

Resilience in gay and lesbian parent families

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Resilience in gay and lesbian parent families

by

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PRETORIA

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---oOo---

DECLARATION OR ORIGINALITY

I, Liana Kruger, hereby declares that the thesis entitled *Resilience in gay and lesbian parent families*, which I hereby submit for the degree Philosophiae Doctor in Educational Psychology at the University of Pretoria, is my own work and has not previously been submitted by me for a degree at this or any other tertiary institution.

.....
L. Kruger

.....
Date

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LIST OF ABBREVIATIONS

EI	Emotional Intelligence
FSOC	Family sense of coherence
GLPF	Gay and lesbian parent family
HTF	High frustration toleration
LGBTQ	Lesbian, gay, bisexual, transgender and queer
SDT	Self-determination theory
SOB	Sense of belonging
SOC	Sense of coherence
TCA	Thematic content analysis
TI	Thematic infusion

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ABSTRACT

Research on the experiences of children raised in gay/lesbian parent families (GPLFs) has shown that the children often feel exposed and/or threatened by the societal heteronormativity they are faced with (Lubbe, 2007; Lubbe & Kruger, 2012). It has also been found that GPLFs often have to work hard and diligently to create a comfortable familiarity, or sense of belonging, within the society in which they live in (Breshears, 2011). Nevertheless, these findings do not disprove GPLFs' assertions that they are happy and are functioning effectively in society. Many psychological and sociological family studies have either ignored the family's bonding with society or dealt with it only in general terms (Cigoli & Scabini, 2006), while there is also scant literature in this regard relating to modern-day society, especially to South African populations and GLPFs specifically.

The aim of this study was to explore the protective factors that facilitate resilience in South African GPLFs living in a predominantly heteronormative society. On the assumption that GPLFs experience challenges relating to living in a heteronormative society, the objective was to understand how (and if) the families' interactions with society influence each other reciprocally.

This study was embedded in a qualitative research approach and was guided by an intrinsic case study design. Accordingly, the lives of ten families were explored, using unstructured interviews, electronic interviews, visuals and other supportive data. In order to construct a resilience framework that highlights the factors that promote resilience in GLPFs, thematic content analysis and a thematic infusion process were conducted against a background of bio-ecological systems theory.

The results indicate that there are both risk and protective factors on the micro-, meso-, exo-, and macro-systemic levels. Subsequently, a resilience wheel was drafted using the protective factors as a framework against which resilience in South African GLPFs can be interpreted and understood. The following protective factors were identified as promoting resilience:

- *Micro level.* Participants reflected a strong sense of self-determination in their personal ok-ness and intentional out-ness. They built resilience through avoidance, disclosure and personal beliefs.

- *Meso level.* Participants reflected a strong sense of family coherence, which was seen in the relationship among the family members and the subsequent family identity. They built resilience through open and honest communication styles, as well as preparational, recreational and bonding rituals.
- *Exo level.* Participants reflected a strong sense of belonging which was seen in the complexity of their social identity. They built resilience through their relationships with health care services and the school, their occupational profile and the support of extended family members.
- *Macro level.* Participants reflected a strong awareness of society's limited exposure to GLPFs and therefore experienced a constant awareness of difference. However, they were also aware that they were being supported by the Constitution in developing resilience, because if it were not for their 'difference', GLPFs would not have had protective laws in place to guide their negotiations with society in a non-discriminatory manner.
- *Chrono level.* Participants reflected the hope that unbiased treatment would be available to them in the future, accordingly, building resilience on their belief in social justice. Such social justice would be reflected the transformation of a heteronormative-family discourse in society to one that accommodates diversity in family structure.

In summary, this study sheds light on GLPFs by expanding knowledge on the issue of their resilience, taking into account the broader political and social issues. The knowledge generated by this study can further be applied to contexts in which studies are conducted on diverse and minority family forms in society.

KEY WORDS:

- Belonging
- Bio-ecological systems
- Diversity
- Gay
- Heteronormative
- Lesbian
- Resilience
- Same-sex parent family
- Social justice

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CHAPTER 1

INTRODUCTION TO AND OVERVIEW OF THE STUDY

The greatest
happiness
is family
happiness.

— Joyce Brothers

Retrieved: www.pinterest.com

This chapter provides an overview of the study. It also offers the reader an insight into the rationale behind and purpose of the study. This chapter explains the meta-theoretical paradigm used for the purpose of the study as well the proposed research questions. The chapter also presents the theoretical framework that serves as backdrop against which the literature review and the research results from this study may be interpreted and understood. In addition, the chapter clarifies the concepts used in the study.

1.1 PERSONAL PRELUDE AND RATIONALE

On a previous research journey I explored how adolescents raised in gay/lesbian parent families (GLPFs) disclose information about their unique family structure (Lubbe & Kruger, 2012). I realised that, amongst other things, children raised in this type of family often feel exposed or threatened by the societal heteronormativity with which they are confronted. In addition, I recognised that GLPFs often have to work extremely hard and diligently to create a comfortable familiarity, or sense of belonging, in the society in which they live. However, all of this did not negate the acknowledgement of GLPFs that they were happy and they functioned effectively in society.

I realised that, despite the additional stress of trying to establish an ‘acknowledged normality’¹ for their unique family structure, GLPFs appear to be completely and happily functional within the same heteronormative society that challenges them on a daily basis. This made me question the state of resilience in GLPFs, and I pondered why GLPFs seem to thrive and not just survive in the midst of heteronormativity. In perusing the literature on GLPF studies one finds, more often than not, much literature that

¹ The use of normality in this context refers to those things that are non-gay/lesbian and that fit in with societal heteronormative discourses.

attempts to disprove the common stigmas surrounding this alternative family type (e.g. see Robitaille & St Jacques, 2009; Stacey & Biblarz, 2001; Tasker & Golombok, 1997; Wainright, Russell & Patterson, 2004). This led me to question whether the factors that make GLPFs happy or efficient are considered to be of less importance. Is research not neglecting the issues pertaining to the healthy family functioning of GLPFs? I therefore argue that an increased research focus is required to explore the reasons why GLPFs are thriving as opposed to highlighting concerns with regard to GLPF studies. More specifically, I became interested in the protective factors that facilitate resilience in GLPFs. In other words, I wanted to explore and understand GLPFs' interactions with society and how such interactions, in turn, influence resilience in GLPFs.

Much of the research in the field of gay/lesbian studies (Annandale, 2008; Fairtlough, 2008; Flowers & Buston, 2001; Lubbe, 2007; Lubbe & Kruger, 2012; Patterson, 1992; Robitaille & St Jacques, 2009; Tasker & Golombok, 1995, 1997) has focused on *individual experiences* (e.g. disclosure practices; coming out processes; parenting experiences; psychological well-being of children with gay/lesbian parents; moral development of gay individuals etc.) but, according to my current readings of the available literature, very little has been said about the GLPFs' *functioning as a whole*, specifically with regard to resilience. In my readings I came across few studies of relevance. Some of these studies had explored resilience as part of the experiences of adult children raised in GLPFs, thus adopting a reflective stance from the children's perspective (see Titlestad & Pooley, 2014). Some studies explored gay/lesbian individuals (not parents) and their extensive family support networks (see Oswald, 2002). A longitudinal study highlighted resilience in GLPFs through family life changes and, specifically, with regard to the separation of parent couples in GLPFs (see Power et al., 2010). I did locate one study (Griffiths & Pooley, 2011) that explored family resilience specifically within lesbian parent families although this study did not focus specifically on the systemic influences which facilitated resilience but rather on the family processes that strengthen coping and subsequent resilience. West, Usher and Foster (2011) claims that there is limited research into family resilience and its application to health and healthcare. Pooley and Cohen (2010) are of the opinion that it is overwhelmingly clear that resilience should be examined within various contexts, taking into account the way in which such contexts interact with the process of resilience. Contextual variables change over time and this contextual fluidity is crucial in our understanding of resilience. Accordingly, it is hoped that this study will contribute to our understanding of the factors that facilitate resilience in GLPFs.

Although studies that explore resilience from a systems perspective do exist, I was not able to locate a study that specifically explored GLPFs from such a perspective. I did manage to locate studies that explored resilience in terms of the social ecology of human development but these studies focused specifically on adolescents and not families (see Ungar, Ghazinour & Richter, 2013). Furthermore, those studies that did explore resilience from a systemic perspective (for example, see Benzie & Mychasiuk, 2006) made no mention whether the factors identified also applied to non-traditional family forms in society. Having gay or lesbian parents automatically introduces gay/lesbianism as part of the family identity for every family member, even for those family members who do not identify with being either gay or lesbian. How then, do all of these family members, once they have 'come together' as a system in their own right, function successfully while being 'heteronormatively other' and often facing prejudice and social judgement from the wider society in which they live. As West et al. (2011) state,

It is important that family resilience be understood...on an appropriate level for the whole is more than the sum of its parts, meaning that a collection of resilient individuals do not guarantee a resilient family. People in families, as in communities, are resilient together, not merely in similar ways (p. 8).

These factors, among others, further motivated me to explore the concept of GLPF resilience from a bio-ecological systems perspective.

Another issue that fuelled my motivation for this study was the conceptualisation of '*family*' that has long been challenged and is rapidly changing. Social forces have impacted significantly on the current Westernised understandings of the traditional concept of family, headed by a husband and wife and have brought alternative family forms, such as single parents or GLPFs, into the mainstream definition of what constitutes a family. As early as 1988; Gary Bowen stated that researchers and practitioners "are increasingly recognizing the rich diversity of family values and process" (p. 458). However, it is my opinion that, despite the emergence of alternative family forms in South Africa, the marginalisation of non-traditional families is still evident. It would appear that this marginalisation is deeply rooted in the heteronormativity that has been passed on through generations and is framed by the accepted truths which have been created by religious, political and medical discourses and informed by social majoritarianism.

In his new family plan, the President of the Republic of South Africa, Mr Jacob Zuma, argues that South Africa subscribes to a narrow definition of what is acceptable for the family despite the fact that research has shown that 23,25% only of families in South Africa are 'traditional' (The Presidency, 2012). It is interesting to note that this statement is later followed by the articulation of a diversity principle, namely,

There are different types of families in South Africa which are products of various cultures and social contexts. Therefore, the need exists to recognise the diverse nature of South Africa's families in all initiatives that address their plight. This principle will guide Government and all stakeholders in their engagement with the family (p. 13).

This quotation on the recognition of diversity, together with President Zuma's plea for narrowing the definition of 'family', reflects the complexity of understanding and defining the term 'family' in a modern society and, specifically, in South Africa. De Vos (2012) confirms this when he comments on President Zuma's announcements by stating that he interprets President Zuma's *Green paper on families* as being biased towards heteronormative and patriarchal marriages. The debate continued in a *City Press* article (Joseph, 2012) in which Mbuyiselo Botha of the Sonke Gender Justice Network stated the *Green paper on families* cannot fit all families into the nuclear family form comprising a father, mother and children without taking into consideration the diversity of other family forms.

Another point worth mentioning is that of the construction of gender roles in family processes. For decades, family studies have provided insights into familial functioning and have made gender stratification a principle element of enquiries (Lorber & Farrell, 1991). It is not my intention to enter into a discussion on or provide an explanation of gender roles in this study. However, it is because of society's generally accepted construction of gender as limited to the categories of 'male and female' (into which not everybody fits) that I feel compelled to highlight this issue at this point. In a heteronormative society it would appear plausible that the majority of people would be socialised to believe that a family should comprise a mother and a father with each carrying out familial tasks that suit either their maleness or their femaleness. The gendered underpinning of this view may often be the reason why society often questions GLPFs with regards to their effectiveness to 'parent' (i.e. raise children or provide proper gender role socialisation). In view of the fact that this is situated in a social constructionist paradigm, the societal perceptions of gender are significant

because they may influence the GLPFs' interaction with society and their subsequent resilience. GLPFs present a challenge to the stereotypical task conceptualisations that naturally falls into one gender or the other. Accordingly, GLPFs provide us with an exclusive opportunity to understand how shared gender may be negotiated (Murry, Mayberry & Berkel, 2012). In South Africa specifically, the sexual orientation section in the Bill of Rights has had an immense impact on the lives of gay and lesbian individuals (Van Zyl, 2005) and has opened up space for the legitimised, discursive representations of relationships.

Considering the position of gay and lesbian sexual orientation in society also brings to the fore the positioning of gay and lesbian sexual orientation within a family. As mentioned before, the presence of a gay/lesbian family member automatically implies that gay and lesbian sexual orientation becomes an integral part of the life of every individual who shares the same family space. It may be challenging for GLPFs to create a healthy and happy family identity and functioning surrounded by the 'otherness' that encapsulates their family structures. There is ample research in both South Africa and abroad that sketches GLPFs as fully functional units with family dynamics that are no different from the dynamics that would be expected in a traditional, heterosexual parent family (Bos & Van Balen, 2008; Breshears, 2010, 2011; Drucker, 1998; Kurdek, 2004; Lubbe, 2007; Lubbe & Kruger, 2012; Patterson, 1992). With the additional challenges and pressure which society places on GLPFs and on the individual family members within these families, resilience is an important characteristic that I expect may be influenced by the reciprocal nature of the families' interactions with various moral cultures (e.g. school, church, friends) in society. I, therefore, assume that positive interactions and relations between GLPFs and society will contribute to family resilience in GLPFs. However, despite this assumption it is important that *two important variables* not be neglected:

The *first variable* is the major role played by biological factors in resilience. Considering that this study is situated in a social constructionist paradigm I acknowledge that this variable may sound contradicting, however, allow me the opportunity to explain this statement. Although I work from a social constructionist paradigm, I do so while acknowledging all the human subsystems ("biology") from where construction takes place. In simpler terms, I acknowledge that sexuality is fluid and no binary classification should exist and I say this with due acknowledgement to (for example) intersex individuals. It is however not the intention for the "biology" as referred to above, to have any reference to sexuality, rather I refer to those human subsystems that inevitably

influence the basis of who we are and from where construction take place and which would inevitably inform resilience, such as a genetic predisposition for depression or maybe impulsivity. In my conception I think of a *being within in body*, constructing life from a cognitive, spiritual and emotional subsystem in reciprocal relationship with a broader social context. Birke (2002, 67.) refers to this in her statement “...as we grow from a fertilised egg, we change and engage with our own environments in bodily, biological ways. That process is partly biological and partly everything else, all interacting”. This reciprocal relationship is what I deem unavoidable in human interaction and resilience. This is in line with Birke (2002) who refers to acknowledging biological factors without assuming them to be determining. Although her work centred on sexuality, I apply this premise to human subsystems and subsequent resilience as I referred to it above. Birke (2002, p.67) states “...how might biology [subsystems] be relevant to our inquiries *without* invoking determinism and fixity?... It thus may be that biological processes are, in some ways, part of the events on the path leading to particular forms of expression (she then refers to sexuality where I make this connection with resilience)”. Other authors (eg. Benton, 1991, Rose, 1997) also address this issue; once again they refer to sexuality whereas I use the same premise to refer to human subsystems and its role in resilience. With regards to resilience, many authors emphasise the link of gene-environment interaction (see, Curtis & Cicchetti, 2003, Kim-Cohen, Moffit, Caspi & Taylor, 2004, Rutter, 2002/2003) Cutuli and Masten (2009) state that an individual may have the capacity for resilience but the actual pattern of the said individual’s behaviour will result from many interactions, both within the individual himself and between the individual and his environment. A very basic example would be that one may be predisposed towards impulsivity. However, the context in which you grow up and create your life in may act as protective factor thus the component of social construction may on its part discourage impulsivity or it may act as a risk factor and thus encourage impulsivity. This, in turn may negatively or positively affect resilience. It is my opinion that just as in the case of sexuality; these subsystems are not fixed and may change over time and in different context. In the same way Cutuli and Masten (2009) state that risk and resilience can operate through limiting experiences such as a child with chronic illness (“biology”) may not be able to interact with his peers and may lack social development or a support system which renders him more vulnerable to risk. They continues to say that studies of resilience around the world repeatedly noted protective factors including individual attributes such as cognitive skills and self-regulation (my interpretation of human subsystems), their relationships and their contexts. As Cutuli and Masten (2009) state, integrated

accounts of resilience are emerging which includes interactions amongst genes, neurobiology, behaviour, family and peer relationships, all of which should be taken into account. In view of the fact that the focus of this study is to understand family resilience from a social constructionist paradigm but by exploring factors within a bio-ecological context it explicitly conveys the *dynamic and complex triadic interplay of a “sexually fluid” human being with its various (bio)subsystems in interaction with a social context*. Therefore, individual traits or dispositions with regards to resilience merit mentioning while it should also be noted that resilience is both a trait and a process (Leipold & Greeve, 2009). It is, thus, essential that the relational context of individual dispositions in a study such as this is not negated.

Secondly, exploring resilience automatically implies the existence of a challenge that has been or should be overcome. It has been said that an accumulation of both positive and negative experiences influences resilience and also that it would appear that protective factors are more important than risk factors in the development of resilience (Truffino, 2010). In this study it was inevitable that adversity with regards to GLPFs would emerge from the data. However, Cutuli and Masten (2009) state that how resilience operates has revolutionized thinking and it has shifted models to a strengths-based approach. Because the aim of this thesis is to determine “what work and how can we do more of it”, the adversity experienced by GLPFs will only be slightly backgrounded. The research is done from a positive psychology perspective, and in line with social constructionism, I want to explore what is happening right now in families that is working, what is positive and contributing to their strengths and resources; and how I can re-author it. Therefore, the cause of adversity (for the purpose of this study) is not an essential focus, however to discover and emphasise strengths which facilitate resilience is a pivotal aim. By unpacking the cause of adversity and by feeding into challenges I run the risk of unintentionally strengthening the focus on barriers to gay and lesbian parenting in South Africa, which I am strongly trying to steer away from. I am aiming to emphasise interest in successes and not problems, therefore creating conversations about possibilities and almost facilitating a dress rehearsal for the participants to see where the adversity to gay and lesbian parenting has had less of an impact in their lives. However, because resilience can not be understood without the context of challenge, section 3.1.2 p.55 of this thesis gives an brief overview of the ample work done by researchers in South Africa with regards to adversity and gay and lesbian parenting.

1.2 PURPOSE OF THE STUDY, PROBLEM STATEMENT AND CONTRIBUTIONS OF THE STUDY

By assuming that resilient GLPFs experience challenges living in a heteronormative society, my objective is to understand how (and if) these families' interactions with society influence these challenges and the families' subsequent resilience in a reciprocal way. The **purpose** of this study is, therefore, to explore the factors (protective factors) that facilitate resilience in GLPFs living in a predominantly heteronormative society. I contend that it is not possible to explore any of the above without taking into consideration the expected challenges (risk factors) that go hand in hand with 'normalising' otherness in a heteronormative society.

In my search for relevant literature, I found limited information pertaining specifically to the relationship between GLPFs and a multi-layered society. Several of the psychological and sociological family studies tend either to ignore the family's bonding with society or else deal with in general terms only (Cigoli & Scabini, 2006). Eggebeen (2012) supports the notion by stating that research which explores variable contexts as well as the impact of these variable contexts GLPFs and their children is needed. Hong, Espelage and Kral (2011) emphasise the importance of exploring and describing the ecological factors that facilitate resilience among GLPFs, stating that these factors may assist in the intervention and prevention efforts aimed at providing support to GLPFs in society. Power et al. (2010) emphasise Hong and colleagues' view by stating that the factors supporting resilience in GLPFs are a key area that has been neglected in literature. Ungar, Liebenberg and Ikeda (2014) suggests that there has been relatively little research that has examined resilience within the context of a meso-systemic interaction. He explains that micro-systemic processes tend to be explored in isolation from each other and that a shift from an individual level to interactions between systems is required. The importance of societal support systems in promoting resilience has been demonstrated by Pooley and Cohen (2010) and is clearly an important indicator of the ecological nature of resilience. In addition, Goldberg and Gartrell (2014) and Titlestad and Pooley (2014) both make reference to the adjustment of gay/lesbian parents as well as their children to society. Goldberg and Gartrell (2014) question the circumstances in which gay/lesbian parenting become more challenging, while Titlestad and Pooley (2014) assert that the evidence of the positive adjustment on the part of children raised in GLPFs calls for recognition of the important role importance which resilience play in relation to GLPFs. In mainstream family research abroad, alternative family forms and their specific needs are also attracting interest and society

is being required to rethink its programmes and policy responses as these programmes and policies should apply to all family forms, traditional and non-traditional (Sanson, 2001, as cited in Rawsthorne, 2009).

I anticipate that this study will **contribute** to the area of GLBTQ psychology, more specifically gay/lesbian family studies, by raising awareness and by presenting a bio-ecological resilience framework that will guide the understanding of GLPFs' resilience in a predominantly heteronormative society. I aim to construct a framework of resilience in respect of GLPFs by identifying relevant themes pertaining to both the risk and protective factors that GLPFs negotiate throughout their daily lives. In addition, although new studies have been and are continuing to be conducted, much of the literature on familial well-being is dated (e.g. Campbell, Converse & Rodgers, 1976; Fisher & Sprenkle, 1978; Krahn, Gartrell & Larson, 1981; Rettig & Bubolz, 1983; Westley & Epstein, 1969) and I wanted to add to the emerging family studies relating to modern day society and especially to the GLPF population in South African. Another important issue is that of unsatisfactory relationships between families and larger systems in general. It would appear that such unsatisfactory relationships exist and continue to develop as there is little attention paid by research to the patterns that develop between the family and the multiple levels of society (Imber-Black, 1988). Rettig and Bubolz (1983) are of the opinion that few attempts have been made to study the family domain in depth.

In short, the legal recognition of same sex marriages in the past decades has resulted in a more accepting attitude towards gay/lesbian individuals than was previously the case (Salmon, 2009). I would assume that this also to extend to GLPFs. In addition, the significant increase in the number of GLPFs also requires more research that may contribute to an understanding of this family form and the experiences of the family form (Breshears, 2010). Thus, this study may contribute in the generating of an understanding of the reciprocal relationship between the family and society, in this case focusing specifically on the relationships between GLPFs and society in order to clarify the misconceptions and myths surrounding both GLPFs as well as the children raised in such family types. I am of the opinion that heteronormative stances in society will be challenged and changed through exposure, information, visibility and understanding – an ultimate goal of this study.

1.3 RESEARCH QUESTIONS

The following research questions guided this inquiry:

Main research question:

What factors foster resilience in GLPFs?

Sub research questions:

- How do GLPFs conceptualise and develop their resilience?
- What (if any) are the risk factors that hinder resilience in GLPFs?
- How do risk factors hinder resilience in GLPFs?
- What (if any) are the protective factors that facilitate resilience in GLPFs?
- How do protective factors facilitate resilience in GLPFs?

1.4 META-THEORETICAL PARADIGM

This study is framed within a social constructionist paradigm.

1.4.1 SOCIAL CONSTRUCTIONISM

This study was conducted within the social constructionism paradigm. The underlying premise of social constructionism is that, as human beings, we co-produce knowledge by social intercourse and by interacting with other people in particular environments, milieus and cultures (Berger & Luckmann, 1967; Crossley, 2006; Gergen & Davis, 1997; Maree, 2007; Vorster, 2003). Important features of social constructionism include the following:

Firstly, social constructionism encourages debate on the traditional interpretation and explanation of the world. It critically appraises the thinking that is ordinarily accepted (Burr, 2003) and it describes and interprets normality as it is experienced by those living it (Freedman & Combs, 1996). It is, thus, not possible to explain reality as a purely mental meaning making process but rather as a product of social intercourse within the milieu of ongoing social relationships (Gergen, 1990). It is, therefore, within these social milieus and relationships that knowledge and meaning are constructed and reconstructed as time progresses and where 'individual functioning' is understood in terms of 'communal interchange' (Rosen & Kuehlwein, 1996, p. 15).

Social constructionism resonated with the aim of this study as the purpose of the study was to explore the factors that facilitate and/or hinder resilience in GLPFs living in a heteronormative society. During the study the participants and I will be in continuous discussions about their resilience and, therefore, we will be constructing definitions and experiences relating to their resilience together. The meaning making process will flow from our conversations and from the way in which we understand and relate to one another. The results of this study will, therefore, be a purposeful social construction of our time spent together. In addition, the aim of this study was to understand and inform on a construct which had been identified, namely, resilience, and not to approve or disapprove of any phenomena. Everyone who participated in the study has their own realities that they brought with them into the research environment – realities that had been socially constructed by their interaction with society. It was, therefore, important to highlight the pivotal implication of social constructionism when human beings speak about their world. In particular, in a study such as this, where one treads upon ‘otherness’, I deemed it especially important to understand the process of social constructionism within society in an attempt to understand why the participants in the study were expressing their realities in the way in which they did. Therefore, to understand the etiology of their realities, I considered it important to understand the process of social constructionism as it relates to the socialisation of human beings.

The third important concept is that of language. In everyday life language provides us with objectifications and order within which reality makes sense. This reality is as real to one person as to the other despite the uniqueness of their respective perceptions of reality. Despite the differences in their perceptions of reality, there is an ongoing correspondence or a shared common sense about reality between the human beings who share the world (Berger & Luckmann, 1967²). The social reality of everyday life is, thus, a sum total of typifications, presented on a continuum of which the one end is represented by those people and ideas that are ‘part’ of oneself and the other end by abstractions with which one does not readily identify. Language, therefore, builds a classification scheme that influences and affects the participation in social knowledge and that encodes the social meaning one constructs out of one’s life world (Berger & Luckmann, 1967; Terre Blanche & Durrheim, 1999). Fundamentally, social constructionism emphasises that all constructions of reality are meaningful and real

² I acknowledge the use of old sources. These sources have purposefully been selected because of their ability to contextualise the essence of what this paragraph aims to convey. Throughout this study the older sources were used intermittently for the same reason.

only to the extent to which they are discussed, argued, reproduced and, ultimately, agreed upon as an accepted truth.

The concept of truth is also another important issue. The collective construction of information and the narratives of what is said and considered as the 'truth', rather than the language *per se*, unfolds in accordance with the way in which the world is constructed. Thus, the 'accepted' truths and related dominant discourses in society are all, themselves, socially constructed concepts (Rosen & Kuehlwein, 1996; Slied & Kotze, 2007; Terre Blanche & Durrheim, 1999; Thrift & Amundson, 2007). Truths, as we know them, may then be described as linguistically signified. Berger and Luckmann (1967) confirm this view when they state that "the common objectifications of everyday life are maintained primarily by linguistic signification ... by the means of language I share with my fellowmen" (p. 37).

A fifth important concept to note at this point is the reciprocal nature of language. It is because of its inherent quality of reciprocity that language may be distinguished from any other sign system and, therefore, language makes it possible to access two or more subjectivities during conversations. In particular, language creates 'reality' out of subjectivity and it is dominated by pragmatic motive in the sense that it clusters meanings of actions which are shared with others. Thus, language transcends the here and now and integrates realities into a meaningful whole that allows us to attach meaning to experiences that are defined as real. The accumulation of social knowledge is transmitted over generations and constantly affects common participation in everyday life through the process of primary and secondary socialisation (Berger & Luckmann, 1967). I consider the transmission of social knowledge specifically to be of interest in this study as I assume that the GLPFs participating in this study have all been affected by this 'archaeology' of reality, specifically heteronormative reality, as it has been maintained by the respective societies in which gay/lesbian parent families function. Primary and secondary socialisation may play a significant role in this regard.

It is also important to note that social constructionism is synonymous with social interaction. Every human being is born into an objective social structure and with a predisposition towards sociability. Human beings externalise their existence into the social world while internalising their world as an objective reality. Within this objective reality are significant others who, from birth, are imposed upon them and who mediate their worlds to them. Korostelina (2007) also makes reference to the early processes of identification where identification with the family is primarily an uncontrolled process

during which the young child adopts the rules, traditions and values as they are presented to him/her by his/her family. It is through this mediation that the young child's world first makes sense to him/her and he/she integrates into his/her socialisation aspects that are rooted in the characteristics of his/her social structure. This internalisation during *primary socialisation* may, thus, be viewed as a 'forced reality' which is brought upon the individual by the strength of his/her first relationship with his/her significant others (Berger & Luckmann, 1967). Reality in this sense may then be described as being dependent upon the historical and cultural location of the individual and, thus, reality is a social construct which is specific to societies (Crossley, 2006; Gergen & Davis, 1997). However, because the relationships of human beings with the world are characterised by "world openness" (p. 47) they then encounter sub-worlds through the process of *secondary socialisation* (Berger & Luckmann, 1967). The extent and character of the individual's exposure to sub-worlds will, however, be determined by the complexity of the social distribution of knowledge which is available to him/her within that context. Whatever the extent of the social knowledge presented, the base knowledge formed during primary socialisation is now partially challenged by the new social knowledge which has been integrated through secondary socialisation. With regard to this study, it is my opinion that primary socialisation contributes significantly to fostering the heteronormative realities out of which values, beliefs and subsequent prejudice and/or acceptance are then born. It is, thus, the result of secondary socialisation that 'otherness' may find a space of acknowledgement and integration within a predominantly heteronormative society.

Secondary socialisation allows individuals to integrate objective realities that are in direct contrast to what they previously believed (i.e. same-sex orientation is a sin vs. same-sex orientation is acceptable) and they may proceed to sacrifice previously held 'truths' in an attempt to commit to the newly acquired realities (Berger & Luckmann, 1967). These 'truths' are accepted until problems arise that cannot be solved in terms of the available social knowledge and, therefore, while the available knowledge is unsatisfactory, doubts about realities may easily be suspended. The environment is, thus, fashioned out of social constructions which are influenced by the socio-cultural and psychological formations out of which individual knowledge is then structured in terms of immediate personal interests and societal situations (Berger & Luckmann, 1967). As mentioned before, I believe that heteronormative stances in society may be confronted and transformed through exposure, information, visibility and understanding.

The concepts of subjective 'truth' and personal realities resonate with the aim of this study as the goal of the study is to explore and explain the factors that facilitate/hinder resilience in GLPFs. I will attempt to explain the GLPFs' constructions of resilience by exploring each family's reality through the lens of the own personal social interactions (Lubbe & Kruger, 2012). I decided to adopt the social constructionist approach for the purposes of the study as social constructionism allows for diverse experiences. This, in turn, made it important (if possible) to select diverse families from different cultural backgrounds and environments and of different social statuses to participate in the study so that their unique stories could enrich and strengthen the research data. I believe that, through their experiences and interactions, each family constructs its own realities and normalities and subsequent resilience and, therefore, each family was accompanied by family specific realities and a diversity of meanings. I realised that the challenge of this research project would lie in identifying repetitive themes, if any, in the construction of the resilience within each family and between the participant families as a group. Finding commonalities within the vast diversity of personal realities would also, I believed, strengthen the results of this research project. Ultimately, social constructionism informs us that we do not have to be mere receivers of our own life stories but that, instead, we are active participants in the creation of our lives and realities and it is in that 'truth' that I chose to situate this study.

Another important aspect relating to the study was the social construction of gender. Although human beings are born biologically and anatomically male or female, there are numerous other categories which pertain to individual gender. As mentioned before, a focus on binary gender differences precludes the many ways in which gender may be constructed. I considered this important specifically because of the gendered nature of society that often finds its roots in primary socialisation. Over a century ago, Karl Marx (1848/1964) referred to the transmission of social beliefs by stating that "the tradition of all the dead generations weighs like a nightmare on the brain of the living" (p. 11). Berger and Luckmann (1967) make specific reference to the plasticity of human beings and to the way in which social interference shapes perceptions, specifically with regard to sexuality. Many gay and lesbian individuals learn a range of negative stereotypes and stigmas with regard to their sexuality not only from their dominant culture but also from their families and friends long before they themselves identify lesbian or gay. In view of the discriminatory messages with regard to gay and lesbianism that are communicated and passed on through generations as a social norm, the internalisation of such attitudes may often negatively affect self-acceptance on the part of gay or

lesbian individuals (Greene & Herek, 1994). Several literature studies also refer to an aspect of gender and/or the constructions thereof (e.g. Butler, 1990; Clarke, Ellis, Peel & Riggs, 2010; Fishman, 1978; Flowers & Buston, 2001; Gauntlette, 1998; Greenberg, 1988; Lorber & Farrel, 1991; Shefer, Strebel, & Foster, 2006). Existing literature reveals that social groups define and construct gender and that these constructions are maintained in everyday living, for example, in the family. Gender may, thus, be seen as a foundation of every existing social order (Lorber & Farrel, 1991). It is, however, important to note that these constructions may differ between different cultures, race groups and religious groups (Berger & Luckmann, 1967; Gergen & Davis, 1997; Lorber & Farrell, 1991) and that even within these groups the conceptualisation of gender changes over time.

From the mid 1980s social constructionists have begun to challenge the essentialist conceptions of sexuality, triggering debates on the historical, cultural and political contexts in which the categories of 'lesbian', 'gay', 'bisexual' and 'transgender' have been constructed (Clarke et al., 2010). Social constructionism rejects the sex 'equals' biology binary and stipulates that both gender and sex are socially derived, thus claiming that a belief in two sexes only is an ideological lens through which the world is viewed and interpreted (Clarke et al. 2010; Garfinkel, 1967). Butler (1990) warns against the regulation and reification of gender relations that may strengthen a binary view of gender. She asserts that gender is a fluid concept which may shift and change as it presents itself in different contexts and at different times. Butler argues that biological sex is perceived as the link for desire towards gender and that it is precisely this link that needs to be eliminated so that gender and desire may come to be seen as flexible and not caused by other stable factors (Gauntlette, 1998). Butler (1990) argues for a change in both gender norms and in the binary understanding of masculinity and femininity. Accordingly, identity categories are perceived as cultural products in which heterosexuality produces sex and gender in a binary form (Jagger, 2008). According to social constructionism all forms of naming are socially constructed, including the basic biological categories such as the female/male distinction (Butler, 1990). Referring to the construction of reality, Brown (1989) states that marginality is an inevitable experience that informs same-sex orientation and that even in the most supportive of settings, gay and lesbian individuals still carry their existential 'otherness' with them.

The recognition of sexuality and gender as abstract but real and powerful concepts is important. In this sense social constructionism contributes significantly to explaining how protective factors facilitate resilience in GLPFs living in a heteronormative society

by emphasising the way in which language and discourse may feel real and potent in everyday life but without denying material reality (Clarke & Braun, 2009). I also agree that this aspect of social constructionism corresponds well with the concepts of social identity and social connectedness (Lubbe & Kruger, 2012) that will be discussed in the literature review in this study.

Social constructionism also resonates well with the concept of family as used in this study. Over the years the concept of 'family' in the field of psychology has been researched and constructed in many different ways. The challenge facing the majority of psychology researchers is the abstract supposition of many of its constructs. For example, there is no clear definition of the term 'normality'. One has to be aware of the individualistic assumptions and constructions attached to many such non-scientific constructs which are without clear and commonly accepted definitions (Kruger, 2010; Rosen & Kuehlwein, 1996). Meaning making is grounded in our cultural and language systems and is, thus, influenced by subjectivity (Kruger, 2010; Rosen & Kuehlwein, 1996; Terre Blanche & Durrheim, 1999; Walsh, 2003). Accordingly I consider it acceptable to refer to normality as being socially constructed and defined primarily by the dominant groups in society such as religious denominations or politically powerful discourses. It is, therefore, within the context of accepted 'normality' that otherness is often pathologised (Foucault, 1980; Kruger, 2010) and in terms of which non-traditional families may be stigmatised and positioned as not 'normal'.

Stigmatisation often accompanies that which is considered as other. In view of the stigmatisation that often accompanies gay and lesbian sexual orientation, it would appear that GLPFs are constantly challenged in terms of their validity as a 'family' (Walsh, 2003) and the influence of gay/lesbian parents on the normal family processes, such as the socialisation or gender development of their biological or adopted children, is often questioned. When all of these dynamics are explored through an ecological systems lens, it is not difficult to understand how social constructions have made it difficult to define a 'normal' family and even more difficult for GLPFs to find 'normality' within themselves and society as a fully functional unit. The concept of family, specifically GLPFs, will be discussed in more detail in the literature review.

1.5 THEORETICAL FRAMEWORK

1.5.1 *WHY AND WHY NOT?*

Although resilience is the pivotal concept of this study, I chose not to use resilience theory as part of the theoretical framework as the aim of the study was not to explore the process of resilience or to focus on the responses of GLPFs in adverse situations but rather it is to explore and describe the factors that facilitate resilience in GLPFs on an ongoing and, sometimes, less direct manner. It seemed to me that bio-ecological systems theory was the theory that was most suited to the purposes of the study as it would provide the most differential and complete account of contextual influences on the development of resilience and of familial interaction with society.

In exploring families, early theorists envisioned an evolution process in terms of which the integration of existing theories would result in new, broad and flexible theories (Aldous, 1970). According to Peterson and Bush (2013), an example of this is the integration of family systems theory with ecological/contextual theories. In view of the systemic and reciprocal nature of families with society, I cannot attempt to explore resilience in GLPFs without acknowledging the influence of a systems perspective and, more specifically, a bio-ecological systems perspective. In addition, the differential impact of protective and facilitative factors on the development of resilience differs from context to context and changes over time. This differential impact may also lead to complex negotiations between marginalised groups (i.e. GLPF) and those groups which control the descriptions of prosocial development outcomes in adverse contexts (American Psychological Association Task Force on Resilience and Strengths in Black Children and Adolescents, 2008; Stevens, 2002; Ungar, Ghazinour & Richter, 2013). This characteristic complexity of resilience is best captured and explained by using a bio-ecological model rather than narrow models which assume a homogeneity in the manner in which individuals from various contexts respond to adversity (Ungar et al., 2013).

In order to explain resilience in GLPFs it was decided to highlight important concepts of the bio-ecological systems theory since, as mentioned before, this theory provides the most differential and complete account of contextual influences on the development of resilience and of familial interactions with society. The following section explains certain of the main concepts of the bio-ecological systems theory as they relate to the purpose of this study. This is followed by a short description of the systemic nature of

families in an attempt to integrate the theoretical concepts of the bio-ecological systems theory with family functioning

1.5.2 BIO-ECOLOGICAL SYSTEMS THEORY

“[T]he main effects are in the interaction.”

Urie Bronfenbrenner

The bio-ecological systems theory of Bronfenbrenner (1977) provides the language and the mapping of connections between family systems and external agencies. In his work Bronfenbrenner emphasises the crucial importance of studying the environments in which people operate, maintaining that explanations for what we do are to be found in the interactions between personal characteristics and contextual factors.

The individual human being is the fundamental element in the bio-ecological systems theory (Anderson, Sabatelli & Kosutic, 2013). Bio-ecological systems theory views the developing person as a growing and dynamic entity that has the ability to reconstruct his/her own environment and that stands in a complex reciprocal relationship with his/her environment. Thus, the environment also exerts an influence, thereby triggering a process of mutual accommodation. In addition, the developing person’s environment is not limited to a single setting but rather, it also includes the interconnections between settings and any other external influences from the wider surroundings that affect these settings. The ecological environment is, therefore, conceived of as a stratification of concentric structures, much like a Russian nesting doll, each contained within the next. These structures are referred to respectively as the micro-, meso-, exo-, and macro-systems (Bronfenbrenner, 1979; Eamon, 2001).

1.5.2.1 The micro-system

The microsystem is composed of individuals and groups of individuals with whom the element under exploration, in this case GLPFs, interact on a daily basis. Bronfenbrenner (1979) defines the micro system as

... a pattern of activities, roles, and interpersonal relations experienced by the developing person in a given setting with particular physical and material characteristics (p. 22).

A setting as referred to above may be defined as any place in which individuals may engage in face-to-face interaction. This may include environments such as the house, the school, the church and many more. With these settings come factors such as activities, roles and interpersonal relations and, in turn, these factors constitute the building blocks of the microsystem (Ungar, Ghazinour, & Richter, 2013). The various settings in the micro-system each invite, permit, or inhibit engagement in continued interaction with the immediate environment. This continued interaction may also become progressively more complex (Hong, Espelage & Kral, 2011). In terms of the bio-ecological systems theory, the human body, with its cognitive and emotional subsystems, may also be seen as part of the micro-system. In addition to many other factors, personality is also a factor which is associated with resilience on the micro-level. However, there are certain challenges (i.e. the ongoing shift in the conceptualisation of personality) which complicate the study of resilience on the micro level. In the same sense, micro-systemic family processes influence resilience and have, in fact, been well researched (Sheridan, Eagle, & Dowd, 2006). Family adaptability and cohesion are, inter alia, some of the micro-systemic family processes that are of relevance in this study. A positive social and supportive relationship between adolescents raised in GLPFs and their peers who come from the same family setting will also be highlighted as a micro-systemic relationship that promotes resilience (Lubbe & Kruger, 2012).

The term '*experienced*' is critical in terms of the micro-system. It is important to emphasise that the objective properties of the environment in which an individual finds him/herself are not the only relevant features which play a role in shaping the development of human beings. The perception or meaning that an individual attaches to events and properties in his/her environment is of crucial importance and significantly affects human behaviour. This concept originated in the work of Kurt Lewin (see 1935) in which he stated that reality is best understood from the perspective of the human mind. He emphasised that the way in which the environment is understood by those who interact with it is pivotal in unravelling reality. Lewin went on to highlight two aspects that are likely to capture a person's attention in any situation. The first such aspect is '*Tätigkeit*' which translates to 'ongoing activity' and which refers to the operations in which an individual sees him/herself or others as engaging. The second aspect involves the perceived interconnectedness between people in a setting and, thus, this second aspect refers to a salient perception of the relations between individuals as part of a group and who are engaged in common, complementary or relative

independent actions. The concept of role is also of relevance in that all sets of behaviour may be associated with a position in society, for example, one would stand in relation to others as a friend, mother, sister etc. On their part, these positions and subsequent relations evolve at the succeeding levels of the ecological system, for example, in the meso-system (Bronfenbrenner, 1979).

1.5.2.2 The meso-system

Whenever a person moves from one setting to a next, a meso-system is formed. Bronfenbrenner defines a meso-system as

... the interrelations among two or more settings in which the developing person actively participates (such as, for a child, the relations among home, school, and neighbourhood peer group; for an adult, among family, work, and social life (p. 25).

Thus, a meso-system comprises a number of microsystems in interaction with one another (Keenan, 2002). With regard to GLPFs, this may, for example, include the family and school. The interconnections between these micro-systems may comprise other persons who participate actively in both settings and formal or informal communications between the settings and transitional links in social networks. Another important factor in the interconnectedness between these systems is the extent and nature of the attitudes and knowledge existing in one setting as regards the other setting (Bronfenbrenner, 1979). Experiences in one micro-system (i.e. home) may influence the activities and involvement in another micro-system (i.e. school), or *vice versa*. The multiple systems that constitute the meso-system exchange resources in ways which may enhance individual growth as well as mitigate risk and experience (Ungar, 2012).

With regard to minority groups, it has been noted that positive meso-systemic relationships may foster resilience. For example, in their research on the disclosure practices of adolescents raised in GLPFs, Lubbe and Kruger (2012) make reference to the protective characteristics of school cultures which promote and encourage the acceptance of difference. In the same sense, a lack of knowledge or understanding in one meso-system about meso-system another may result in challenges arises and hinder the growth of resilience. An example of this may be the staunch religious beliefs about the 'deviancy' of same-sex orientation that many religious denominations foster

and promote through their teachings. This may be carried over to schools and other institutions which are all connected within the community setting.

1.5.2.3 The exo-system

Bronfenbrenner defines the exo-system as

... one or more settings that do not involve the developing person as an active participant, but in which events occur that affect, or are affected by, what happens in the setting containing the developing person (p. 25).

Thus, the exo-system comprises interactions between two or more settings, one of which does not contain the individual in question. These indirect interactions may, however, affect the processes within the immediate setting in which the individual is imbedded (Bronfenbrenner, 1994; Hong, Espelage, & Kral, 2011).

In the case of children from GLPFs the exosystem may include the parents' office environments, the parents' friends, the school board activities or even siblings' friends. In the case of GLPFs, a lack of support from extended family members may, for example, influence the immediate family dynamics in the GLPF household. The exposure of children from GLPFs to anti-gay comments in the media or news is yet another example. Furthermore, research shows that families with few links to social networks often become isolated and this, in turn, may impact adversely on their resilience (Emery & Laumann-Billings, 1998). Another example of resilience with regard to the exo-system is that of 'Ubuntu' in the South African culture and in terms of which orphans are taken in and cared for by the extended family or other community members (Theron, 2007).

1.5.2.4 The macro-system

The macro-system is the most outer level of the societal context and is often referred to as the cultural blueprint (Bronfenbrenner, 1994; Hong & Espelage, 2012). The macro-system refers to

... Consistencies, in the form and content of lower-order systems (micro-, meso-, exo-) that exist, or could exist, at the level of the subculture or the culture as a whole, along with any beliefs system or ideology underlying such consistencies (Bronfenbrenner, 1979, p. 26).

The macro-system contains cultural customs, values, shared knowledge, material resources, norms and laws. Macro-systems may determine the social structures at the

micro-system levels and, therefore, these macro-systems may implicitly influence all other the interactions between the various 'layers' or systems in society. For example, if the prevailing cultural belief is that parents are solely responsible for raising their children, then there would be little or no chance of society providing resources to help support parents to raise their children (Anderson et al., 2013).

With regard to GLPFs, societal homophobia or traditional religious beliefs serve as examples of negative macro-systemic influence on familial resilience. In the same sense, anti-gay activism may be a macro-system that positively contributes to the development of resilience in GLPFs.

1.5.2.5 The chrono-system

The chronosystem refers to the dimension of time in human development. Chrono-systems involve consistency and change over time and over life events in both the individual and the broader environment (Hong et al., 2011; Hong & Espelage, 2012). Time may be external (i.e. the timing of a loved one's death) or internal (i.e. physiological changes as a child grows older).

Resilience, which is conceptually linked to risk, is characterised by socio-historical dimensions (Ungar et al., 2013). There are very few studies that account for the changing historical factors with regard to resilience (Schoon, 2006). However, Laub and Sampson (2003) and Schoon (2006) indicate that resilience is not merely a personality factor but it is also influenced by processes and interactions originating within both the family and the family's surrounding environment. Individual development (and, hence, resilience) is continuously changed through the socio-historical context experienced by the individuals concerned (Schoon, 2006). The impact of challenging life events on any individual is, thus, dependent on the said individual's developmental stage as well as the socio-historical context in which the challenging event plays out. For GLPFs, life transitional changes may also include life events such as personal abuse or trauma (i.e. victims of anti-gay violence), divorce, the birth of a child/sibling, adoption and/ or marriage.

It is important to understand and explore the above mentioned bio-ecological contexts of resilience in GLPFs because of the complexity of processes that potentiate the growth of resilience under adversity. By exploring these systems from the perspective of GLPFs and taking into account the multiple reciprocal relationships between the family members and the elements of their surroundings, I hope to gain an understanding of the

factors that facilitate resilience in GLPFs (Masten & Obradovic, 2006; Ungar, 2011). When conceptualising resilience from this systemic perspective, it is understandable that the individual is not exclusively the pivotal determinant in the complex system changes that affect resilience but, instead, that resilience may, to a greater extent, be influenced by the adaptation of the micro-, meso-, exo-, and macro-systems (Ungar et al., 2013). DuMont, Windom, and Czaja (2007) confirm this notion. They indicate that resilience is influenced by the interaction between risk factors and the way in which systems respond. Their results showed that elements of the environment were, in some cases, more important than individual factors such as cognitive ability.

In an attempt to integrate and place the family within the context of bio-ecological systems theory, the following section highlights the systemic nature of the family.

1.5.3 THE SYSTEMIC NATURE OF FAMILIES

In order to better understand the concept of the functioning of GLPFs and their subsequent resilience in society, specifically with regard to this study, I felt it was important to provide an overview of the systemic nature of families as they find themselves nestled in their daily interactions with the society in which they live. As explained above, systems thinking is grounded in the notion that there is a constant relationship and interaction between the different components that make up a system. When one conceives of the family as a system in society, it becomes clear why it is possible to define families as unique (Peterson & Bush, 2013). It is essential to be cognisant of the fact that the interrelationship between individual family members and between families and society sculpt the family into being. All of these relationships are governed by recurring, predictable and purposive rules which enables familie to execute tasks and to meet the need requirements of both their own family members and those from external agencies in society (Hill, 1971; Kantor & Lehr, 1975; Walsh, 2003; Watzlawick, Beaven & Jackson, 1967).

According to Mattessich and Hill (1987), families display four systematic features, namely: *intimate interdependence*, *selective boundary maintenance*, *ability to adapt to change and maintain their identity over time* and *performance of family tasks*. As an institution the family also fulfils various family tasks, such as the maintenance of family morale and fostering the motivation required to perform roles both inside and outside of the family. Families comprise smaller subsystems such as marital, sibling or parental subsystems and that may be organised according to hierarchy in terms of gender,

generation or function. In addition, some of these subsystems may wield greater influence than others (Broderick, 1993). However, each of these subsystems is interdependent in that a change in one part will inevitably bring about a change in all the other parts (Von Bertalanffy, 1968/1975; Bronfenbrenner, 1977; Vorster, 2003; Witchchurch & Constantine, 1993). The changes that take place and reverberate throughout the family may originate within an individual family member or else outside of the family in the broader society.

As with any other system, families are maintained by both internal and external boundaries. Boundaries may be defined as a subjective impression of the way in which systems and subsystems relate to one another and, therefore, these boundaries are not always directly visible. Internal boundaries regulate the interaction and information exchange between family subsystems while external boundaries regulate family membership as well as the personal and information exchange between the family and broader society (Anderson & Sabatelli, 2007; Bitter, 2009; Peterson & Bush, 2013; Steinglass, 1987; Vorster, 2003).

In view of the fact that families are in constant interaction with society, they are also open systems which must monitor information and feedback as well as adapt and reorganise as it becomes necessary. It is, however, normal to find some tension between change-resisting and change-promoting feedback within families. When systems such as families resist change because of rigid boundaries, the system (family) may become closed and isolated. It may also be that some families are too open to change and, as a result, they become chaotic or disorganised. It is important for healthy systems to find a balance between adaption and change while also maintaining clear boundaries in order to foster a sense of family identity for both individual family members and the family as a whole (Dalton, Elias & Wandersman, 2001; Olson, Sprenkle, & Russel, 1989; Peterson & Bush, 2013; Walsh, 2003). It should be noted, however, that the degree of adaption is a subjective notion and family functioning is always congruent with the context in which the family finds itself (Dell, 1982). In the same vein, I assumed GLPFs to operate optimally (resiliently) given the contextual factors of their social interaction with society. Accordingly, I am of the opinion that the GLPFs' understanding of society and society's understanding of GLPFs (or rather their positioning as regards gay/lesbianism in general) may influence the GLPFs' interaction and, ultimately, facilitate resilience.

1.6 Clarification of central concepts

1.6.1 RESILIENCE

Many writers have agreed that there is no single definition of resilience and, in fact, a definition of resilience has been the subject of considerable debate over decades (Luther et al., 2000; Masten, 2001; Masten & Reed, 2002; Seligman, 2002; Ungar et al., 2013). It would appear that resilience is a multifaceted concept which focuses the attention on the qualities of individuals and environments which promote healthy development and functioning (Ungar et al., 2013). However, for the purpose of this study, resilience is defined as the “maintenance, recovery or improvement in mental or physical health following challenge” (Ryff & Singer, 2003a, p. 20).

Resilience models may typically be divided into *variable-focused* and *person-focused* models. Variable-focused models explore resilience by examining possible linkages between the personal characteristics, environments and experiences which promote healthy outcomes in the face of adversity. On the other hand, person-focused models examine individuals who have been identified as resilient and they aim to identify those elements which result in these individuals being more resilient than others (Masten & Reed, 2002). This study examines resilience from a variable-focused perspective by exploring the factors that facilitate resilience in GLPFs, thus taking into account personal characteristics as well as their reciprocal influence on the systemic context in which GLPFs find themselves.

1.6.2 GAY AND LESBIAN INDIVIDUALS

A male person who is sexually attracted to a partner of the same male sex is usually referred to a gay while a lesbian is a female person who is sexually attracted to a partner of the same female sex. Gay/lesbian people are a diverse group of individuals who acknowledge their same-sex sexual orientation in different ways. The acknowledgement that one is of gay/lesbian orientation may present throughout life cycles and may differ in terms of the degree of expression. Anyone may be of gay/lesbian orientation and many gay/lesbian individuals choose to make their sexual orientation visible. However, for some gay/lesbian individuals, the fear of stigmatisation or discrimination leads to a hidden, same-sex sexual identity and these individuals may live their entire lives suppressing their sexual preferences. Many religious denominations subscribe to the myth that gay/lesbian individuals are sinful or immoral and they offer interventions aimed at healing their deviant sexualities.

However, just as heterosexual people do not choose to be “straight”, gay/lesbian individuals do not choose to be gay. In essence, gay/lesbian individuals are often extremely courageous in owning their true identities and living their true selves (Okun, 1996).

1.6.3 GAY AND LESBIAN PARENT FAMILIES (GLPFs)

For the purpose of this study, GLPFs are defined as any adult lesbian or gay couple, married or not, that stands as the head of a family with children living in the same household. The children may be from previous marriages or from the union of the gay or lesbian parents. These families have typically also been referred to as “same sex families or same gendered parented families”.

1.7 BRIEF OVERVIEW OF CHAPTERS

❖ CHAPTER 2

Literature review on resilience

❖ CHAPTER 3

Literature review on GLPFs

❖ CHAPTER 4

Methodology

❖ CHAPTER 5

Research results

❖ CHAPTER 6

Conclusion and summary followed by the contributions and limitations of the study and recommendations for future studies.

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CHAPTER 2

LITERATURE REVIEW: RESILIENCE

This chapter discusses the concept of resilience and, thus, it explores the definition of resilience. It also explores the many factors that may influence individual resilience, family resilience and, especially, resilience with regard to gay and lesbian parent families.

2.1 DEFINING RESILIENCE

Resilience is a complex and dynamic construct. Resilience is not only influenced by biology (i.e. genes) or intra personal factors (i.e. optimism, emotional intelligence, faith) but it is also affected by social-contextual/environmental factors such as available resources (i.e. money, friends, institutions). It is, thus, possible to say that resilience reflects the dynamic convergence of factors which promote adaptation to life after adverse life experiences (Truffino, 2010). Individuals with effective support systems such as friends and family members may find it easier to cope in difficult times than individuals who may be isolated and who feel completely alone. In the same sense, a person may have numerous friends who serve as a support system but who foster a cynical outlook on life and, thus, such an individual may still find it difficult to cope in adverse circumstances, despite the presence of a support system. Resilience may, thus, be regarded as an important component of psychosocial adjustment and positive mental health (Truffino, 2010). One must, however, acknowledge that building resilience may be either more difficult or easier for some as a result of a variety of these factors. Many researchers (i.e. Keyes & Lopez, 2002; Masten, 2001; Ryff & Singer, 2003a, 2003b, Seligman, 2002, 2011; Southwick & Charney, 2012) have indicated that a combination of personality and contextual/environmental factors may influence resiliency in individuals. Numerous individuals possess untapped resilience and they may only become aware of how resilient they are when they are faced with adversity. Resilience appears to be an ordinary capacity and, thus, it is a characteristic or ability which is often found in individuals from all spheres of life and it is not limited to a gifted few (Grotberg, 1999; Masten, 2001; Neenan, 2009).

Neenan (2009) contends that there is no definite definition of resilience and that it is an elusive concept. He highlights the fact that, despite numerous research efforts, the

factors associated with resilience and the reasons why people are affected by adversity in such diverse ways remain a puzzle. To date, there is much discrepancy in the literature as regards defining resilience. Early literature tended to portray resilience as being facilitated by exceptional personal qualities while more recent literature suggests that resilience is both a dynamic and ongoing process and is a result of various interlinked factors, both personal and contextual (Griffiths & Pooley, 2011; Masten, 2001; Christiansen, Christiansen & Howard, 1997; Walsh, 2003). Ebersohn et al. (2012) state that an increasing number of research studies support an emic perspective when exploring resilience, thus emphasising the importance of taking into account the cultural frame from where the concept becomes apparent. According to Chen and Reuben (2011), cultural homogeneity and heterogeneity refer to the culturally determined manner in which individuals navigate and negotiate resources. Culturally, aspects of resilience differ to the degree in which cultures collide and celebrate either homogeneity or heterogeneity. However, there is also a need for an understanding and appreciation of the culturally diverse ways in which groups express themselves. Minority groups may find themselves under scrutiny because it is the power groups that define socially acceptable behaviour (Ungar et al., 2013).

Many writers define resilience by including various domains and areas of expression. In the social sphere, resilience refers to both the profile of those affected by adversity and to the socio-political strategies aimed at enhancing resilience. It also refers to the degree of resilience in the community and is linked to the community's protective or risk execratory nature (Truffino, 2010). Masten (2001) defines resilience as "a class of phenomenon characterized by good outcomes in spite of serious threats to adaption or development" (p. 228). Crawford, Wright, and Masten (2005) define the study of resilience as "a search for knowledge about the processes that could account for positive adaption and development in the context of adversity and disadvantage" (p. 355). Nevertheless, however it manifests it would appear that resilience is an 'ordinary magic' (Masten, 2001) that is common throughout the lifespan of individuals and that it has roots in both psychological and social resources.

The early studies of resilience focused on child development in the face of adversity and later led to resilience studies in general (Masten & Powell, 2003; Shaikh & Kauppi, 2010). It must be noted that the study of resilience does not ignore the presence of risk as being resilient does *not* mean that one is immune to the effect of adversity. Instead, resilience studies focus on the opportunities and resources required to overcome adversity and live optimally (Garmezy, 1996; Luthar & Zelazo, 2003). Positive adaption

is, thus, a key concept in understanding resilience (Theron, 2012; Tummala-Narra, 2007). The criteria for positive adaptation differ from writer to writer. Definitions of positive adaptation have included the absence of pathology, the absence of physical disorders, high social competence and affect regulation. However, it is essential not to negate the cultural context, individual characteristics and time of event when considering positive adaptation and resilience (Herrman, Stewart, Diaz-Granados, Berger, Jackson, & Yuen, 2011; Theron, 2012). Thus, resilience is clearly a multi-layered concept that focuses the attention on the strengths of individuals and the strength of communities while highlighting that social justice is implicit in successful development and adaptation (Ungar, 2008). According to Masten (2001), resilience is the expression of basic human adaptive and protective systems. Based on their studies with children, Masten and Reed (2002) identified protective factors within the individual, within the family and within the community and that contribute in facilitating resilience. According to Masten and Reed (2002), resilience is linked to the health of these protective systems rather than to the type of adversity encountered.

Various explanations have been offered for growth after adversity while the meaning making process after adversity has been described as a process of reappraisal or revision of how a challenge may be interpreted or what the challenge may mean. Nolen-Hoeksema and Davis (2002) suggest two forms of meaning making. They refer to the first process as *sense-making* and in terms of which the event is interpreted as comprehensible in line with the beliefs about the way in which the world functions. This process may be highly individualised as the life circumstances of people so diverse. The sense that a person will attach to an event is significantly influenced by the individual's life story. For example, the death of a loved one may be interpreted as 'God calling the loved one home' and this may even give comfort to those left behind while others may view the loss of a loved one purely as part of the life cycle and with no message attached. The second process is concerned with *benefit-finding* and involves finding benefits or positive outcomes in the trauma. Benefit-finding typically falls into one of three categories, namely, perceptions of the *self as stronger*, *closer relationships* or *greater clarity* regarding what is truly important in life. In addition, researchers have found that an optimistic attitude is positively correlated with finding benefits in adversity and loss while it would appear that spiritual orientation and religion greatly influence meaning making (Baumgardner & Crothers, 2014).

Nevertheless, however resilience is defined, it is clear that the concept of resilience does not refer purely to the ability to resist adversity but rather to adjusting, growing and

developing *under* difficult circumstances. Resilience covers all areas of personal competence and, therefore, it affects the emotional, cognitive and social domains (Truffino, 2010).

2.2 FACTORS THAT INFLUENCE RESILIENCE

There is considerable literature on resilience with the majority of such literature highlighting the factors that influence the building of resilience. Positive psychology points out that both happy and unhappy events form a tapestry against which the quality of life may be displayed (Carr, 2011; Seligman, 2002; 2011). In view of the fact that it is not possible either to understand or define resilience without taking into account challenging life events, this principle of positive psychology resonates well with the aim of this study and I assume that factors relating to the resilience of gay/lesbian parent families will emerge throughout this study during the exploration of both the risk and protective factors that GLPFs negotiate in their daily lives.

For the purposes of the study, the factors (individual factors and family factors) described in the following sections have been selected as playing a major role in contributing to the building of resilience. It must be noted that working with families is often challenging as it involves working with individual entities who form an integrated whole. As with any other system in society, we must not deny the fact that families comprise the total sum of different parts and, thus, that families are made up by individuals who each have their own personalities, ideas or perceptions. Although these personalities, ideas and perceptions are often influenced and shared by family identity to an extent, the individual family members are still unique. This uniqueness may, in various ways, influence the effect of factors on family resilience. However, we cannot, in a study on family resilience, negate the relational context of the individual traits and characteristics in the family system as a whole and, therefore, all of the following concepts I deem to be equally influential and important. In view of the fact that the pivotal concept of the study is the protective factors that facilitate family resilience, the literature review will, in addition to focusing on other factors, also focus in depth on exploring the factors which are regarded as beneficial to this reciprocal relationship (i.e. sense of belonging or social connectedness).

Numerous studies (see e.g. Burns, Anstey, & Windsor, 2010; Cohn, Brown, Mikels, Fredrickson, & Conway, 2009; Jowkar, 2007; Souri & Hasanirad, 2011; Wang & Kong, 2013) have indicated the positive relationship between resilience and high subjective

well-being. Accordingly, some of the following factors have been specifically selected as factors that I assume would improve resilience through their direct and/or indirect effect on subjective well-being.

2.2.1 INDIVIDUAL RESILIENCE

2.2.1.1 Self-regulation, cognitive reappraisal and positive emotion

Self-regulation, cognitive reappraisal and positive emotion are some of the very personal factors that contribute to resilience and which are usually intertwined. When challenging circumstances arise, mobilising positive emotions may foster the determination to overcome these challenges. Seligman (2011) categorises three types of positive emotions. The first type of positive emotion includes those emotions which are associated with the *future* i.e. optimism, hope, faith, confidence and trust. The second type of positive emotions includes those emotions that are associated with the *past* and would typically be satisfaction, contentment, fulfilment, pride and serenity. Thirdly, momentary pleasures and other enduring gratifications (such as bodily pleasures and higher pleasures) are positive emotions associated with the *present*. Negative emotions that arise from misfortune may easily be counteracted by inducing positive emotion as positive emotion buffers challenges and encourages resilience (Seligman, 2002; Southwick & Charney, 2012; Troy & Mauss, 2011).

One of the prominent theorists of positive emotions, Barbara Fredrickson (2001), has described extensively how positive emotions contribute to building social, psychological and physical resources. In her *Broaden-and-Build theory* she describes the various ways in which positive emotions may broaden one's thought-action repertoires and build resources in order to increase well-being. In view of the fact that an increase in well-being may heighten the experience of positive emotions, an upward spiral of health and happiness may be expected (Frederickson, 2001). She goes on to emphasise that positive emotions undo negative emotions in that it is almost impossible to experience both positive and negative emotions simultaneously. Positive emotions furthermore builds resilience by offsetting the effects of negative emotions and, therefore, continues to build an upward spiral of enduring resources and continuous well-being (Baumgardner & Crothers, 2014; Frederickson, 2001). Positive emotion has been well documented in relation to coping with stress. A combination of emotional, behavioural and intellectual efforts may be employed to reduce the effect of challenging experiences and to increase coping behaviour. Coping behaviour is often grouped into

problem focused, emotion focused coping (Lazarus & Folkman, 1984) and proactive coping (Aspinwall & Taylor, 1997). Problem focused coping involves efforts to reduce or eliminate the source of stress by seeking help from others, taking action to mobilise change or conducting an evaluation to assess possible options. Emotion focused coping involves attempts to change or reduce one's personal response to challenging events. This may include actions such as avoidance, denial, seeking support from others and positive self-talk. On the other hand, proactive coping refers to attempts to prevent the challenging events from happening in the first place.

Positive emotions are often mobilised by employing cognitive reappraisal. The aim of cognitive reappraisal is to become more flexible by cognitively reframing the challenging situation into a more positive situation (Baumgardner & Crothers, 2014). Troy and Mauss (2011) suggest that positive cognitive reappraisal fosters resilience in that it allows an individual to reframe a stressful event as either less stressful or more positive than it was initially perceived to be, thus resulting in adaptive responses. Numerous studies have shown that individuals who employ positive cognitive reappraisal reported higher psychological well-being as compared to those who do not employ this coping mechanism (Baumgardner & Crothers, 2014; Folkman & Teddlie Moskowitz, 2000; Fredrickson, 2002; Ochsner, Bunge, Gross, & Gabrieli, 2002; Southwick & Charney, 2012).

Another form of cognitive flexibility involves acceptance and humour. Accepting the reality of a challenging situation and maintaining perspective may cause one either to redefine goals or to re-direct efforts. It is important to note that acceptance does not mean defeat or resignation but, rather, it emphasises goal-directed and problem focused coping in which realistic cognitive appraisal enables the individual to become more resilient than may otherwise have been the case. This resilience, in turn, may open the way for active decision making and resolving the challenge ahead. Siebert (1996) and Cheung and Yue (2012) cite acceptance as one of the key abilities in individuals who cope successfully with highly stressful situations. In their study on minority groups, Gerber and Ginsberg (1990, as cited in Southwick & Charney, 2012) indicated acceptance as a key ability in adults who are highly successful despite learning disabilities. Humour is often employed as a coping mechanism in the midst of challenging life events (Neenan, 2009). Victor Frankl (1985) referred to humour as '*...one of the soul's weapons in the fight for self-preservation*' (p63). Humour is effective in counteracting stressful events as it often brings pleasure and comic relief not only to the person dispensing it but also to those receiving it. Humour allows individuals to

reframe circumstances objectively and not to take challenges too seriously (Neenan, 2009).

2.2.1.2 Positive traits and emotional intelligence

It is not possible to refute the fact that some people are just happier than others. Scheier and Carver (1992) coined the term '*dispositional optimism*' which refers to a global expectation that the future will bring with it positive things. Numerous studies have indicated that personality is an important predictor of subjective well-being (Costa & McCrae, 1980; Diener & Larsen, 1993; Diener & Lucas, 1999; Gomaz et al., 2009; Myers & Diener, 1995). Positive personal characteristics or internal dispositions may account for strong resilience in certain individuals. The foremost positive traits are defined as strengths and virtues but also include specific abilities such as intelligence (Carr, 2011; Diener & Lucas, 1999; Seligman, 2002, 2011). The idea of happiness linked to (amongst others) genetics/personality traits are extensively supported by literature (Diener & Lucas, 1999; Gomaz et al., 2009; Lykken, 1999; Lyubomirsky, 2007; Schutte et al., 2007; Seligman 2002, 2011). Studies on the aspects of personality that influence resilience have been less explicit and have revealed that the various dimensions of personality may influence resilience among populations in challenging circumstances (Pearlin, Menaghan, Lieberman, & Mullan, 1981; Ungar et al., 2013). Ghazinour et al. (2003) found that resilient minorities, in their case refugees, exhibited the recognisable personality traits such as low harm avoidance, high self-directedness and high cooperativeness which enabled them to obtain sufficient social support in a marginalised context. I believe this finding may resonate well with the resilient minority group (GLPFs) which was the focus of this study.

As compared to their pessimistic counterparts, positive traits may enable optimistic individuals to experience challenges as more transient thus rendering them more susceptible to developing resilience (Seligman, 2002). Temperament refers to a genetically determined physiological disposition to respond to environmental triggers in a stable and typical manner (Baumgardner & Crothers, 2014). Several researchers believe in the biological basis of reactivity and the subsequent development of personality traits later on that influence resilience (McCrae et al., 2000; John & Sirvastava, 1999). Self-acceptance and autonomy are two further personal traits that play a significant role in predicting resilience (Ryff & Singer, 2003a, 2003b). A person who has mastered self-acceptance has the ability to accept all the varied aspects of the 'self' and this helps to foster a positive attitude towards his/her own life. In addition,

autonomy provides internal standards that guide actions and mobilise initiative, self-direction and independence. According to Anant (1967), self-sufficient individuals experience less anxiety as compared to those who are less self-sufficient. Self-acceptance is inextricably linked to self-esteem. Self-esteem refers to feelings of self-worth and has been consistently found to be a strong indicator of happiness. Internalising self-acceptance provides the long term stability which serves as a stabiliser when challenging events disrupt life (Baumgardner & Crothers, 2014; Diener & Diener, 1995; Neenan, 2009). According to Neenan (2009), high frustration toleration (HFT) is also a personal trait which is related to resilience. He defines a HFT as “the ability to endure in times of distress or upheaval without continually complaining how difficult the struggle is or lapsing into self-pity every time a new setback is encountered” (p. 74). According to this definition, a HFT may imply a high degree of emotional regulation and self-control and, in my opinion, it is, therefore, inevitably linked to emotional intelligence (EI).

Emotional intelligence (EI) has been one of the key concepts in research on subjective well-being and has been shown to significantly predict subjective well-being and resilience (Armstrong, Galligan, & Critchley, 2011; Buckner, Mezzacappa, & Beardslee, 2003; Gallagher & Vella-Brodrick, 2008). EI has been linked to both subjective well-being and social support (Bar-On, 2005; Salovey, Bedell, Detweiler, & Mayer, 1999; Diener et al., 1999). The capacity to regulate emotions is an indispensable life skill. Self-control and self-regulation are critical components of both health and happiness. High self-control has been linked to improved personal adjustment and a greater capacity to cope with stress and pressure (Baumeister, Heatherton & Tice, 1994; Baumgardner & Crothers, 2014; McGinnis & Goldstein, 1997; Peterson & Seligman, 2004; Ronen & Rosenbaum, 2001). It has been shown that, as compared to those with a lower EQ, individuals with a high EI perceive and negotiate emotions with greater ease and that this, in turn, results in positive affect (Salovey et al., 1999). The ability to regulate the emotions often takes years to develop and may be a challenging skill even in adulthood. Teenagers often struggle for years to contain and regulate their emotional impulses while adults may spend hours working through their emotions during psychotherapy (Southwick & Charney, 2012). Both over reacting and under reacting often result in either too much or too little energy being used to overcome challenges while becoming either emotionally flooded or emotionally disengaged disrupts the ability to process information successfully and inhibits efficient decision making. By learning to regulate the intensity of their emotions and not allowing the emotions to interfere, individuals

under stress may be able to channel their cognitive and behavioural responses into productive problem solving. Paying purposeful attention in a non-judgemental way, also referred to as 'mindfulness', may be one way of regulating the emotions successfully (Kabat-Zinn, 1994; Southwick & Charney, 2012; Wang & Kong, 2013) and becoming more resilient than may otherwise have been the case.

2.2.1.3 Sense of coherence and self-determination theory

Self-determination theory (SDT) proposes that human beings have three psychological needs, namely, autonomy, competence and relatedness. These psychological needs have, in turn, been positively associated with self-determination.

According to SDT, the need for autonomy requires individuals to act in response to their own feelings and choices and, thus, to initiate their own actions and take responsibility for them. The need for competence requires the ability to act in accordance with challenging tasks and to succeed in achieving the desired outcomes. This includes simultaneously influencing the environment and coping with environmental demands. The need for relatedness reflects a sense of belonging and, thus, a need to foster the close relationships which have particular meaning in life. All three of the above mentioned needs have an significant impact on guiding and enhancing mental health (Baard, Deci, & Ryan, 2004; Gagne & Deci, 2005). Several studies have reported on the significant impact of psychological needs on life satisfaction and subsequent happiness (Deci & Ryan, 2008; Sheldon & Bettencourt, 2002; Sheldon & Niemiec, 2006; Sapmaz, Dogan, Sapmaz, Temizel & Dilek Tel, 2012). Stewart and Yeun (2011) also indicate that self-determination is significantly associated with resilience in the physically ill. Accordingly, I am confident in assuming that self-determination may play a significant role in the ability and motivation of individuals as regards taking action which increases their well-being, sense of belonging in society and related resilience. In the same sense, I assume that the determination of GLPFs to belong in society motivates the interaction between themselves and society at large and this, in turn, contributes to the effect of protective factors on the resilience of these families. The determination to succeed may be significantly influenced by a belief in the ability to succeed. Although the literature does not indicate a specific link between SDT and Sense of coherence (SOC) in this regard, I am of the opinion that is, indeed, a link as I believe the two to be inextricably intertwined and relevant to the purpose of this study.

Sense of coherence (SOC) is “a construct that refers to the extent to which one sees one’s world as comprehensible, manageable and meaningful” (Antonovsky & Sourani, 1988, p. 79). It is closely related to and derived from the salutogenic model which was first proposed by Aaron Antonovsky (1987). The salutogenic model (and, by implication, SOC) is concerned with stress and coping. According to the model the stronger one’s SOC (one’s ability to experience stressors as predictable and manageable and to believe that the engagement with the process will be meaningful) the easier one will cope with life’s challenges. In his early work, Antonovsky (1972, 1979, 1987) proposed that generalised resistance resources such as money, faith, work role autonomy and social support provide individuals with continuous life experiences that are consistent, balanced and socially valued in terms of decision making. He went on to state that individuals who go through these types of experiences will, over time, come to see the world as meaningful and as making sense. This, in turn, results in the world becoming meaningful, manageable and comprehensible. This worldview then allows individuals to employ cognitive clarification in terms of which problems may be efficiently and appropriately handled while facilitating the motivation to drive the engagement with problems. Generalised resistance resources are a pivotal concept in SOC. Generalised resistance resources refer to a number of specific resources that are generally available to help individuals cope with life demands. These resources may differ from individual to individual and may depend on both personal (i.e. skill, intelligence) and external (i.e. social support, economic resources) qualities. However, it is not necessary for the strength of SOC to coincide with the levels of available resources and the emphasis is rather on the individual’s ability to utilise resources efficiently (Suominen, Helenius, Blomberg, Uutela & Koskenvuo, 2001). The ability to utilise general resistance resources resonates well with the aim of understanding the protective factors that facilitate resilience in GLPFs.

It should be noted that SOC is not a specific coping style but, rather, it is a construct that emphasises flexibility in selecting an appropriate coping style, depending on the situation and contextual factors of the problem (Antonovsky & Sourani, 1988). The key concept in SOC is that it is a global orientation and, thus, it is not a skill or view which is applicable only to a certain context of an individual’s life. It would appear that SOC increases with age and throughout the entire life span. It has been found that a strong SOC is positively linked to good health (Eriksson & Lindstrom, 2006/2007; Honkinen, Suominen, Valimaa, Helenius & Rautava, 2005; Jorgensen, Frankowski & Carey, 1999). This has been confirmed by studies which highlighted the inverse effect of SOC and

psychological symptoms such as anxiety and depression (Myrin & Lagerstrom, 2006; Ristakari, Sourander, Ronning, Nikolakaros, & Helenius, 2008). High SOC has also been noted in successful coping with life demands and severe adversity (Braun-Lewensohn, Sagy, & Roth, 2011). Findings by Switaj et al. (2013) also indicated that SOC significantly reduces the impact of levels of stigma in individuals with mental illness. In this regard, enhancing SOC has been noted as beneficial in treatment programmes for patient rehabilitation and recovery (Griffiths, 2009).

In their research on SOC in adolescents, Moksnes, Espnes, and Lillefjell (2012) found that taking individual SOC into account may be helpful in understanding the support required in school systems. I am of the opinion that this view of individual SOC may relate to any system, including the family subsystem in society and, therefore, I consider SOC to be an important factor in understanding the protective factors that facilitate resilience in GLPFs. Evans, Marsh and Weigel (2010) refer to the family as the context which is the most influential as regards SOC although they point out that SOC emanates from multiple developmental contexts such as the school, neighbourhood, peers, family etc. Rivera, Garcia-Moya, Moreno, and Ramos (2013) also refer to positive influences, for example support from classmates and teachers at school, as significant contributors to SOC. Accordingly, I expect SOC to be influenced by protective factors as regards GLPF resilience. The perceived coherence of family life in terms of coping with specific crises is referred to as the '*family sense of coherence*' (FSOC) and was suggested by Antonovsky and Sourani (1988)., FSOC is clearly one of the key components of family or relational resilience (the processes whereby families transcend challenging situations) (Walsh, 2003). The following section will discuss the significant role which FSOC plays in family resilience.

2.2.2 FAMILY RESILIENCE

Family resilience has been extensively explored in the literature (Bhana & Bachoo, 2011; Black & Lobo, 2008; Beavers & Hampson, 1990; Benzies & Mychasiuk, 2008; Olson & Olson, 2000; Walsh, 2003). A key characteristic of the family resiliency models in the current literature is the focus of these models on the coping processes within the family as a unit and also the greater emphasis on the processes between family members with regard to resilience rather than on the processes between the family and society. Although some studies do explore resilience from a bio-ecological perspective, I was not able to locate a model which had been designed specifically to explain resilience in GLPFs. Benzies and Mychasiuk (2008) specifically emphasised the social-

ecological influence on family resilience. In their study Benzie and Mychasiuk (2008) identified factors in three spheres, namely, the individual, family and community and that served as protective factors to enhance family resilience. They confirmed that family resilience is a construct which is facilitated through complex interactions between the risk and protective factors which operate in all three spheres and highlight that it is essential that these factors are assessed within context as there are numerous influences that may moderate or mediate their functioning. They suggest that future research is needed to develop a comprehensive family resiliency model which will capture these factors in their interaction.

In view of the purpose of this study, I do not think it was necessary to include existing models of family resilience in this section of the literature review (refer to the discussion in section 1.5.1). In light of the gap in current literature as regards the protective factors that may facilitate resilience in GLPFs families, I preferred to move forward and to explore the factors that I considered to be influential in GLPF resilience from a bio-ecological perspective. These factors may (or may not) present themselves in the research results and it would be interesting to see the degree to which resilience in GLPFs has (or has not) been facilitated by the existence of some or most of the factors discussed in this literature review.

2.2.2.1 Positive social connectedness: Sense of belonging and social identity complexity

The aim of living life is not mere existence but it is, instead, geared towards living a well-lived life (Keyes & Haidt, 2003). Several studies have found that the core contributor to a life well lived is 'meaning in life' – in other words positively gratifying the needs for autonomy, competence and relatedness as referred to in the concept of sense of coherence (Deci & Ryan, 2000; Diener et al., 2003; Diener, Sapyta & Suh, 1998). Baumeister and Leary (1995) proposed the "belongingness hypothesis" in which they suggested that "human beings have a pervasive drive to form and maintain at least a minimum quantity of lasting, positive and significant interpersonal relationships" (p. 497). Research suggests that well-being is significantly influenced by social networks in the form of social support while the concept of social capital has long been a focus of the research conducted by family and community researchers (Bubolz, 2001; Brehm & Rahm, 1997; Coleman, 1988; DiFulvio, 2011). Peer support networks, safety networks and protection inside the family as well as in school or one's personal life are some of the protective factors that promote resilience (Truffino, 2010). Cohen (2004) states

specifically that social interaction provides individuals with a sense of identity, belonging and self-worth. He goes on to say that social networks fulfil the need for predictability, security and stability. In this sense, one may assume that strong social connectedness may be a significant factor in the protective factors that facilitate resilience in GLPFs and, therefore, the GLPFs' relationship with society is a pivotal focus area in this study on resilience.

As mentioned before several of the psychological and sociological family studies have either ignored the family's bonding with society or they have dealt with the issue in general terms only (Cigoli & Scabini, 2006). It is my opinion that families' bonding with society or their sense of belonging (SOB) may be closely related to their social identities in the many spheres of society. Tajfel and Turner (1979) confirm that personal identity is determined primarily by belonging to one or more groups. The more one is able to identify with being part of society, the more likely one will feel socially connected and experience 'belongingness'. I assume this to be true for all families, not only GLPFs. However, it would appear that social identity is a complex construct as it is sculpted by numerous facets of society and 'self'. Korostelina (2007) also proposes that social identity seems to be a controversial topic in social science. Social identity theory (Tajfel & Turner, 1979) explains that society comprises a stratification of social categories, each with different statuses and powers. Members of society belong to certain of these groups and this, in turn, determines their identities. Accordingly, the members of society establish their social identity based on three interconnected processes, namely, categorisation, identification and social comparison (Lazzari, 2010, as cited in Moscato, Novara, Hombrados-Mendieta, Romano & Lavanco, 2013; Roccas & Brewer, 2000). However, for the purpose of this study, the process by which complex identities develop is not a key issue. What is of importance is the concept of GLPF members viewing their identity as a more complex issue than purely belonging to GLPFs because I assume this to be one of the main reasons why GLPFs adapt successfully in society. I am of the opinion that their ability to transcend the minority status often assigned to them by society enables GLPFs to manage and become part of the same society that challenges them on a daily basis. Whatever the process used and/or however many social identities are established, I believe that both GLPFs and the individual family members extend their social identities to encompass more than merely the minority category of GLPF

In addition, for the purposes of this study, I regard the concept of social identity and SOB as reciprocal to one another and as important factors in understanding the

protective factors that facilitate resilience, more specifically resilience in GLPFs. Research indicates that positive relationships with institutions such as a democratic society or freedom of inquiry are fundamentally important in harsh times (Baumeister & Leary, 1995; Seligman, 2002). Merely belonging to a strong and supportive family significantly improves one's subjective feelings of social connectedness.

The concept '*sense of belonging*' (SOB) or a need for '*belongingness*' has long been proposed by theorists as one of the important human needs for optimal and healthy functioning (Baumeister & Leary, 1995; Kune, 2011; Maslow, 1943; Stillmann & Baumeister, 2009). A SOB not only acts as a buffer against loneliness but also as a forerunner to social connectedness (Mellor, Stokes, Firth, Hayashi, & Cummins, 2008). The need for human belongingness is so strong that, in the absence of it, humans may exhibit psychological or behavioural problems (Buckley et al., 2004; Seeman, 1996; Stillmann & Baumeister, 2009). In their article on well-being in the social context, Halliwell and Putnam (2004) make reference to the link between social capital and subjective well-being. The notion of human needs in respect of the quality of life was further explored by Cotstanza et al. (2007). They made reference to quality of life as a function of (i) the degree to which needs are met and (ii) the importance of the need with regard to subjective well-being. An early study by Anant (1967) also provides evidence of the positive correlation between belongingness and mental health. Research has shown that people define their identity beyond themselves if the collective identity has meaning. These individuals usually share values, goals, commitment, support and respect as well as mutuality and cooperation with the group (Levin & Cote, 2002; Qutaiba & Tamie, 2010). A study that focused on minority families (Moscatto et al., 2013) indicated that a strong sense of community and life satisfaction contributed to a low sense of discrimination.

There are a significant number of researchers who have emphasised the important link between sense of belonging and improved well-being and/or resilience and happiness (Anderman & Anderman, 1999; Bolger et al., 2000; Choearom, Williams, & Hagerty, 2005; Malone, Pillow, & Osman, 2012; Seeman, 1996; Stewart & Yuen, 2011). Although it was not possible to find any literature pertaining specifically to SOB in GLPFs and improved well-being (and only a limited amount of articles on resilience in GLPFs) much of the literature indicated the overwhelming effect of discrimination on gay/lesbianism and/or other minority groups in society and the subsequent feelings of poor well-being on the part of these groups (Schaafsma, 2013; Wang, Li, Stanton & Fang, 2010). These findings are confirmed by studies on subjective well-being which found

that both subtle and blatant discrimination against minority groups had a negative impact on subjective well-being and also that social support significantly increased subjective well-being (Gallagher & Vella-Brodrick, 2008; Schaafsma, 2013).

It is well known that anxiety is often caused by the uncertainty experienced in a situation. However, as a member of a group individuals are less likely to become anxious and they are more likely to feel secure when there is a support system of people to offer help. According to Anant (1967), there is a definite inverse relationship between belongingness and anxiety and, thus, the higher the SOB, the lower the anxiety experienced. According to Haggerty et al. (1996), SOB also relates to both social and psychological functioning and, thus, they proposed clinical interventions to assist patients to developing the skills required to enhance their SOB for the benefit of optimal functioning. It is important to note that personality also plays a significant part in social connectedness in that the proactive efforts made by individuals are important in establishing social networks (Wanberg & Kammeyer-Meuller, 2000; Zhu, Woo, Porter, & Brzezinski, 2013). These efforts may differ from individual to individual and from family to family as personality traits such as extroversion and introversion tend to impact on such proactive initiatives. Therefore, once again, one must acknowledge the relational impact of individual traits and dispositions on a concept such as resilience, especially when the concept is explored within a family context and from a bio-ecological perspective. I found a study by Yetim (2001 as cited in Gulacti, 2010) that indicated no relation between subjective-wellbeing and social contact. Accordingly, it was interesting to see how the research results presented in this study.

The literature indicates that identity is socially constructed and shaped by the various practices of the existing social structures (Barth, 1969; Butler, 1990; Korostelina, 2007; Young, 1997). It is the constructionist element of social identity that resonates well with this study.

In my search for literature on the influence of protective factors on familial resilience in GLPFs I was not able to find any articles which specifically addressed the social identity of family members belonging to a GLPF. I therefore posed the question as to how gay/lesbianism forms part of the identity of individual family members who do not identify with being gay/lesbian themselves? Is it possible that resilience and subsequent wellness in GLPFs may be influenced by a transcendent, complex or 'flexible' social identity rather than a rigid, fixed identity? As mentioned earlier, it was my assumption going into this study that it was possible that the individual family

members of GLPFs, especially GLPFs with school going children were more flexible in their social identities. I assumed this, because being a gay/lesbian parent or a child in a GLPF, does not take away the fact that the individual concerned is a husband or wife, a mother or father, a brother or sister, an actor in a school play, a parent on a school committee or a member of a church. I also made this assumption particularly as regards families with school going children as exposure to various moral cultures in society (school, church, sport events, festivals etc.) requires greater involvement on the part of gay/lesbian parents as compared to gay/lesbian couples without children and who can easily 'hide' away from societal involvement on multiple levels.

As mentioned, social identity complexity refers to the subjective representation of individuals of the interrelationship between their multiple group identities. Thus, social identity complexity may be described as the perceived degree of overlap between the various groups of which a person is simultaneously a member at any given time (Roccas & Brewer, 2000). Social identity serves as a buffer against interpersonal conflict and also provides a platform for social group interaction, identification, social relationships and belonging (Korostelina, 2007). Groups of identification may take different forms and may be described as primary groups (i.e. family/friends), primordial groups (i.e. ethnic/religious), socially constructed groups (i.e. nation/political party), contact groups (i.e. colleagues/associates) and symbolic groups (i.e. generation). Schmid, Hewstone, and Al Ramiah (2012) confirm that, in societies in which diversity is greater, higher social identity complexity may be found. Diversity is a 'theoretically intriguing antecedent' (p.136) of social identity complexity in that individuals need to be aware that a) multiple in-groups constitute distinct social categories and b) that these categories cannot, or need not, merge completely (Schmid et al., 2012). Accordingly, cross-cutting and diverse social groups may lead to higher cognitive differentiation processes and more complex perceptions of one's own in-group. Nevertheless, there are certain implications regarding conceiving diversity as an antecedent of social identity complexity, including the fact that continuous views on diversity may lead to an increase in prejudice between groups, thus negatively affecting intergroup relations (Pettigrew, Wagner, & Christ, 2010; Schmid et al., 2012). However, in view of the fact that I work with GLPFs who self-identify as resilient, I assume that their exposure to diversity has led to reciprocal positive and tolerant in-group attitudes. Other research studies have confirmed this positive association (Brewer & Pierce, 2005; Miller, Brewer & Arbuckle, 2009).

It is essential to acknowledge that GLPFs as a whole and the family members as individual persons belong to multiple social groups besides belonging to the group of GLPFs. Also, although all family members may not identify with gay/lesbianism, each family member in a GLPF experiences gay/lesbianism as part of their world. I am, therefore, of the opinion that it may be because of greater social identity complexity (Roccas & Brewer, 2002) that GLPFs may be able to function effectively in a heteronormative society as these complex identities allow for greater belongingness and negotiation. Family members in diverse families are required to negotiate the dynamic between togetherness and individuality in ways that fit their unique ecological and cultural circumstances (Raef, 2006; Rothbaum & Trommsdorf, 2007).

An individual's ability to control the process of identification may vary from context to context. As mentioned before, identification with one's family is primarily an uncontrolled process during primary socialisation. Through identifying with the family, an individual involves him/herself with familial expectations, aspirations, anxieties and joys. The feeling of "we-ness" (p. 19) cements group identification and leads to common forms of thinking and behaviour (Korostelina, 2007). However, as the individual becomes more aware of various sub-worlds or moral cultures, the opportunity for the further development of social identity arises. The development of social identity may take several forms; from harmoniously integrating the new identity into existing identity to creating a core conflict when the restructuring of the social identity seems to be in contradiction with the existing social identity. Whatever the case, it is clear that social identity is changeable and may, therefore, become more complex.

I am of the opinion that the awareness of multiple identities and by not limiting themselves as 'outsiders' of restricted 'belonging' to the categories of gay/lesbian; GLPFs may find it easier to blend their 'otherness' into society and become *part of* and *belong to* their society at large. Belongingness, among other things, in turn, contributes to successful resilience. It is from this point that the reciprocal relationship, if nurtured, may continue. This '*sameness debate*' is discussed in more detail in section 3.2. It would be interesting to discover whether or not the participants in this study acknowledged social identity complexity with regard to resilience.

2.2.2.2 Family strengths

Family strengths may be defined as those relationship qualities that contribute to the emotional health and well-being of the family (Mace, 1985). For the purpose of this

study, the following concepts have been borrowed from various literature studies (see Bhana & Bachoo, 2011; Black & Lobo, 2008; Walsh, 2003; Iruka, Curenton, & Eke, 2014) as key processes in facilitating family strength and subsequent resilience.

The first of these factors is ***family cohesion***. The connectedness of family members within a family, as well as a close-knit bond with the extended family, has been noted as one of the important factors in effective family functioning (Bitter, 2009; Iruka et al., 2014; Olson, Gorall, & Tiesel, 2002; Walsh, 2003). Resilience in families is strengthened by mutual support and collaboration in attempts to resolve adversity. Creative brainstorming by family members opens up possibilities for overcoming challenges and mobilising growth. Family members find joy and comfort in relating to one another. However, cohesion should also be of such a nature that there is still space for separateness, thus ensuring that the individualism and personal boundaries of family members are still respected. Not all family members react to adverse circumstances in the same way as personal factors (i.e. age of family members, time of event) may influence their interpretation of the event. Optimal family members take responsibility for autonomy and they claim ownership of their own thoughts, feelings and behaviours. A tolerance of this type of autonomy fosters mutual respect between family members and also encourages a “we-ness”. By finding outcomes through facing and resolving adversity, families build resilience. It is important that families find resolution through intervention that fit their situation, cultural orientation and personal strengths (Walsh, 2003/2012).

Family ***flexibility*** is another core factor in facilitating resilience. Where resilience implies “bouncing back”, flexibility implies “bouncing forward”, thus implying that adapting after adversity when returning to normal circumstances could not be negotiated. At the same time, it is essential that stress is buffered and balanced to maintain stability in the family system. Flexible family authority plays a significant role with regard to familial adapting in a changing society while it also affects the way in which family systems balance stability with change. According to the Circumplex model of family and marital systems family flexibility may be defined as the “amount of change in its leadership, role relationships and relationship rules” (Olson & Gorall, 2003, p. 519). Just as in the case of cohesion, it is imperative that family flexibility is managed so that it does not become too flexible and chaotic. Moderate sources of flexibility allow for balance during change and functional adaption.

Effective communication between family members is closely linked to cohesion and flexibility. Communication is an essential skill in the ability of families to negotiate their cohesion and flexibility. It includes speaking, listening and self-disclosure. Open family communication, characterised by clarity, trust, mutual respect, empathy and tolerance, is essential in order to manage challenges with clear and congruent messages during a family crisis facilitating the effective transmission of the information required in order to mobilise intervention. It is normal for parents to want to shelter their children or life partners from harm and, therefore, they may choose not to communicate about threatening topics. However, avoiding honest communication in this regard may lead to suppressed anxiety which will reflect in their behaviour and which may generate fear in their partners and children. This, in turn, will prove to be counterproductive in effective problem solving. Optimal families have the ability to negotiate tasks, organise themselves, gain input from one another and coordinate ideas. It must be noted, however, that cultural norms are pivotal to family communication and that they regulate the degree of sensitive information which is shared (Miller et al., 2000; Walsh, 2003/2012).

Spirituality and religion is another factor that significantly influences the ability to handle crises. It has also been indicated as a predictor as regards fostering resilience in general but also specifically in diverse families (Iruka et al., 2014; Javanmard, 2013). Resilience is fostered by a shared belief system that supports families, thus helping them to transcend challenges while providing meaning and strength during such challenging times (Werner & Smith, 1992). Transcendent beliefs enable families to view adverse events from a perspective that gives meaning and facilitates hope. The paradox in resilience is that, at the worst times, it may bring out the best in families in the form of transformation and adaptation. Resilient families often emerge from adversity with renewed moral strength and purpose in life (Walsh, 2003). Boyd-Franklin (1989) confirmed that strong religious connections supported African American families in overcoming poverty and racism. Other studies also found spiritual activities such as prayer, ceremonies, rituals etc to be sources for facilitating resilience (Bernard, 2004; Walsh, 2003; Werner & Smith, 1992).

Family identity is another concept that stands in a reciprocal relationship with family strengths and that may also be defined as a family strength in its own right. I assumed that family identity played a major role in the facilitation of resilience in GLPFs, specifically because I believe family identity is influenced to a degree by family-society

interaction and that it is not only sculpted by family members in isolation within the family. The next section contains a more detailed discussion of family identity.

2.2.3 FAMILY IDENTITY

Family identity may be defined as “the family’s subjective sense of its own continuity over time, its present situation and its character” (Bennet, Wolin, & McAvity, 1988, as cited in Epp & Price, 2008, p. 52). Through the family’s interaction with society, this family identity is scripted and it provides the family with personal and private meaning (Rosen & Kuehlwein, 1996). Epp and Price (2008) contend that “being a family” is a “collective enterprise that is central to many consumption experiences and replete with challenges in contemporary society” (p. 50). Family identity is sculpted through the family interactions and rituals of family members with one another and also between the family and broader society, bringing the family members closer together (Brooks, 2008). These rituals serve both to conserve the family paradigm and to transfer the family identity from one generation to the next (Friesen, 1990). Rituals may be defined as behaviours or activities on the part of family members, that have symbolic meaning, reflect family traditions and promote family stability (Black & Lobo, 2008; Imber-Black et al., 1988). Family rituals serve as vehicles through which family identity is transmitted and provide a basis from which family history may be traced and understood (Brooks, 2008; Friesen, 1990). Black and Lobo (2008) define family rituals as “symbolic communication with enduring, affective, and generational transmission” (p. 46).

Friesen (1990) categorises family rituals into three groups. He describes the first group as family celebrations and, thus, as activities that are widely practised by the culture to which the family belongs. Examples of these types of celebrations include weddings, religious holidays or baptisms. Practising family celebrations contributes to family stability although it may happen that religious or cultural differences within a family (i.e. mixed marriage in terms of religious denomination) cause conflict about the carrying out of such events. I consider this to be especially important in the case of GLPFs as religion (more specifically Christianity) has often been in conflict with the notion of same-sex relationships and, thus, I have to question how and if these celebrations actually strengthen family identity?

Another family ritual identified by Friesen (1990) was those family traditions which are less culture specific and more unique to each family. In this context traditions refer to

moderately organised activities that do not necessarily occur on an annual basis but that occur regularly i.e. vacations, anniversaries, activities with kin and birthday parties. It is the responsibility of the family to decide how and when to celebrate family traditions and to make an important statement about the family's identity as this emphasises what is important in their lives. The third ritual is that of family routines (Friesen, 1990). Family routines are the most frequently practised ritual and they are usually practised on a daily basis and without conscious planning as they are routine activities. Routines serve to organise daily roles and responsibilities and to structure family life in general as well as to link family members with both the past and the present. Furthermore, these routines provide families with the opportunity to express their common identity and shared belief system. These family rituals often make the changes that families face bearable and manageable and, therefore, I believe there is a link between family rituals (and subsequent family identity) and resilience.

In contemporary society, however, one must take cognisance of the fact that there are changing views on family and that the definition of normality may change during the life cycles of families (Walsh, 2003). Family identity varies considerable in diverse families and it is necessary to tread carefully in not confusing "normality" with "functionality" when discussing family identity.

Epp and Price (2008) confirm this assertion by highlighting that families face competing demands and interests in a modern world. They go on to say that families have increasingly elective and fluid interpersonal relationships and that mixed family structures may differ from the traditional view of what constitutes a family. This, in turn, influences the definition of what a family should be.

Despite the rising number of same-gendered families, it would appear that negotiating family identity in GLPFs is an ongoing process while same-sex marriages are also becoming more prevalent in society. Evidence proves that the interaction of lesbian mothers with society challenges their family identity (Suter, Daas & Bergen, 2008). It would appear that these lesbian mothers' family identity was continuously negotiated through the use of symbols and rituals (i.e. symbolic interactionism) and that their identities were never simply claimed. Lesbian mothers also found that, as their children grew older, the secrecy also increased and, therefore, they advocated for coping strategies that could assist children to negotiate heterosexism (Suter, Daas & Bergen, 2008). According to Breshears (2010), it is important to discuss family identity in the families that differ from traditional families because of the potential complex

implications family identity may have for the children. She supports this statement by adding that,

... given the stigma surrounding gay/lesbian parent families, the negative implications this stigma may have on children's sense of family and the discourse dependency of non-traditional and marginalised families, it is important to understand how familial identity is negotiated and discussed between gay/lesbian parents and their children (p. 80).

From a social constructionist perspective, family identity may be changed and co-constructed by family members to create the family life story (Bitter, 2009). In my opinion, this also highlights the essential contribution by each family member to the creation of the family identity, thus creating a "we-ness" in addition to the fundamental differences between the individuals themselves. I consider this especially important in the case of GLPFs as sexual orientation is a recognisable component of the family identity of GLPFs despite the fact that the children may not identify as gay/lesbian themselves. Individuals in a family may have certain ideas or beliefs about themselves which may be either praised or scorned. These beliefs may relate to the family's achievements, physical appearance or coping mechanisms but each of these characteristics reflects the family identity as a whole (Friesen, 1990).

Family relationships and the subsequent family identity are subject to the opportunities and constraints imposed by social relationships. Cigoli and Scabini (2006) explain family identity using the relational-symbolic model that is extremely helpful in this regard. Three principles are highlighted, namely, *organisational*, *symbolic* and *dynamic*. The organisational principle refers to the family as a unit with history and a system with the ability to organise relationships. Families organise the primary relationships that bind the crucial differences (i.e. gender, generation, and lineage) inherent in human nature, thus binding family members together as people and rooting gender identity. These relationships produce the next generation and this is essential in the human community. The interaction which is part of these relationships allows the co-construction and sequence of events between those who produce them. The concept of interaction in this regard includes interdependence, reciprocity of exchange, nonlinearity and multifinality. Analysing relationships provides information on family ties and their meanings while it also highlights boundaries, alliances, exclusions and negotiation processes, thus enabling a better understanding of the family. The second principle refers to a symbolism, thus, etymologically something that "connects different

parts together” and resulting in recognition (Sini, 1989, as cited in Cigoli & Scabini, 2006). With regard to families, the symbolic matrix of gender and/or generational ties, among others, provides substance and meaning to family life as well as forming the affective and ethical base of the family. Qualities such as hope, trust and justice are all situated in this symbolic sphere and influence the construction of the family’s social and personal ties in a reciprocal manner. The third principle, dynamics, refers to the social and interpersonal exchange in family relationships. Although this is a complicated principle with several facets and it may be viewed from many different perspectives, the essence of this principle is that family well-being is dependent on the quality of relationships within and outside of the family itself. It incorporates the act of “giving and indebtedness, and is based on giving, receiving and reciprocating” (Cigoli & Scabini, 2006, p. 45). Thus, understanding “family-ness” (and, in my opinion, its effect on resilience) is part of understanding who takes part in the relationship exchange as well as the value of the bond between these role players (Cigoli & scabini, 2006, p. 73).

In short, it would appear that establishing and expressing healthy family identity facilitates the strong relationships between family members which may guide and support families of any nature through adverse times as well as help them to negotiate difficulties.

2.3. CRITIQUE ABOUT RESILIENCE

Besides the fact that resilience research, and its subsequent relation to human functioning in demanding situations, has developed rapidly over the past two decades, discrepancies in this field of research still exists (Fletcher & Sarkar, 2013). Recently, Chaudieu (2010) observed that it is the conceptual inconsistencies that hamper the assessment of resilience as well as the comparison of research results. One such example is the fact that the construct of resilience has variously been defined as a trait, a process and an outcome and these concepts provide researchers with theoretical boundaries that helps determine the nature, direction and reliability of their research (Fletcher & Sarkar, 2013, Olson, Jerneck, Thoren, Persson & O’Byrne, 2015). The difference in definition and conceptualisation of resilience offers challenging debate between scholars in the field. Luthar, Sawyer and Brown (2012) notes that the central objective of resilience research is to identify risk and protective factors that may alter the negative effects of adversity as well as to identify the processes that underlie this association. They therefore content that clarification of the meaning of protective and risk factors are pivotal for future research. They continue to state that another issue less

often discussed is the underlying processes of adversity itself, and this should gain more attention as the relative impact of different processes linked with global risk is crucial in understanding antecedents of vulnerability and resilience. Furthermore, an applied perspective, focusing on gene-environment interactions may explain the importance of biological processes that contribute to both protection and vulnerability (see, Curtis & Cicchetti, 2003, Kim-Cohen, Moffit, Caspi & Taylor, 2004, Rutter, 2002/2003).

Luthar, Cicchetti and Becker (2000) confirm that the construct of resilience in research are tainted by variations in definitions and terminology as well as by discrepant conceptualizations of resilience as a trait versus a process. They state that researchers use the term interchangeably to refer to each of these, a confusion stemming, in part, from influential literature on ego-resilience which reflects a set of resourceful traits of character as well as flexibility of functioning in response to varying environmental circumstances. Masten (1994) comments on the issue of terminology by recommending that the term resilience be exclusively used when referring to the maintenance of positive adjustment under adverse circumstances as the term resiliency may carry a connotation to a personality trait. Luthar et al., (2000) continues to say that the multidimensional nature of resilience has led some researchers to question the veridicality of the construct and therefore there need to be some degree of uniformity across “theoretically similar” (p.7) adjustment domains, but not across those that are conceptually distinct. Evidence of uneven functioning across different domains indicates the need for specificity in discussing resilient outcomes and therefore in their outcomes researchers must specify the particular spheres to which their data applies. It is further important to clearly indicate that successes in said domains does not necessarily imply positive adaptation across all important spheres. The inclusion of diverse adaptation domains with its subsequent inconsistencies also confuses the explanation of ideal indicators of resilience within individual studies (Luthar et al., 2000). Therefore, in the case of multiple outcomes which were assessed, it is pivotal to consider whether these outcomes should be examined separately or in an integrated manner and the decision should rest on the conceptual distinctness of the domains in question.

Another critique to the concept of resilience is that of the subjective versus objective ratings of risks (Bartlett, 1994). It is difficult in any one study to determine whether individuals experience a comparable level of adversity due to the subjective nature of their responses (Luthar et al., 2000, Kaplan, 1999). However, concerns with regards to subjectivity in self-ratings are not unique to resilience research and it does not

automatically fault resilience research. It is indeed worthwhile to try and determine the factors associated with relatively positive adaptation as well as to examine the proximal processes by which vulnerability is conferred (Luther et al., 2000). It is important to note that although some at-risk children may excel at certain points in time, many falter subsequently and manifest deterioration in their levels of adjustment (Tarter & Vanyukov, 1999). Therefore, ontogenetic instability in the phenomenon of resilience is to be expected since positive adjustment are rarely maintained over long periods of time (Kaplan, 1999). Having said this, it is critical that ontogenic fluctuations are considered in studies about resilience as resilience is clearly not a static state (Egeland, Carlson & Sroufe, 1993). Mowat (2015) agrees that the wider societal and political context should be recognised in exploring resilience. She contends that the interpretive framework from which the individual's experiences of risk and protection are shaped should always be considered.

Olson et al., (2015) make mention of the fact that resilience thinkers address the ambiguity in the meaning of resilience. Resilience seems to include both change and resistance to change and it is therefore critics who misinterpret the notion of transformation. They continue to say that it should be discussed whether or not resilience is a normative concept since the majority of resilience theories have thus far treated resilience as almost exclusively normative. It is subsequently argued that the application of resilience to the social systems requires more solid theoretical grounding.

Historically, there has been a tendency to assume that adversity hinders positive adaptation. However, research found that individuals with a history of some lifetime adversity reported better mental health and well-being than those without experienced adversity. It can therefore be assumed that adversity encourages individuals to tap into unrecognised resources which facilitates mastery for future endeavours (Fletcher & Sarkar, 2013, Seery, Holman & Silver, 2010). In the light of future research it may be helpful to more rigorously explore the processes underlying protective and risk factors as well as more explicitly acknowledge and engage with the importance of integrative, multidisciplinary research. The interface between research and intervention should be capitalised upon by facilitating interventions by utilising accumulated knowledge.

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CHAPTER 3

GAY AND LESBIAN PARENT FAMILIES

Addressing resilience automatically implies the existence of a stress which provokes challenge. In an attempt to explain resilience in GLPFs, it is imperative to understand the way in which GLPFs are perceived and challenged by society. This chapter aims to investigate gay and lesbian parent families by first exploring the historical context of this minority family type in South Africa. The chapter then expands on societal reactions towards gay and lesbian families in general. The experiences of children raised in gay and lesbian parent families are then explored. The chapter ends by highlighting existing literature on resilience in gay and lesbian parent families.

3.1 HISTORICAL REACTIONS TO SAME-SEX ORIENTATION AND GAY/LESBIAN PARENTING

“Ladies and gentlemen, step right up! Look closely at the child of a gay dad. No horns! No tail! In fact, she could pass for anybody’s child”

(Garner, 2005, p. 13).

3.1.1 A GLOBAL HISTORICAL PERSPECTIVE

The history of societal attitudes towards LGBTQ people has been synonymous with persecution, irrational prejudice, violence, repression and marginalisation although there have also been incidents of tolerance and celebration (Davies, 2012; Okun, 1996). The increasing resistance to any form of sexual oppression has brought with it an awareness of the stratification of human sexuality and provided critical insights into the consequences and limitations of certain social structures (Davies, 2012). The Western world’s pervasive intolerance towards LGBTQ people during from 1945 to 1990 may be ascribed mainly to the staunch religious views that condemned same-sex sexual orientation (Marcus, 1992). Historically, the term homophobia emerged in the late 1960s. The main focus of the prevailing homophobia depends extensively on the cultural and historical context of the society in which it is prevalent. Weinberg (1972) is generally credited with coining the term homophobia. He describes homophobia as the

irrational fear and/or hatred that heterosexual people feel for people of same-sex orientation. Weinberg (1972) suggests several reasons for homophobia including a tendency on the part of heterosexual men to defend themselves against their own homoerotic feelings. From ancient Greece until today, sexual practices in the world have varied with people in society differing with regard to their experiences and expressions of sexuality. Some may view sexuality as a stable, essential component of one's biological make-up, while others may view it simply as a descriptor of one's desires and which may vary during a lifetime. In general, societal attitudes toward same-sex orientation are diffused either with discomfort or delight in perceived threats to the dominant gender norms (Davies, 2012).

In ancient Greece homoerotic relations were celebrated although certain same-sex relationships were highly taboo. The male body in Greece was regarded as the ideal representation of beauty while "the free male" (a male belonging to an ethnocentrically and androcentrically defined social class) was generally regarded as the human ideal (Davies, 2012, p. 617). Sexual relations in Greece were linked to expressions of dominance and it was acceptable for free males of different social statuses to practise same-sex relations as long as the active partner (the lover) was of a higher status, i.e. an older man, than the receptive partner (the beloved). Thus, the receptive partner had to be of an inferior social status, i.e. a teenage boy, but with the potential for a social status equal to that of the lover. However, in the times of the Roman Empire attitudes towards same-sex orientation became increasingly negative and, in due course, it was criminalised and made punishable by death. Christian homophobia has its roots in the Roman Empire while the belief that procreation is not merely a product of heterosexual intercourse but also of divine assistance has placed a further strict regulation on extramarital and same-sex relationships.

The argument of '*natural law*' which contends that the universe is ordered in such a way that all elements serve the higher purpose of '*a man lying with a woman*' enforced the belief that same-sex orientation was a sin against God and not a natural happening. Early philosophers such as Immanuel Kant and Thomas Aquinas supported the belief in heterosexual intercourse and, especially Kant, believed that any form of sexual activity between consenting adults outside of a heterosexual marriage was to be condemned. In view of the fact that marriage is traditionally tied to reproductive sexuality, the argument pertaining to natural law often emerges in contemporary debates about same-sex marriages. This goes hand in hand with the assumed evolutionary superiority of heterosexuality over same-sex orientation together with the implication that

heterosexuality is evolutionary fitter because sexual reproduction depends on heterosexual intercourse. However, these arguments negate the fact that same-sex orientation traits have been evolutionary successful in that same-sex relationships has occurred throughout human history to the present day and also across the world (Davies, 2012).

Prior to World War II, it was highly taboo to practise same-sex relationships and LGBTQ individuals often led secretive lives while undergoing heterosexual marriages in order to appear to be adhering to the norm. The aftermath of World War II uprooted many people and exposed them to a broader world peopled by diverse people, including individuals of same-sex orientation, and whom they may have never have previously known. This, in turn, allowed LGBTQ people to acknowledge their sexual identity and find confirmation for whom they were or wanted to be (Okun, 1996). Thus, after the war, individuals of same-sex orientation banded together to survive in a heteronormative society and they organised secret groups, for example, the Mattachine Society and the Daughters of Bilitis. During the 1960s the meaning of sexuality began to shift and people became confident in experimenting with varied sexual behaviours. However, it was not until 1969 in the United States of America that the Stone Wall Riot resulted in the gay rights movement as it is known and visible today (Okun, 1996).

Criminal sanctions on same-sex relationships are often assigned to the historical context of colonial regimes. On the other hand nationalism and cultural pride hold social power in terms of resistance to colonisation. During the Nazi propaganda era, prisoners who had been identified as gay or lesbian were forced to wear a pink triangle on their uniforms as a visible sign of their “race traitorship” (Davies, 2012, p. 169). Although protection against discrimination does exist, it is still illegal today for gay men and lesbian women to serve openly in the U.S. armed forces while revealing one’s same-sex orientation may lead to discharge (Davies, 2012; Drescher, 2007). Up until today individuals of same-sex orientation remain the targets of state violence in various countries. For example, in Zimbabwe, people of same-sex orientation were referred to as “the festering finger endangering the body of the nation” while in countries such as Poland and Russia, Gay Pride marches have been banned. In Nigeria, an individual is compelled by law to report any person of same-sex orientation and neglecting to do so may result in accusations of abetting gay or lesbian individuals with subsequent jail terms of up to 10 years (Mac-Iyalla, 2014).

Throughout their developmental histories, gay and lesbian individuals report periods of difficulty in revealing their sexual orientation to others and even acknowledging it to themselves. The fear of discrimination from society as well as their own families often causes gay and lesbian individuals to spend years of their lives being unable to acknowledge their true sexual orientation (Drescher, 2007). Many individuals of same-sex orientation often come to regard their sexuality as an unpleasant fact and they choose to stay hidden ('in the closet'). This, in turn, causes additional stress. Hiding one's sexual orientation may increase the difficulties experienced as it is impossible to assess the true reaction of others towards same-sex orientation if it is not made known or discussed. Moreover, revealing oneself as gay or lesbian may also be dangerous because of the possible social stigma and discrimination (Drescher, 2007). However, for some of those who have crossed the boundary of disclosure, being acknowledged as an individual of same-sex orientation has been a positive experience for self-discovery while, for many, revealing their true sexual orientation was less stressful than it would have been to stay hidden for ever. In an early assessment of the attitude of gay men towards their own sexual orientation, Nungesser (1983) found the best predictors of attitude towards same-sex orientation was the frequency of passing for gay or lesbian; the average reaction towards the sexual orientation of significant others; the timeframe since accepting one's 'label' as gay or lesbian; and the amount of social time spent in the company of fellow people of same-sex orientation.

In view of their experiences, many individuals of same-sex orientation have joined in creating a LGBTQ community of organisations in which they are able to relate their experiences, find affirmation of their identities and create a sense of belonging. In so doing LGBTQ individuals challenge society's dominant perspective of 'queerness' and authentic origin of pride in one's identity (Davies, 2012).

3.1.2 A HISTORICAL PERSPECTIVE OF THE SOUTH AFRICAN CONTEXT

In an attempt to understand GLPFs' interaction with society, I include a short but comprehensive overview on LGBTQ rights in general but also in terms of South African legislation over the past few years. As mentioned before, the aim of this study is to explore what is positive in and around the lives of GLPFs and to highlight factors contributing to their strengths and resources. The cause of adversity (for the purpose of this study) is not that important, since the discovery and emphasise of strengths is a pivotal aim. However, as with any other study focusing on resilience the position of adversity inevitably finds its way into the discussion and therefore, to focus some light

on the challenges experienced by GLPFs and to highlight why resilience is worthy of exploration, the following section will background the context and challenge of heteronormativity with regards to GLPFs in South Africa.

Heteronormativity can be defined as a cultural gold standard that stipulates what counts as acceptable and appropriate (Califa, 2000). This standard includes cultural beliefs, rules, privileges and sanctions that work together to maintain heterosexuality as the norm, thus the latter being superior but, and more importantly, it defines what is considered 'normal' (Lynch & Maree, 2013, Oswald et al., 2005, p.144). The apartheid regime in South Africa was characterised by its heteronormativity and hostility towards LGBTQ South Africans. During the apartheid years same-sex orientation was regarded as a crime and it was punishable by terms of up to seven years in prison. It was only during the late 1970s that pro-gay and gay-rights associations emerged. The negative attitude towards LGBTQ individuals was evident in acts such as the South African Defence Force forcing gay and lesbian soldiers to undergo various medical treatments in an attempt to cure their deviant sexualities. In contrast to the criminalisation and legal sanctions that had characterised same-sex orientation during apartheid, the post-apartheid regime brought with it constitutional reform which allowed individuals of same-sex orientation to foster their identities. The South African Bill of Rights (1996) first prohibited discrimination on the grounds of sexual orientation (Davies, 2012). Since the mid 1990s, progressive law reform has led to a greater decriminalisation and increasing equalisation of gay and lesbian individuals in South Africa. In November 2006 the signing of the Civil Union Act (Act 17 of 2006) brought about the recognition of gay and lesbian marriages (Polder, Nel, Kruger & Wells, 2008). Currently, the Marriage Act (Act 25 of 1961) and the Customary Marriages Act (Act 120 of 1998) together with the Civil Union Act all provide for the status of marriages in South Africa. The legalisation of gay and lesbian marriages positioned South Africa as the first country to do so in Africa and the fifth to do so internationally. In addition, the Domestic Violence Act of 1999, the Employment Equity Act of 1998, the Labour Relations Act of 1995, the Rental Housing Act of 1999 and the Medical Schemes Act of 1998 all recognise the status of same-sex orientation in South Africa. Gay and lesbian activism and visibility has grown with the emergence of gay and lesbian organisations, film festivals and other exposure via print and through social media. Organisations such as the Organisation of Lesbian and Gay Activists (OLGA), Lesbian and Gay Organisation of the Witwatersrand (GLOW) and the National Coalition of Gay and Lesbian Equality (NCGLE)

are some of the organisations that have contributed to the constitutional reform of same-sex orientation in South Africa (Tatchell, 2005).

Broader exposure and public debate in South Africa have reinforced the existence and recognition of same-sex orientation and, yet to date, same-sex orientation continues to be characterised as “un-African” (Roberts & Reddy, 2008). It would appear that, despite South Africa’s progressive legal position with regard to the constitutional protection of minority groups, separatism as regards the gay and lesbian culture is still prevalent (Theunick, 2000). Incidences of hate crimes towards black gay and lesbian individuals as well as gay bashing highlight the fact that constitutional equality has not guaranteed social acceptance in South Africa. The growth of gay and lesbian visibility South Africa and affirmative gay and lesbian social structures are still in their infancy as compared to those in first world countries such as ASU, England and Australia. According to Roberts and Reddy (2008, p. 9), the assertion of ‘un-Africaness’ conceals a moral and cultural view that [South] Africa is unique and is perceived to be immune to Western and European imports. National trends in South Africa have shown that homophobic sentiments are deeply entrenched in the population. In a quantitative survey what was conducted the question “Do you think it is wrong or not wrong for two adults of the same sex to have sexual relations?” elicited the response that, overall, 80% of the population aged 16 years and above agreed that it is “always wrong”. Compared to other countries in which the same question was posed, South Africa was ranked with Chile and Philippines with the intolerance revealed being five times higher than that in the Netherlands, double that in Britain and a third higher than the United States of America (Roberts & Reddy, 2008).

An investigation into the attributes that influence intolerance with regard to individuals of same-sex orientation has shown that, in South Africa, there does not appear to be a significant divergence in the negative attitude between the genders (Roberts & Reddy, 2008). With regard to age, it would appear that older South Africans are moderately more intolerant towards gay and lesbian individuals than the younger population. However, the reason for this observed difference remains open to speculation. Some may say that the passing of the Civil Unions Act in 2006 may have contributed to the statistically significant difference while others may attribute it to the influence of media and political attention. Education, on the other hand, seems to be a constant trend over years with those with higher educational levels appearing to demonstrate more tolerance and to be more liberal in their views than those with no formal education. Strongly linked to education is the issue of geographic divides with conservative rural

settings being significantly more gay-unfriendly than city centres such as Cape Town (Van Zyl, 2005). The proximity of individuals to gay and lesbian communities has also been cited as one of the main reasons for this urban-rural divide (Roberts & Reddy, 2008). In view of the high level of intolerance in the rural areas, the prevalence of hate crimes in these areas may be expected. Religion is another variable that marginally influences tolerance of the gay and lesbian community. In South Africa, 'conservative' denominations such as the Zion Christian Church (ZCC) and Islam appear to foster moderately more negative views of individuals of same-sex orientation while Anglicans and Hindus seem to be more positive towards individuals of same-sex orientation. It is of interest to note that no statistically significant differences were found between the various denominations and this may reflect a very narrow range in which attitudes related to religion orientation may vary. Population groups in South Africa have also shown statistically significant differences in attitudes with regard to individuals of same-sex orientation with black South Africans indicating higher levels of disapproval as compared to whites or coloureds. Indian individuals in South Africa have shown considerable fluctuations in their responses over the years and this makes an estimate difficult.

With regards to the challenge of heteronormativity and GLPFs in South Africa, Lynch and Maree (2013) and Motswapong (2010) confirms that constitutional protection of sexual orientation is in place, yet discrimination persists. In some instances, lesbian women are violently attacked. Bonthuys (2008) and Chan Sam (1995) agrees that evidence point to South African lesbian women being "correctively" raped by groups of men, the rapists claiming that they aim to "cure" lesbian women of their deviant sexuality (Bonthuys, 2008, p.730). In South Africa, whether or not a same-sex couple would have an openly same-sex relationship is greatly determined by factors such as culture, Christian beliefs, family member's and community member's attitude towards same-sex relationships (Isaaks & Morgan, 2005). In South Africa, community tolerance of same-sex relationships are often based on the perception and belief that those who engage in same-sex relationships are intersexed by nature and therefore they are not to be held responsible for their sexual urges (Bonthuys, 2008). Within the context of the South African Civil Union Act, the same-sex couples which this Act protects are those couples who openly identifies as gay or lesbian, however, many couples involved in same-sex relationships are hiding their true sexual orientation. Furthermore, in South Africa, these couples same-sex activities often coincides with heterosexual relationships or it is associated with a particular life stage, therefore it is assumed to be abandoned in

a later life stage (Bonthuys, 2008, Arnfred, 2004). Several African leaders, including Zimbabwean and the Namibian presidents, have openly claimed that same-sex relationships are “un-African” (Cameron, 2001, Niehaus, 2002); however this is not the case, as proven by social research. Western notions of gay and lesbian identity as exclusive seem to not be reflected by the identities of African people who have sexual relationships with those of the same-sex (Pantazis & Bonthuys, 2007).

Taking the above mentioned variables into account, it would appear that constitutional rights are not necessarily related to justice and that prejudice towards gay and lesbian individuals still exists. Attitudinal changes are required and it would seem that education on same-sex issues may be required in South Africa.

3.2 POSITIONING THE GAY AND LESBIAN PARENT FAMILY

The concept of family has evolved over time and both its form and function have been challenging to study. Cigoli and Scabini (2006) explain that the family “is an exceedingly complex living organism, a social entity and psychological subject that both mirrors and meshes with its environmental/social context and the cultural history it is steeped in” (p. 1). The unfixed characteristic of the family makes it a phenomenon that is increasingly difficult to investigate with family research needing to continuously redefine aspects such as male-paternal and female-maternal functions as well as the significance of genealogy in relation to children and families of origin. As a subsystem in society, the family, like any other system, comes into being when its components interact with one another. The family is original in the sense that it possesses its own intricate features but it is also a construction of the various parts that function as a whole. The family system is functional in that it is based on a relationship-organisation-system triangle that takes effect during interaction (Morin, 1968, as cited in Cigoli & Scabini, 2006). Thus, the family displays both its wholeness and its constituent parts (Cigoli & Scabini, 2006; Koestler, 1978). It is because of this characteristic of families that a social-ecological perspective on resilience in GLPFs resonates well with the aim of this study.

According to Walsh (2003), the normal family processes are grounded in systems theory. Walsh (2003) explains that a biospsychosocial systems orientation allows for unique coping and adaption on the part of the family in society. In terms of this orientation, the capabilities and coping strategies of each family are evaluated in relation to individual family members and also in relation to the broader society in

which the respective families function. One noticeable change in family diversity has been that of the two parent nuclear family that has made way to a number of alternative family types such as single parent families, adoptive parent families and GLPFs.

Bernstein and Reimann (2001) state that the visibility of GLPFs challenges dominant discourses on gender. With the increasing visibility of gay/lesbian rights and the legalisation of same-sex marriages in the past decade, has come an increasing number of GLPFs. Weston (1991) maintains that the emergence of GLPFs indicates a huge historical shift. Nevertheless, despite the increasing visibility of GLPFs, these family types continue to experience a great deal of stigma which, in turn, contributes to their often being labelled as 'not normal' (Goffman, 1963; Walsh, 2003). GLPFs often use normalisation strategies (discussed in more detail in the following section) to claim belonging and acknowledgement for their family structure. Okun (1996) states that contextual considerations enable a reformulation of 'normal' as "normal" is a social construction that cannot be understood outside of context. Historically and traditionally a family has been defined as a "biologically related system of two heterosexual parents" (p. 11). Typically the father would be the sole provider while the mother would be the primary caretaker of the household and children. Social change after World War II caused a shift in family ties and functioning and brought with it the first significant challenge to the traditional construction of the family (Okun, 1996). However, whatever the family structure, it became clear that biology, cultural dominance or legality were not the pivotal determinants of family but, instead, love, caring, shared responsibility and the capacity to value each other's needs became central to defining the concept of family (Okun, 1996).

Sociocultural context plays a significant role in familial well-being. It is, thus, not possible to ignore the societal discriminatory stance towards minority families in a study such as this. With regard to GLPFs, societal homophobia and heterosexism are still evident and may influence families in different ways, depending on factors such as the larger culture of society or the availability of support.

Society often 'prescribes' perceptions and reactions towards same-sex orientation and gay/lesbian parenting. These prescriptions, in turn, are inevitably linked to gender, sexuality and, subsequently, the *assimilation debate*. Wood (1986, cited in Rosen & Kuehlwein, 1996) commented that emotion engrosses the internalisation of social representations which include a range of societal attitudes and desires and which teach us what we 'ought to experience' and, subsequently, sculpt what we do and think.

Society often neglects to realise that the children from gay/lesbian parents may experience a wide array of problems, just as any other child raised by heterosexual parents. However, these difficulties are often ascribed to their family structures and, therefore, these youngsters try their best to keep their problems 'hidden' from others. Research confirms this notion by stating that emphasising the ordinariness of gay/lesbian parents may hide the possibility that these families may not conform to the heterosexual norm (Clarke & Kritzinger, 2004; Pollack & Vaughn, 1987; Walters, 2000; Wright, 2001) and may cause gay/lesbian individuals to disown their label as gay/lesbian parents, therefore not finding pride in their sexual identity. Many scholars repeatedly question the notion that children raised in GLPFs are no different from the children raised in heterosexual parent families (Clarke, 2002; Coyle & Kritzinger, 2002; Stacey & Biblarz, 2001). For example, Wells (1997, p. x–xi) states the following:

Lesbian households are raising a new generation of men who will be significantly different from their counterparts in patriarchal families ... Patriarchal families teach girls what they cannot do and teach boys what they cannot feel ... Lesbian families teach their sons to embrace the full range of their emotions. No one in a lesbian household says, "Take it like a man' or 'don't cry".'

Wells (1997) goes on to say that lesbian parents should embrace the inherent and beautiful difference in the children they raise. Research argues that normalisation is a product of heterosexist ideology and that gay/lesbian parents often adopt a 'highly defensive stance' whereby they claim to be ordinary in an attempt to establish eligibility for normalisation in society (Lubbe, 2005). The challenge with assimilation is that it may lead to the decontextualising and desexualising which does not contribute to transformation in the field of GLPFs. Emphasising 'sameness' through the assimilation discourse is, in its essence, defensive, apologetic and ignorant of diversities (Clarke, 2002; Savin-Williams & Esterberg, 2000).

Clarke (2002) confirms that the most prevalent construction of gay/lesbian parenting within a 'gay friendly context' is the strategy of normalisation. She reports four normalisation strategies which are commonly used to present gay/lesbian families in society. The first normalisation strategy in defence of societal critique and which attempts to establish the normality of GLPFs is that of love and care. The notion that "love creates a family" is far from controversial and is often agreed upon in general. If society were able to relinquish their traditional views and beliefs about gender, this

would reinforce the fact that parental gendered role division is not as important as the quality of the family relationships or the care that children receive within the family (Malone & Cleary, 2000). However, for many GLPFs, love does not represent their experience of family life as family life is often clouded by judgement, rejection and disappointment (Savin-Williams, 1998). By arguing that love creates their family, gay and lesbian parents negate the fact that a lack of social support and recognition often frame their families as “other” and steer the attention away from the institutional support and validation bestowed on heterosexual families with this, in turn, complicating the struggle for long-term social change (Clark & Kritzinger, 2004). The argument in favour of love is also often used to counter the claim that lesbian/gay parenting is sinful. From this perspective families may then assume any form as long as it provides a stable, loving and caring environment for children (Clarke, 2002).

The second normalisation strategy is that of explicit parallelism in which similarities between heterosexual and GLPFs are emphasised. This strategy is often used to address questions about the possible lack of appropriate role models (i.e. ‘Where is the father in a lesbian household?’). In defence against such questions, lesbian parents may compare themselves to single mothers who also do not have a father figure in the household and they, therefore, downplay the importance of parental sexuality (Clarke, 2002). The attempt to emphasise ordinariness is the third normalisation strategy used. This strategy, much in the same way as explicit parallelism, highlights the similarities between the everyday lives of heterosexual parent families and GLPFs. This strategy focuses on ordinary household tasks such as washing the dishes or taking out the rubbish and how the way in which these tasks are performed is no different to that in any other heterosexual parent family. This strategy emphasise that GLPFs do not pursue an ‘exotic’ lifestyle and that household tasks are recognisable components of normal family life (Clarke, 2002). In the debates on GLPFs, questions are often raised about ‘deficits’ in family life, such as the lack of appropriate role models mentioned before. Highlighting compensations for possible ‘deficits’ is the fourth normalisation strategy that Clarke (2002) identifies. In terms of this strategy, lesbian or gay parents may communicate that the lack of a mother or a father role model in the household is being compensated for by aunts or uncles, a grandmother or a grandfather. However, this strategy does not allow GLPFs to challenge the assumption that children need two parents of the opposite sex in order to develop normally.

It would appear that the assimilation debate, even within radical gay and lesbian movements, is at a crossroads regarding progressive discourse in an attempt to create

both resistance and change in the existing power structures. Accordingly, assimilation strategies seek the normalisation of same-sex orientation by creating a mixed category. In this mixed category, gay/lesbian individuals will assimilate the condition of being married, being a parent and being a head of a household (Peregrin, de la Rosa & Garcia, 2014). Although normalisation supports the recognition of GLPF rights there is, of course, a political cost to normalisation. In the long run, normalisation does not challenge the dominant heteronormative discourses in society, it provides no resistance to anti-gay propaganda and it apologises for the existence of GLPFs (Clarke, 2002). In the same sense some queer theorists insist that same-sex orientation is outside of mainstream society and that, by pushing the boundaries of normativity, queer people (such as LGBTQ individuals) embody good citizenship.

GLPFs are, in many respects, like all other families. There are different ways in which gay/lesbian households come to parent. The first is where gay/lesbian parents raise a mutually gained child through a shared experience (i.e. surrogacy, pregnancy through alternative methods, adoption). Secondly, there is the 'blended family' which comprises gay/lesbian parents of which one parent has brought a child from a previous relationship into the family. The third way is where both gay/lesbian parents bring children from previous marriages, whether same-sex or heterosexual marriages, into the new, existing family (Clunis & Green 1988; Moore & Stambolis-Ruhstorfer, 2013). However, to overexaggerate the small differences between GLPFs and heterosexual parent families often leads to an 'alpha error' (Hare-Mustin, 1987) since the majority of parents in GLPFs have been raised in heterosexual parent families where they have been taught to embrace family traditions, culture and religion (Walsh, 2003). Although some GLPFs may reject some of the more traditional gender roles learned in their families of origin, it is not uncommon to find this in some heterosexual families. In many modern households the emancipation of women has led to double income families in which the household tasks are equally shared by both parents who are otherwise employed. It is, therefore, more realistic to define these alternative role divisions as a matter of choice or biculturality rather than as a matter of tradition or difference (Lukes & Land, 1990; Walsh, 2003).

Gay/lesbian culture is as ever changing and improvised as any other subsystem in society and it is as important to take cognisance of the overarching culture that influences gay/lesbian communities as it is in the general and more traditional families (Laird, 1998). In the same sense, Garner (2005) confirms that the challenge which GLPFs experience with regard to blending into the mainstream often has nothing to do

with the parents' sexual orientation but more to do with the complexities of the family dynamics that may occur in any family. However, because sexual orientation is the issue that 'exposes' GLPFs in the first place, it is almost impossible to acknowledge these other complexities without confronting the opponents to gay/lesbian parenting (Garner, 2005). I consider this one of the main obstacles in societal education about GLPFs. Coming out as a gay/lesbian parent or GLPF is an ongoing process within the social context. Gay/lesbian parents are continuously called upon to explain their family structure to the various moral cultures in society, for example, the school, their doctors, parents of their children's friends, in an attempt to pre-empt and eliminate possible discrimination (Garner, 2005; Lubbe & Kruger, 2012). Lubbe (2005) proposes that, if schools fostered a tolerant attitude towards diversity, open disclosure about family structure may be encouraged. Graig, Martinez, and Kane (2005) reported that societal values and attitudes are, in the main, ambivalent towards issues relating gay/lesbian rights. Although their study specifically penetrated the legal sphere of same-sex orientation, I am of the opinion that this ambivalence transcends the school environment and many other areas of functioning in society. Being part of the 'gay culture' is an experience of 'otherness' that the children of gay/lesbian parents have communicated as part of their self-awareness (Garner, 2005). This self-awareness process emphasises the importance of also understanding the experiences of children raised in GLPF experiences in order to further explain resilience in GLPFs.

As with any heterosexual family, GLPFs are diverse and they vary in their parenting skills, values and beliefs. The processes of both heterosexual parent families and GLPFs are influenced by the sociocultural context in which they live and it is essential that one is aware of the impact of societal homophobia whenever one aims to explore GLPFs. However, focusing primarily on the challenges that GLPFs face is futile and the unique strengths, courage and resilience that may be found in GLPFs also need to be highlighted and valued (Okun, 1996). There are several diverse non-dominant families that exhibit the resilience and strength which challenge the dominant discourse of difference as a path to pathology (Okun, 1996).

3.3 SOCIETAL REACTION IN DIFFERENT SPHERES

The effect of societal reaction towards same-sex orientation has been the topic of considerable debate (Drescher, 2007; Feng et al., 2012; Ross, 1885; Sagarin & Kelly, 1975; Weinberg & Williams, 1974). Moreover, gay and lesbian parenting has been extensively reported upon in research. It is obvious that being part of a GLPF or

identifying oneself as gay or lesbian comes with a unique set of challenges. The children of gay/lesbian parents are often expected to talk about extremely adult issues such as the legislation and sex and civil rights from which policies are then derived and legislation formulated (Garner, 2005; Schmitz et al., 2012). In a gender role analysis of the sex difference in the attitudes toward same-sex orientation, Kite and Whitley (1998) indicated that it would appear that men have a more negative attitude towards same-sex orientation as compared to women. In addition, men appeared to have less negative attitudes towards lesbians than towards gay men. Women, on the other hand, reported similar attitudes towards gay men and lesbian women. It is interesting to note that Kite and Whitley (1998) found no significant difference between the attitudes of men and women towards same-sex orientation as regards the civil rights of gay and lesbian individuals. Although research has shown that the traditional views (among others) with regard to role behaviour is strongly indicative of negative attitudes towards same-sex orientation, it is clear that significantly more research is needed on the way in which heterosexual men and women respond to gay men and lesbian women and also on the factors that influence those responses (Kite & Whitley, 1998).

Feng et al. (2012) indicated that factors such as demographic characteristics (i.e. age, economic status, education level), self-identified sexual orientation and family values (among others) play a significant role in societal perceptions of same-sex orientation. Exploring a controversial issue such as gay and lesbian parenting inevitably involves references to the legal, social, medical and religious domains in society. Some of which will now be discussed further:

The explicit inclusion of sexual orientation in antidiscrimination *law and policy* is a recent trend in legal reform (Davies, 2012). Political behaviour with regard to same-sex orientation has been infused with stigma throughout history. Strand (1998) makes reference to the fact that the politics of gay and/or lesbian orientation and sexual orientation involve much more than purely anti-gay stigma. He goes on to say that it is necessary not to confuse civil liberties with civil rights as attitudes towards the two concepts do not fall on the same continuum. Certain people may be more tolerant towards same-sex civil liberties but less tolerant to issues pertaining to same-sex civil rights. Strand (1998) suggests that any increase in public post materialism with its characteristic emphasis on personal freedom may not advance same-sex civil rights as it may their civil liberties.

In an international study, Garner (2005) found that it is exactly such commonly held beliefs that hamper gay/lesbian parents from attaining parental rights which are equal to those of straight parents. The fact that lesbian and gay couples with children do not fit the traditional concept of a "family" and that has been protected by law has led to the confusion in many legal decisions and which has resulted in case law being ambivalent concerning the rights of gay/lesbian parents. The traditional legal paradigm in terms of which these rights and responsibilities are interpreted also calls for considerable discretion when such cases are addressed (Connolly, 1996; Skinner & Kohler, 2002). According to Peregrin, de la Rosa and Garcia (2014), expert discourse play a fundamental role in regulating the implementation of legal decisions, legislative action and the development of policies aimed at confirming the existence of alternative family forms. They cite the following three expert discourses as presented by the defenders of gay/lesbian parenting, namely; defining gay/lesbian parents as 'not different'; emphasising the rights of gay/lesbian parents to parent and 'desexualisation' as a normalisation strategy. However, there are both benefits and costs to normalisation strategies. From a political perspective, normalisation clearly challenges anti-gay/lesbian assumptions about sexual deviancy and gay/lesbianism as a master identity. On the other hand, from a radical perspective, normalisation strategies permit only defensive and apologetic responses to diversionary anti-gay/lesbian claims and, therefore, they negate pride in sexuality and the celebratory nature of difference (Clarke & Kitzinger, 2004).

In addition to these challenges, Davies (2012) indicates that, in many societies, contact between LGBTQ adults and children is generally discouraged. This state of affairs affects many institutions including the schools where LGBTQ teachers may be hindered from fulfilling their professional roles towards children or, even more radically, where learning material on sexual diversity is banned. Learning material that focuses on the diverse experiences of children of family life may be valuable in education and yet books such as *Heather Has Two Mommies* was ranked by the American Library Association as the eleventh most frequently challenged book in the 1990s (Davies, 2012). Martin (2009) found that the majority of mothers assume their preschool children to be heterosexual and do not discuss with them the existence of non-heterosexual orientations. This, in turn, may lead to the perpetuation of heterosexuality, thus normalising heterosexuality at an early age. Although the heterosexual marriage ideal is still alive and well in modern society, it is definitely weakening (Herdt & Koff, 2001). The reality of living an alternative lifestyle such as being gay/lesbian is becoming

increasingly commonplace and more gay/lesbian couples are seeing parenthood within a family structure as a possibility for themselves (Rabun & Oswald, 2009). An increasing amount of literature is also suggesting that marriage enhances psychological resilience and, therefore, denying marriage to same sex couples means they are also being denied the psychological benefits of marriage (Drescher, 2007).

Gender and sexual socialisation are two developmental issues that originate within the family as the family is the first social point of contact for any child. Gender and sexual socialisation is also an issue with regard to GLPFs that is heavily criticised by society. Parents are thought to be the primary source of the sexual socialisation process and they provide children with the ideas, beliefs meanings, sexual scripts and codes of conduct with regard to sexuality (DeLamater & Hyde, 2004; Lefkowitz & Stoppa, 2006; Shtarkshall, Santelli & Hirsch, 2007). According to Foucault (1990), sexuality does not refer to private behaviours only but it also represents social life and social regulation. Gender and sexuality play a pivotal role in the development of gender identity. One may be born as anatomically male or female but one's psychological gender represents an acquisition which made up of both cognitive and affective elements and which is acquired as a development progress. Drescher (2007; pp349) contends that, from a young age, children learn a 'psychological construct of gender' that is rooted in a myriad of cultural and familial clues (e.g., boys like playing with cars or girls are made from sugar and spice). From this perspective, it is easy to understand why some gay/lesbian individuals have to contend with the conflict which is created by their same-sex attraction in contrast to their learned cultural beliefs. In the same sense it is possible that children who grow up to be gay/lesbian may be gender stressed as they feel their gender-nonconformity and inability to adhere to the cultural expectations of assigned gender have resulted in their transgressing gender boundaries (Drescher, 2007).

In addition to the gender role socialisation of children raised in GLPFs, parenting itself may be understood and analysed in terms of gender. According to Butler (1990), gender is a performance which is not linked to fixed gendered identities which are grounded in nature. Thus, parenting may also be defined as a performance since we 'do' parenting in the same way as we 'do' gender. Both parenting and family are socially constructed and should, therefore, be regarded as fluid entities that shape and change with the context in which they find themselves (Lubbe, 2005). As mentioned before, GLPFs manage to direct the traditional focus away from gender in families and parenting (Lubbe, 2005). In view of the fact that parenting is socially and legally constructed from a biological model, lesbian/gay couples challenge the normative conceptions of the hetero-gender

family. Sexuality has been liberated to the extent that individuals, irrespective of sexual orientation, are free to engage in intimate relations and to create families free from the pressures of reproduction (Giddens, 1991; Lubbe, 2005). The fluidity of family and parenthood allows parents to perform, form and choose their own identities as parents in a way that accommodates their own strengths and unique skills and which is not necessarily linked to gender stereotypes.

It is not possible to deny the fact that, in some GLPFs, parents still replicate heterosexual role divisions. Dunne (2000, p. 134) refers to this practice as 'theoretical heterosexism'. He goes on to say that GLPFs offer a post-patriarchal vision of what families could be like if society were able to move beyond its 'gendered' conditioning of what a mother or a father should be. Rather, he suggests, one should consider a more generic concept such as 'parents' (as opposed to 'mother/father categories') and which enables an egalitarian model of parenting. Such, transgressive modalities would allow for creativity and cooperation in parenting, thus highlighting the viability of non-heterosexual parenting models. Dalton and Bielby (2000) confirm this assertion by agreeing that the absence of gender differences permits the reconstruction of family values and subsequent parenting.

Societal commentary on same-sex orientation often finds *expression in the media*. The media may have a significant impact on public attitudes with research showing that the media shapes public opinion (Warren & Bloch, 2014). As a primary source of social information the mass media has historically marginalised and underrepresented or demeaned minority groups in society (Ramasubramanian & Murphy, 2014). The issue of same-sex orientation is often discussed in the media, especially on television talk shows. Livingstone and Lunt (1994) argue that talk shows provide a forum for free public debate and the expression of marginal views as such shows allow for the liberal politics of democracy and equal participation. However, feminists have attacked talk shows as being traditional and conventional and as framing a heterosexist view of gay and lesbian issues (Clarke & Kitzinger, 2004; Epstein & Steinberg, 1998; Squire, 1994). They point out that talk shows often remarginalise the already marginalised voice of gay and lesbian individuals and problematise or mainstream same-sex orientation as a human issue "distanced from sex and politics" (Squire, 1994, p. 71). In contrast, Gamson (1998) argues that talk shows may be a platform for gay and lesbian visibility. However, he acknowledges that talk shows may also both positively expose and also exploit sexual minorities. He validates this statement further by explaining that these shows may be dominated by moral themes and highlight sex and gender non-conformity at the

expense of the “dangerous queer (bisexual/transgender) as opposed to the ‘good gay’”. Gamson (1998) also states that the family in conflict is a particular interesting and debatable topic on television shows and, therefore, queer families are often constants on these shows as they provide a certain amount of conflict. In addition, Clarke and Kritzinger (2004) highlight that debates are often framed by ‘should or should not’ questions, hence leaving discussions on gay/lesbian parenting open for a ‘no’ answer instead of framing questions which would open the way for discussion and, thus, encourage thinking and learning about gay/lesbian parenting. More often than not this antagonistic approach constitutes the general approach to introducing topics on gay/lesbian parenting and, thus, sets up the topic as ‘problematic’ from the start. These shows do not often put the homophobe on trial but, rather, they attempt to resolve the issue by expecting the gay/lesbian parents to prove their normality but giving them the opportunity to defend themselves.

In Britain, Jowett and Peel (2010) explored the coverage of 348 national newspapers over a three month period and found that the heteronormativity of the coverage allowed little scope for the recognition of the more radical constructions of same-sex relationships. The Pew Research Report (2013) found that attitudes towards same-sex marriage have changed significantly over the past ten years with a shift from 32% in favour of same-sex marriage in 2003 to 51% in 2013. In California, Warren and Bloch (2014) analysed the newspaper media’s representation of same-sex marriage. They found that same-sex marriage was more frequently framed as a civil rights issue and less frequently as a threat to the institution of the heterosexual marriage. They emphasise that those opposed to same-sex marriages do so as a function of discrimination. Furthermore, they found the two most prominent arguments against same-sex marriage to be the traditional definition of what constitutes a marriage and the association of marriage with religion.

There are more subtle forms of the moral condemnation of same-sex orientation visible in *religious discourses* with expressions such as ‘love the sinner, hate the sin’ predominating (Drescher, 2007, p. 351). For many LGBTQ individuals organised religions have been a source of humiliation, discrimination or harassment (Davies, 2012). Olatunji (2008) states that the disgust and negative attitudes towards gay and lesbian individuals may be accounted for by conservative sexual ideology and religiosity. One example of such a religious discourse is that of the Pope who, so recently as 2003, made a public statement claiming that “allowing children to be adopted by persons living in such unions [same-sex relationships] actually means doing

violence to these children” (Garner, 2005, p. 14). Allegations such as these reinforce misconceptions and strengthen stigma as the fact that some children are, in fact, already living in these types of circumstances is ignored and, worse, these children are told that their circumstances, however loving and nurturing, are damaging to their development. The spiritual needs of the growing number of gay and lesbian individuals as well as the needs of their families are prompting religious authorities to debate the issue of embracing same-sex orientation in the church (Drescher, 2007). Many anti-gay religious authorities believe an individual chooses to be of same-sex orientation and, thus, the onus to change is on the individual who chooses to be in discord with moral heteronormativity. Therefore, rather than excluding individuals of same-sex orientation from religious institutions, they are invited in but with the precondition that they convert to heterosexuality. The religious domain that is opposed to same-sex orientation represents an ongoing source of stress in the lives of gay and lesbian individuals. Prohibiting LGBTQ individuals from participating in religious activities may lead to their becoming isolated from other community members and even from their families. This form of social isolation and the fear of moral condemnation may induce stress on a daily basis (Drescher, 2007).

The issue of Christianity and same-sex orientation has been well researched and documented (e.g. Canda & Furman, 1999; Hodge, 2005; Jimenez, 2006; Melendez & LaSala, 2006) and I assume it will continue to be a point of discussion for a long time to come. In South Africa, especially, the debate around the place of same-sex orientation in the church has elicited an intense reaction from society. It is worth considering whether the same critics who make statements for ‘the benefit of the children’ realise that the fight against gay rights becomes as much a fight for the children of gay/lesbian parents as their parents’ struggle inevitably becomes their struggle as well. When the heterosexual children of gay/lesbian parents realise that they are part of the same society that offends their parents on a regular basis this may easily lead to internalised guilt and confusion on their part. The underlying pressure experienced by the children raised by gay/lesbian parents may lead to their adopting a defensive stance towards society in that they may attempt to always present their families as ‘perfect’. However, their constantly trying to emphasise the normality of their family structure creates an obscured and restricted picture of GLPFs in the media and in society in general (Garner, 2005).

Despite the resistance from religious organisations, it would appear that spirituality and religion often remain meaningful to LGBTQ people. There are many LGBTQ positive

religious communities in modern society and this has, in turn, given LGBTQ individuals encouragement and enabled them to come to terms with the daily struggles of living in a heteronormative society. However, it would also appear that many LGBTQ people seem to distance themselves from participation in formal religious events with their experiences of 'suffering in the name of religion' contributing to their reluctance to become part of a religious group (Davies, 2012). The Nigerian activist for LGBTQ rights, Mr Davis Mac-Iyalla, has lived a life of exile in the United Kingdom since 2008 because of his outspoken identity as a gay Christian man in Nigeria. In a recent interview he explained how he would hear priests preach about Sodom and Gomorrah when they discussed same-sex orientation in the church during his childhood. He mentioned that he had many gay friends at church and that even some senior members of the church were closet gay or lesbian individuals. However, whenever he had spoken to these senior members they would point out the error of his ways as his sexuality was an 'open secret' and most people knew he was gay (Mac-Iyalla, 2014). He went on to say that he believed that anti-gay laws were not in accordance with Christian values and that Christians were not supposed to pass laws against people based purely on a disagreement about their sexual orientation.

Medical discourses have also contributed in the construction and maintenance of 'same-sex-abnormality'. The Diagnostic and Statistical Manual of Mental Disorders (DSM) classified same-sex orientation as a mental disorder and it was only in 1972 that the amendment was made to exclude same-sex sexual orientation from the DSM (Drucker, 1998). However, even today one may still come across psychological professionals and other therapists who offer to cure same-sex orientation. The debate about individual choice remains ongoing as many LGBTQ individuals may seek help to overcome their sexual preferences if these sexual preferences happen to be in direct conflict with their religious orientation (Davies, 2012). Homophobia has also compromised the sexual and reproductive health of many LGBTQ individuals. Evidence shows that not only biological processes but societal homophobia play a role in causing illness in LGBTQ individuals. It has been shown that medical personnel who may be ignorant about the issues pertaining to same-sex orientation may exaggerate social homophobia and that this, in turn, may have a reciprocal effect on the way in which LGBTQ individuals' access and use health services (Davies, 2012). Studies on lesbian experiences with regard to health care have highlighted that lesbians often feel invisible, uncomfortable and vulnerable as a result of the heterosexual assumptions of care personnel and which often lead to insensitive questions. Adverse responses on the

part of health care workers, such as embarrassment, anger, shock and excessive curiosity, have led many lesbian women to avoid medical check-ups and to rather turn to friends for advice (Wilkinson, 2002). Workers employed by health care facilities have also made statements indicating that they fear coming out to co-workers as a result of possible discrimination and homophobia. In addition, the societal misconception that AIDS is a medical issue related to individuals of same-sex orientation may eliminate any other consideration of the pressing medical needs of LGBTQ individuals. However, Davies (2012) also states that LGBTQ medical professionals, scientific professionals and activists have contributed disproportionately to a better understanding of the social and medical issues associated with HIV/AIDS.

3.4 THE EXPERIENCES OF CHILDREN AND OTHER ISSUES PERTAINING TO GAY/LESBIAN PARENTING

“I think the hardest part is that people tell me not to take people’s comments personally.

But I do. Every time. They are personal. This is my family”.

Emily (in Garner, 2005, p. 95)

With the emerging recognition of diversity, variant forms of postmodern families are becoming more evident. One such family that elicits constant debate about raising children is GLPFs (McLeod & Crawford, 1998). From a legal perspective, many people believe that children should not be raised in GLPFs. The commonly held misconceptions about children raised in GLPFs have led to social prejudice. However, according to Strommen (1990), society’s fears for the children raised by gay or lesbian parents are irrational and misconstrue the image of individuals of same-sex orientation as family-less. Society’s strong reaction towards gay and lesbian parenting may be transferred to same-sex couples who wish to have children and, in many cases, has resulted in internalised homophobia. Pies (1990) describes how lesbian couples immerse themselves in a process of focused attention on personal, social, psychological ethical and practical considerations before making a decision to parent with lesbian women often questioning their right to parent because of the internalised homophobia caused by deep-seated societal prejudice and ignorance

Research has been consistent in indicating that the sexual orientation of the parent(s) does not influence healthy child development (Goldberg & Gartrell, 2014). In fact, gay/lesbian parents have shown remarkably positive outcomes that suggest resilience, particularly in view of the fact that they often receive very little social and legal

recognition and support as compared to heterosexual parent families (Goldberg & Gartrell, 2014; Goldberg, 2010). Research further indicates that the gay/lesbian parents who report poor health are typically those who receive less familial and legal support and who experience higher levels of internalised homophobia (Goldberg & Gartrell, 2014; Goldberg & Smith 2011). With regard to family functioning, Leung, Erich, and Kaneberg (2005) indicated that GLPFs demonstrate a high level of family functioning and that adoption by gay/lesbian parents should be supported and encouraged. Lesbian parents seem to develop qualities of independence in their children and they deem conformity as a child-rearing goal as less important (Bos et al. 2004). Besides lesbian mothers being less orientated towards traditional child-rearing goals, it seems that lesbian mothers feel a need to justify the quality of their parenting. However, overall research found few difference between lesbian parents and heterosexual parents (Bos et al., 2004).

Children raised in GLPFs often internalise society's criticism of their parents' relationship as a criticism of themselves and this association may lead to them feel vulnerable (Hancock, 2000; Lubbe, 2005). It is, thus, understandable that deciding on how and in which context to communicate this sensitive information, and to whom, remains a serious issue for the children of gay/lesbian parents. Disclosing sensitive information has become a highly selective process for the children from GLPFs while it has been found that adolescents from GLPFs may approach the disclosure of their family structure in a casual-calculated manner (Lubbe & Kruger, 2012). This approach to disclosure allows adolescents from GLPFs to calculate carefully when to disclose information about their family structure. However, they often proceed to do so in a casual manner so as to not draw too much attention to themselves and to attempt to normalise the information to the recipient of the disclosure. Thus, if disclosure is such a well thought through process, one has to question what the most prevalent experiences of children raised in GLPFs have been.

Although the sexual orientation of parents is not a common theme of discussion within the *school context*, the family is with family discussions coming up on a regular basis. In such situations a fear of bullying may hinder the children raised in GLPFs to disclose information about their family structure. Much of the literature on the topic of homophobic bullying and stigmatisation emphasises that children from GLPFs often fear revealing their family structure (Clarke, Kritzinger & Potter, 2004; Fitzgerald, 1999; Robitaille & St Jacques, 2009; Stacey & Biblarz, 2001). Not only the children but also the

gay/lesbian parents fear that their children may be teased and targeted by labelling (Meezan & Rauch, 2005).

The children of GLPFs often feel disempowered, afraid and lonely. In some extreme cases teachers may even contribute to homophobia by making homophobic comments (Ray & Gregory, 2001). A study conducted by Fairtlough (2008) revealed that nearly fifty percent of the participants had experienced homophobic abuse in the school environment. However, in addition to these findings, Wainright et al. (2004) found that a close relationship with parents, regardless of family structure, predicted positive school adjustment. In addition, the study found no significant differences in academic achievement or trouble at school.

Research conducted by Van Gelderen et al. (2012) reports that, in the main, incidents of homophobic stigmatisation towards children from GLPFs usually take place in the school context with the children's peers usually being indicated as the transgressors in such incidences. Furthermore, it appears that adolescents often use adaptive strategies to cope with such incidents of stigmatisation (i.e. optimism) rather than maladaptive strategies (i.e. avoidance).

The compatibility of same-sex orientation with *religion*, specifically with the Christian faith, has been well researched and documented (e.g. Canda & Furman, 1999; Hodge, 2005; Jimenez, 2006; Melendez & LaSala, 2006). In South Africa, in particular, Christianity was a dominant theme in public and some private schools. However, over the past (approximately) twelve years, private and public schools have phased out religion as a compulsory school subject and religious diversity has become more accepted. Some Christian churches in South Africa have done away with discrimination based on sexual orientation by accepting gay and lesbian members as well as employing gay preachers (Kruger, 2010). Children of school going age and who live in GLPFs have reported encountering discrimination and resistance from people of the Christian faith (Lubbe & Kruger, 2012). However, Christianity has prided itself on accepting difference and has been presented as being non-monolithic in its identification of transcendent truths (Melendez & LaSala, 2006). It is, thus, essential that the arguments concerning same-sex orientation are interpreted with care and also that Christianity as the context of these arguments should always be taken into account. In addition, one must understand that the developmental age of the child involved in such a discussion would have a significant impact on the child's interpretation and experience as regards to what is being said in a religious context.

Friends and acquaintances appear to be another significant variable in the experiences of children raised in GLPFs. Many youngsters tend to negate the notion of disclosing their parents' sexual orientation out of fear of losing friends and, subsequently, feeling betrayed (Bozette, 1987). Fairtlough (2008) highlights that many children raised in GLPFs experience stress as a result of the frequent use of homophobic language in society. Homophobic jokes and derogatory comments about gays or lesbians heighten these children's fear of discrimination and fuel their need to keep their family structure unknown. However, research shows that children from GLPFs display no significant differences as regards their social adjustment while they have been found to enjoy normal peer relationships (Patterson, 1992; 2000). It has further been indicated that these children function well on the psychosocial level and that their social well-being does not appear to differ from that of children raised by heterosexual parents (Meezan & Rauch, 2005; Tasker & Golombok, 1995). In addition the children in GLPFs also appear to function well psychosocially as adults. Tasker and Golombok (1995) found these adults to have meaningful and successful relationships.

The literature on the teasing and bullying of children raised in GLPFs as compared to children from heterosexual parent families seems to be conflicting with some studies reporting higher rates of teasing and bullying for children from GLPFs (Kosciw & Diaz, 2008) while others found no significant difference (Rivers, Poteat, & Noret, 2008). There is, however, some evidence that indicates that children from GLPFs experience teasing at specific developmental stages (Kovalanka, Leslie, & Radina, 2013). It has also been noted that the content of what the children are teased about differs between the two groups (i.e. lesbian mother vs big ears or freckles)

On an ***emotional level***, it has been found that the feelings of the children raised in GLPFs change during the course of their lifetime (Goldberg, 2007). Their feelings towards parental same-sex sexual orientation may fluctuate between four different spheres, namely, neutral positive, ambivalent and somewhat negative (Fairtlough, 2008). Some children praise their parents' courage in facing a heteronormative society on a daily basis and they communicate this pride by disclosing their family structure (Tasker & Golombok, 1997). On the other hand others may be ambivalent and not completely deny their negative feelings about having a gay or lesbian parent (Pennington, 1987). Negative emotions are not an uncommon characteristic of children raised in GLPFs. In view of the fact that the children of gay /lesbian parents are often exposed to homophobic discrimination their positive experiences may not feature as a dominant narrative (Fairtlough, 2008) and they may distance themselves from their

parents in an attempt to preserve their self-image (Goldberg, 2009). It would appear that balancing self-effacing guilt versus healthy self-protection is a task for both gay/lesbian parents and their children (Pennington, 1987).

With regard to *gender roles and sexual socialisation*, Pennington (1987) found that boys from GLPFs appear to worry less about becoming gay as compared to their female counterparts. However, she highlights the positive impact of the under-emphasis of societal prescriptions in terms of family roles. GLPFs have a greater freedom to negotiate roles and relationships and this, in turn, allows for better decision making. Schmitz, Sloan & Wright (2012) echo these findings by stating that the exposure of children to diverse gender roles and the negotiation of related responsibilities have lasting positive effects on the children raised in GLPFs. In addition, children raised in GLPFs learn early in life that the judgement of others may be negated and/or healthily absorbed through self-confidence and resilience. In the main research appears to unanimous in stating that the sexually development of children from GLPFs seems not to differ because of their family structure (Okun, 1996). Meezan and Rauch (2005) found no evidence that children raised in GLPFs exhibited any confusion about their gender identity, either in childhood or in adulthood. They went on to say that they also found no evidence that children raised in GLPFs were more likely to be of same-sex orientation themselves. Some studies, however, have found that girls raised by lesbian mothers appeared to be more masculine in play whereas boys raised by lesbian mothers tended to be less aggressive (Goldberg, Kashy, & Smith, 2012). According to social constructionism, gay/lesbian parents may be more flexible with regard to cross-gendered play and they may even be supportive in facilitating environments that encourage such play activities (Goldberg & Gartrell, 2014).

A review of relevant research indicates that children raised in GLPFs tend to well-adjusted and gender-syntonic, even superior in their social adaption and skills (Golombok & Tasker, 1996; Lubbe, 2005; Malone & Cleary, 2002). Despite research highlighting that having gay/lesbian parents does not seem to negatively affect the gender socialisation of children, the question about sexual identity development is continuously posed by critics of GLPFs. Research has shown that children raised in GLPFs actually have a more tolerant view and less gendered role attitudes towards same-sex relationships as compared to children raised in heterosexual families (Green, Mandel, Hodvedt, Gray, & Smith, 1986; Tasker & Golombok, 1997) and that having gay/lesbian parents has given these children broader conceptualisations of potential sexual and gender identity options (Kovalanka, Weiner, & Russel, 2013). However, this

does not imply that all children raised in GLPFs choose to be either gay or lesbian or 'sexually-other' in any way. Moreover, studies have shown that youths and adults with gay/lesbian parents do not appear to differ from their peers with regard to same-sex attraction (Gottman, 1990; Tasker & Golombok, 1997).

As mentioned before, the experiences of both gay/lesbian parents and their children are intricate and should never be explored without a recognition of the context. Eggebeen (2012) emphasises that the impact of anti-gay sentiments on gay/lesbian parents and their children depend very much on the particular setting. He states that some schools or neighbourhoods may be much more tolerant than others, and they may intentionally foster a sense of belonging and encourage diversity. Furthermore, he claims that building and maintaining social support networks may be more difficult for GLPFs who live in small towns or in areas which are dominated by conservative religious beliefs.

3.5 RESILIENCE IN GAY AND LESBIAN PARENT FAMILIES

The concept of resilience with regard to GLPFs has been largely understudied. To date there appear to have been limited studies on resilience, specifically as related to GLPFs and also limited studies that focused specifically on the relational aspect between GLPFs and society with regard to their resilience. In the limited studies found, the focus was either mainly on the familial processes that shape outcomes and facilitate resilience, or on the extended family networks of gay and lesbian individuals. Studies that explored family resilience in general indicated that the protective factors that foster resilience present on three integrated, but distinct, levels, namely, the *individual level* (i.e. positive mental health; education; optimism), *family level* (i.e. cohesiveness; quality of parental relationships) and *community level* (i.e. access to strong social support networks, extended family, healthcare systems). With regard to GLPFs, community level factors may include legal recognition and social policy support (Black & Lobo, 2008; Canvin et al., 2009; Power et al., 2010). Studies that explored resilience in diverse or minority families indicated that the availability and accessibility of culturally relevant resources are of immense importance in fostering resilience (Iruka et al., 2014; McConnell, Savage & Breitzkreuz, 2014).

In their study on resilience in GLPFs, Griffiths and Pooley (2011) identified seven family resiliency processes utilised by GLPFs. These included the creation of family unity, preparation, support, outness, flexibility, normalisation and humour. Creating family unity was highly valued by the research participants in the study. This was done in

various means, of which one was to adopt the same surname so that everyone in the family shared a common last name. This strategy has been echoed by various studies in the field of gay/lesbian parenting (Oswald, 2002; Reimann, 1997; Stiers, 1999). Family unity was also established through rituals and routines. This finding has also been echoed consistently in other research on family identity in lesbian parent families (Suter, Daas, & Begren, 2008). Togetherness and participating in family activities were highly valued and significantly helpful in creating family unity. The importance of correct language use in this regard has also been noted. It emerged that, in some families, the children resisted blending and referring to themselves as a 'family'. Accordingly, the parents of these GLPFs used the term "household" to create unity until the children adapted and became "brothers and sisters" to one another (Griffiths & Pooley, 2011).

GLPFs also appeared to prepare themselves and their families with regard to their unique family structure. Being informed on parenting philosophy and possible negative incidents with regard to gay/lesbian parenting and preparing the children to understand diverse family structures all seemed to strengthen family resilience. As mentioned in the section on sense of belonging, social support may make a significant contribution to family well-being. In their study, Griffiths and Pooley (2011) related that the participants' positive experiences with doctors, clinics and day care had impacted significantly on facilitating resilience in GLPFs. In addition, being "out" as a GLPF appears to facilitate pride and increase emotional well-being (Griffiths & Pooley, 2011; Lambert, 2005). As with any other family, flexibility has also been indicated as another factor in facilitating resilience. Such flexibility was indicated not only in terms of household tasks but also in terms of gender roles as there is no "script" on how gender roles apply in GLPFs. This flexibility allows for the creative and innovative chore distribution among family members. Normalisation was another process used by GLPFs to emphasise the normality of their family structure, thus helping to strengthen their resilience (Hequembourg, 2004; Simon, Murphy & Smith, 2005). This normalising tactic may also be detected in the casual-calculated manner in which the adolescents with gay/lesbian parents sometimes choose to disclose their family structure when confronted by an unavoidable situation in which disclosure is required (Lubbe & Kruger, 2012). Humour may also be used as a coping mechanism to enable GLPFs to defend themselves against heteronormative challenges. A sense of humour has the ability to moderate the intensity of emotional reactions and has been linked to emotional well-being (Neenan, 2009; Richardson, 2002; Titlestad & Pooley, 2014).

Titlestad and Pooley (2014) explored resilience in GLPFs from a retrospective position by interviewing adult children who had been raised in GLPFs. Their results indicated five issues that were important in coping with challenges and building resilience. The first issue was positive parental modelling. Parental modelling relates to the way in which gay/lesbian parents exhibit pride in their sexuality. Pride and 'outness' of identity were indicated as important facilitators in resilience. Secondly, Titlestad and Pooley (2014) highlighted that controlling when or how to disclose parental sexual orientation and subsequent family structure were highly valued by children raised in GLPFs. By controlling disclosure, the children either managed homophobic bullying or eliminated it to an extent by choosing when or how to disclose information (Rivers et al., 2008). Social support was noted as a third important issue with regard to resilience. The participants interviewed by Titlestad and Pooley (2014) indicated a number of social support systems, such as the GLBT community, professionals, family and friends which aided family resilience. The support from within the GLBT community was described as direct and/or indirect. Some children from GLPFs indicated that they enjoyed taking part in events organised by GLBT communities, such as campaigns for equal rights. Contact with other individuals, especially other children with gay/lesbian parents, played a significant role in helping children to cope with discrimination from society (Bos & Van Balen, 2008). The fourth important issue was a strong sense of protectiveness – also referred to as an outward perspective. Children raised in GLPFs often compared their own individual resilience to that of their siblings (i.e. "I have a thick skin but my little sister doesn't") as fostering protectiveness. An outward perspective and positive comparison in itself may relate to resilience (Titlestad & Pooley, 2014). The participants also indicated that time to adjust both to their parents' sexuality and to possible transitions in the family structure as the fifth important issue with regard to resilience. Not only did such adjustment relate to their parents' sexuality but it also applied to their own beliefs with regard to accepting their parents' sexuality. Titlestad and Pooley (2014) and Green (2004) make reference to the likelihood that all people, regardless of their sexuality, may, at some point, experience internalised homophobia. They report that some of the participants who had self-identified as pro-gay had occasionally surprised themselves by instinctively lying about or hiding their parent's sexual orientation.

In addition to the above mentioned factors which foster resilience, Titlestad and Pooley (2014) indicate that being part of a GLPF may bring significant advantages to children.

They cited open-mindedness and an acceptance of difference as well as alternative experiences and knowledge as such advantages.

Oswald (2002) reviewed the literature on resilience within the family networks of gay and lesbian men and found that intentionality and redefinition are two resilience processes which gay and lesbian individuals use to create and strengthen their family networks. Intentionality includes those behavioural strategies that legitimise and support relationships such as choosing kin (i.e. “friends as family”) or choosing children (i.e. becoming parents) and managing disclosure. The process of redefinition entails, among others, actions such as politicising, naming (i.e. what to call co-mothers or co-fathers) and envisioning the family as an ongoing construction that affirms difference. Oswald concludes by stating that resilience provides a lens through which research may explore hardship in context as well the way in which resourcefulness facilitates successful relationships.

In an international study, Patterson (2000) found that the relationships of gay/lesbian couples are often characterised by positive adjustment despite stressful encounters in society. In this study, seventy-eight percent of gay and lesbian couples have reported better functioning relationships as compared to heterosexual couples (Kurdek, 2004). These statistics, among others, may be seen as indicative of resilience in gay and lesbian couple relationships and may further indicate resilience in GLPFs. Perlesz (2006) indicated that children and grandparents of gay and lesbian parents have to negotiate both mainstream and marginalised spaces in their family life. It was found that love and empathy defines family and not biological relatedness and therefore being resistant to patriarchal views of “family” allows GLPFs to be flexible and strengthen their connectedness in the context of heteronormativity. Furthermore, Perlesz (2006) noted that by studying lesbian parent families per se, and not using heterosexual parent families as a measure, it significantly highlights how these families retain resilience in the midst of homophobia. Interestingly, when young children of lesbian parent families were interviewed, some children do perceive their parent’s relationship as not normal, and they were aware that this affects how the public talk about their families, yet it is noticeable that at the same time nothing disconfirms that fact that the family is still well-functioning and resilient. This observation by Perlesz (2006) links strongly to the notion mentioned earlier in this study that one should not confuse the idea of “normality” with functionality in terms of family structure. Because of this complex interchange between modern and postmodern families, it is best to study families within the interface of the modern and post modern and across different spheres as it opens up

fluidity and it acknowledges vagueness (Perlesz, 2006). Research by Litovich and Langhout (2004) indicated that heterosexism is evident in the lives of children from lesbian parent families, however it does not seem that heterosexism influence children's development negatively. This seems to be due to the fact that lesbian parents prepare their children to deal with heterosexism, a finding confirmed by Griffiths and Pooley (2011). Preparation took place in the form of open discussion about sexual orientation as well as warnings about possible heterosexist incidents. Furthermore, the ways in which parents and children manage incidents of heterosexism also influence their resilience in terms of coping. Evidently, many families in Litovich and Langhout's study (2004) communicated that they do not experience heterosexism, or at least that incidents are few and not often encountered. In addition, lesbian parents often release children of the burden of defending their family by explaining to them that it may be impossible to do away with heterosexism as a whole and by teaching them when to pass on derogatory comments and allowing them to be invisible as a child of a lesbian parent at times.

As mentioned before, there appears to be limited literature on resilience in GLPFs and it is possible that many more factors may play a significant role in fostering resilience in GLPFs.

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CHAPTER 4

RESEARCH METHODOLOGY

As discussed in Chapter 1, this study was guided by the meta-theoretical paradigm of social constructionism. Social constructionism may be said to have guided the research study by proposing a certain ontology and epistemology. This chapter will focus on explaining the methodological paradigm within which the study is situated. This chapter discusses the research design used in the study, including the data collection and data analysis processes. This chapter also discuss ethical considerations with regard to the study.

4.1 METHODOLOGICAL PARADIGM: QUALITATIVE RESEARCH

Research studies in the social sciences may be categorised primarily into either the qualitative or the quantitative approach (Berg, 2001; Du Plooy, 2014). Quantitative research focuses on the quantity of the measurements involved such as statistics, while qualitative research involves a focus on the nature of aspects being researched (Berg, 2004). Qualitative researchers typically view the environment as socially constructed and as consisting of numerous interpretations of reality and truths which are relative to each individual and which may change over time (Merriam, 2002). According to Du Plooy (2014):

Qualitative research can be described as being concerned with meaning and depth in a general sense. This implies that it focuses on how individuals view situations from their unique perspectives while excluding “common sense” notions, scientific explanations or any other interpretation to come to that understanding as is commonly found within the positivist approach. It considers the unique knowledge or “truth” of the world from the unique points of view of individuals, as well as how these individuals engage with that knowledge (p. 98).

According to the qualitative research approach, the departure point of study is from the perspective of the GLPFs (Babbie & Mouton, 2001).

Qualitative researchers are concerned with understanding multiple subjective points of view and the meaning attached to experiences. In order to develop these meanings and to place them in social context qualitative researchers use open-ended approaches that allow them to discover detailed information. The results are typically written up in the form of multi-layered descriptions from which analyses are then based. In this study, the analytic process as referred to above covered my interpretations and meaning making of phenomena within their social contexts and they guided me in paying particular interest to the patterns and processes that emerged from the data. In view of the fact that the unit of research in the study was families, which comprise several individuals, I expected diverse, unique but also possibly integrated processes, to emerge from the data.

I adopted a qualitative research approach to understanding the protective factors that facilitate resilience in GLPFs living in a predominantly heteronormative society. The goal of qualitative research is describing and understanding (*verstehen*) rather than explaining and/or predicting. During qualitative research, a researcher tries to stay as close as possible to the subject(s) under study and, therefore, the data collection may include methods such as unstructured interviews, participant observation and the use of personal documents (Babbie & Mouton, 2001) from which concepts are then presented in the form of themes, motifs, generalisations and taxonomies (Neuman, 1997). Even from historical times, qualitative research has acknowledged the importance of the researcher's purposeful engagement with the research units in question. Dilthey (1976) built on Kant's early thinking and coined the term "*erlebnis*" which translates to the "lived experiences" which researchers need to place as the subject of their investigations as these lived experiences may only be understood in their social context (Peterson & Bush, 2013). Accordingly, for the purposes of this study I attempted to understand and explore each of the participant families within their unique systemic context.

The purpose of qualitative research is not to quantify the data collected into objective numbers or to test existing concepts but rather qualitative research concerns itself both with access to the research subjects' accounts of their social worlds and with creating new concepts (Halfpenny, 1979; Neuman, 1997). Researchers who use the qualitative approach try to capture aspects of the social world by focusing on subjective meanings, metaphors, symbols and descriptions of specific cases. It is a *non-linear* and *logic in practice* approach which relies on informal wisdom and successive research steps to gain insights and to build knowledge. Accordingly, in this study I relied on the depth of

personal stories to create a clear picture of what the GLPFs conceptualised as their resilience. The transcendent nature of qualitative research allows for the participant(s) under study to be treated as compassionate living beings and, because it does not aim to objectify, it enables social change (Neuman, 1997).

One of the main characteristics of qualitative research, which also resonated well with the meta-theoretical paradigm of this study, is that of *critical context*. The emphasis in qualitative research is on the recognition of social context for the purposes of understanding the social world and, thus, qualitative research holds that social statements or subjective meanings are dependent on the context in which they appear. Thus, qualitative researchers interpret all data against the social context in which it appears. The removal of the data interpretation from its social context would result in distorted meanings and a loss of significance (Neuman, 1997). This characteristic of qualitative research resonated with the aim of this study as the systemic context of the families under study was pivotal to understanding how resilience is fostered in GLPFs and who stand in a reciprocal relationship with their surroundings.

Another important characteristic of qualitative research is the emphasis on *researcher integrity*. In view of the fact that there is so much scope for personal bias in qualitative research, an inordinate amount of trust is placed in the researcher to not act dishonestly or to practise unethical tactics. Such possible bias may be eliminated by member checking and methodological empathy – a term also discussed in the quality criteria of this study (McGuire 1982 in Mouton, 2008). During qualitative research researchers continuously check all the possible themes arising from the data collection with the participants in order to clarify their understanding and interpretation of what was said or described. In other words, researchers look for confirmatory evidence and check for internal consistency before writing up any research results. During this study I wrote up the themes and met continuously with the participants to clarify my understanding of themes and processes as they emerged. Nevertheless, it is generally accepted that removing the effect of the researcher completely from qualitative research is impossible and, instead, the human factor in qualitative research is used as an advantage through which personal insight, feelings and values or assumptions may serve as a means to understand the subjects under study. Acknowledging prior beliefs or prior knowledge in explicit reports assists researchers to guard against biased personal influence while conducting a study (Neuman, 1997).

Qualitative research is concerned with *process* and *sequence*. It was, thus, vital that I paid attention to the order of events in order to track progression and witness social relationships developing (Neuman, 1997). The interpretations of what is found are typically not presented in the form of numbers or tables but in the form of visual representations, maps, photographs or any other form of representation that may illustrate how ideas or themes are related. In this study the interpretations and meaning making of what found were given from the perspective of the GLPFs. Interpretation in qualitative research is dependent on both first-order and second-order interpretations. During the *first-order* interpretation in this study, I learned about the meaning that social behaviour had for the families under investigation. I then moved forward to the second-order interpretation in which I discovered and reconstructed the first-order interpretation. The *second-order* interpretations allowed me to make sense of and to create coherence in the research data, therefore placing the social behaviour under study in context in terms of the events to which it is related (Neuman, 1997).

4.2 CASE STUDY DESIGN

I decided to use an intrinsic case study design for the purpose of collecting rich and detailed information from a minority group (i.e. GLPFs) in society. The use of an intrinsic case study design in the study meant that I focused on the specific issue of resilience with regard to GLPFs for the aim of acquiring an in-depth understanding of its uniqueness in terms of this family type and making sense of the intrinsic aspects to which resilience is related (Berg, 2001; Hancock & Algozzine, 2011). Furthermore, an intrinsic case study design allowed me to become part of the participant families whom I had selected to take part in the study. Becoming “part of” my participant families meant that I gained a holistic and naturalistic insight into their everyday functioning in a real life context and subsequent construction of successful coping (Creswell, 2007; Hancock & Algozzine, 2011; Terre Blanche & Durrheim, 1999).

Case study designs require certain design principles (Yin, 1994; Stake, 1995). One such design principle is that of conceptual issues. Conceptual issues are as important in case study design as in any other qualitative research design. Conceptual frameworks serve as guide in understanding and interpreting a study. In addition, they also assist in structuring the data collection process (Babbie & Mouton, 2001). Contextual detail is another important principle in case study design. In view of the fact that case studies are rarely isolated and are continuously affected by the broader systems in which they operate, it is important to describe the context of the case under study in detail. I

considered this principle especially important as, at the outset of the study, I assumed that the families I was investigating were affected by their interaction with society. I also assumed that this interaction would inevitably contribute to and affect their resilience and it was essential that I was aware of and took cognisance of the important influence of the surrounding environment on the contextual detail in this regard.

Another important principle in case study design is the use of multiple sources of data. The purpose of this principle is to ensure that rich data is generated for the purpose of convergence and replication (Cook & Campbell, 1979). In addition to the selection of cases for the purposes of the study, I wanted to enrich the data by incorporating additional sources of information, such as visual data (collages/photographs). This resonated with the principle of ‘multiple sources’ of data in qualitative research and which attempts to enhance the credibility of such research. Mouton (2008) also suggests that several sources of data may be regarded as part of the data generation process. In light of the fact that the topic of same-sex orientation, especially in South Africa, provokes such controversial arguments in the media and in the public domain, I also relied on field notes, such as newspaper/magazine articles as reference points to further interpret statements made in the study. Another form used to enrich my understanding of the data arose from recording informal conversations on paper. I found that some of the most valuable information emerged spontaneously during my daily conversations with individuals around me. I, therefore, chose to jot down all the informal, impromptu conversations about the research topic and that arose out of my conversations with others during my daily life. I then added this information (informal conversations as well as media related articles) to the field notes I had recorded throughout the study. It is important to note that I did not disregard this information on the grounds of it not emanating from a planned session or interview. Discussions on “otherness” or unconventional practices and ideas have often led to scepticism and it is my opinion that many people tend to become defensive when confronted by “that of which we do not speak”. I, therefore, attempted to understand, document and include the sceptical arguments of friends, colleagues and the media in the research data, not in order to detract from my ideas but as a way of strengthening them. By acknowledging dissimilar views in my study I attempted to strengthen its credibility (Terre Blanche & Durrheim, 1999).

Nevertheless, qualitative case study designs, however effective, have their limitations. Two limitations that I considered to be of specific relevance to this study included the subjective involvement of the researcher and the generalisability of the research

results. Firstly, it was essential that I was aware of my own subjective interpretations that may have impacted on the objectivity of the study. When embarking on a research study it is important that the researchers involved clarify and are made aware of any suppositions or presuppositions that may cloud their interpretations of the data (Parahoo, 2006; Streubert-Speziale & Carpenter, 2007). As the researcher, I am a heterosexual, married, white female and, at the time of the study, I did not yet have any children. I did not consider myself as either 'other' or exceptionally interesting. I lived a life that is 'normal' in terms of my construction of normality. With one older sister only and limited contact with my extended family members, I had been raised in a relatively small family. Besides my gay and lesbian friends, I had had one lesbian cousin with whom I had had no contact. I was aware that all of these factors may have played a significant role in my subjective interpretations of the data that I collected during the course of the study. Therefore, in order to eliminate and contain any possible bias on my part as the researcher, I realised I would have to methodological empathy (McGuire 1982 in Mouton, 2008) to ensure that I understood and acknowledged situations and happenings without necessarily agreeing with them.

Methodological empathy may be described as a fundamental approach whereby researchers suspend their own beliefs in an attempt to understand the phenomenon under study as it is perceived by the research participant(s). Thus, methodological empathy requires that the researchers respect and allow into their research assumptions, ideas and beliefs that may differ from their own (Singelton & Strait, 2009). Therefore, it was possible that, in some cases, I would have to re-analyse or reassess the data that I gathered. According to Creswell (2005), triangulation is a method that researchers use to ascertain whether there are any discrepancies in their research data.

Another issue was that of the generalisability of the research results because of the relatively small sample group that was used (Berg, 2001). However, the main purpose of this case study was not either to prove or disapprove any particular phenomenon but, rather, to understand it better. Accordingly, the main objective of the data collection and data analysis was not to generalise the research results but rather to find depth and richness in the participating families' stories in an attempt to create a better understanding of the phenomenon.

4.3 RESEARCH PARTICIPANTS AND OTHER INFORMATION SOURCES

4.3.1 SAMPLING

Sampling refers to the process during which cases for inclusion in a research study are selected. Samples are drawn from a larger pool of cases or elements (Creswell, 2005; Neuman, 1997). A sampling element refers to the unit of analysis (i.e. person, group, document, social action) in a larger population. The larger population from which the sampling element is selected plays a significant role in the sampling process. In order to define the population in question, a researcher specifically notes the sampling element selected and also the geographical location and the temporal boundaries of the population. Therefore, the target population refers to the specific pool of cases that is under study (Neuman, 1997).

Non-probability sampling is not based on principles of randomness but rather it is based on sample elements that are more limited. It is often employed in studies in which the kinds of probability sample elements available are not suited to for the purpose of the study. Non-probability sampling is most commonly are used in studies in which very specific sample elements are required and where contact with these sample elements is not readily available.

For the purpose of this study non-probability sampling was used to select specific cases within a minority population group. Whenever research requires contact with minority groups in society, the issue of the availability and the visibility of possible sample elements arises. This study aimed to explain resilience in GLPFs. The emphasis on family units headed by gay or lesbian parents framed the requirement pertaining to extremely specific sampling elements, as did the characteristic of this minority group, specifically being self-defined as resilient and, by implication, exhibiting positive subjective well-being. Both of these characteristics of the sampling elements indicated the use of non-probability sampling as the most appropriate to the study. There are various forms of non-probability sampling from which to choose from when deciding on a research design. The type of characteristics, as mentioned above, also indicated define which non-probability sampling method would be best suited to the specific purpose of this research study.

Snowball sampling was used to identify GLPFs who could be used as possible research participants in the study. All the participant families had to be headed by gay or lesbian parents and with children still living in the same household, preferably children of

school going age. The fact that this minority group belonged to a difficult to reach, specialised population made the notion of purposive sampling very attractive; however, snowball sampling seemed to be the most applicable to the purposes of this study as, in difficult to reach populations, the researcher is often forced to rely on referrals from already committed or previously contacted participants. The cases (participant families) were selected based on my belief that they would provide relevant information. Qualitative case study designs are extremely useful in providing rich, in depth data.

Author's personal note

The (exasperating) journey...

Although I have thoroughly enjoyed every aspect of this research process, finding gay and lesbian parents to participate in the study proved to be exhausting and, at times, frustrating. One would think in today's age that GLPFs would be setting up house everywhere. However, finding a needle in a haystack may have been a much less challenging task ...

During the sampling phase I contacted 26 families and seven LGBTI organisations. I emailed three lesbian and gay-friendly churches, requesting information and the names of possible participants. In addition, I left research invitations at the rooms of a general practitioner and a gynaecologist, at a pharmacy, a dentist, an optometrist, a bridal gown/evening wear designer shop, hairdresser, crèche/nursery school and a paediatric practice. I also put the word out to a modelling agency. I also contacted personal friends who were professionals in the fields of occupational therapy, psychology and speech therapy as well as family Law. All these attempts resulted in a total of ten willing families. This was a devastatingly demotivating experience and I really felt defeated.

It was only when a colleague in the field of psychology introduced me to an article on the challenges of recruiting GLPF's that I felt a slight relief – at least it was not just me. In their article on the 'Triumphs and challenges in recruiting same-sex parent families' (Crouch et al., 2014), the authors describe the general challenge involved in recruiting participant parents (in this "hard-to-reach population" p. 88) for studies related to gay and lesbian parenting. Some of the challenges described included identifying and recruiting same-sex parents. This was often done via snowball sampling. However, snowball sampling often leads to homogenous groups of Caucasian women. Using population surveys also resulted in limitations in that the samples were small and restricted to same-sex couples in "marriage like" relationships. The authors stated that, in order to "better represent same-sex parent families, alternative methods need to be utilised to recruit – and then study – health and wellbeing in such context" (p. 87).

The 'invisibility' of this population group became even more evident to me when one of the participant gay parents (Family F 1:24:207-208) in this study commented as follows during an interview:

"I went over to a do a listing [estate] and, when the client opened the door, he was a gay man with a partner and a child! I almost fell on my back, I did not know more people like this existed!"

So, where to from here?

... to be continued on p.93

4.3.2 DESCRIPTION OF PARTICIPANT SAMPLE

The final composition of the participant family sample was as follows:

1	FAMILY A	Caucasian lesbian couple 11 years together Pre-school son Baby daughter	Two face-to-face interviews/FN Two email interviews Photographs
2	FAMILY B	Caucasian lesbian couple Four years together Pre-adolescent daughter Pregnant	Three informal visitations /FN Three email interviews Collage
3	FAMILY C	Caucasian lesbian couple 2,5 years together Pre-adolescent daughter	One email interview (NR)
4	FAMILY D	Caucasian lesbian couple Six years together Baby son	One email interview (NR)
5	FAMILY E	Caucasian lesbian couple 11 years together Two adolescent sons	Two email interviews One informal conversation Photographs
6	FAMILY F	Caucasian gay couple 16 years together Two young adult sons	One face-to-face interview
7	FAMILY G	Caucasian lesbian couple Seven years together Adolescent son	One email interview
8	FAMILY H	Mixed-race lesbian couple (parents Caucasian/Indian) Adopted black baby boy	One email interview
9	FAMILY I	Caucasian lesbian couple Daughter (Besides nature of employment, no additional information provided on family composition despite request)	One email interview
10	FAMILY J	Caucasian gay couple	One email interview

*FN = Field Notes / NR = No response to follow-up

4.4 DATA COLLECTION AND DOCUMENTATION

The essence of qualitative research, namely, to understand the informants, their environments and their experiences, usually leads to the use of quasi-inductive rather

than deductive approaches. Accordingly, for the purposes of the study I used the study questions or hypotheses that were the focus of the inquiry. Based on these original questions I continually generated new questions as I learnt more about the unit of study.

The research data required for the purposes of the study was collected via triangulation. The process of triangulation (Hancock & Algozzine, 2011; Gerring, 2007; Remenyi, 2012) allowed me to view the unit of study through various lenses, thus enriching the data collection by using various data collection sources.

The study used triangulation of written, spoken and observational/visual data. This data collection methods used included structured and unstructured interviews, a review of literature sources and collages or photographs as visual data.

Interviewing³ is one of the most popular ways in which to acquire spoken evidence (Babbie & Mouton, 2001; Remenyi, 2012). Wimpenny and Gass (2000) state that the participants' descriptions of their experiences may be gently explored, highlighted and probed via individual research interviews. The participating families in this study were contacted via telephone or email and introduced to the purposes of the study through a recruitment letter. If the participants responded in a positive way, an initial meeting with the family was scheduled to initiate the interview process. Interview times were scheduled to suit the time schedules of the respective families. All ten of the interviews which were conducted during the study were unstructured, and all three face-to-face interviews were audio recorded and then transcribed.

The face-to-face interviews provided the additional benefits of enabling me to observe non-verbal cues as well as giving me the opportunity to observe the families during their authentic interactions. Unstructured interviews also allowed the participant families to provide me with whatever information they wanted to share with me. The qualitative interviewing designs used in the study were flexible and continuous. However, a few challenges did arise such as friends arriving to pay a visit in the middle of an interview or families running late for their interview times. During one interview session a little one played with my recording device and switched it off while at another point she cried so loudly that my recording was not very clear. However, these are just some of the challenges a researcher may expect when he/she enters a family setting in

³ See appendix A for examples of the transcribed interviews.

all its authenticity. Nevertheless, such challenges do not negate the value of the personal contact and relationship building which take place during face-to-face interviews.

Author's personal note

...continued from p. 89

The initial data gathering method involved conducting face-to-face, unstructured interviews with the participants. However, of the 10 families who had responded, 4 were geographically dispersed and it would have been both physically and financially challenging to conduct face-to-face interviews with them. Furthermore, because so few participants had responded, I offered email interviewing, hoping that the opportunity to answer questions in their own time and in my (the researcher's) absence would sound attractive and may lure more participants into considering participating in the study. I also believe that some people are better writers than speakers and, therefore, I wanted my small sample of participants to decide for themselves how they would like to go about participating in the study.

...to be continued p. 95

When participant families indicated that they favoured **email interviewing** emails were sent the email addresses of the parents. The replies were sent back to a secure email address to which only I had access and which was password protected. To begin with these interviews were based on a set of structured questions. The initial question was relatively similar for all the families although I did make slight changes when I realised there were room for improvement while I was working through the responses. After I had received each initial email response, I plotted the data and formulated new questions that were sent to the participant families. Although I had a general plan or set of questions, the email exchange established a general flow for the conversation. The follow-up questions were, therefore, tailored to the initial responses of the participant families and the topics that arose from our conversations. By allowing the participant families to follow their own train of thought I hoped to gather rich data that was both true and authentic to the families themselves.

Although they are devoid of personal contact email interviews have several advantages (Lokman, 2006). Interviews via email may be very cost effective and are considerably easier to administer as they eliminate the need for set interview schedules and times. In addition, email interviews require very little (if any) transcription and/or editing. A further benefit is that these interviews able to reach participants in any corner of the world while they also appeal to those individuals who would otherwise avoid face-to-face interviews. Nevertheless, despite these benefits, as mentioned before, email interviews lack personal contact while finalising responses may take several days, if not

weeks. Such delays in finalising the interview responses may lead to frustration for both the interviewer and the interviewee and this may, in turn, result in drop outs and/or a failure to respond to the follow-up interviews (Hodgson, 2004). I had experience of both these advantages and disadvantages throughout the data gathering process. Although some families responded very well to the email interviews 2 families silently disappeared during the data gathering process and never responded to either the follow interviews or any other probing requests.

In both the structured and unstructured interviews I used probing to elicit additional information from the families. Probing is a useful way in which to elicit in depth answers from respondents. Lofland and Lofland (1995) propose the term 'socially accepted incompetence' to suggest that interviewers act as if they understand less of the conversation than they actually do in an attempt to probe the interviewees to elaborate on their responses. It was important to me to conduct sessional reviews of the interview notes so that I could verify my understanding and establish directions for further discussions (Babbie & Mouton, 2001). Reviewing my notes was a crucial part of the qualitative research process as understanding the meaning making of the GLPFs was, at times, a slow and delicate process and it was a process that did not want to rush.

In addition to the interviews, I also made **informal, personal visits** to some of the participant families to order to initiate contact and receive invitations to family events. I attended these events with no structured interviews planned. However, I did so in an attempt to become part of, learn from and appreciate the family functioning as they preferred to present it to me. Nevertheless, on these occasions I made mental notes of interesting thoughts and conversations and recorded these mental notes afterwards as part of my field notes. According to Remenyi (2012), the researcher's reflections after interviews are often very important and it is beneficial to write them up.

Field notes⁴ was another documentation method that I used to strengthen the data collection strategy and to allow for a diversity of meaning and perceptions. I reviewed literature sources on GLPFs, resilience and the related resilience of GLPFs and families in general and noted any significant information that triggered thoughts and themes that merited further investigation with the participant families. As mentioned before, I also engaged in informal conversations with those around me and I studied newspaper/magazine articles closely for additional information. All informal

⁴ See appendix B for example of field notes.

conversations were noted and used as part of my field notes. Some relevant articles⁵ which I perused as part of my fieldnotes during the study were filed with all other data for safe keeping. Filed notes are beneficial in that they record important information on the researcher's personal impressions of the session conducted and highlight topics for further enquiry. All the field notes that were recorded during this study was captured in a notebook and stored with the other data.

The participant families were invited to share **visual data**⁶ in the form of photographs or collages or anything else they deemed significant to their family, should they wish to. This visual data had the added benefit of allowing me to 'see' what the participants were feeling. It allowed for visual cues and storylines that highlighted important themes in the GLPFs' lives. This shared visual data, collages or photographs were then thematically analysed via the same steps as the written data. The themes that emerged were then discussed with the families in order to ensure that my understanding was correct and to add or eliminate any information. The collages and other visual data were safely stored with all the other data collected. Copies of the collages and other visual data were included in the final product of this research study.

4.5 DATA ANALYSIS, DATA INTERPRETATION AND PRESENTATION OF RESEARCH RESULTS

Qualitative research allows for more reflectivity and sensitivity as regards the interaction with the research subjects under study. In addition, the procedures are particular and replication rare (Babbie & Mouton, 2001; Neuman, 1997). Qualitative research also emphasises the non-automated and non-mechanical nature of research tasks and, thus, I captured and ascertained meaning once I had become engrossed in the data. In qualitative research the theory is typically inductive and analyses are conducted by identifying the themes which emerge from the organisation of the data⁷. Based on these themes which have been identified, a coherent whole or consistent picture is then presented (Neuman, 1997).

In case study research the data analysis is a challenging task. The first of these challenges involves clarifying where data collection ends and when the data analysis process begins as these two processes may often be tightly coupled in case study research. In qualitative data there is often a significant overlapping of and interaction

⁵ See appendix C for examples of some relevant articles perused throughout the research process.

⁶ See appendix D for examples of visual data

⁷ See appendix E for example of data analysis/theme table

between issues that allows the researcher to reflect and intervene throughout the whole research process (Remenyi, 2012). In qualitative research the researcher will inevitably become involved in thinking about (analysing) the data during the collecting process and this, in turn, leads to the formulation of new questions while also providing guidance for follow up interviews. Thus, this inductive process serves the purpose of early analysis and guides researchers in further data collection (Babbie & Mouton, 2001; Remenyi, 2012). During the data analysis process, researchers look for patterns and relationships while also creating new concepts and blending theory together in innovative ways. Concept formation is a crucial element in qualitative data analysis (Babbie & Mouton, 2001). It is through concept formation that qualitative researchers organise and make sense of the data.

Qualitative data analysis is not based on vague speculation. In fact, qualitative data analysis involves explicit, step by step and systematic approaches. During analysis, the data is organised into categories on the basis of themes or similar features. Conceptual definitions are developed and relationships examined. Ultimately, concepts are linked to each other in terms of sequence, oppositional sets or similar categories. The ideas and evidence in qualitative research are mutually interdependent, especially in case study designs (Babbie & Mouton, 2001).

Author's personal note

... continued from p. 92

....I was not willing to give up on this research project.

I felt that the ten families who had responded deserved to be heard, even if their voices were the only ones willing to break through the boundary of invisibility. I decided to move forward by modifying my data analysis – let us say I was infusing it with a personal touch of originality – so that at least these ten families could be acknowledged as resilient families who were willing to contribute to processes that would enable positive change, such as this. I then decided to structure my method for analysis as a case study approach with underlying narrative principles, where the master voice family is represented as the main case. In studies where smaller data sets are utilised, narrative principles are often employed to facilitate more in-depth understanding (Lieblich, Tuval-Mashiach & Zilber, 1998).

Of the ten families who responded, one family was especially responsive (Family B) and open about their experiences. I decided to frame Family B as my 'Master Voice' Family (MVF) and to extract my MVF themes from this specific family through thematic content analysis (TCA). From there, through a process that I have termed *thematic infusion* (TI), I enriched (strengthen or infused) Family B's themes with the themes extracted, also through TCA, from both the literature on resilience in GLPFs and the other participant families.

Here follows a description of TCA as well as the process called 'thematic infusion' (TI).

... to be continued on p. 98

4.5.1 THEMATIC CONTENT ANALYSIS AND ‘THEMATIC INFUSION’⁸

The objective of the data analysis conducted for the purposes of this study was to identify constructs and concepts which would have a direct bearing on answering the research question. Accordingly, I produced a list of concepts and constructs that repeatedly presented themselves in the research data and that could, thus, be classified as repetitive themes. The data collected in the study was analysed using thematic content analysis (TCA), also known as conceptual analysis. In qualitative research TCA is defined as “any technique for the purpose of making inferences by objectively and systematically identifying specified characteristics of messages” (Roller, Mathes, & Eckert, 1995, p. 167).

TCA involves a great deal of involvement and interpretation on the part of the researcher during the analysis process. Via the TCA I embarked on identifying and describing both explicit and implicit themes in the data and for which codes or clusters were then generated (Guest, MacQueen, & Namey, 2012). It is true that TCA involves certain challenges, including the fact that its reliability is often questioned because of the interpretative nature of the coding and because of applying codes to chunks of text. However, it is a useful way in which to capture the complexities of meaning within textual data. Following is a brief summary of the phases in TCA which were employed in line with Braun and Clarke (2006) to elicit themes from both the MVF as well as other participant families:

Phase 1: I familiarised myself with the data to become familiar with the depth and breadth of the content. This entailed repeated reading whilst searching for meanings and patterns. This phase also included the transcription of any data that were audio recorded.

Phase 2: This phase included the generation of initial codes. The codes represented a feature of the data that appeared of interest. Coding in this study were data driven and done manually by writing notes on the texts. Codes were initially identified and then matched up with data extracts that demonstrate the said codes. I coded as many potential themes as possible as I had smaller data sets. I also coded individual extracts into as many themes as they fit into. Even codes which deviated from the dominant story in the

⁸ See Appendix F for a visual representation of TI and revert back to Appendix E for documentation of the TI process

MVF were coded as to not ignore tensions and possible additions to MVF themes. Firstly, a level of analysis was decided on (i.e. micro, meso, exo, macro and chrono). I then proceeded to determine the number of concepts I had to cover through coding. I decided that I would code for the frequency of the concepts that arose from the data as I was trying to establish the way in which protective factors contributed to resilience in GLPFs.

I established parameters to distinguish between the different constructs and I then proceeded to develop a set of rules for the coding of the text. Through coding, the analysis of themes followed in order to better understand the test results (Babbie & Mouton, 2001; Marshall & Rossman, 1999; Palmquist, 1993 as cited in Mouton, 2001).

Phase 3: During this phase I actively searched for themes after all the initial data were coded and collected. This phase focused the analysis at the broader level of themes rather than purely codes. Thus, it included sorting the different codes into themes as well as pairing the data extracts with the themes. The data in this study was sorted into relevant themes in table format (see appendix E). At this stage the relationship between codes and different level of themes became clearer. Some themes were identified as main themes or overarching themes while others were classified as sub-themes (or aromas/infusions as later described in this chapter).

Phase 4: This phase involved the refinement of the identified themes. In this phase irrelevant themes that previously seemed relevant was eliminated as well merging of themes took place. Clear and distinguishable themes were finalised here. Reviewing data in this phase involves reviewing data at the level of the data extracts after which the whole data set were reviewed. At the end of this phase I had a good understanding of how the themes fit together.

Phase 5: For this phase the data extracts were revisited and organised into into a coherent and consistent account. In this phase data extracts are presented as well as the reasons why it was found to be interesting. This was useful as it clarifies how the data extracts fit into the bigger broader story that the GLPFs were telling.

Phase 6: The final phase required writing up the analysis within the thesis in the form of the research results.

After the initial TCA process was completed, I embarked on the process of TI as described below:

Step 1: For the purpose of the study, I started off by deductively analysing the ‘Master Voice’ themes as they would be representative of the main themes relating to resilience in GLPFs. These MV themes were used for the purpose of identifying relationships between and repetitive relational patterns in the participant families’ conceptualisations of resilience. All of the MV themes were then categorised in a tabular format.

Steps 2 and 3: The next steps involved identifying repetitive and relational themes in the additional families and that correlated with the MV themes. This was done using exactly the same TCA steps as described above. These themes were then slotted into the data table categories. At this stage literature on resilience in GLPFs was also explored and prominent themes extracted. This was an easier task as the respective themes had already been grouped in the literature sources and I only had to slot them into the data table according to my interpretation of the level of analysis into which they fitted. The purpose behind the extraction of themes from both the additional families as well as the literature sources was inductive by nature, thus serving to infuse or strengthen the MV themes.

Author’s personal note

...continued from p. 95

The Latin root *infusus* means “to pour into”. To *infuse* is to steep something in a liquid to extract the flavours from it. To *infuse* also means to inspire or fill with a certain quality.

Using metaphors in qualitative research provides an opportunity to examine phenomena from an “unique and creative perspective” (Carpenter, 2008, p.274). My goal with the data analysis process was to infuse Family B’s themes with those themes that I had found to be the most prominent in the literature as well as the other participant families. Metaphorically, one could say that I went through a process of infusion by extracting themes from the above mentioned sources to give flavour (enrich or to once again infuse) my Master Voice Family, Family B. Accordingly, I analysed the additional families as well as the literature sources by actively searching for any themes that correlated to the MV themes and would infuse (strengthen) them. All these themes were categorised according to the data table. In addition, I was conscious of any new constructs that may have arisen and that had to be categorised as strong and prominent themes in the additional families as well as the literature sources.

The data table were continuously adjusted to add or delete themes as the infusion process and the TCA progressed. The aim was to have one data table with all the relevant information constantly being integrated, instead of a few smaller, individual and less informative tables where the information may easily have become scattered and isolated. This resulted in a holistic table of themes which were grouped together in

accordance with systemic levels and that were then represented as the main themes I had identified as factors that promoted and/or hindered resilience in GLPFs. From these themes, subthemes were identified through a further analysis of commonalities in the research data. I then categorised the subthemes relating to the GLPF resilience MV themes to enable a systematic understanding of the interpretation (Clarke & Braun, 2003; Henning, 2004). I distinguished between relevant and irrelevant data and used the relevant data in the coding process. However, all irrelevant data was kept in mind and not completely disregarded to ensure that I did not miss any potential information and/or possible themes that I may have misinterpreted during the initial analysis process. The transcribed texts were, thus, fully coded and the results analysed to my satisfaction (Palmquist, 1993 as cited in Mouton, 2001).

The visual data in the study was also analysed using TCA. Visual cues (such as people laughing, family members embracing etc.) were noted as 'resilient themes' under the relevant categories in the data table. In addition, the words used by the participants to describe the photographs and collages was extracted and categorised according to their significance to resilience.

Step 4: From the table I separated the risk and protective factors and deductively extracted the protective factors that promote resilience in GLPFs. These protective factors were, ultimately, presented in a framework (Resilience Wheel) that highlighted the protective factors that promote resilience in GLPFs.

In keeping with the metaphor of infusion, the themes identified from the process of TI and TCA has been structured according to Overarching level themes, aromas and infusions. They are explained as follows:

Over arching themes indicates the strongest theme that was presented by the participant families on a specific systemic level. This theme is more abstract and complex and would be the context against which factors that hinder or promote resilience can be better understood.

Aromas in this study refer to the strongest themes as presented by the master voice family and often supported by the additional participant families that contextualise, enhance, infuse or give depth to the overarching systemic level theme. These aromas add additional information and dissect the complexities encapsulated by the overarching level theme in more detail.

Infusions are the smaller and more multifaceted relationships and factors that come to the fore when exploring the aromas which “infuses” the overarching level themes. The infusion themes enhance the aromas presented, thus they enrich understanding of the dynamics between the relationships and factors at grass roots level of the specific systemic level under discussion.

The leverage of infusions and/or aromas lie in that it only serves as strengthening the main themes elicited from the master voice family (MVF) by finding themes from the 9 other families as well as from resilience literature and it does not necessarily rely on vast repetition. I acknowledge that this must be difficult to understand and I can also see how scholars of TCA can find many things to critique. However, the terms “aroma” and “infusion” are not supposed to represent rigorous extensions of TCA, rather it is aimed at touching on the additional families’ narrative about their experiences without relying on vast repetition of themes. Narrative principles serve almost as a touchstone from where the concepts of aromas and infusions become apparent without subjecting them to the rules of repetition as required in TCA. By losing data due to a lack of repetition I ran the risk of silencing data that may be considered “insignificant” under normal circumstances and in the case of bigger data sets; however, in this case of smaller but rich data sets, eliciting themes which enrich my master voice family’s stories seemed valid. Although a dated source, Rosaldo (1989, p1) adds insight to this point of discussion. He states that “...all interpretations are provisional; they are made by positioned subjects who are prepared to know certain things and not others...analysis are always incomplete”. I take from this that the more vantage points from which we can explore and unravel data the broader and more complex our understanding becomes, this is in line with the social constructionist framework within which this study is situated. I wanted to engage with all the vantage points of my smaller data sets and not negate one or the other on the grounds of the lack of repetition. Therefore, in the tradition of qualitative research, in the tradition of case study design with applied principles of narrative research, smaller data sets with the chosen method of analysis still provided this thesis with a solid foundation.

4.6 ETHICAL CONSIDERATIONS

I made use of the following guidelines to ensure that the study procedures complied with the ethical standards for research of the University of Pretoria:

4.6.1 VOLUNTARY PARTICIPATION AND INFORMED CONSENT

The GLPFs volunteered to participate in the study of their own free will. Thus, the participating families were voluntary partners in the study and were free, at any time, to withdraw from the study. These families were allowed to refuse to answer questions and they were interviewed only through means and at times which were suitable for them according to a prior arrangement.

In order not to coerce the participants into participating in the study and to respect their informed choice to participate (Halai, 2006), I provided all the prospective participants with the necessary information on the purpose and process of the study. A letter of consent was sent to each prospective participant in which all expectations were clarified, as well as the methods that would be used during my time spent with them (i.e. audio recordings, collages). The informed consent was obtained through letters that were sent via a secure email account that could be accessed only by the researcher.

4.6.2 CONFIDENTIALITY

The principles of anonymity and confidentiality are concerned with providing protection to participants with regard to the information shared (Halai, 2006). The confidentiality and anonymity of the participants were guaranteed at all times. The identities of the individual family members were not made known to anybody outside of the respective family while pseudonyms were used to protect the privacy of each family member participating in this research study.

4.6.3 CLARITY THROUGHOUT THE RESEARCH PROCESS

The participating families were kept informed, at all times, of the purpose and process of the study. The families were informed by dialogue and were provided with my contact details in case they required clarity on anything and at any point during the study.

4.6.4 EQUITABLE TREATMENT AND SAFEKEEPING FROM HARM

As the researcher I ensured the equitable treatment of each participating family member by not discriminating against or being biased towards any of the statements or ideas during our discussions. I respected their choices and ideas regardless of my own values and beliefs. I aimed at all times to protect the participating families from harm

and, to my best of my ability, to promote the well-being of everyone either directly or indirectly involved in the study.

4.6.5 FREEDOM OF CHOICE

The participating families were treated with respect and dignity and their freedom of choice was recognised. No discrimination against any person or group of persons was tolerated.

4.6.6 PERSONAL AWARENESS AND TERMINATION OF RELATIONSHIPS

In view of the fact that the study focused on a very sensitive topic, there was a constant awareness of deep personal experiences. It was, therefore, possible that searching questions in various contexts may have drawn the participating family members' attention to issues they had not considered before the research process started, and this may, in turn, have placed them in a vulnerable position as the study progressed (Lubbe, 2005). I therefore, discussed with all the family members involved the way in which such occurrences would be addressed should they arise during the study. I did my utmost to ensure that the participants were, at all times, comfortable with the level of disclosure and exploration in our discussions (Lubbe, 2005). In addition, there was a possibility that the regular visits and the intimacy of our discussions may have led to the development of close relationships between myself and those involved in the study. Accordingly, the termination of our relationship was discussed at the beginning of the study to ensure that everyone involved understood the nature of the closure process (Lubbe, 2005).

4.7 QUALITY CRITERIA

4.7.1 TRUSTWORTHINESS

The terms credibility, conformability and transferability are closely related in research. The accurate presentation of the particular context under study and the accuracy of the research results in relation to the data refer to the credibility of the study (Mays & Pope, 2002, Van der Riet & Durrheim, 2006). Conformability is defined by Babbie and Mouton (2004) as the degree to which the study results are not a result of researcher bias while the degree to which a researcher is convinced that the study findings did, undeniably, occur as he/she found they did refers to dependability (Van der Riet & Durrheim, 2006).

4.7.1.1 Credibility

I employed a process of peer examination as described by Maree and Van der Westhuizen (2007). I discussed the study results with my supervisor for the purpose of debriefing and eliminating any possible bias. During the research process I regularly met with my supervisor to clarify my undertakings in each of the research step, from the data generation to the data interpretation. During these meetings we compared the data and discussed problems as well as solutions. This also provided an opportunity for suggestions in terms of the further analysis of the research data. I also used member-checking in that I clarified the emergent themes with the participating families to ensure that my developing conceptions were in line with the “true” experiences of those engaged in the study. I acknowledged and understood any sceptical arguments that arose from conversations throughout the research process, not as a weakening of my ideas but as way of strengthening them. By acknowledging disparate views in study I attempted to strengthen its credibility (Terre Blanche & Durrheim, 1999). Furthermore, triangulation of the research methods was employed to ensure the cross-checking, comparison and revision of the data (Creswell, 2012; Stake, 2010).

4.7.1.2 Conformability

Conformability refers to the “chain of evidence” that must be available to prove that data generation has happened in a just and reliable way (Yin, 2014, p. 127). For the purpose of conformability, appendixes of the transcribed data, data analysis and other research material have been included in the thesis. Member checking also served to verify the sufficiency and conformability of the data.

4.7.1.3 Transferability

Transferability refers to the extent to which the results of a study may be applied to other respondents in other contexts. However, in qualitative studies, the aim is not primarily generalisation and the “obligation for demonstrating transferability rests on those who wish to apply it to the receiving context” (Babbie & Mouton, 1998, p. 277). In an attempt to increase the transferability of this study, I relied on thick descriptions of the research data in context. Purposive sampling was also used to further maximise the range of specific information that I aimed to gather from the specific context under study.

4.7.2 ROLE OF THE RESEARCHER

As a subjective human being I acknowledged the possibility of researcher bias and, therefore, triangulation (as mentioned before) was used in order eliminate possible subjective interpretations of the research data. Moreover, I was continuously reflective and noted my thought processes down in a research diary. I was constantly aware of and willing to be flexible and adaptable to in respect of any change required during the research process. Furthermore, entering into this study as a white, heterosexual, married, middle-aged, Afrikaans speaking woman with one child and no strong bonds with extended family members I was aware that my own life experiences may have affected my interpretation of the research data. I, therefore, relied strongly on member checking and supervisor guidance to clarify emerging themes and thoughts throughout the research process.

4.7.3 SAFEKEEPING OF RESEARCH DATA

At the conclusion of the study all the research data, transcripts and audio tapes will be stored in the Department of Educational Psychology at the University of Pretoria and in accordance with the University's rules and regulations. Only the researcher and research supervisor will have access to this data.

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CHAPTER 5 INTERPRETATION OF RESEARCH RESULTS

This chapter will highlight the risk and protective factors associated with resilience in GLPFs as well as propose a framework in terms of which protective factors that promote resilience in GLPFs may be interpreted and understood.

5.1 UNDERSTANDING RESILIENCE IN GLPFS

The purpose of this study is to understand and highlight the protective factors that promote resilience in GLPFs. However, as mentioned before, it is not possible to understand resilience in the absence of adversity and, thus, the next section will contain an overview of the factors (risk, protective or both) that influence resilience in GLPFs. The protective factors will then be highlighted in a resilience framework ('The resilience wheel' – Figure 5.1).

5.2 FACTORS INFLUENCING RESILIENCE IN GLPFS

The table below provides an overview of the factors which influence resilience in GLPFs. Systemic levels can be seen on the horizontal pane of the table. Each level is divided into an overarching theme, followed by the master voice family (MVF) aromas. Each of the aromas is infused through what is typically known in qualitative research as subthemes. The metaphor of aromas and infusions has been explained in the methodology chapter (see chapter four section 4.5.1). Each of the infusions is marked by whether it is a protective (P) or risk (R) factor, or both (P/R). The table is followed by a detailed description of each of the systemic level themes:

Table 5.1: Factors which influence resilience in GLPFs

Systemic level	Micro level themes	Meso level themes	Exo level themes	Macro level themes	Chrono level themes
Overarching theme	Self-determination	Family sense of coherence	Sense of belonging	Exposure to gay and lesbian sub-culture	Social justice through transformation

Systemic level	Micro level themes	Meso level themes	Exo level themes	Macro level themes	Chrono level themes
MVF aromas	Intentional 'outness' and personal 'ok-ness'	Relationship between family members and family identity	Social identity complexity	Constant awareness of difference	Belief in and need for social transformation
Infused through	Avoidance (P) Disclosure (P) and personal beliefs (P)	Communication (P) and recreational, preparational and bonding rituals (P)	Relationship with healthcare services (R/P), schools (P), and society at large – including extended family members and geographical context (R/P) and occupational profile (P)	Constitutional laws (P), institutional policies (R/P) and the South African cultural belief system (R)	n/a

5.2.1 MICRO LEVEL THEMES

As mentioned before, it is not possible to negate the relational context of the individual components that constitute a family. In view of the fact that the microsystem is composed of individuals with whom the element in question under exploration interacts, this section will focus on individuals within the family. Each of the individuals in the family brings to the family dynamic their own subtleties that influence the holistic family functioning. Thus, micro level themes include those individual or internal processes or strategies that were mentioned in from the interviews conducted with the gay and lesbian parents. Individual or personal strategies have been shown to be implicit in the family resilience of another type of minority family in South Africa, namely, families with children diagnosed with autism (Greeff & Van der Walt, 2010) and, therefore, when dealing with minority families, however that minority is defined, I am of the opinion that one cannot negate the implicit role of personal internal processes with regard to resilience. The strategies on the micro level focus on personal processes and are characteristic of the personal life world of the gay and lesbian parent(s). These processes or strategies on this level exclude any pivotal focus on reciprocal systematic influence although I acknowledge that such influence does exist and that it influences personal dispositions.

5.2.1.1 Overarching micro level theme: Self-determination⁹

The theme of self-determination became evident in the way in which the families in this study continuously emphasised the issue of strong will in enabling their family to succeed despite the societal pressure related to their otherness. The determination of the gay and lesbian parents to create functionality and ‘acknowledged normality’ for their family structure is clearly driven by personal investments and negotiations through various means.

The first micro level theme may be explained by means of the self-determination theory (SDT). This theory proposes that one acts in order to satisfy one’s psychological needs for autonomy, competence and relatedness. These needs require (among other things) that one acts in response to one’s own feelings and choices and that one takes responsibility for these feelings and choices to ensure that one acts appropriately in response to challenging tasks, thus bringing about the desired outcomes as well as fostering the close relationships which, in turn, foster meaning in life (Baard et al., 2004). It is clear from the above description that SDT is a strong thread throughout all the systemic levels referred to in this study. However, I found that the participants in this study acted on the micro level (i.e. on individual level) with the self-determination to fulfil two additional personal needs, namely, ‘intentional out-ness’ and ‘personal ok-ness’. Both of these needs may safely be linked to the needs of autonomy, competence and/or relatedness according to self-determination theory.

5.2.1.2 Master voice aromas: *Intentional ‘outness’ and personal ‘ok-ness’*

Two master voice aromas became evident from the data analysis, namely, intentional ‘outness’ and personal ‘ok-ness’. Although these are two separate concepts they are closely related in that both signify the GLPFs’ determination to be recognised as ordinary functional families. An integrated discussion of these two aromas will follow in the next section.

Intentional ‘outness’ may be defined as the way in which families intentionally act in ways that expose them to broader society while personal ‘ok-ness’ translates to the degree to which families exhibit pride in their family structure. The literature confirms ‘outness’ as an important factor in facilitating resilience as it impacts positively on both pride and emotional well-being (Griffiths & Pooley, 2011; Lambert, 2005). ‘Outness’ was

⁹ Please refer back to the discussion on thematic infusion in chapter 4 for an explanation of overarching themes, aromas and infusions.

evident in the way in which parents modelled pride in their sexuality with proving to significantly encourage resilience in GLPFs (Titlestad & Pooley, 2014).

The master voice family (MVF) in this study made specific mention of the fact of their determination to make their family a happy and functional unit through certain intentional actions such as verbal disclosures and/or physical engagements aimed at proclaiming the pride and personal strength by means of which they successfully negotiated their family structure:

MVF – 2:4:35-36,87-88:

“...was prepared to accept anything that comes my way, if it means gossip, or people staring or so... I didn’t really give them a choice, my thoughts at that time – I was willing to take the punch”

In the above statement the MVF highlights the selfless act of intentional ‘outness’ by means of the parent’s insistence, they put themselves ‘out here’ in society in an attempt to be recognised as a family. Gibson, Schlosser, and Brockmurray (2007) confirm that the lesbian individuals in their study expressed a celebration of their lesbian identity, thus indicating a truthfulness to themselves and with this, in turn, helping to foster well-being with regard to identity management. Thus, personal identity transfers to parental identity which, in turn, transfers to family identity. A positive gay or lesbian identity (thus, personal ‘ok-ness’) has been shown to be a pivotal well-being indicator (Luhtanen, 2002). According to Rawsthorne (2009), outness for GLPFs may also indicate a degree of comfort with their own circumstances while it signals a demand to receive the equitable treatment which is the prerogative of any other functional family. The parents of the MVF then continued to highlight their self-determination with regards with regard to finding personal peace and comfort in their choice of family structure:

MVF – 1:12:159-161:

“We are now so strong and content with our life and relationship that it did not stop me from marrying the women of my dreams and to celebrate it with people who actually do love and support us”

The words in the above statement such as ‘strong’, ‘content’, ‘celebrate’ and ‘support’ all indicate an inner feeling of peace and comfort which transfers to the self-determination of the MVF to be recognised as a functional family unit. Echoing the MVF’s reference to

self-determination with regard to personal 'ok-ness', Families A, J and F had the following to say:

Fam A – 2:3:24-25:

“As a lesbian couple with children you have to stand up to show your children they don't have to be ashamed of their family”

Thus, Family A indicated an inner motivation to exhibit and model pride about their family and to teach their children about their personal 'ok-ness', thus teaching them about being visible, taking action and not feeding into the societal assumption of “shame” about otherness'. Family F concurred:

Fam F – 1:3:26-27/1:16:117-118:

“...that day we just decided bugger it [how we are going to cope going forward], we are going to do it [cope] because we are going to do it for them [children]” and¹⁰ “...here I am world, bugger you, accept me or go”

Family F clearly indicated a strong personal 'ok-ness' and intentional 'outness' by using the words “bugger, accept or go”. Although I have to acknowledge that the use of the word “bugger” may easily be interpreted as defensive, the participants' non-verbal cues during the interview were not at all aggressive but merely communicated inner personal acceptance. Family J continued with the notion of inner peace:

Fam J – 2:4:19, 25-26:

“...I had made peace with my sexuality...other people's lack of understanding and empathy is NOT MY PROBLEM [their emphasis]”

It was clear that the parents of Family J had experienced a need for understanding and empathy and, yet, despite this need, they had still found inner acceptance. The ongoing striving for acceptance also became evident in the way actions which Family E took to foster family relations with extended family members:

Fam E – 2:1:17:

“...I continued to reach out to them and insisted on still spending time with them so that my kids would still have their grandparents”

¹⁰ The word “and” indicates another instance in which a particular family confirmed a specific notion highlighted by the quotations. These instances did not necessarily follow onto each other in the initial interview.

In terms of the need for acceptance, Family E confirmed their self-determination to foster relationships with extended family members who, without the lesbian parent's insistence, would not have engaged with their grandchildren.

Self-determination, as a psychological need, is strongly linked to family resilience in that it fosters emotional well-being, not only on the individual level but also on the family as a whole. Existing literature has reported on the considerable impact of psychological needs on life satisfaction and well-being even, by implication, the effect of self-determination on the physically ill (Gagne & Deci, 2005; Sheldon & Bettencourt, 2002; Sapmaz, Dogan, Sapmaz, Temizel, & Dilek Tel, 2012; Stewart & Yeun, 2011). Although this finding pertained to research conducted on the physically ill, as a minority group with specific needs I see a relation to GLPFs in this context. It is true, however, that self-determination may assume various forms depending on the family's situational context and genetic pre-dispositions. Thus, self-determination plays a protective role, acting as a coping mechanism to enable families to take action and, thereby, enhance their well-being, both as a family and individually.

It would appear that there are two types of *infusion themes* that exist and through which families mobilise their self-determination to establish emotional well-being. These two types of infusion include managing disclosure and personal beliefs.

(a) Self-determination infused through managing disclosure

It became evident that the families in this study managed disclosure in two ways – either by avoiding direct disclosure or by employing direct disclosure. Oswald (2002), Litovich and Langhout (2004) and Rivers et al. (2008) confirm the functionality of managing disclosure as an intentional way in which to facilitate resilience in GLPFs. Although membership of a stigmatised group may not be immediately obvious, individuals belonging to such a group may often decide on disclosure (Goffman, 1963).

Some of the families in this study appeared to be intent on avoiding conflicting situations in their attempt to foster resilience. As the MVF stated:

MVF –1:6:66/ 1:7:93/2:7:81-86:

“We kind of tend to ignore what society may think about us...” and “We try to stay away from people who would influence our family negatively” and “I knew there will be a great deal of gossip,...we just kept to ourselves doing our own thing....I just ignored it”

It was evident from the above three statements that families may avoid disclosure by merely avoiding conflicting situations. This form of control about what happens in life appeals strongly to the sense of mastery in gay and lesbian parents and which, in turn, positively affects their ability to cope in adverse situations. This coping ability mobilised through mastery was noted in a study on family resilience as regards coping with family members with mental illness (Zauszniewski, Bekhet, & Suresky, 2010). In view of the fact that this study related to another form of a minority family group in society, I see a connection with GLPFs. The families in the study were found to exhibit better morale and greater psychological well-being (Zauszniewski et al., 2010) through their belief in their ability to control life events, for example, disclosure with regard to GLPFs). Families in this study confirmed the enabling strength of managing disclosure that was evident in the MVF with Family H and Family F stating that they, as parents, often judged interactions and then decided when to disclose and when to avoid disclosure:

Fam H – 1:5:33-34:

“Giving yourself permission to not have to fight, knowing when to pass ...”

Fam F – 1:1:5-6/1:8:50/1:24:205:

“It’s not as if we advertised it ...” and “... I just went with the flow [other parents preventing their children from playing at the participants’ house]. I didn’t want to be difficult for the sake of the kids” and “We were lucky as a family, we went through under the radar [so no one really noticed their family structure]”

It is clear from the statements cited above that that a mindfulness of when to expose oneself and one’s heteronormative otherness both offers protection and increases the well-being which, in turn, fosters resilience. As mentioned before, disclosure styles, or rather the avoidance of disclosure, may take on various forms. For example, the MVF seemed to prefer to isolated themselves from conflicting situations while Family F appeared to prefer to ‘pass’ on difficult situations but still engage, thus not isolating themselves from possible conflict. Masicampo and Baumeister (2007) confirm the reciprocal relationship between mindful states, self-regulatory ability and increased well-being. In the context of gay and lesbian parents an acceptance (being mindful) of internal states such as thoughts, feelings and memories may mobilise resilience in that it is a self-determined action based on the gay or lesbian parent’s preference of how to handle any given situation such as the statements above described. Thus, acceptance refers to the active process of understanding and adjusting to unchangeable situations (Zauszniewski et al., 2010), in this case situations in which the gay and lesbian parents

chose not to disclose their family structure. Family G confirmed such acceptance of avoiding disclosure as follows:

Fam G – 1:1:4/1:1:7-10:

“We don’t put ourselves in positions where we have to [face adversity]” and “We choose not to get involved with people like that ... we prefer not to throw it in people’s faces, who and what we are”

Although Family G did not specifically explain how they avoided such situations it would seem that they have accepted their positioning as a non-heteronormative family and, thus, as a family structure which is often frowned upon in society.

Adaptive identity management strategies appear to be crucial in fostering well-being and subsequent resilience (Gibson, Schlosser & Brockmurray, 2007). Newheiser and Barreto (2014) and Selemogwe and White (2013) confirm that stigmatised groups do tend to avoid any disclosure of the stigmatised social identity. However, they also argue that, by hiding (avoidance), these individuals create the isolation which, in turns, feeds the stigma about the specific minority group. They specifically highlight the detrimental cycle of the stigmatised individuals’ need for hiding (avoidance) and which results in a diminished sense of belonging while, at the same time, exacerbating the avoidance of the stigmatised identity. Isolation such as this often results in the limited support systems which, in turn, impact adversely on resilience. Much of the literature in the field of social belonging confirms this correlation between well-being and social support (Bubolz, 2001; Coleman, 1988; DiFulvio, 2011; Kune, 2011; Truffino, 2010) and confirms the notion that the avoidance of social contact may lead to isolation. It is, therefore, that, although avoiding disclosure may present as a resilience indicator, in some families the act of avoidance may turn out to be a lingering risk. In the light of gay and lesbian parents choosing to avoid disclosure it is essential that one is cognisant of the context of such a decision.

Research has shown that, in many contexts, heterosexuals tend to resist open awareness (Montini, 2000) and actively (though subtly) try to protect gay and lesbian individuals by avoiding contexts that may necessitate disclosure by, for example, choosing specific topics of discussion in conversations or intentionally withdrawing from certain conversations. GLPFs also appear to sometimes opt for withdrawal. Family A explained their reservation about interacting within a heterosexual context out of fear

of being ridiculed or rejected. They stated specifically that they felt ‘reserved’ in their interactions:

Fam A – 3:1:3-4:

“I definitely feel a bit reserved and that’s why I don’t reach out to my neighbours. Because we are gay. I am scared they will judge us and make things difficult for us”

Self-imposed invisibility (Mercier & Harold, 2003 as cited in Rawsthorne, 2009, p. 56), as described by Family A above, has been noted in parental experiences with institutional engagement and has said to be changeable as contexts change. Setuke (2011) confirms the compartmentalisation of gay and lesbian individuals’ lives as based on avoiding disclosure. It would appear that avoiding disclosure enhances feelings of safety because sexual identity may be kept secret from others (Underwood, 1995). In view of the fact that avoidance is often an intentional identity management strategy, I feel compelled to highlight the unfortunate issue of internalised homophobia as an alternative form of self-imposed invisibility. Three participants in this study only made reference to internalised homophobia as a risk factor to resilience and, therefore, I did not deem it to be a strong enough theme to merit any lengthy discussion. However, because personal ‘ok-ness’ has been mentioned as a resilience indicator in this section, internalised homophobia merits mention as a maladaptive form of avoidance. It is not uncommon for a degree of internalised homophobia, as a risk factor, to present itself from time to time in any GLP family members, irrespective of sexual orientation. Green (2004) and Titlestad and Pooley (2014) refer to internalised homophobia and the likelihood that all people, regardless of sexual orientation, may, at some experience, the need to hide or lie about their own or their parents’ same-sex relationships. Three parents in this study referred to the existence of internalised homophobia, despite their healthy family identity, specifically naming it as one of the risk factors that may have hindered resilience in their family:

Fam H – 1:3:15:

“[A risk factor is] internalised homophobia”

Family F also referred to internalised homophobia when they stated that they intentionally kept their children away from other gay and lesbian individuals, even if it meant narrowing their friendship group:

Fam F – 1:24:209-210:

“And our circle of friends, when the kids were smaller, they were more straight [heterosexual] orientated because I did not want to expose them to it, I was scared”

One parent in Family J specifically acknowledged that internalised homophobia had caused her to feel internally obliged to “prove” her family as valid:

Fam J – 2:6:34-35:

“Due to my own internalised stigma, I feel our family have more to prove”

The literature emphasises that minority group stress components, such as internalised homophobia, are negatively associated with well-being (Baams, Bos, & Jonas, 2014). Internalised homophobia may also be present in the form of in-group blame (Sandfort, 1997), thus indicating that gay and lesbian individuals may foster a negative attitude to same-sex attracted individuals as a whole. In-group blame may also be the result of minority groups with a controversial attribute or label themselves endorsing stereotypes about other individuals with the same label and, therefore, applying these stereotypes to themselves (Livingston & Boyd, 2010). This was evident in the statement by Family F, as cited above, about trying to keep their friendship group “straight orientated”. However, internalised stigma is not fixed feature and it may change through exposure to other members of the stigmatised group and disclosure promotion (Thomas, McLeod, Jones & Abott, 2015).

A variant category to the avoidance of disclosure that emerged from this study is that of direct disclosure. The MVF in this study explained how direct disclosure often confirms personal ‘ok-ness’ and intentional ‘outness’ and, subsequently, becomes a resilience indicator:

MVF – 2:8:89-90/2:15:168/1:6:82-83:

“It’s much easier when people do ask questions. I like to inform or educate them as I am sure they are curious” and “we want them to be informed and not having to wonder or gossip or ask questions behind our backs” and “We also try to minimise the community’s challenges by having open communication with others such as the school teachers and principle”

It is clear from the above statements that families may enjoy educating society about non-heteronormative family forms while it appears that providing information and disclosing family structure up front may encourage resilience. Griffiths and Pooley (2011) as well as Lambert (2005) also support the notion that ‘outness’ on the part of

GLPFs fosters emotional well-being that promotes resilience. 'Outness' that is mobilised and advertised through direct disclosure may take on either a verbal or a visual form. Goldberg (2014b) confirms that direct disclosure about family status may reduce the challenges related to family diversity. In her study on pre-school environments with regard to experiences of gay, lesbian and heterosexual parents, Goldberg (2014) states that direct disclosure of family status communicates a message of intolerance towards discrimination and challenges the victimisation of the children.

Rivers et al. (2008) also refer to negotiating disclosure and deciding to whom to disclose in an attempt to reduce victimisation. As a protective factor, direct disclosure allows families to be and to feel stronger and, thus, to become more resilient as they limit the challenging situations that may cause stress. Participant Family A explained:

Fam A – 3:2:5-6:

"I told him [neighbour] directly that we are two moms and he said as long as we are happy there is nothing wrong with it"

Although the statements cited above describe the positive effect that direct disclosure may have on GLPFs, it must, nevertheless, be acknowledged that not all families find resilience in direct disclosure but, rather, as mentioned in the previous sections they find it in avoidance,. However, Family F confirms Family A's sentiment about direct disclosure by stating how their openness about their non-heteronormativity had mobilised positive well-being:

Fam F – 1:1:4-5:

"We've been out and about for long, I mean, I don't have to hide who and what I am. From the moment I made that decision my life went forward"

As regards this statement of Family F it is important to recognise that the parents of Family F had been 'out' about their sexuality and relationship for more than 10 years. Thus, one may assume that direct disclosure may possibly be influenced by the time frame related to openness about sexual identity. One parent in Family E described her attempt at open disclosure when she stated:

Fam E – 2:2:25:

"I do declare my sexual orientation [to parents of children in her day care]"

With regard to the statement cited above, Family E mentioned that direct disclosure with regard to the parents who used her day care service had been a forced disclosure

as she had felt compelled to disclose the heteronormatively-other nature of her family as the majority of the day care parents were from heterosexual parent families. It would appear that declarations or disclosures of this nature relieved the stress for the participant families as they negotiated their family structure through the sharing of voluntary information. Oswald (2002) confirms that intentionality, thus managing disclosure (among other things), promotes resilience in GLPFs. Family F explained how direct disclosure through intentional 'outness' had fostered resilience in his family as it had allowed him to claim his partnership in public:

Fam F – /1:35:317:

“...we'll, I do it intentionally. When we walk in the mall, I place my hand on [partner's] shoulder”

MVF – 2:14:160-161:

“...we walk hand in hand, we are aware of some people looking twice and we get a laugh over it sometimes...”

Family A continued with the trend of direct disclosure by stating that intentional 'outness' and personal 'ok-ness' with family structure elicited respect from others and also fostered resilience. Family A shared the following impromptu email that a colleague sent after their family had attended a work function together:

Impromptu email share from a friend to Fam A (2:3-5):

“[friend's comment about family]...one would think you guys would be shy and reserved, but you are the exact opposite. You take your family to work for a hat party, you dance as if no one is watching and you enjoy your lives while not giving attention to anyone else”

Lubbe and Kruger (2012) explored the disclosure of a South African born adolescent raised in an American same-sex parent family and found that disclosure may often be casual-calculated in nature and, thus, it may appear to be very controlled and self-effective. However, it seems that direct disclosure may, in certain contexts, be a product of well thought through actions whereby information is passed on and executed (and masked) by casual non-verbal and verbal cues. Casual-calculated disclosure is one example of how challenging direct disclosure may be for GLPFs despite their personal 'ok-ness' and intentional 'outness'. In addition, direct disclosure may even be done 'pseudo casually' despite internalised homophobia and may serve purely as a social identity management strategy and not as an acknowledgement of 'ok-ness'. The lesbian

mother's (in Family E) disclosure to her clients as described previously serve as a good example of this form of casual-calculated disclosure.

Although direct disclosure may eliminate anticipated future stress, it is not possible to negate the prior stress that accompanies a decision of initial disclosure. In view of the implicit stress that accompanies direct disclosure I feel it is appropriate to mention cognitive reappraisal at this point. The optimism that, in my opinion is often intertwined with cognitive control or cognitive reappraisal also seems to foster adaptive coping (Van Gelderen, Gartrell, Bos, Rooij, & Hermanns, 2012). In view of the stress that accompanies initial direct disclosure, the ability to cognitively reappraise the challenging context of disclosure may be an important skill with regard to resilience. Although only one participant in this study explicitly mentioned a cognitive reappraisal strategy with regard to resilience (Fam H – 1:5:31, *“being meta-cognitive and proactive”*), it may be beneficial to explore such a link further as much of the literature refers to cognitive reappraisal and increased well-being.

(b) Self-determination infused through personal beliefs

Personal beliefs in the form of spirituality and/or religion have been noted in a vast amount of the literature on resilience (Iruka et al., 2014; Javanmard, 2013; Walsh, 2003; Werner & Smith, 1992) while spirituality and religion have been noted as an identity management technique (Gibson, Schlosser, & Brockmurray, 2007). For the purpose of this section, personal beliefs refer to the participant families' spiritual and/or religious customs. The participants in this study appeared to relate resilience to their religious and spiritual beliefs strongly. This was an exceptionally interesting find for me as gay and lesbian individuals' relationship with the church is a prominent factor in their straining relationship with a heteronormative society. I, therefore, realised that I needed to make a distinction between the personal religious/spiritual beliefs of gay and lesbian individuals and their relationship with the social institution of religion, i.e. the church. The following section contains a discussion of the micro level aspect of this distinction, i.e. personal religion and/or spirituality as a protective factor which unrelated to any social institution.

Spiritual beliefs support families in times of challenge by not only fostering resilience but also by providing a meaning for the hardships being suffered and, therefore, creating hope (Werner & Smith, 1992). In this study the MVF communicated how their religion (specifically Christianity) had enabled them to remain strong and to find

meaning in life. The MVF's personal transcending belief in their ability to educate through their hardships had allowed them to find meaning in their struggle for acknowledgement in society. They specifically communicated their strong religious orientation by claiming that they 'yearned' for a church where they could satisfy their spiritual needs. Although the relationship between the GLPF and the church is reserved for later discussion, their personal spiritual desires and existential meaning making find are relevant at this point.

Studies have found that spiritual activities such as prayer, ceremonies and rituals are often a source of resilience for families. Although not related to GLPFs specifically, early work has referred to minority group resilience and religion and I see a link with regard to minority status at this point. As early as 1989, Boyed-Franklin (see Greeff & Van der Walt, 2010) referred to minority group African-Americans who had transcended both racism and poverty through their spiritual strength. In other minority families, such as those with an autistic child, faith in God has been emphasised as an important factor in positive adaptation (Greeff & Van der Walt, 2010). In general, religious involvement has shown to exercise a significant positive influence on well-being in that individuals with strong faith tend to exhibit higher levels of life satisfaction and greater happiness and show fewer negative psychological consequences after traumatic events (Ellison, 1991).

MVF – 1:8-10:124,138:

"... it is important for me and important for both of us to raise [daughter] in a Christian home, going to church ... I yearned to go to church" and "I believe we are here to help with that change [purpose in life of educating society about accepting difference]"

Other GLPFs echoed the MVF's reference to spirituality by referring to their own strong personal spiritual beliefs:

Fam C – 1:4:31:

"We both come from religious homes and are declared Christians. We also raise our daughter with this purpose [to be Christian and find strength in God]."

Fam D – 1:2:19:

"We have, however, not stopped believing in the living God and we live spiritual lives"

It would appear that spirituality serves a strong purpose of divine interaction and, thus, operating on an existential level seems to provide meaning related to the purpose in life for the GLPFs. Family F in the study explained that they viewed their choice to adopt their children as a higher spiritual purpose:

Fam F – 1:13:90-94/1:23:192-198/1:25:215-217:

“The children grounded us, it prevented us from getting involved with irregular things as we had children to look after ... if you don’t have that ... you don’t have a reason to get up in the morning” and “it’s my God given task to get [them] through matric ... we [the family] are there stability” and “It [having children] happened this way to give us purpose, to be more cohesive, otherwise we wouldn’t have been able to do it [stay resilient] for 16 years”

Although I was not able to find any studies that specifically linked spirituality or purpose in life to resilience with regard to GLPFs as a minority group, I did locate quite a few studies that drew a correlated between these concepts in other minority groups (Pan et al., 2008; Smith et al., 2009) and, therefore, I also make mention of a connection at this point. Mosqueiro et al. (2015) state that religiosity in depressed inpatient groups is associated with stronger resilience and a greater feeling of purpose in life. Studies on HIV patients (stigmatised group, hence the link to GLPFs) by Litwinczuk and Groh (2007) highlighted the positive relationship between spirituality, purpose in life and well-being. With regard to GLBTQ adolescents and young adults, Dahl and Galliher (2012) found that a religious context gave GLBTQ adolescents and young adults an increased sense of self, greater acceptance of others and the increased social support that all promote resilience. Lease, Horne, and Noffsinger-Frazier (2005) confirm the positive link between spirituality and decreased internalised homo-negativity in gay, lesbian and bisexual adults and which, in turn, contribute to psychological well-being.

In addition, spiritual involvement may enable individuals to find solace and guidance in troubling times while it may also boost self-esteem and self-efficacy through a heightened sense of ‘being’ beyond a physical self (Ellison, 1991). It is also through the belief in the unconditional, divine forgiveness of sins that personal guilt feelings may be mitigated. Although Ellison (1991) does not specifically refer to GLPFs, I choose to include a reference to internalised homophobia at this point. Although two participants only made explicit reference to internalised homophobia in this study, they also referred to their spiritual belief system and, therefore, I am of the opinion that divine interaction may serve as a mediator in times of guilt with relation to sexual orientation if and when it does arise. The fact that daily crises may be rendered manageable through a relationship with a more powerful, existential force encourages self-responsibility and the psychological control taking of the problematic context, thereby reducing self-blame (Ellison, 1991). A leading proponent of the relationship between a sense of coherence and spirituality Berger (1967) argues that religion provides a frame

of reference in terms of which human events may be ordered and interpreted. It is this ability to feel that the world is comprehensible, meaningful and manageable that speaks strongly to meso level familial functioning in the form of a family sense of coherence (FSOC). Although the literature has not specifically linked a sense of coherence, specifically FSOC, with self-determination, I choose to link them at this point as I believe them to be unavoidably interwoven, while this link seems to be the platform where micro level dynamics meet meso level dynamics.

5.2.2 MESO LEVEL THEMES

A meso-system comprises of a number of microsystems in interaction with one another (Keenan, 2002). The meso level themes relevant to this study focus on the family as a whole. Family interaction is pivotal to the dynamic of family resilience while the way in which family members create unity is undeniably important. Although we have to acknowledge that the dynamics within the bounds of the immediate family and sharing the same family space are inevitable impacted upon by a broader systemic influence, the focus of the meso level themes falls solely on what is happening within and between family members and excludes the family's relationship with broader society. The latter will be discussed in a later section. If we revisit the micro level themes of self-determination and an intentional, internal and personal desire to demand family acknowledgement, one has to ask how these individual drives come together as a whole in order to foster resilience within the family.

5.2.2.1 Overarching meso level theme: Family sense of coherence

Sense of coherence is defined as “a construct that refers to the extent to which one sees one's world as comprehensible, manageable and meaningful” (Antonovsky & Sourani, 1988, p. 79). Walsh (2003) and Antonovsky and Sourani (1988) propose that a family sense of coherence (FSOC) is the process whereby families transcend adversity and, thus, it refers to the relational resilience of the family members' ability to cope with stress. In this study the families made repeated reference to the fact that they faced adversity together and that their togetherness provided the strength required to manage challenges if and when they arose. The MVF responded to a question on facing and making sense of challenges together as follows:

MVF – 1:15:76-77

“... our absolute happy place filled with love ... through all of this, creating a loving and secure home for us made us strong as a family and brought us closer together.”

This worldview of meaning related to adversity allowed the MVF to employ cognitive clarification or reframing in order to negotiate challenges effectively. It is clear from the statement cited above that the MVF attached meaning and purpose to their family life and this, in turn, increased their resilience. Furthermore, their relationships of love and togetherness generated the motivation required to seek solutions to overcome situational difficulties. This was evident not only in our interviews but also in our informal discussions during the informal visits as well as the collage¹¹ that they created to reflect their family identity. McCubbin et al. (1996) as well as Greeff and van der Walt (2010) confirm that families who emphasise togetherness exhibit higher levels of family adaption.

Family E confirmed the above mentioned FSOC when they stated:

Fam E – 1:2:4-6:

“A resilient family talks together to understand each other and the society around them. They find a way to support each other and stand up for each other when faced with outside conflict”

Family H reiterated their sense of togetherness when they stated:

Fam H – 1:2:2:

“The ability of a family to collectively face adversity ...”

FSOC is a global orientation and, thus, not a skill or a coping style. It emphasises family flexibility depending on the situation and contextual factors in which a problem occurs (Antonovsky & Sourani, 1988; Zauszniewski et al., 2010) and it is said to increase with the life span and age of family members. It is, therefore, understandable that, although all the families in this study perceived themselves as being resilient, their level of coherence differed according to the family members’ ages and biological dispositions and the external resources available. Nevertheless, no matter how the family is constituted, FSOC enables families to function in a healthy and optimum way with families seeming to approach hardships collectively as a “shared challenge” (a concept contained in Walsh’s process model of family resilience (2003)) and seeming to be strongly rooted in the relationship between the family members as well as the subsequent family identity. According to Walsh (2003), families who approach hardships in this way normalise and contextualise challenges, thus fostering FSOC as well as experiencing the challenges encountered as meaningful.

¹¹ Revisit appendix D for examples of visual data.

5.2.2.2 Master voice aromas: Relationship between family members and family identity

The positive nature of the familial relationships between family members sharing the same household has been repeatedly indicated as a resilience indicator (Gibson et al., 2007; Hawley & DeHaan, 1996; McCubbin, Thompson & McCubbin, 1996; Walsh, 2003/2012). The notion that positive, supportive relationships, framed by mutual understanding and accommodation, increase psychological well-being was a common thread in the participant responses in this study and was highlighted in the statements cited above. With regard to the resilience of GLPFs specifically, the research emphasises the importance of the relationship between family members (Griffiths & Pooley 2011) as well as the protective nature of family relationships in times of adversity (Titlestadt & Pooley, 2014). It would appear that the relationship between family members and family identity is imbued by two *infusion themes*, namely, (a) communication, support and flexibility between family members and (b) recreational, preparational and bonding rituals. These infusion themes are so tightly enmeshed with the MVF aromas that attempting further discussion without introducing them at this point would be futile.

(a) Family sense of coherence infused through communication, support and flexibility

Communication is strongly linked to the cohesion of family members. Effective congruent communication is an indispensable skill that enables families to negotiate their togetherness and flexibility. In addition, clear and honest communication during times of adversity enables the effective transmission of the information needed to transcend the said challenges) (Walsh, 2003). Literature on family resilience has repeatedly emphasised the protective factor of cohesion, honesty and communication between family members (Asoodeh et al., 2011; Bitter, 2009; Black & Lobo, 2008; Iruka et al., 2014; Miller et al., 2000; Walsh, 2003/2012). It is usual for parents feel the need to protect their partners and/or children from harm. However, often their intention to shield family members from threatening topics may result in their using dishonest communication. This tactic may, in turn, result in suppressed anxiety which is then channelled in behaviour and reflected in fear. One understands that, in a minority family such as GLPFs, the need to protect partners and children from discriminating attacks would be a natural desire. However, the families in this study proved that honest communication and providing clear and direct explanations, no matter how challenging

the situation, fostered their resilience. The MVF touched on their open communication and effective sharing techniques when they stated:

MVF – 2:21:284-285:

“... tried to give her [daughter] information as she grew older... so again we explained some more, we bought her a book ‘Mom and mom are getting married’ and this really helped”

The MVF dealt with any uncertainty about their family structure and their marriage and that may have caused situational stress for their child with ensuring clear and honest communication about the issue in question. Walsh (2003/2012) confirms that communication processes that entail clarity of content, open emotional expression, collective problem solving and effective conflict management are crucial for family resilience. By reading a story to their child, the MVF not only used open communication but also engaged in collective problem solving by becoming part of the explanation process as it evolved. The togetherness that this communication activity created fostered both a supportive environment and a high degree of cohesion. As indicated by Walsh (2003) as well as Greeff and van der Walt (2010) a high degree of cohesion within a family, such as the MVF in this case, typically results in higher levels of commitment in times of stress. Others families in the study echoed their togetherness through open communication while problem solving:

Fam A – 3:8:24-25:

“We also inform our kids so that they know exactly where they come from, we are honest with them”

Family F in the study made specific mention of their togetherness that had transcended the function of communication, enabling them to reach a deeper level of connection and belonging. They stated:

Fam F – 1:11:91-94/1:25:216:

“... they could have left long ago, they are old enough, but they still live with us ... we are their stability ... it’s their frame of reference” and “... it gave us the purpose to be more cohesive”

The implicit message in the above statement is clear. The children of the gay couple in Family F were young adult men who could have chosen to live anywhere as there were no financial constraints preventing them from doing so. Nevertheless, they chose to live at home, thus providing testimony of the cohesion and close family bond. Their

presence in the family was, thus, by choice and they had not been deterred from sharing family space with parents whose sexual orientation automatically exposed them, as a family, to possible prejudice or discrimination. Dalton and Bielby (2000) refer to the phenomena of individual agency and choice in institutions such as the family. They emphasise that people (such as these young men) choose their actions because these actions provide socially constructed, practical routes for satisfying certain social and individual needs. Families provide cohesion in that they often meet the social needs that are central to the ongoing participation of the family members in the family. It is clear that, as a family, Family F had constructed a close bond and that the family members were compatible. This compatibility is also an indication of life satisfaction (Van Gelderen, Gartrell, Bos, & Hermanns, 2012) and subsequent resilience. Close social bonds with their gay and lesbian parents are not an uncommon phenomenon for children raised in GLPFs. Gartrell, Bos, Peyser, Deck, and Rodas (2012) conducted a study in which adolescents who had been raised by lesbian mothers described their lives. The study found that these adolescents had close bonds with their family while the majority of them described their parents as sound role models. Scott (2007) explored gay and lesbian parenting and found that parents in same-sex unions tended to be strong and capable in their parenting role, thus resulting in emotionally strong and capable children.

These findings of Scott (2007) highlight the pivotal role of the spousal relationship in promoting family resilience and FSOC. The communication between the parents who stand as head of the household serve as an example of communication patterns in the household and between family members. In view of the fact that family adaptation is associated with the patterns of communication used by the family as a whole (Greeff & van der Walt, 2010) it is important to note that spousal emotional support, in whatever form, has been noted in studies to be an important contributor to GLPF resilience (Griffiths & Pooley, 2011; Power et al., 2010). In the context of this study, the spousal relationships that promoted resilience took form via supportive, flexible communication which was framed by understanding. The MVF explained how their spousal relationship was characterised by togetherness and mutual support:

MVF – 1:6:85-86:

“We are so content with ‘us’ that we just cope, no matter what life, society, family or community throws at us”

Family A indicated that communication and collective problem solving in a loving spousal relationship are key to developing resilience and remaining strong in times of challenge:

Fam A – 2:2:12-14:

“We will discuss the situation together and then decide on what to do. Even before we had children this was always our method”

By approaching challenges collectively through collaborative communication, Family A not only reached viable solutions but created the meaningful cohesion that promotes FSOC. As mentioned before this higher level of cohesion resulted in Family A adapting easily to situational stress (Walsh, 2003). Family A also shared visual data in the form of photographs¹² that clearly portrayed the loving and supportive nature of their spousal relationship. Clearly, the strength found in the spousal relationship had benefited the participant parents in this study. Family F explained how a spousal partner’s emotional strength had made it easier for the family to cope in times of adversity:

Fam F – 1:25-26:218-219,230:

“We did [spent time together as a family]. But it was difficult because I was always the uncomfortable one ... we went to Gold Reef City ... It was difficult for me, but [partner’s name] was stronger, yes, yes, he was ...”

It would appear, from the statement cited above, that although internalised homophobia may manifest in some parents, the resilience of the emotional strength of the other spouse often helps to overcome the obstacles or, at least, makes transcendence easier.

Patterson (2002) and Kurdek (2004) echo the above statement by reporting that the relationships of gay/lesbian couples are often characterised by positive adjustment despite adversity. Baams, Bos and Jonas (2014) affirm this protective relationship by indicating that same-sex attracted youth involved in a romantic partnership were psychologically buffered from the impact of expected rejection and hardships. Although the romantic relationships described in this study were of a less formal nature, they, nonetheless, indicated the functional link between romantic support and well-being in a sexual minority group. Coombs (1991) confirms this correlation by stating that marital status with a spousal partner who provides companionship and psychological aid buffers the partners against emotional pathology. Powdthavee and Wooden (2015) as

¹² Revisit appendix D for examples of visual data

well as Markey, Markey, Nave and August (2014) acknowledge the effect of a positive relationship quality and positive well-being. Other studies have shown that being involved in a same-sex relationship may increase self-esteem in males and decrease internalised homophobia in females, thus indicating the positive function of such romantic partnerships (Baumeister et al., 2010). Markey et al., (2014) mention the fact that romantic relationships between gay and lesbian individuals may be more important for well-being as gay and lesbian individuals are less likely to receive support from external sources such as extended family members. As was evident in the quote above by Family F, it may, thus, be that same-sex couples have a heightened sense of reliance on and support for one another.

The link between communication and support automatically evolves into flexibility as family members who communicate and support one another are usually willing to be flexible in their approach to family tasks, ranging from household activities to finding viable solutions to situational problems. Flexibility and commitment in parenting in the form of shared household tasks and non-conformity to gender orientated task assignment have also been noted as key factors in fostering resilience in GLPFs (Greeff & van der Walt, 2010; Griffiths & Pooley, 2011). Family F confirmed the flexibility as regards parental tasks when they described their style of discipline:

Fam F – 1:21-22:174-178:

“... and the roles between me and [partner] differ. He is the strict one. I’m strict too but I have the softer side, I enjoy it ... he is the one who will give them hidings”

Family F described their resourcefulness when it came to carrying out daily activities. Resourcefulness skills are complementary, they may fluctuate over time and they are equally important for optimal well-being and quality of life (Zauszniewski et al., 2010). This type of resourcefulness is also evident in Dalton and Bielby’s (2000) research on the households of lesbian mothers in which lesbian couples reconstructed the cultural understandings of family and parenting. They were obliged to do this as the gender difference with regard to the division of household tasks was not available to them. Walsh (2002) confirms that flexibility is a resilience indicator in that it allows family members to rebound, reorganise and adapt to challenges over time.

This sense of flexibility and continuity over time is closely linked to family identity as a product of the reciprocal relationship between the family members and is strongly shaped by family rituals and routines. This issue is discussed in the next section.

(b) Family sense of coherence infused through recreational, preparational and bonding rituals

As mentioned before, family relationships are influenced by family identity (and vice versa). Family identity may be defined as “the families’ subjective sense of its own continuity over time, its present situation and its character” (Bennet, Wolin, & McAvity, 1988, as cited in Epp & Price, 2008, p. 52). Family identity, on the other hand, is shaped by certain rituals or routines that a family practises in order to establish unity and identity as a family in its own right. Family identity is sculpted through the family’s interaction with society as well as through family interactions and rituals (Brooks, 2008; Epp & Price, 2008). Family interactions and rituals contribute to family stability while bringing the family members closer together. In GLPFs family identity has been noted as an important contributor to resilience. Dunne (2000) and McNair et al. (2008), describes lesbian parent families as simultaneously marginal (because they are heteronormatively other) and mainstream (as a result of their motherhood). These complexities render the self-definition of same-sex parented families both fraught and complex while challenging the social norms of recognition. Breshears (2010) states specifically states that it is important to understand how, in non-traditional families, family identity is negotiated as the process may have complex implications for the children raised in such family types. The GLPFs in this study mentioned various ways in which they created family identity through family activities that not only fostered an environment of love, but also prepared the family members for possible adverse challenges. Many gay and lesbian couples are adapting or creating their own rituals in order to confirm their commitment to one another (McQueeney, 2003). The MVF in this study highlighted their ritualistic attempt to claim acknowledgement for their family, to pledge commitment and to symbolically establish bonds between family members at their wedding ceremony:

MVF – 2:13:149-152:

“We did a unity ceremony on our wedding day where we had three different colours of sand, each in a jar and we each had a chance to pour it into a larger jar. This was a symbol of our three lives binding together forever”

Ceremonies such as this provide an opportunity for gay and lesbian couples to also validate their relationship through their friends and families, biological or otherwise, who choose to attend and support such celebratory activities (McQueeney, 2003). Dalton and Bielby (2000) acknowledge that same-sex couples may participate in

commitment ceremonies (such as the MVF above) to demonstrate their dedication to a relationship that is transforming the institutionalised scripts about marriage and the family. Nevertheless, no matter how these actions are proactively constructed and flexibly scripted, they are still not guaranteed separation from the dominant discourses, such as the institutionalised understanding of the marital roles. Suter, Daas and Bergen (2008) confirm the above when they emphasise that family unity is established, among other things, through the value of the rituals and routines in lesbian parent families. Through their symbolic actions the MVF attempted to conserve their family paradigm while they also aimed to transfer family identity from one generation to the next – an action previously described by Friesen (1990). The bonding ritual with its symbolic sand transfer activity appeared to be rooted in the wish of this particular lesbian parent family to promote family stability and to create a basis from which familial history could be traced (Brooks, 2008). In addition, as McQueeney (2003) argues, ritualistic or symbolic activities such as marriage mobilise social transformation and liberation for marginalised groups.

Nevertheless, family identity rituals do not necessarily aim only to claim unity as, in many instances minority families may use rituals and routines as a means to prepare other family members, especially children, for possible prejudice. Family A explained:

Fam A – 2:2:14-17/3:8:39-40:

“We read a story that a friend of ours wrote to [son] when we were still pregnant with him. That way we felt that we were preparing him to deal with the question ‘Where do I come from?’ We also try to make our children very confident and build their self-esteem so they can handle everything in life ... we build their self-esteem so that they never feel they are less worthy or that others are better than them”

Family A in this study invested in family routines such as story reading activities both to foster family identity and to prepare their children for possible discrimination based on their family structure. The notion of preparing children for possible homophobic incidents are also emphasised by Litovich and Langhout (2004) when they explain how lesbian mothers enforce resilient coping in children by preparing them for possible incidents of homophobia. Other families in the study had also prepared their children as a strategy against possible discrimination:

Fam F – 1:2:12-16/1:8:53:

“... let’s give the kids a coping mechanism ... so we focused on making the kids to stronger” and “... we just prepared them ... I tried to teach them how to negate it [questions about family]. It’s just easier”

One may wonder why preparation appears to be such an important activity in GLPFs as alternative family forms are visibly increasing in society. However, it seems that negotiating family identity in GLPFs is still an ongoing process as GLPFs are constantly challenged by a heteronormative society. There is evidence that the identities of lesbian parent families are were continuously negotiated through symbolic interaction and that they are never simply claimed (Suter, Daas & Bergen, 2008). Accordingly, a discussion on the issue of identity in traditionally “other” families may be important in view of the implications such a complex identity may have for children in such family types (Breshears, 2010). Creating or discussing family identity take place via family activities or routines. Many of the families in this study explained how they created time together to engage in the family activities which build the relationship between family members while also fostering family identity. The MVF explained:

MVF – 1:6:70-71,74-75/ 1:6:76/1:17-18:88,94-96/1:19:205:

“... so we try to have regular family/girls’ nights where we just get movies, popcorn or play family board games to have quality time together ... with our honeymoon earlier this year we had a family honeymoon and the three of us went away together” “We create times /events to spend quality time as a family ...” and “... she gets so much love and attention from us ...” and “... we are living a wonderful life, we have all we need ... our absolute happy place filled with love”

Family F and Family A echoed this by describing their family activities and/or routines of togetherness:

Fam F – 1:25:219-222:

“We went to Gold Reef City, stuff like that. We have a rule that we eat together on specific days ... we played a bit of tennis together ...”

Fam A – 3:9:43-45:

“We make a point of if it to eat together around the table. We go out on trips and spend as much time together as possible over weekends. We try to give our kids as much exposure as possible”

The literature confirms the existence of such family bonding rituals and their importance in families, especially in GLPFs. McCubbin et al. (1996) highlight that family

celebrations and family time spent together, such as the families described above, are an important resource that promotes family adaptation and subsequent resilience. When the families in this study were asked about their family identities, they described these family identities as positive, healthy, loving and resilient. In fact, they compared themselves to heterosexual parent families. This, in turn, indicates the ongoing negotiation in which GLPFs engage in a heteronormative society:

MVF – 2:21:284-285:

“... we have morals, rules, discipline, routine, safety, etc. in our house, just as they [heterosexual parent families] do”

Fam I – 1:5:10/1:3:3-4:

“Tons of love and security” and “A family that faces the future with all its challenges and problems with energy and enthusiasm”

The media had also assisted participant Family A with regard to their family identity. This family noted specifically that the media had followed them during their pregnancy up until the birthing process in a programme that had showcased the pregnancy journey of families in South Africa. In their opinion, being showcased on television had given Family A an opportunity to be viewed by society as a ‘normal’ (their word choice) family. This, in turn, emphasises the problematic theme of normality versus functionality when society is confronted by alternative family forms.

[The TV show] presented us as the loving ‘normal’ family [that we are]”

Family E confirmed their priority for togetherness just as any other heteronormative family by exclaiming:

Fam E – 2:3:32:

“... of course, [time spent together to bond as family] is my priority”

It is important to be cognisant of the fact that family identity is fluid and may change over time as contexts change. In addition, family identity may be changed and constructed by family members to create the family’s life story (Bitter, 2009). This is illustrated by the statement above that highlights the social construction of a healthy, happy and functional family identity by the families themselves. In modern society this social constructionist principle in respect of family identity is important. It is also significant to note that diverse families’ construction of identity will vary in the different spheres of diversity (Walsh, 2003) and in relation to competing demands on

the interests of diverse families in the modern world (Epp & Price, 2008). Functionality should, therefore, not be confused with 'normality' when the GLPF is viewed against the heteronormative backdrop of what constitutes a healthy family. In view of the fact that the family is also constructed through law (i.e. biological parents have rights versus non-biological parent etc.), Dalton and Bielby (2000) suggest that lesbian mothers actively negotiate family status with surrounding people, thereby challenging the institutionalised scripts with regard to what constitutes a 'properly' configured male/father and female/mother family. If these negotiations were to be successful, they would have a cumulative impact on the widely held, gendered notions of family but, unfortunately, they would probably also infiltrate the same-sex parent family with gender through gendered-based attributions and understandings about biology and about caregiver and provider roles (Dalton & Bielby, 2000).

No matter how the family is gendered through society's infallible need to label and classify, the social institution that is 'the family' serves the purpose of 'we-ness' through both a collective identity and the reciprocal support that is ingrained in the relationship between family members. This 'we-ness' or belonging does, however, ripple out from the core of the family to the family's constant interaction with a broader society while the need to belong extends to multiple developmental contexts such as the neighbourhood, the children's school, places of employment, extended family members, etc (Evans, March & Weigel, 2010; Rivera et al., 2013). It is also between these contexts and the family that FSOC reciprocally develop. The GLPFs' daily interaction with these contexts leads this discussion into the next section on the exo level themes that influence resilience.

5.2.3 EXO-LEVEL THEMES

The exo-system consists of interactions between two or more settings, one of which does not contain the individual. The indirect interactions may, however, affect the processes within the immediate setting in which the individual is imbedded (Bronfenbrenner, 1994; Hong et al., 2011). In view of the fact that the GLPF is much more than merely the sum of its parts, the broader environment in which it operates plays a significant role in the way in which GLPF resilience is fostered. Included in this section on exo level themes are the various spheres of society that the GLPF face in their daily interactions, either through direct contact (i.e. neighbours, general practitioners or bosses at work) or indirect contact (i.e. society's perception of gay and lesbian parenting). The factors on this level correspond with Oswald and Holman's (2013, p.

196) explanation of what they define as the ‘proximal manifestations’ which include (among others), workplaces, schools, healthcare settings and friendship networks. This section does not, however, include the distal factors that are far removed from the GLPF and which affect the family in a much more removed, yet implicit way (i.e. laws), as those factors are discussed later.

5.2.3.1 Overarching exo level theme: Sense of belonging

In view of the fact ‘belonging’ was one of the main assumptions with regard to resilience in GLPFs, the concept of belonging and social support has been extensively discussed in the literature review in this dissertation. As a protective factor, social capital, i.e. belonging to a social group that fosters significant interpersonal relationships, is a universal human need and one which enhances subjective well-being (Helliwell & Putnam, 2004; Baumeister & Leary, 1995). The pervasive drive to form and maintain lasting interpersonal relationships lies at the core of belonging (Baumeister & Leary, 1995). A sense of identity, belonging and self-worth are all characteristics of social interaction and social networks (Cohen, 2004).

Social belonging/social capital and its relationship with resilience have been well researched (Anant, 1967; Bolger et al., 2000; Malone et al., 2012; Stewart & Yuen, 2011). Research indicates that it would appear that minority groups find protection in belonging to more than one social identity group in society and this, in my opinion, refers to the social identity complexity faced by GLPFs. Accordingly, I feel confident in making a link between the social identity complexity of GLPFs (as a minority group) and resilience at this point. With regard to the social identity complexity of minority groups and resilience, Lee (2004) examined the protective factors that negate discrimination. Lee (2004) found that, among others, other-group orientation (i.e. social identity complexity) acted as a buffer against adversity. It is clear in the following statement made by the MVF in this study that both belonging and resilience are fostered by social identity complexity:

MVF – 1:4:40-43:

“... the upside was that people actually got to know me as a ‘normal’ person who actually fitted into their world ... I went to the NG church ... I was still a manager at [company], I am still a mother and a very reliable and social person”

As early as 1979, Tajfel and Turner confirmed that personal identity is primarily determined by belonging to various groups. They maintained that the more one

identified with being part of society, the more likely it was that one would feel socially connected and experience 'belongingness. The participants in this study highlighted a sense of belonging through their sense of social identity complexity. Consequently, social identity complexity is the MVF aroma in this section.

5.2.3.2 Master voice aroma: Social identity complexity

Social identity complexity may be defined as "an individual's subjective representation of the interrelationships among his or her multiple group identities. Social identity complexity reflects the degree of overlap perceived to exist between groups of which a person is simultaneously a member" (Roccas & Brewer 2002, p. 88). Early research (Anant, 1967) has shown that people define their identity beyond themselves, granted that the collective identity has meaning. The collective identity would imply shared goals, mutual respect and cooperation (Qutaiba & Tamie, 2010). In view of the fact that GLPFs are a minority group in society, I intended to find studies which explored the link between resilience and the subjective well-being of minority groups in relation to belongingness and social identity complexity. It has been found that minority families with a strong sense of community and a high level of life satisfaction exhibited a lower sense of discrimination (Moscato et al., 2013). Minority groups studies which focus on well-being indicate that subtle and blatant discrimination results in negative subjective well-being while, on the other hand, subjective well-being is significantly improved by social support (Gallagher & Vella-Brodricj, 2008; Schaafsma, 2013).

Kritzinger (1996) points out that gay and lesbian individuals are often forced to compartmentalise their sexual identity because of the compulsory silence imposed on them while this, in turn, results in psychological strain and diminished well-being. Thus, managing lesbian or gay identity in such a way that it enables gays and lesbians to cope in a heteronormative society is extremely important for their subjective well-being although this may prove to be challenging for most gay and lesbian persons (Gibson et al., 2007). The identity management strategies of lesbian individuals of African descent, as explained by Gibson et al. (2007), confirmed that multiple identities allow for positive adaptation to life. In their study, lesbian individuals made specific reference to their identities extending beyond being 'just' lesbian to those of a stratified human being, thus indicating that they were, in fact, defined by many layers.

The gay and lesbian parents in this study confirmed that being 'more' than just gay and lesbian had extended their belonging to various levels of society. Specifically the

parents in this study communicated their extended belongingness as a result of the compulsory 'outness' implied by their having children. As the MVF explained:

MVF – 1:14-15:173-176:

"... however, I do think it can also make it easier when you have children. If it was only the two of us we would not have been so involved in the community and interacted with other families who have children as we do now with [daughter] at school. This 'forces' people to get to know us better and see that we actually lead a normal life"

The other participant families, including Family A, also referred to their social identity complexity and exposure to various levels of society as a result of fulfilling their children's requirement for exposure:

Fam A – fieldnotes:

"... people without children can hide easier. If you have children you cannot hide from society"

Research has shown that high rates of gay and lesbian parents tend to volunteer in society (such as the parents in this study who communicated during an impromptu casual conversation that they often volunteered at school events) and that this is a proactive and/or reactive strategy aimed at eliminating stigma against their families. By increasing their visibility these parents create a safe environment for their families, especially their children, in the hope of decreasing victimisation and increasing acceptance (Goldberg, 2014a). It would appear that exposing oneself to others in an attempt to create belonging significantly improves well-being. According to Thomas et al. (2015) and Rawsthorne (2009), contact with one's own stigmatised group, myth busting and disclosure promotion in general may improve subjective well-being. Thus, social identity complexity does not negate the fact that one may find solace and strength in connecting to one's own stigmatised group in addition to identifying with several other social identities in society. As the MVF family explained, active social networks are extremely important,

MVF – 2:17:12-13,217-219:

"We then decided to open a mutual [facebook] account specifically to connect with other lesbian couples who are married and have kids so that we could have some support system" and "We now have quite a number of friends again and such a wonderful support group that we cannot believe how blessed we are"

Family A confirmed these sentiments:

Fam A – 1:7:61/3:5:23-24

“Yes, a gay church. Only gay people can go there” and “Friends are there to support you and to talk you through the difficult times”

Gartrell et al. (2012) reiterate the importance of social networks, as do Van Gelderen et al. (2012). Wooden and Powdthavee (2015) mention that de facto relationships as well as friendship networks significantly improve the life satisfaction of sexual minorities while Griffiths and Pooley (2011) and Titlestadt and Pooley (2014) confirm that social support and belonging strengthen resilience in GLPFs. The social groups range from friends and family to professionals and GLBT communities. Support relationships in the case of GLPFs may often constitute ‘selected kin’ – choosing friends as family (Oswald, 2002). Family H and Family D verbalised this as follows:

Fam H – 1:5:41-42:

“[A protective factor is] creating a family of choice, choosing your friends and support network, not necessarily blood”

Fam D -- 1:1:4-8/1:3:20-21:

“We are definitely part of the community and are accepted by the people that actively participate in the community events. We help to organise complex activities and have made very good friends within the estate. [Partner] is the manager of the estate where we live but, even before she became the manager, we were actively involved in the community” and “Our friends really serve as a valuable support structure for us”

Thus, as highlighted in the quotations above, a sense of belonging for gay and lesbian individuals often depends on selected family which originates in the gay and lesbian individuals’ fluid ties with friends, their social identity and their emotional commitment to others (Dalton & Bielby, 2000).

It is clear from the responses cited above that GLPFs often define themselves beyond their belonging to the GLBTQ community and as a true part of all spheres of society. This, in turn, strengthens resilience. This appears to be especially true for GLPFs with children as children subtly force the parents to become part of, connect with or venture into various communities, such as school committees or recreational settings. In this regard, from the data collected in this study, there emerged four **infusion themes** in terms of which a sense of belonging in relation to social identity complexity may be understood as either a risk or protective factor, or both. These themes include (a)

relationship with health care services, (b) relationship with schools, (c) occupational profile of gay and lesbian parents and (d) relationship with society at large (including extended family members).

(a) Sense of belonging infused through relationships with health care systems

Research has indicated that, in general, gay and lesbian individuals have poorer health as compared to heterosexual individuals (Bakker, Sandfort, Vanwesenbeeck, Lindert, & Westert, 2006). This may be caused by specific medical needs relating to sexual orientation as well as the stress which results from being discriminated against on a daily basis, whether directly through hate crimes and physical assault relating to sexual orientation, or indirectly (Jalali & Sauer, 2015). Bisexual and lesbian individuals often seek psychological assistance to help them to deal with the general stress relating to societal onslaughts on their sexual orientation (Bakker et al., 2006). This, in turn, raises questions with regard to the way in which the health care services assist GLPFs with fostering resilience.

The interactions of gay and lesbian parents and their children with the health care services may significantly impact on their social identities, not only as ‘patients’ of a health care service but also as normal human beings who deserve equitable and quality service which acknowledges family structure and any possible special needs of the family members. GLPFs’ positive experiences with healthcare systems such as doctor patient interaction during doctor consultations and visits to clinics impact positively on resilience (Griffiths & Pooley, 2011). As found by Rawsthorne (2009) the families in this study also felt worthy and recognised when the healthcare systems reacted in a non-judgemental and accepting manner to their respective needs:

MVF – 3:10:81-82/3:11-12:89-97:

“[Partner] was on my medical aid even before we got married (as my partner), so we had no problems” and “Our experience with health care systems has been excellent so far ... People treated us with the same respect as any others ... we had very positive experiences, for instance, on Friday when we got to the gynaecologist for the scan, I walked in alone and the receptionist asked me ‘where is your wife?’ How cool is that?!”

It would appear that the recognition of a co-parent significantly contributes to positive relationships between GLPFs and the health care services. Rawsthorne (2009) confirms this correlation, noting that it came as a “pleasant surprise” to the participants in her

study when co-parents were acknowledged (p. 55). The unexpected recognition of a co-parent and the subsequent appreciation of gay and lesbian parents of such recognition are also clear in the above quotation when the MVF exclaims ‘How cool is that?’. Family A and Family E both confirmed the MVF’s positive experiences with the health care services as follows:

Fam A – 1:12:121-122:

“She said ‘God is love and if you love each other that is all that matters’. She was a social worker”

Fam E – 2:2:24:

“I am on my partner’s medical aid and pension scheme, so we have no problems there”

Within the South African context, it seems that cultural differences play a significant role in both health care and in the communication between patients and health care workers. In addition, South Africa has a particularly fluid cultural diversity as a result of the continuously changing sociocultural and political climate in the country (Penn & Watermeyer, 2014). In my opinion this not only affects patients with diverse cultural identities but it may play a significant role in the management of sexually diverse patients. South Africa is strongly orientated towards providing equitable service for all its citizens, irrespective of, among others, sexual orientation and this may partly be the reason why the participant families, as quoted above, all described positive experiences during their medical and related consultations. Nevertheless, despite the emphasis on diversity, GLPFs do often experience discrimination in their contact with health care systems.

The participant GLPFs’ contact with healthcare systems had had a significantly negative impact on their resilience in cases in which medical personnel were ignorant about same-sex relationships and medical issues pertaining to LGBTQ individuals. Family A described the risk factors associated with such incidences as regards their reproductive health:

Fam A – 1:1:4-6/1:2:12-13:

“... then I went to a sperm bank ... I walked in ... she said ‘Ah, I’m so glad you don’t have a wife’. So, now I’m in straight mode, I explain I have a husband with blue eyes, all the things that [partner] has ... I was so scared, I trembled” and “... so we didn’t work through the sperm bank anymore because the women was so rude, she said ‘You must see the women that come in here, your hair will raise”

It would appear that ignorance about GLPFs is particularly rife in South Africa. This was often suggested by the families as the main reason why they may seem to be hesitant to seek medical assistance:

Fam E – 2:2:23:

“Local welfare seems to have no knowledge of any LGBT people in the area even though they are here”

Fam H – 1:3:4-7:

“[A risk factor is] accessing health services [due to heteronormative systems, prejudice and homophobia”

International literature confirms ignorance of the medical personnel as one of the factors that hinder resilience in GLPFs (Davies, 2012; Wilkinson, 2002). The embarrassment that arises from over curiosity or insensitive questioning of the part of medical personnel often results in gay/lesbian individuals avoiding medical consultations and this, in turn, may play a role in the invisibility of GLPFs in society. Participant family F confirmed their damaging experience with ignorance, especially concerning the male gender of two parents, when they accessed social welfare services in an attempt to adopt their sons:

Fam F –1:3-5:27-36:

“The women [social workers] pulled us apart. They asked us if we wear women’s clothing...do we watch pornography, who is the male and who is the female and how many times a week do we have sex”

In respect of the above example of discrimination and ignorance, Jalali and Sauer (2015) and Hughes (2009) indicate that marginalised populations, especially LGBT patients, fear social inequality and inconsistencies in the health services and, therefore, by avoiding such services, they may be placed at a higher risk for disease and ill health. In addition, a lack of access to reproductive health care as well as discriminatory policies and practices in the adoption processes may hinder gay and lesbian individuals from becoming parents, thus increasing the invisibility of these families (Patterson & Riskind, 2010; Goldberg, 2009). It must be noted, however, that marginalised groups may have a heightened sense of awareness of the discriminatory behaviour exhibited by professionals in the field of medical care and, therefore, they may interpret non-intentional actions (such as poor eye contact) as discriminatory even if it were not intended as such. In a study on LGBTQ adolescents, Kitts (2010) also indicated that

increasing the level of knowledge of health care workers of the multiple psychological stressors and issues that these individuals face is necessary. There appears to be a general lack of communication between gay and lesbian patient and health care workers as a result of the common assumption that patients are heterosexual (Bonvicini & Perlin, 2003; Rawsthorne, 2009). With regard to sexual minority women, Mosack, Brouwer, and Petroll (2013) found that disclosure about sexual orientation resulted in greater satisfaction with health care providers for those who did disclose as opposed to sexual minority women who did not disclose their sexual orientation to their health care providers. The initial contact with a healthcare provider such as a nurse during health history assessments exerts a significant influence on level of comfort of sexual minority individuals as regards both disclosure as well as their decision to return for follow up care (Bosse, Nesteby, and Randall (2015).

The medical discourse on 'same-sex-abnormality' is based primarily on the historical classification of same-sex orientation as a mental disorder and it was only in 1972 that the Diagnostic and Statistical Manual of Mental Disorders (DSM) was amended to remove this classification. In addition, the misconception that HIV/AIDS is a same-sex-related medical issue may discourage many gay and lesbian individuals from seeking medical assistance of any sort. However, it would also appear that medical professionals have, over time, contributed to better understanding of the social and medical issues related to HIV/AIDS. Although it seems from both the literature consulted and the analysis of the interviews that were conducted that it is the GLPF's relationship with the health care services which contributes to risk rather than to the protection of these families' resilience, the social construction of homophobia (as referred to by Wilton, 1999, p. 154) may allow for medical practice to be better theorised and critiqued, thus improving and changing its characterisation of anti-gay or gay-ignorant service delivery to one framed in the context of social justice and recognition. This, in turn, leads to the second infusion of the GLPF's relationship with their child(ren)'s school.

(b) Sense of belonging infused through relationships with the school

Inevitably raising a child in a GLPF necessitates interaction between the gay and lesbian parents and their child's school context. As previously mentioned in Chapter 3 (literature review chapter), sexual orientation is an uncommon topic of discussion within the school context. However, this is not so for the topic of family. Family discussions come up on a regular basis and may expose both the children and parents of GLPFs as a result of their non-heteronormative nature. Both the children and parents

often fear such revelations if they are not intentionally planned and executed. Children fear bullying and victimisation while the gay and lesbian parents fear the victimisation of their children (Meezan & Rauch, 2005; Robitaille & St Jacques, 2009).

However, as opposed to the majority of the literature which highlights the risk of the school environment, the participant families in this study had, in the main, experienced their relationship with the schools as positive and as assisting in promoting resilience. The MVF in the study confirmed that their relationship with their child's school was positive. They stated that, through the supportive relationship with the school, they had managed to protect their child from bullying while the said relationship had also promoted their visibility as a family and this, in turn, had increased acceptance:

MVF – 1:22:251-25:

“He [principal] advised that I should just make sure each year as [daughter] progresses, that I inform her class teacher so that they were aware of it. I suppose also hopefully to be more sensitive or look out for bullying”

Other families, including Family F, echoed the role of the support they had received from the schools in building resilience:

Fam F – 1:2:11-12:

“The principal called us in. He then said ‘Listen, let’s help these kids...let’s help these kids through providing them with a coping mechanism because they will encounter it [discrimination] again. So let’s make them stronger and teach them how to handle it the next time it happens”

It would appear that being ‘out’ to their children’s schools had a protective effect on gay and lesbian parents and their children as it demanded acknowledgement and respect (Rawsthorne, 2009). Support from the school in eliminating anticipated bullying or victimisation had proved to be significant to the parents in this study. Family F also explained their relationship with the school had extended beyond a protective one to one of nurture and guidance:

Fam F – 1:10:70-72:

“... the teachers were great, the school was great. They meant so much more than just being teachers. They took the kids under their wings ... the female teachers [especially] made it easier since they were there for the kids as a female figure in their lives”

Family A concurred:

Fam A – 1:12:112-113/1:13:126-127:

“When I had to tell the teacher that we are two women I started crying because I just couldn’t take it [stress] any more and, um, then she said to me ‘My darling, I will never judge you!’ and “I must say, they accepted us. And there are plenty of other gay parents there, we saw them on the open day”

International literature which explores the nature of this relationship has pointed out that, in general, same-sex parent couples who felt more accepted by their children’s schools exhibited greater involvement in the school context and engaged in better teacher-parent relationships (Goldberg 2014a). It has also been found that a homophobic school climate does not deter same-sex parents from involvement in the school although the involvement in such cases is accompanied by a degree of discomfort (Kosciw & Diaz, 2008). Involvement in school related activities increases the same-sex parents’ social interaction with other parents, regardless of their gay or lesbian sexual orientation, thereby increasing social support. It is in respect of this social support that I see a link to resilience as mobilising support creates a chain reaction of protective factors which influence resilience through the said social support. Goldberg and Smith (2011) go further in explaining that gay and lesbian parents who lived in gay-friendly communities were less likely to perceive mistreatment as a result of sexual orientation as compared to their counterparts who lived in less gay-friendly communities. This, in turn, emphasises the importance of geographic context when one explores GLPF resilience in relation to familial interaction with society. However, the relationship between geographical context and resilience will be discussed later in this section.

Goldberg (2014c) maintains that lesbian and gay parents who are open about their family structure do not seem to encounter resistance related to their being GLPFs. In local literature pertaining to South Africa Breshears and Le Roux (2013) highlight the powerful impact of the school environment on the child’s formative processes as the school is the first context in which children receive messages that may contradict their conceptualisation of their family structure. It is, therefore, important to appreciate the supportive role of the relationship between the GLPFs in this study and the school as, instead of emphasising the non-heteronormative nature of their family structure, the schools referred to in this study had pointedly mobilised supportive actions to embrace these families and to enhance the understanding of them. This is exceptionally revealing as relatively recent research refers to South African schools as perpetuating

homophobia instead of eliminating it (Bhana, 2012; Francis, 2012; Richardson, 2006). Oswald and Holman (2013) confirm that supportiveness from schools impacts on the quality of life of GLPFs. Bos, Gartrell, Peyser and van Balen (2008) indicated that children from lesbian mothers were more resilient when they attended schools and LGB issues were addressed as part of the curriculum but that, unfortunately, not all GLPFs have access to such schools. Rawsthorne (2009) also confirms that the relationship between GLPFs and the school is shaped through the school climate and culture and that these are especially positive in schools in which lesbian staff members are employed. Resilience with regard to the children who have to address LGB issue in school also came to the fore in this study when the parents from Family C noted that they believed their child would become emotionally stronger as she grew older as a result of the fact that she had to defend such adult issues on a regular basis. They stated:

Fam C – 1:10:58-60:

“... children from gay homes come out stronger; the fact that our child and we have to fight for a rightful place under the sun just builds your character [prepares you]”

Of course, in any such incidences it is essential to take into account contextual factors, for example, geographical context played an important role in resilience with regard to the sense of belonging arising from the GLPFs’ relationships with various social institution, such as schools. The parents’ place of employment is another important social institution. In many respects, the same dynamics apply to the place of employment as they do in the school environment. The issue of occupational profile will be discussed in the next section.

(c) Sense of belonging infused through occupational profile.

Although education and the subsequent availability of financial resources have been linked to resilience in the literature (Black & Lobo, 2008; Powdthavee & Wooden, 2015), I struggled to find articles that linked occupational profile (especially with regard to GLPFs) to resilience. I consider this an interesting omission when seen in the light of the existing literature on resilience. When referring to occupational profile I am referring to the position held at work, irrespective of education or the financial resources that may or may not accompany such position.

The families in this study highlighted that their places of employment and the positions they held at work had significantly influenced their acceptance by others. Whether this acceptance was forced as a result of the nature of the position or not may add an extra

dimension to the true scope of such acceptance. Some of the families referred to the nature of such relationships while others did not and it would be beneficial to explore this issue in future research. However, in this study the following references to occupational profile and resilience were made:

MVF – 1:4:34/2:6:63-65:

*“... they [town’s people] actually looked up to me for the position I held at the college ...”
and “I already earned a bigger salary than most people in town. I was a graduate and, as mentioned, worked for a respectable company which not just anyone would have the opportunity to work for”*

Interestingly, Luhtanen (2002) suggests that there is a significant correlation between social support in the form of acceptance by work colleagues and higher levels of self-esteem and lower levels of depression in gay men. Powdthavee and Wooden (2015) and Rawsthorne (2009) refer to a de facto relationship and/or formal institutions (such as, in this case, the work environment) that serve as a platform for social support and which subsequently channel resilience. It would appear that being ‘out’ at work fosters resilience as the GLPs become visible and demand acknowledgement. This visibility may, in turn, also increase the GLPFs’ colleagues’ knowledge about the normality of same-sex parents being in a relationship and raising children. Family A shared a heart-warming impromptu email which had been sent to them by a work colleague and which referred to both exposure and social support:

Email sent to Fam A by colleague:

“... we ADMIRE [their emphasis] how dedicated you as a family are. I said to him [husband] that, because you are not the norm one expects, or thinks, that you will be shy and reserved. And you are just the opposite. You take your family to work for a hat party, you dance as if no one is watching and you enjoy your life and you don’t give any thought to anyone [that may be judgemental towards their family] ...”

Positive feedback, such as that expressed in the quotation above, from work colleagues further motivates GLPF s to be ‘out’ as it builds confidence about ‘owning’ one’s family. It is interest to note that research has found that gay and lesbian employees often fear coming out at work and yet, when such disclosures did happen, job satisfaction increased (Law, Martinez, Ruggs, Hebl & Akers, 2011). This was clearly confirmed in the above quotation as well as in the informal conversations with Family A. Newheiser and Barreto (2014) emphasise the effect of social belonging with regard to acceptance by colleagues and which, as discussed in a previous section, increases resilience through

social support. A. Newheiser and Barreto (2014) go on to say that hiding from colleagues increases isolation and reduces social support and, thus, through the act of selective invisibility, gay and lesbian individuals create the exact atmosphere they aim to eliminate. In addition, their study indicated that those stigmatised individuals who preferred to hide were less liked by co-workers while their interactions with co-workers were less positively evaluated by onlookers. This, in turn, indicates the value of exposure and disclosure. The families in this study all mentioned their experiences of positive interaction after exposing themselves to co-workers. They explained:

Fam A – 1:8:75-76:

“... he was accepted well at school. I worked at the same school so I knew they would be ok with gay people”

At this point, however, I want to acknowledge that, although the majority of families in this study referred to occupational profile as promoting resilience, one family in particular had experienced the complete opposite. One of the lesbian mothers from Family E stated that their sexual orientation had made it especially hard to expand her business and retain clients. As lesbian mothers who both specialise in the field of children (educational and medical) it is rather disturbing that these mothers described open discrimination towards them as professionals dealing with children. In cases in which the parents allowed these two women to interact with their children, the parents often made ignorant comments/explanations to their children in an attempt to clear up confusion (such as the quotation below follow). This is a clear indication of how misinformed society often is about the concepts of sex, sexuality and gender:

Fam E

“It’s ok for [lesbian mom 1 and lesbian mom 2] to be together because [lesbian mom 1] is really a boy”

Family E further shared that, in most cases, parents were unsure about how to explain the lesbian mothers’ family set up to their children and, thus, they either avoided using their services completely or, at the very least, requested that the two lesbian mothers not be in the room together when dealing with their children. Family F also explained that lesbian friends of theirs were completely closeted at work as a result of their fear of discrimination and occupational “suicide”. Examples such as these highlight the internal struggle for GLPFs who contend with disclosure on a daily basis. Although incidences such as those described above leave me feeling exasperated, I cannot negate the fact that a major theme in this study with regard to occupational profile was one of

resilience and, therefore, I will continue to discuss the positive effects of exposure in the workplace. I will, however, refer back to these negative incidences in a later discussion.

It may be that position at work or nature of employment impacts significantly on resilience in the case of GLPFs. Verbakel (2013) found that the occupational attainments of partnered gay men and partnered lesbian women were often impressive. In this study Family F made specific reference to their need to excel, stating:

Fam F – 1:20:150-153:

“I look back and see that I am actually successful and then I realise that it is ok to be gay, you know, because everyone thinks , if you are gay you are going to be a washout ... you have to first make something of yourself so that people can have respect for you”

A respectable position at work enables positive self-evaluation of the part of the individual concerned, even in the face of contradictory heteronormative messages while it may also be serve as a strong motivating factor for coming ‘out’ to colleagues. As Family C and Family D explained, in some cases acceptance is implied due to the nature of the job:

Fam C – 1:2:20-21:

“Due to our work I think we are more acceptable because, as it is, people don’t really voice their opinion when they are on the receiving end of medical care”

Fam D – 1:1:4-8:

“... we are definitely part of the community ... and have made very good friends within the estate ... [partner] is the manager of the estate we live in”

As indicated above Family C stated specifically that their position as medical service providers in times of emergency ensured that society did not openly discriminate against them or verbalise their opinions of GLPFs in public. Although they described their acceptance as ‘forced’, almost obligatory, and that they are unsure about what was said behind their backs, they did feel more resilient in view of the fact that they did not have to endure any confrontations or obvious judgement about their family setting at work. Family D described how their position in the estate, among other things, had also contributed to their feeling accepted. Family F described their position at work as playing a role in their acceptance. However, they experienced their acceptance as genuine in nature and not only related to their occupational profile:

Fam F – 1:23:184-188:

“We are very happy at work, it is our business [owners] ... people are very fond of me and [partner]”

As regards to the participants’ statements on occupational profile and subsequent resilience, it must also be said that workplace policies play a significant role. Although these policies are reserved for a later discussion (see section on macro level themes), I feel compelled to refer to them at this point in view of the nature of systemic interaction. Eliason et al. (2011) confirm that non-discriminatory and diversity enhancing workplace policies would help to create a positive workplace climate for LGBTQ individuals. Both Family F and Family J confirmed the existence of such a work climate, stating:

Fam F – 1:16:118:

“I worked in the bank, the banking industry was, at least, very accommodating”

Fam J – 1:4:32-36:

“... my colleagues gave me the confidence to tell them about my situation. I was so relieved that they handled it so well and that they treated me just the same as any of their other colleagues. It is wonderful to be able to speak about my husband and daughter and to know they do not judge me.”

Eliason et al. (2011) indicated that many workplaces lacked such policies and that this, in turn, resulted in sexual minority staff members feeling excluded and unsafe. They also stated that friendly and accepting interaction with co-workers sets a standard for the acceptance of diversity. Allport (1954) also referred to a culture of acceptance by stating that contact between various in-groups would lead to institutionalised support and the perception of common interests and equal status which, in turn, fosters in common humanity. Workplace non-discriminatory policies have been linked with higher disclosure rates, improved positive social relationships with colleagues and increased job satisfaction (Griffith & Hebl, 2002; Rostosky & Riggle, 2002). However, Ferfolja (2010) states that internal policies often force sexual minority employees to hide their sexual orientation or result in their experiencing harassment. However, she highlights that this harassment does not silence the targets of such behaviour but increases resilience in that it demonstrates the power and agency which challenge the dominant heteronormative discourse in society.

An understanding the dominant discourse of heteronormativity is, therefore, crucial to explaining resilience in GLPFs. The dominant heteronormative discourses are often strongly intertwined with the geographical context in which they occur and, thus, when one explores sense of belonging it is essential that one is cognisant of the broader society in which the GLPF is situated.

(d) Sense of belonging infused through relationships with society at large (including geographical context and extended family members)

When ones explore relationships with society at large, one ventures once again into the realm of belonging. For the purpose of this discussion, society at large includes the members of the broader society whom the GLPFs encounter in their daily interactions even less directly, as well as extended family members and geographical context. Broader society, geographical context as well as extended family members may serve as buffers against adversity, support in times of challenge and social platforms for acceptance. It was clear from the participants' responses that, for GLPFs, these factors may be both protective as well as disruptive in terms of fostering resilience:

MVF – 1:11:147/1:12:155:

“Another difficulty was that I ‘lost’ my dad, brother, sister-in-law and their kids in the process...said he [brother] can’t even sit at the same table as us because we are sinning – my dad then also fell back on his old beliefs” and “Being gay or lesbian is frowned upon by society, having a child, I suppose, confuses them even more”

The above quotation highlights the tangled web of interrelated issues with regard to GLPFs and broader society. For example, the always to be expected reference to God and sin framed the context of this specific family's loss of their extended family members. In South Africa, specifically, the cultural belief system has been framed and constructed by the heteronormative religious discourse over the years with these frames of reference being passed on from one generation to the next. It is these belief systems that have, for years, hindered the exposure of broader society to GLPFs and to gay and lesbian individuals in general. The influence of the prevailing cultural belief system in South Africa with regard to GLPFs is reserved for a later discussion. However, the result of this belief system limiting society's exposure to gay and lesbian individuals in general is relevant at this point. The MVF and Family C stated:

MVF – 1:21:239-240:

“I suppose they still see a family as a husband and a wife with the man at the head, making the money and they support the family, look after the children etc.”

Fam C – 1:7:47:

“Society does not know how to treat us, and it’s unnecessary. Our preferences in life does not differ [from the heterosexual person]”

The data from this study indicates that the lack of exposure to the gay and lesbian subculture appears to result in GLPFs being misunderstood and misconstrued by society. Society’s skewed presentation of gay and lesbian individuals, in turn, often impacts on the extended family members’ acceptance or rejection of their gay and lesbian family members and children. As early as 1986, Wood (cited in Rosen & Kuehlwein, 1996) made reference to the internalisations of the social representations of what we ‘ought to experience’ and that this ultimately shapes what we do and how we do it. In this regard, convincing one’s extended family that one’s sexual orientation and subsequent family is morally acceptable is clearly difficult against the backdrop of an omnipresent heteronormative society. The MVF explained how important it is to gay and lesbian individuals that their parents accept and embrace who they are and that this makes rejection all the more difficult to handle:

MVF – 1:7:98-103/2:18:35-37:

“... he said that if your parents accept and support your being gay and support and accept your relationship/marriage [family] then it does not matter what society thinks, you feel good and content”

Although South Africa is a country in which diversity is supposed to be celebrated and protected, it would, nevertheless, seem that a lack of acceptance of gay and lesbian individuals is widespread (Morrison & Reddy, 2013). The South African climate towards gay and lesbian individuals is “at best intolerant and at worst openly hostile” and seems to be shaped through “cultural taboos, morality and hetero-patriarchal sensitivities” (Morrison & Reddy, 2013, p. 23). Lubbe (2008) confirms that the invisibility of GLPFs in institutions outside of the family contributes to their stigmatisation as being different. Various families in this study reiterated this assertion by explaining how they had lost ties with extended family members as a result of their inability to prove themselves as a valid family. Family E confirmed this by saying:

Fam E – 2:1:2:

“... that’s the one thing all GLPFs have in common. Rejection from some or all of their family members”

Family A highlighted similar events and described their experience as equally upsetting:

Fam A – 1:15:145-146:

“Yes, my mom chased me away. She hit me with her fist ... said she’ll never agree with my [our] lifestyle”

However, despite the above descriptions of troubling family relationships and severed family ties, many of the participants in this study commented on the protective nature of their relationships with extended family members. The MVF, who had suffered deeply as a result of their relationship with extended family members pointed out that they still continued to find a huge amount of strength through the extended family relationship with one of their mother:

MVF –1:7:103-104:

“other than friends, we also had certain family members who really made it easier for us and who supported us ... I can highlight my mother as my pillar of strength and support”

Other families also confirmed the protective nature of their relationship ties with extended family members:

Fam A – 2:3:18:

“Friends, supportive family and the media has helped us to cope”

Fam D – 1:3:20-21:

“Our friends and family (extended and close) really serve as a valuable support structure for us. Both our sets of parents have accepted us unconditionally”

Fam E – 2:1:19:

“Fortunately my brother and extended family have always been supportive ...”

Fam F – 1:11-13:94-99:

“[partner’s] mom also plays a very important role. They call her grandma ... his brother’s one sister, she and her husband, are like a mother and father figure to them”

There is extensive literature that confirms the supportive role of society and the extended family in fostering resilience in families in general (Benzies & Mychasiuk, 2009; Bhana & Bachoo, 2011; Black & Lobo, 2008; Haliwell & Putnam, 2004; Walsh,

2003) but also with regard to GLPFs (Griffiths & Pooley, 2011; Lubbe & Kruger, 2012; Titlestadt & Pooley, 2014). In the light of the comments cited above, I feel comfortable in acknowledging relationships with extended family members as both a risk and a protective factor in fostering resilience.

As regards geographical context, it was interesting to find that the participant families from smaller towns had struggled as much as the participant families from the bigger, urban areas in demanding acknowledgement from extended family members and society at large. Nel (2005) argues that the most visible and vocal component of the South African LGBT community comprises mainly white, affluent males. However, this is not a true reflection of the South African LGBT community as a whole as it would appear that, in reality, the majority of the South African LGBT community is still made up of predominantly black and economically disadvantaged individuals. In South Africa there are no “gay ghettos” such as are found in many metropolitan cities in the developed countries, for example San Francisco and New York. In addition, the LGBT community in South Africa is said to be “notoriously uncohesive politically” (Cameron, 1993, p. 451).

The study found that the participants experienced significantly more acceptance from society in the modern metropolitan cities as compared to the smaller towns and, as a result, they often felt more resilient when visiting such areas. The literature often refers to the effect of geographical location and psychological resilience. Swarr (2009) specifically explored same-sex relationships in South Africa and pointed out the difference involved in finding acceptance in the rural areas as compared to the urban areas, stating that it appeared that the rural areas struggled to accept sexual diversity. She referred to gay and lesbian individuals being labelled as “stabane” which, in rural South African language, implies “hermaphrodite” thus having both male and female physical parts. International literature has also questioned how place of residence impacts on the well-being of gay and lesbian individuals. It is interesting to note that, although they typically receive less support from others, the gay and lesbian individuals living in rural areas does not fare significantly better than those living in urban areas (Wienke & Hill, 2013). In South Africa, it would appear that living in Cape Town seemingly increases resilience as Cape Town has been dubbed the “gay friendly city”. With regard to geographical context, Montini (2000) explains that, in the main, gay and lesbian individuals are comfortable acknowledging a person’s same-sex orientation in a visible and well-developed gay community. Participant Family F in this study confirmed

how geographical context affected GLPFs when they explained their choice to get married in Cape Town although they lived residing in Gauteng:

Fam F – 1:32:291-294:

“The venue where we are getting married is very excited because they have done a lesbian wedding before, but they have never done a gay couple. We are their first gay couple and they are very excited about it ... people in the Cape is just different”

It is clear that residing in a smaller town in South Africa, as compared to a metropolitan city such as Cape Town, also has implications for resilience. The MVF in this study explained that it is more difficult to develop resilience if, in a small town, you feel as if everyone else in society is continuously watching you and focusing on your every move. They said:

MVF– 2:11:129-132:

“... you can't blow your nose without someone knowing or hearing about it ... you can pretty much feel it when you are not wanted or frowned upon in this town”

They expanded on this assertion by explaining the context about the towns' exposure to gay and lesbian individuals:

MVF – 1:22:258/2:22:286:

“... we are the first [lesbian] couple in this town to have a kid at school, we are the first to get married in this town, etc. Taking all our experiences and observations into consideration it is just understandable that they would not have enough information about gay people, relationships or families”

Family E confirmed:

Fam E – 2:2:23:

“Local welfare seems to have no knowledge of any LGBT people in the area, although they are here”

Family E's statement above clearly indicates the need for and importance of local LGBT organisations providing settings in which members may 'belong'. LGBT organisations provide their members with the opportunity to their consolidate identity and to explore their feelings through the strength of unity (Nel, 2005).

Ward et al. (2010) further explain the issue of geographical context by referring to Simon, a gay man from Soweto (a township in Gauteng, South Africa), and how he had to

cope with his sexuality being rationalised as a “bewitchedment” to enable society to create a space for his gay identity in the traditional Xhosa culture. In short, both local and international literature confirms that community and cultural levels may either foster or hinder resilience. However, in this study, not one of the families indicated that their geographical location of residence had fostered their resilience in any way. Accordingly, in the context of this study, geographical location was not defined as a protective factor with regard to resilience.

Once again, it is not possible to separate the extended family members and society at large from the geographical contexts that shape their relationships with their gay and lesbian family members and which, in turn, influence the societal perception of GLPFs. As mentioned before, society influences this perception in a significant way. The participants in this study also mentioned how society perceived GLPFs. The MVF as well as Family C and Family J had the following to say:

MVF – 1:22:258:

“... I’m sure it’s also due to previous stereotyping by thinking their children are not safe around gays or they are not safe around us because we might try to get involved with them or issues like that -- and that is so far from the truth”

Fam C – 1:5:37-38:

“It is definitely more difficult to be gay in society with a child. People look at the child through a magnifying glass ...”

Fam J – 2:6:36-38:

“... My daughter also needs to have the best opportunities, have the best behaviour, be the best in school and participate in ALL activities [their emphasis] ...”

The above quotations of Family C and Family J confirm the findings of research conducted by Crouch, Waters, McNair, Power, Davis and Van Mourik (2014) and which seem to be especially true in respect of gay men. Family A explained their interpretation of the societal perception of gay men raising children:

Fam A – 3:4:17-18:

“I think that more people are of the opinion that two men can’t have a motherly influence on a child and, thus, they are more judgemental towards men with kids”

The assumed gendered nature of family, as referred to by Family A above, leads on to the next level of societal perceptions, namely, with regard to gendered roles. It would

appear that society is unable to undo the gendered ideations of the roles and scripts of what is generally regarded as “motherly and fatherly”. The visibility of GLPFs is challenging the dominant discourses about gender (Bernstein & Reimann, 2001). A study on lesbian mothers’ negotiation of the institutionalised understandings of gender within the family (Dalton & Bielby, 2000) found that lesbian mothers drew on gendered scripts in order to construct themselves as two-parent families. However, they also appeared to challenge the fundamental, implicit heteronormative assumptions. Although the gendered assumptions of family are enmeshed in our cultural belief system (the topic is reserved for a discussion on the macro level), it the constant awareness of difference that this gendered assumptions enforces that is worthy of mention sat this point. The families confirmed that they were constantly aware of their imposed “otherness”. This awareness was described by Families E, F and J as follows:

Fam E – 2:3:33:

“... even now at the ages of 26 years and 22 years old, they [sons] are treated differently when people find out their mother is a lesbian”

Fam F – 1:35:313-315:

“It’s not nice walking in a mall knowing you can’t hold your partner’s hand ... it’s that awareness [that you don’t want to elicit a reaction from others] the whole time ...”

Fam J – 1:2:8-10:

“We would love to attend a ‘normal’ church ... it will confirm to our daughter that we are a ‘normal’ family, part of ‘normal’ society”

The emergence of GLPFs has indicated a huge historical shift (Weston, 1991) and yet, despite their increasing visibility, GLPFs are still experiencing the stigma of being ‘not-normal’ (Goffman, 1963; Walsh, 2003). Family H described their ongoing effort to claim validation:

Fam H – 1:3-4:14-21:

“... isolation, being seen as less ... to have to come out and validate your family unit, over and over every day. The assumptions are always heteronormative and any new person you meet means another occasion for judgement resulting in anything from acceptance to aversion”

According to Okun (1996), contextual considerations formulate ‘normal’ as it is socially constructed and it is not possible to understand these contextual considerations outside of context. Thus, sociocultural context is pivotal to both familial-wellbeing and societal

discrimination of minority families. As mentioned before, society often prescribes perceptions and reactions towards gay and lesbian parenting. These prescriptions are inevitably linked to gender and sexuality. In order to channel this constant awareness of difference, Wells (1997) encourages GLPFs to embrace their inherent difference instead of trying to normalise their family context.¹³ As mentioned previously, as a strategy of assimilation normalisation poses the risk of decontextualising and desexualising GLPFs and this, in turn, counteracts transformation and the acknowledgement of diversity (Clarke, 2002; Savin-Williams & Esterberg, 2000).

The need issue of normalisation links conceptually to the macro level themes of laws and policies. These are discussed in the next section.

5.2.4 MACRO LEVEL THEMES

A macro-system may be defined as a cultural blueprint of the context under study (Bronfenbrenner, 1979; Hong & Espelage, 2012), in this case the GLPF. The macro level encompasses, among others, cultural customs, values, shared beliefs, norms and laws. Macro systems implicitly influence all the other interactions between the various levels of society and, therefore, it is undeniable that they exert a massive influence on the social structures at the micro-, meso- and exo levels.

For the purpose of this study, the macro level themes will include issues relating the regulatory sphere of South Africa and which, as the outermost level of the GLPF, influence the process of impacting on family resilience in various positive and negative ways. This level corresponds with Oswald and Holman's (2013, p. 196) description of 'distal community manifestations' which they define as including legal codes, political affiliations, economic and social service infrastructure, and religious/moral tones.

5.2.4.1 Overarching macro level theme: (Un)conditional acceptance

In 1993 South Africa became the first national jurisdiction worldwide to explicitly claim constitutional protection for gay and lesbian individuals (Lind, 2005). According to the Constitution, no person shall be discriminated against based on race, gender, sex, ethnic or social origin, colour, sexual orientation, age, disability, religion, conscience, belief, culture or language (Davies, 2012; Lind, 2005). Thus, post-1994 law in South Africa stipulates 'queer' as a productive and affirmative subject (Reddy, 2006). Although it is a

¹³ Please refer to the assimilation debate in the literature review of this study for additional information on normalisation.

fact that, in South Africa, gay and lesbian individuals are protected by law, it would, nevertheless, seem that the exact same law that emphasises anti-discriminatory acts against ‘otherness’ reinforces otherness by putting laws in place to protect the “others”. The MVF explained this sentiment:

MVF - 3:2:7-11:

“One thing though, why should we need or have laws that are different to the heterosexual person or couple? Fighting for laws to protect us makes us “different” from the norm and this is not exactly what freedom is. Yes, we have laws that allow us to be protected, to be married to the person we want to be married to, to have children as we wish and which, in a general sense, is great and I am thankful for this. But this law is not in all its truth friendly”

The inherent message and the need expressed in the above quotation are clearly evident. It is clear from the quotation that the MVF feels conflicted as regards the laws that provide protection to GLPFs. Although thankful for the legal protection, GLPFs in South Africa, as indicated above by the MVF, seem to feel they are conditionally accepted as their sexual orientation still places them in a position which *requires* protection. Therefore, two significant concepts lie at the centre of the macro level theme, namely, protection versus empowerment. The macro level theme of this study is contextually bound to South Africa specifically in view of the role of the ‘law’ on this systemic level. Accordingly, this section involves an immediate jump to the master voice aroma of protection versus empowerment (including its implicit *infusions* through constitutional laws and institutional policies as well as the overarching cultural belief system in terms of which the South African Constitution is framed).

5.2.4.2 Master voice aroma: Protection versus Empowerment

Accessible resources, legal recognition and social policy support are pivotal in fostering resilience (Canvin et al., 2009; Power et al., 2010; McConnell, Savage & Breitkreuz, 2014). Unfortunately, it would seem that gay and lesbian individuals seem do not always have the luxury of receiving the same fair degree of legal and institutional support as their heterosexual counterparts. Historically, the institution of ‘family’ has evolved from a core heterosexual-two-parent family to now include diverse definitions of what a family comprises. Although the social construction of family has created space for heteronormative other families such as the GLPFs, diverse families continue to experience their otherness through the legal construction of family in terms of which rights, resources and power are, in the main, still unequivocally attributed. With regard

to sexuality and rights in South Africa, Sanger and Sanger (2013) state that the “regulation of sexualities through entrenched colonial discourses should not be seen as an isolated site of oppression” (p. 53). They go on to say that these (sexuality and rights) should rather be understood as closely connected to the hegemonies of other control systems. The MVF indicated how the law does not necessarily eliminate contextual discrimination when they explained their frustration with the hegemony of social institutions, such as the church:

MVF – 3:2-3:11-20:

“To get married, we need to find someone who is willing to marry us. This means that, if all the people who are legally allowed to marry us have to stand together and refuse to marry us, we won’t be able to get married. This is because they are just as protected by law not to marry us if they so wish ... [it is] exactly what we went through. There are no churches in [town] that would marry us ... because we are a lesbian couple. They had no problem marrying us until they found out we were lesbian. And so the law stopped protecting us and worked against us.”

The issue that emerges clearly from the above quotation is that of empowerment. The MVF appeared to be angered at the fact that the South African Constitution does not empower sexual minorities, despite the fact that it does provide them with protection. Empowerment involves the subjective sense of enhanced control over one’s life through the ability to express opinion and mobilise change (Rissel, 1994, cited in Nel, 2005). It is, clear from the above quotation that GLPFs, such as the MVF, do not feel empowered at all as, although they are afforded legal protection, they have little control over how the law is implemented, who chooses to implement it and the contexts in which it is implemented. This complicated relationship came to the fore in the first *infusion theme*, namely, constitutional law and institutional policies.

(e) (Un)conditional acceptance infused through constitutional laws and institutional policies

The acknowledgement by GLPFs that the South African Constitution provides protection through rights was unanimous and is worthy of mention. The participant families explained:

MVF – 3:1:5-6:

“... we have a foot to stand on which is better than what some people have to go through elsewhere. Without these laws we would have to either live lives we don't wish or be forced in other directions out of fear”

Fam E – 2:3:34:

“...the Constitution is fantastic in regard to not allowing discrimination of any kind”

Although the participant families did not seem to feel that the constitutional protection they enjoyed had empowered them to any great extent, the dominant theme with regard to constitutional protection was positive and seemed to foster resilience in many spheres. The incongruity between empowerment and protection seemed to manifest the institutional level:

Fam F – 1:35:310-311:

“I think on ground level it [institutional laws and policies] is still an issue. With the constitution on top there are rights but the way they [institutions] orientate themselves, definitely not”

Thus, in their quotation above Family F described how they perceived there to be incongruity between empowerment and protection by stating that they did not feel the constitution was always implemented in a fair way. Although this study was conducted using a South African population, the sentiments of social policy support with regard to resilience in GLPFs are emphasised in international literature (Black & Lobo, 2008; Canvin et al., 2009; Power et al., 2010). Cuesta's (2014) research on the stigmatisation of lesbian individuals relates strongly to the above findings on constitutional versus institutional laws and policies. Although Cuesta's (2014) work focused on an international sample group, the pivotal concept of the relation between sexuality and social inclusion may be extended to include culturally diverse groups of stigmatised individuals. Cuesta (2014) claims that sexual rights are rooted in universal human rights such as the dignity, equality and freedom of all human beings. He goes on to say any country that does not acknowledge such rights would be infringing on the full expression and realisation of individuals. Full expression, in this context, may be linked to Rissel's (1994) explanation of empowerment as well as constitutional protection. It is, therefore, clear that, if constitutional laws are to enforce not only protection but also empowerment, the policies for social inclusion should promote recognition and acceptance. I agree with Cuesta (2014) that these policies should create cohesion throughout the various spheres such as the work, social, community and economic

sectors as well as citizenship and participation. In South Africa, in particular, the social inclusion policies do assist in promoting resilience, if and when they are enforced. Family A stated:

Fam A – 3:7:37-38:

“It helps because places of employment cannot discriminate against us. We can be comforted by the fact that [partner] and I are lawfully bound to one another and our kids”

However, sadly it would seem that the dominant theme with regard to the GLPFs’ perception of institutional policies in South Africa is one of passive or indirect discrimination. In contrast to Family A’s assertion that institutional policy does reinforce protection through constitutional guidelines, the majority of the families in this study explained that the lack of inclusive institutional policies had rendered their families invisible and provided no grounds for unconditional acceptance. The invisibility of GLPFs on an institutional level was evident in the GLPFs’ administrative interactions with their children’s schools. They explained:

Fam A – 1:14:133-134:

“We filled in the forms ... it said ‘mother and father’, so then I scratched it out and wrote parent 1 and parent 2”

Fam D – 1:2:14:

“The school forms usually state mother and father, which we change to mother and mother”

Fam F – 1:33:301:

“I scratched it [mother/father] out and just wrote guardian to keep it neutral”

It is, thus, clear that the institutional policies of schools in South Africa do not recognise same-sex parents in their application processes. International research supports these findings (De Palma & Atkinson, 2010), stating that the way in which every day school practices are enforced, such as school records listing ‘mother/father’, should be examined. The reference to the institutional policies within the school context is relevant at this point as these policies are conditioned by broader society and enforced through history (De Palma & Atkinson, 2010), both of which link to macro system influences and cultural belief system dominance. It would seem that the ignorant stance towards sexual diversity in parenthood finds explicit expression in the discriminatory way in which administrative forms are issued in, among others, the schooling system.

Fam E – 2:2:21:

“Constitution needs to be implemented in schools to teach respect for others”

Family H confirmed this sentiment:

Fam H – 1:3:4-7:

“... heteronormative systems, prejudice and homophobia, structural impediments, i.e. paperwork, application forms ...”

Although the GLPFs’ general relationships with the schools seemed to foster resilience, it is clear that, on an institutional policy level, the GLPFs felt invisible. They also expressed a need for unconditional acceptance. The invisibility of the GLPFs on an institutional policy level may be a result of the way in which sexuality is often disregarded as a social phenomenon. Sexuality is not merely natural but it is also a phenomenon of culturally social construction and it is, therefore, subjected to the hegemonies of the predominant discourses (Cuesta, 2014). The predominant heteronormative discourses render gay and lesbian parents invisible through social exclusion with this exclusion and subsequent invisibility resulting in a chain reaction in terms of which non-inclusive policies feed the invisibility and the invisibility feeds the non-inclusive policies (De Palma & Atkinson, 2010). Both the MVF and Family E highlighted their invisibility and the need for education to ensure that GLPFs were socially included in the various different spheres of institutional policies and especially the school policies:

MVF – 1:22:254/2:9:104-106:

“... it is quite clear that the teachers need some education on this” and “... that schools actually would be more sensitive when it comes to topics such as families or mother’s or father’s day”

Fam E – 1:4:14-15/2:2:20-21/1:6:19-22:

“The schools that I have approached on the subject have said that they don’t have ‘people like that here’ ... Awareness must be a priority ... If students and teachers were educated about different families ... they would realise that LGBT exist as normal variations of humanity and would be more accepting”

Sedgwick (1990) and Adams (2011) confirm this chain reaction by stating that, despite mainstream awareness of a same-sex world, gay men are often forced into the closet by their not articulating their sexual identities themselves. This, in turn, disempowers same-sex identities from finding their way into the existing knowledge and discourse on

legitimate social life and, thus, heterosexuality continues to be normalised. De Palma and Atkinson (2010) point out policy and practice need to be reconceptualised to ensure the recognition of institutional heteronormativity so that the discourses sustaining the systematic forms of oppression may be re-examined. According to Kelly (2012), schools should take steps to make alternative discourses on families available through proactive curriculum resources, such as picture books.

In South Africa there is persistent prejudice and violence towards LGBT individuals in schools despite the fact that the constitution protects their rights (Betteridge & Van Djik, 2007). The homophobia related to LGBT people in schools may also affect those from GLPFs and, thus, institutional oppression should be viewed from a systemic institutional perspective framed by cultural bias (De Palma & Atkinson, 2010). The issue of non-inclusive policy clearly extends beyond the school environment as the families in this study indicated obstacles in their negotiations with the government offices of the Department of Internal Affairs as well as other social institutions such as the church:

Fam D – 1:2:12-13:

“The worst we had to cope with was getting both our names on his [son’s] birth certificate as the computer software does not cater for [same sex parent] settings”

MVF – 3:7:48-52:

“...and the laws protecting them [children] and gay parents as a family are not seen as different. We will, however, be testing that theory when it comes to the registration of our child as a lesbian couple and parents”

MVF – 1:10:138-139:

“... they said we are welcome to visit the church but we are not allowed to become members ...”

Fam J – 1:2:7-8:

“We would love to form part of a church that does not only exclusively accommodate gay members”

The relationship between the GLPFs and the church has been reserved for the next section. Religion is implicitly interwoven into our overarching cultural belief system. However, it is relevant to mention in view of its non-inclusive policy which, yet again, disempowers the GLPFs and prevents them from exercising their free will despite their constitutional protection.

Although the families in the study expressed their appreciation of constitutional protection they enjoyed, it would seem that the discrepancy between empowerment and protection is an ongoing challenge and also that creates a need for the acknowledgement of the sexual minority groups. It should be noted, however, that a wide variety of factors influence the empowerment of individuals (Nel, 2005) and that the constitutional law also cannot be held accountable when this does not happen. Aspects such as education, personal growth and awareness all influence the acquisition of power through a critical understanding of the socio-political factors that disempower people. It is interesting to note that Nel (2005) found that only a small number of LGBT individuals in South Africa had participated in the lobbying process with regard to retaining the sexual orientation clause in the final Constitution. This may, be a result of the fact that South Africa is still a relatively new democracy and that many policy-makers as well as citizens are still learning how to make their voices heard (Nel, 2005). However, it may also be that a number of members of the South African LGBT community were either apathetic or unaware of the clause and its implications.

Nevertheless, the question remains as to whether the legalistic lenses through which we perceive and manage our world are the most appropriate with which to address the issues faced by the South African LGBT community? Although the Constitution provides a legal framework that ensures equality for all, much remains to be done to effect change (and resilience) in the actual everyday life of LGBT individuals. Unfortunately, social inclusion and exclusion are ultimately influenced by policies and laws while they are also culturally constructed and imposed on one generation after the other (Cuesta, 2014). It cannot be denied that the South African Constitution finds its roots in an overarching cultural belief system which prescribes appropriate behaviour.

(f) (Un)conditional acceptance infused through the South African cultural belief system

The overarching cultural belief system in South Africa is interwoven with religion and, thus, the GLPFs' relationship with the church finds its place here. The traditional African and Christian values all tend to point in the same direction (Sanders, 1997). Throughout the world religion is often seen as a pivotal predictor of attitudes about same-sex relationships (Adamczyk & Pitt, 2009) although cultural orientation also significantly influences the manner in which religion influences attitudes about same-sex relationships. In South Africa, the discourses on same-sex relationships are both permitting and restraining. Modisane (2014) states that "in South Africa, legislation and

government policies are not enough to deal with the challenge of heterosexism. There has to be an actual culture of inclusion of homosexuals¹⁴” (p. 50). The permitting discourse of same-sex relationships relates to the constitutional democracy while the restraining discourse is rooted in traditions, religion and culture (Reid, 2003).

As mentioned before, in terms of the South African belief system, the church’s acceptance of same-sex relationships is a topic of ongoing discussion.¹⁵ The families explained:

Fam C – 1:4:31-36:

“We both come from Christian homes and are devoted Christians ... but it was a problem when we wanted to enter into marriage because it is apparently against the rules of the church. Our opinion is that the pastor marries many people whose [sin] is unknown to him”

Family H explained that their experiences in/with churches as *“religious prosecution”* (1:3:10). It would appear that not only does the church judge gay and lesbian individuals based on religious belief, but, also, it seems to be a vessel through which heteronormative beliefs are carried on from one generation to the next. For the purpose of this study, I want to narrow the South African belief system down further and highlight the ‘Afrikaans’ sub-culture within the overarching South African belief system. The participants in the study had often referred to this ‘Afrikaans’ sub-culture as an obstacle to resilience. The ‘Afrikaans’ sub-culture is, however, just one of many subcultures in the rainbow nation of South Africa. Accordingly, I must clarify that, in general, in the various different culture groups in South Africa, it would appear that religion is at the root of heteronormativity. However, with the exception of two, all the families in this study came from an Afrikaans background and, thus, I was of the opinion that it would be appropriate to discuss the Afrikaans sub-culture and its influence on resilience in this section. In a broader scope however, the almost culturally “homogenous” sample group did limit the generalisability of this study. This limitation is addressed again in chapter six.

It would seem that the participants had experienced religious, Afrikaans speaking people as more rigid and unaccepting of GLPFs as compared to any other group. In addition, they also seemed to perceive the Afrikaans sub-culture as more restrictive in its understanding of diversity with regard to sexuality. The families often referred to the

¹⁴ The word “homosexuals” have been included in the text as it is directly quoted from the author.

¹⁵ Refer to appendix C for examples of articles

Afrikaans sub-culture and the associated heteronormative cultural beliefs as a risk factor:

MVF – 2:2:12-14/1:7:104:

“Also, with an Afrikaans family background, as we all know it, I knew that, for my family, it was not acceptable ... my mother ... still believes in what her Bible tells her and that it is wrong to be gay ...”

Family F and Family C confirmed that:

Fam F – 3:17:126-128/1:35:316-317:

“... I think it is terrible that you have to, in certain instances, dodge [your sexual orientation], and you know, I link it to the Afrikaans thing because the English are much more ok with it.” and “It [Afrikaans cultural beliefs] is drilled into you, you are so used to it that you can’t do this here or touch me in this way ... stuff like that”

Fam C – 1:2:16-22:

“... it’s a very narrow minded place [town] where everyone thinks their way to heaven is paved. The people there are almost a second ‘7e Laan’¹⁶ where everyone knows everyone. We feel more accepted in a place like Cape Town where you are just another human being”

Gibson et al. (2007) refer to the beliefs and stereotypes in respect of lesbian individuals. They state that, among other negative perceptions, lesbians are generally viewed as sinners. This, in turn, correlates with the historical invisibility and stigmatisation of LGBT individuals as enforced via religious and legal doctrines. Dahl and Galliher (2012) and McQueeney (2003) indicate how a Christian religious background may act as a risk factor by highlighting that it would appear that religious context increases the feelings of inadequacy in LGBTQ individuals. The MVF as well as Family A confirmed feelings of inadequacy arising from their interactions with the Christian belief system:

MVF – 1:8:116:

“... after a few sermons the pastor suddenly ‘worked in’ the gay issue in his sermon ... his answer to the question was that we [church] would love the sin out of them and we were very upset ...”

¹⁶ The reference to 7de Laan is made to emphasise the extremely Afrikaans culture of the town as 7de Laan is a very well known Afrikaans television series.

Fam A – 1:4-6:35-53/3:6:32-36:

“... I didn’t have the right verses [Bible] with me [so I could not defend myself] ... I was scared to be judged ... He [son] was baptised at home ... I moved out of the church now” and “The church hammer on the fact that a family is only a mom and a dad. We’ve wondered how children who are raised by single parents, or grandparents or an aunt feel when they sit in church and hear this”

Gibson et al. (2007) also refer to feelings of religious related guilt and depressive symptoms, both of which were confirmed by the participants in this study:

MVF – 1:8:116-129/1:10:138-139/1:5:52-53:

“it was important for both of us to raise our daughter in a Christian home, to go to church ... they said we are welcome to visit the church but we are not allowed to become members ... we yearned to go to church but every Sunday I came home so depressed and sad that we decided not to go anymore ... I did not have the strength for another experience like that” and “... I suffered from depression...I self-harmed...”

Fam F – 1:9:65-69:

“You get so ‘brainwashed’ with stuff that has to happen in a certain way, in the NG church you have to stand when you sing or sit ... that whole issue is so ingrained into you that, as soon as you see [or do] things differently, your head tells you ‘no, this is wrong, this is not we are used to it”

Family F expanded on the issue of religious-related guilt by explaining that it even affected the people around the GLPFs and not just the GLPFs themselves. They explained how their religious Christian friends had avoided their wedding ceremony although these same friends would visit them at home and share social events with them on a regular basis. Thus, it appears that the religious context of their interaction with Family F at a wedding ceremony had defined such interaction as unacceptable as compared to general social events where religion did not play a pivotal role. Family F seemed shocked and confused by their friends’ selective decision as to when and where interaction with them as a gay couple would be appropriate:

Fam F – 1:29-30:267-277:

“She said that her relationship with God is in a good place and that she does not want to jeopardise it [by attending the wedding] ... But we have been friends for 16 years! We visit back and forth at each other’s houses?! ... I feel betrayed ... We invited them to attend, not condone it ... is God going to punish you for attending a gay wedding? That is a bit farfetched!”

Family F's experience as described above is linked directly to Gibson et al.'s (2012) fourth concept of social strain as a result of friends and family being religiously active. MVF confirmed:

MVF – 1:11-12:48-54:

“... it turned out to be a [extended] family break-up ... My dad loved my ex-husband as his own son and this made it hard for him to accept that he would never get to hunt or braai with him again”

Fam E – 1:3-4:9-14:

“Lack of acceptance from churches is a huge [risk] factor ... Churches cause division and expect family members to disown/reject/abandon homosexual youngsters and homosexual adults”

Experiences such as these highlight Drescher's (2007) description of the subtle moral condemnations as regards loving the sinner but hating the sin. Davies (2012) confirms that churches have often been the source of humiliation and condemnation for gay and lesbian individuals. The majority of religions classify same-sex behaviour as both ungodly and tainted (Yip, 2005). In addition, regular contact with religious people and religious literature often fosters heteronormative attitudes and may even influence less religious people to become anti-homosexual (Moore & Vanneman, 2003, Olson, Cadge, & Harrison, 2006). International research confirms that it would seem that both black and white lesbian and gay individuals are wedged between the prevailing Christian culture and the gay sub-cultures (McQueeney, 2003). At present, however, the forms of prejudice against LGBT individuals are perceived as spontaneous and, thus, as running through the 'social fabric' of society and difficult to identify as they are unnoticed by most who subscribe to them (Cuesta, 2014, p. 79). Family E then pointed out how the church could act as protective measure in promoting resilience by stating:

Fam E – 1:6:24-25:

“Churches that are inclusive would also be of moral and spiritual support to GLPFs and be able to counsel and guide them when they face victimisation”

Sadly, however, it would seem that the church rejects GLPFs instead of protecting and supporting them. As a result of the GLPFs' experiences with churches, gay friendly churches that accommodate and accept LGBTQ (and other diverse) individuals have come to be regarded as havens where GLPFs are able to freely express and fulfil their religious needs. However, there is still a limited number of these churches. Davies

(2012) also refers to the joint actions of gay and lesbian individuals to establish communities where they may affirm their identity and create a sense of belonging. However, the families in this study also confirmed Davies' (2012) notion that many gay and lesbian individuals distance themselves from organised religion as a result of their fear of discrimination and the emotional suffering caused by religious condemnation.

The results in this study did not indicate the cultural belief system in South Africa as a protective factor, especially as regards to the strong influence of the Christian religious discourse on homosexuality. This correlates strongly with the African belief in the “un-Africaness”¹⁷ of same-sex sexual orientation (Roberts & Reddy, 2008). In view of its implicit relation to social justice, this leads us straight into the next section on the chrono level factors that influence resilience in GLPFs.

5.2.5 CHRONO LEVEL THEMES

The chrono level in bio-ecological systems theory speaks to the dimension of time. The dimension of time relates to the development in the lived events of the individual but also in the environment (Hong & Espelage, 2012, Hong et al., 2011). As mentioned before, very few studies have been conducted on the link between resilience and socio-historical dimensions (Schoon, 2006). It is important to take into account the influence of socio-historical context on resilience in a minority group such as the GLPFs. Nevertheless, it was difficult to make solid inferences about resilience in GLPFs over time on the basis of the findings of this study and a longitudinal study may provide much more detailed information. However, in line with Zetterqvist's (2006) construction of open time narratives together with Morson's (1994) multiple time narratives the concept of shadows of time became apparent through some of the participant families' responses. The concept of backshadowing (past events), forshadowing (events to be determined by destiny) and shideshadowing (pointing out events that could have happened) are all ways in which narratives are reconstructed by the participants. One such example is the way in which the MVF employed sideshadowing in order to open up alternative narratives that may have been possible as opposed to their lived lives and reality, thereby focusing on individual choice and agency. In this regard, it does seem that life changes, such as having children, increased the resilience in GLPFs as such life changes often force social interaction with several spheres of society. The MVF explained:

¹⁷ The participants in this study were mainly Caucasian and, therefore, the “un-Africaness” discussion with regard to this study will not be expanded on at this point.

MVF – 1:14-15:173-176:

“However, I do think it can also make it easier when you have children. If it were only the two of us we would not have been so involved in the community and interacted with other families who have children as we do now with [daughter] at school. This ‘forces’ people to get to know us better and see that we actually lead a normal life”

However, in view of the fact that all of the families who participated in this study already had children at the onset of the study, I am hesitant to frame ‘having children’ has a life change in the context of this study. Instead, I opted to focus on a more existential and less tangible level and, therefore, this section includes the participant families’ expressed *reflections on, need for and belief in* transformation as a chrono level dimension of time. The way in which these chrono-level reflections, needs and beliefs influence resilience is, thus, less palpable while they are, in fact, actually rooted in the participants’ resilience and, thus, they flow from the concept under study. Nevertheless, this feeds back into resilience as the belief in a just society increases a sense of hope and well-being. In view of its existential characteristic, this section were not infused by any themes but, instead, it focused on one overarching chrono level theme, social justice, as presented by the master voice family’s belief in transformation. Thus, this section presents all the information related to the families’ reflections on, need for and beliefs in transformation as a means to social justice. Transformation over time is not merely geared towards adaptation as its radical objective is to enhance well-being in the face of both future and present risk and, thus, it includes progressive change and development (Keck & Sakdapolrak, 2013).

5.2.5.1 Overarching chrono level theme: Social justice through transformation

Social justice may be defined as the *“distribution of wealth, opportunities and privileges within a society”*. Consequently, it requires individuality to give way to the struggle for social justice. Transformation, on the other hand, refers to marked change in form, nature or appearance (www.oxforddictionaries.com). Rawls (2003) refer to social justice and its link to human rights, claiming that in a just world all members of society will have, among others, equal opportunity to participate in the community as well as the right to marry and have a family. Miller (2003) states that social justice is a social virtue and that it requires everyone to treat others as equals. Social justice is therefore equated with the notion of equal opportunity in society (Robinson & Scherlen, 2009). Thus, social justice through transformation, with regard to the context of this study, refers to the fact that transformation is not only seen as the vehicle through which social justice would be mobilised but it would

also signify the existence of a just society in which all individuals, irrespective of sexual orientation and identified gender, would be treated equally by others. Therefore, the notion of ‘transformability’ refers to the system’s ability to change steady, “untenable” social structures into new ones that may address issues at the “heart of developmental discourse, such as equality, justice and human rights” (Keck & Sakdapolrak, 2013, p. 7). Sexual citizenship, as a “new form of citizenship”, has, over the past decades, increased the interest in the challenges to citizenship and social justice faced by lesbian, gay, bisexual, transgender and intersex individuals (Potgieter & Reygan, 2012, p. 39).

In line with Zetterqvist’s (2004) notion that time can also be opened up by picturing the future, many of the participants in this study verbalised their hope in the transformation of heteronormativity into a more inclusive society that would both enable agency and also encourage them to feel and to be more resilient and more ‘normal’ (their word choice). The MVF explained this hope:

MVF – 2:12:137-139:

“It will be a place where we can be ourselves without laws to enable us to be ‘normal’”

So, how does or how will transformation and the subsequent resilience of GLPFs present itself over time? Since the decriminalisation of homosexuality in 1994 in South Africa, queer identity has found a space in which to develop recognition and inclusion. This development is a precondition for equal membership of a socially just society (Reddy, 2006). With reference to the above quote of the MVF, it is clear that policy change lies at the heart of social justice for the GLPFs in this study. In view of the fact that resilience is not merely a trait but also a process (Laub & Sampson, 2003, Schoon, 2006; Ungar, 2008), it is understandable that both personal and contextual factors will influence resilience and that changes in the actors that influence resilience such as exclusive policies cannot be held solely accountable. This characteristic of resilience also highlights the importance of population diversity in a study like this as people from different cultural groups and contexts experience and interact differently with their environment. In this regard, Lorenz (2010) points out that people’s ability to cope and adjust to threats is partly determined by their personal endowments and willingness to invest in adaptive measures and partly by the societal factors that limit and promote the accessibility of the resources required to become part of the decision making process. Thus, resilience involves an interchange between social structures and the agency of those social actors who are involved (in the case the GLPFs) and one cannot be held accountable for the other. Transformation is, thus, greatly influenced by people’s

participative abilities to mobilise assets and support from the broader socio political arena (Lorenz, 2010). In my opinion, the mobilising of such assets often proves to be challenging for the minority groups in society, for example, GLPFs, as it is the exact same socio-political arena from which resources should be tapped, that restricts the minority groups' participation in the first place. The participatory ability of minority groups in society is, thus, strongly limited by their (more often than not) limited social capital in society. Social relations and social network structures play a key role in fostering resilience through transformation (Keck & Sakdapolrak, 2013). However, the families in this study repeatedly pointed out how a lack of social capital stemming from exclusive policies had hindered their resilience. It is, thus, obvious why their participation in the transformative processes may be lacking or why they may be hesitant to engage in transformative activities. Family E explained their view as it related specifically to their experiences with the church policies that infringed on the GLPFs' participatory powers and rights to access:

Fam E – 2:3:39-40:

“Churches and their ministers need to be held accountable to the law and prohibited from saying ‘God says’ or ‘the Bible says’ in relation to GLPFs. The country has to uphold the Constitution and enforce its principles”

Issues of access give rise to questions related to equity, justice and power (Keck & Sakdapolrak, 2013). Galvovic et al. (2003, cited in Keck & Sakdapolrak, 2013) argue that resilience at one level of the community does not necessarily imply resilience at another level. This proved to be true for the participants in this study as they communicated a sense of belonging in many different spheres of society and, yet, they felt disempowered at the chrono level. It would appear that the inequality as experienced by the GLPFs is an implicit part of the social fabric of society and that it presents itself in various ways:

MVF – 2:9:104-106:

“... that I could form part of a church, that schools would be more sensitive when it comes to topics such as families, mother’s day, father’s day etc.”

Fam H – 1:6:43-45:

“We would have choices like any other family”

Fam J – Informal conversation via email:

“In Utopia it [policy forms] would read: ‘parent/guardian 1 and parent/guardian 2, identified gender, identified race or nationality”

Family J's quotation above clearly highlights the institutional processes that silently and, in the main, unintentionally reproduce inequality (Boesten & Wilding, 2014). Fraser (1995/2003) argues that recognition is socially rooted in society's institutions. She argues that, through social construction, minority groups are assigned characteristics by the dominant groups within a culture and which devalue or misrecognise them and which assign to them in a relative standing within society. In turn this facilitates social injustice through a status order of domination and subordination rather than the recognition of peers who are all free to participate equally in society. Family E confirmed their experience of their subordinate standing in society. They acknowledged how they desired transformation through educating society about their family structure and which may lead to social change that promoted acceptance and fostered resilience:

Fam E – 2:3:45-46:

"In fairness, the law cannot make people kind or open minded, or accepting, or understanding. That power lies within the individual. As a community we can only educate those around us, and hope that they make better choices when they are better informed"

In contrast to society offering unequal space for GLPFs to participate in everyday life, May (2011) proposes that the self and society stand in a reciprocal relationship and, thus, every day practices are regulated and creative and capable of generating social transformation. Family E above reiterated this sentiment when they cited their belief in social transformation through a reciprocal effort on the part of both GLPFs and society in informing and educating. Nevertheless, it is not possible to predict social transformation as it is the result of individuals responding to new situations in unpredictable ways (Bourdieu, 1979) It is, however, important to understand the GLPFs' positioning of their everyday and personal life. According to May (2011), everyday life refers to the interactions of social actors (in this case the GLPFs) with existing social structures, while personal life refers to the complex and interrelated spheres of human life which are connected to other people as well as their culturally and socially embedded characteristics. Personal life, in this regard, corresponds with the chrono level factors that influence resilience as it focuses on life projects and, therefore, it portrays motion in people's lives. Both personal and everyday life resonate with a sense of belonging in individuals and encompass a emotional component of feeling at home as well as a political element of claiming space and acknowledgment (Bell, 1999; Miller, 2003). Tilley (1994) and Leach (2002) argue that, when one

identifies with a place, one introjects the environment while simultaneously projecting oneself into the surroundings, thus reading oneself into the external world. It is, therefore, understandable that GLPFs would find transformation desirable in view of the fact that these families cope in a predominantly heteronormative world in which they have to make sense of themselves as well as their environments which are often challenging. As regards their environment, the families in this study claimed that they wished for transformation which would define the heteronormative discourses in an alternative way. Family A stated:

Fam A – fieldnotes:

“It would be a world where people would understand that love does not have a gender”

Family F indicated that their perception of their environment was one of motion, thus confirming that change has taken place. However, they also expressed a need for more progressive transformation away from the heteronormative discourse towards unequivocal acceptance:

Fam F – 1:18:129-131/1:23:190-191:

“It would be better ... it’s not yet what it is supposed to be, but we have hope”

Transformation in the sense of belonging, as expressed in the quotations cited above, may thus be described as “a trajectory through time and space” (de Certeau, 1984, cited in May, 2011, p. 372) and, therefore, it finds its place on the chono level.

It is interesting to note that May (2011) proposes that ‘not belonging’ may open up new possibilities of creating alternative pathways to transformation. Stychin (1997) confirms that the questioning of their belonging by minority groups such as non-heterosexuals may be “conducive to the development of deep diversity where identities are not predetermined or totalising but rather flexible and open to multiple belongings” (pp. 33–35). Resistance in the form of ‘not belonging’ may lead to the advancement of narratives on identity and which may, in turn, result in new and different social positions (Duggan, 1993) – the ultimate need in respect of social transformation as expressed by the families in this study. Therefore, ‘not belonging’ does not necessarily imply negative consequences just as belonging does not purely imply an ideal state (May, 2011).

Despite the GLPFs’ need for and belief in transformation, history has shown that, in all likelihood, resistance and justice would be addressed through the expansion of human

rights (Beyrer, 2012). Thus, resilience should be viewed as a concept ‘in the making’ (Keck & Sakdapolrak, 2013) and should be explored as a product of the interaction between global and local forces (Olwig, 2012). In conclusion, it would appear that, overall, the families in this study have experienced a positive change during the years preceding the study but what was most significant was their ability to continue to hope for transformation. In most cases the families acknowledged that they had faced challenges but they expressed optimism about the possibility of future change. In my opinion this is a characteristic of their resilience.

5.2.6 A FRAMEWORK FOR GLPF RESILIENCE: THE RESILIENCE WHEEL

The following visual framework depicts the protective factors (as highlighted by the themes, aromas and infusions in the study) that promote resilience in gay and lesbian parent families in South Africa.

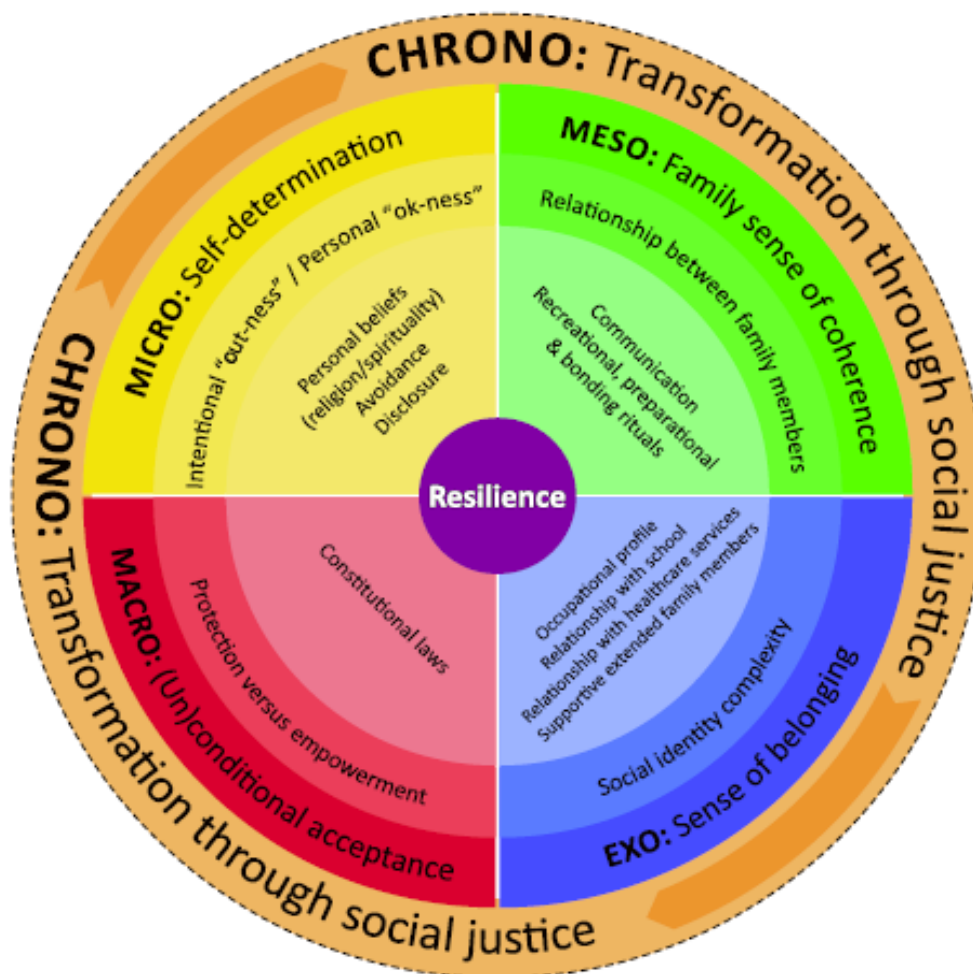


Figure 5.1: Resilience wheel

The resilience wheel has been specifically designed to represent each of the different levels of the GLPFs' interaction with society. The different levels are situated next to each other in the form of quadrants in an attempt to represent their interconnections, with the chrono level embracing all the factors described in the resilience wheel. With regard to their relatedness, each of the levels described in the resilience wheel framework is subject to change over time and, therefore, it was fitting to place all the foregoing factors in a "chrono system embrace". The various levels each represent the overarching level theme as described in the previous section. This is followed by the master voice aromas and subsequent infusions that, ultimately, penetrated the pivotal concept of resilience as it is situated in the middle of the resilience wheel.

The resilience framework depicted above describes how the micro level factors that influence resilience are strongly related to the theme of self-determination, thus highlighting the need on the part of each of the individual family members to make their families "work". The study found that intentional 'outness' and personal 'ok-ness' on the part of the individual family members (parents) encouraged their self-determination. It was through the gay and lesbian parents' disclosure management (either avoidance or direct disclosure) and personal beliefs (religion/spirituality) that they exhibited their 'outness' and 'ok-ness' at being part of a GLPF.

On the meso level it came to the fore that family sense of coherence is essential in order to foster resilience. It was clear that a healthy relationship between family members encourages family sense of coherence in that it fosters open and honest communication. In addition, resilience is also generated by the GLPFs' recreational, preparational and bonding rituals in terms of which family members spend time together in order to develop and grow as a family and this, in turn, makes them stronger as a unit.

With regard to the exo level, the GLPFs' resilience is strongly related to the theme of a sense of belonging and refers to their inevitable social identity complexity through which they identify themselves as being more than just gay or lesbian parents. This may take form through the GLPFs' interactions with various social institutions in society, including their relationships with the health care systems, their relationships with their children's schools, their occupational profile as well as their relationships with supportive, extended family members.

On a broader level, the GLPFs seemed to foster their resilience through a constant awareness of difference. This awareness of difference appears to be rooted in a

heteronormative society's limited exposure to gay and lesbian individuals. Although one may acknowledge a constant awareness of difference as a possible obstacle to equitable treatment, it seems that 'difference' is what has resulted in constitutional laws being put in place in order to ensure protection. Therefore, without the acknowledgement of difference, these laws would probably not have been put in place. It would, thus, seem that a constant awareness of difference in this instance has actually provided a means of protection and given rise to subsequent resilience. The GLPFs appear to experience a sense of 'conditional' acceptance in this regard and, although 'conditional' acceptance is not ideal, it does provide protection in terms of law.

The resilience wheel presented above encompasses the chrono level theme which encapsulates transformation through social justice. It emerged that that GLPFs' hopes for a more equitable future are embedded in their belief in a just world. It is this optimism and personal engagement with society that GLPFs use to foster resilience. By being part of, and believing in transformation, the GLPFs also foster a sense of belonging which, in turn, opens up new pathways for change.

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CHAPTER 6

CONCLUSIONS, CONTRIBUTIONS AND LIMITATIONS OF RESEARCH RESULTS AND RECOMMENDATIONS FOR FUTURE RESEARCH

This chapter contains an overview of the research results in a tabular format. This is followed by an explanation of the study's contribution to the existing body of knowledge on GLPF resilience. The limitations of the study are then addressed and recommendations for future research suggested.

6.1 SUMMARY OF THE RESEARCH RESULTS

The following bullet points aim to provide a quick overview¹⁸ of the research results:

- ❖ Micro-level factors facilitating resilience
 - Overarching micro theme: Self-determination
 - Master voice aroma: Intentional 'outness' and personal 'ok-ness'
 - Infused through: Avoidance and direct disclosure

- ❖ Meso-level factors facilitating resilience
 - Overarching meso theme: Family sense of coherence
 - Master voice aroma: Relationship between family members
 - Infused through: Communication and recreational, preparational and bonding rituals.

- ❖ Exo-level factors facilitating resilience
 - Overarching exo theme: Sense of belonging
 - Master voice aroma: Social identity complexity
 - Infused through: Relationships with healthcare services, relationships with school, occupational profile and relationships with supportive, extended family members

- ❖ Macro-level factors facilitating resilience
 - Overarching macro theme: (Un)conditional acceptance

¹⁸ Please refer back to chapter 5 for a detailed explanation of the bulleted list

- Master voice aroma: Protection versus empowerment
- Infused through: Constitutional laws

❖ Chrono-level factors facilitating resilience

- Overarching chrono-level theme: Social justice through transformation
- Master voice aroma: (Un)conditional acceptance
- Infused through: n/a

6.2 CONTRIBUTIONS TO EXISTING BODY OF KNOWLEDGE

As mentioned earlier, the results of this study not only contribute to Positive Psychology and Systems theory's current understandings of resilience, but also expand on the existing body of knowledge in the field of LGBTQ Psychology.

LGBTQ Psychology is a branch of psychology that investigates the experiences of LGBTQ people, actively taking into account that people's lives differ in many ways. This branch of psychology seeks to challenge inequity and prejudice against LGBTQ people and, in this way, to be of benefit to the LGBTQ community in terms of research (Clarke et al., 2010). LGBTQ Psychology also explores issues such as identity development, parenting, families and coming out specifically as these issues pertain to LGBTQ individuals.

As regards LGBTQ Psychology, it is anticipated that the findings of this study will contribute to the literature on same-sex parented families by extending the existing body of knowledge on the issue of resilience in GLPFs. More specifically, the study highlights these families' functioning and reciprocal relationship with society. In addition, the study contributed information on GLPFs' resilience while taking into account broader political and social issues (i.e. power struggles, essentialism-constructionism binary, liberalism, positive social change etc).

In view of the fact that this study was guided by the social constructionist epistemology while LGBTQ Psychology is dominated primarily by essentialism, it is believed that this research study will encourage critical debate surrounding material reality (i.e. biology) and how this material reality functions in relation to our own functional constructions of what reality entails. Although essentialism has tended to dominate LGBTQ Psychology, social constructionism has proved to be an important strand of contemporary LGBTQ Psychology. By including polarities such as constructionism and essentialism, positive psychology and criticism, the research results from this study

may establish 'intersectional theorising' (Clarke et al. p 49), and generate debates that may lead to future research.

LGBTQ Psychology emphasises positive change. This study aimed to give GLPFs a voice by giving them an opportunity to take part in and listen to their own voices during the interviews. It is hoped that this will, in turn, strengthen their rightful place in society and, in particular, encourage more studies that create and highlight positive experiences for GLPFs and potential future social change.

Patterson and Riskind (2010) claim that GLPF formations may be unfamiliar to family scholars. It is, thus, hoped that this study will contribute to research focused on the functioning and processes involved in the same-sex parented family. In short, society needs more diverse representations of families and experiences (Morrison, Lynch & Reddy, 2015) while a study such as this exposes GLPFs as functional units in society. This study has contributed an insight into the barriers that GLPFs are currently experiencing in society as well as contributing information on the psychosocial support that they may need in order to function more resiliently.

In addition, this study contributes to the existing literature on the interconnectedness of subsystems and the way in which reciprocal relationships influence resilience in minority families. The study further contributes by highlighting the way in which reciprocal relationships between the family and society promotes familial function as the study describes the functioning of minority families over a broad range of societal interactions. This study found a possible link between self-determination and family sense of coherence and this could prove to be a valuable addition to emerging family research.

6.3 LIMITATIONS OF THE RESEARCH RESULTS

In view of the restricted number of families who participated in this study, one of the most prominent limitations in this study is the challenge as regards generalising the results. Research into the resilience of GLPFs may benefit from data generated across different ethnicities, including a variety of sexual orientations and covering a wider variety of cultural/geographical contexts so as to provide more information on the similarities and differences in the factors that promote resilience. This study relied on the accounts of ten, white GLPFs from relatively similar, middle class, urban areas (with the exception of one Indian parent). A greater number of participant families would

generate more diverse data sets and may also indicate differences between rural and urban families.

The question as to the reason why GLPFs remain so invisible remains unanswered. The richness of the data generated from the various families in this study differed significantly from one family to the next. This, in turn, highlights the need for diversity and quantity in a study such as this. In addition, the study was limited to the South African context. With regard to the major role that laws and policies appear to play in the resilience of GLPFs, one has to question how protective factors in various countries throughout the world may influence resilience.

For the purpose of this study I specifically selected the parents of GLPFs as participants as I believed they would be able to offer valuable descriptive and explorative information from an adult perspective. However, the impact of adversity and resilience on GLPFs would be better understood if the families as a whole participated as such research would include the views of minor (and other) children living in the families. Although this would present a set of new challenges with regard to ethical considerations, it would undoubtedly add value in the form of additional data sources which may increase the richness and meaning of the information generated. Nevertheless, it must also be noted that interviewing the parents, as the main social actors with regard to extensive societal interaction, proved to be an important backdrop against which the 'whole' familial interaction with society could be better understood.

Another limitation and one which is fairly common in qualitative research in general, is that of memory. In view of the fact that the participants in this study had to rely on memory in the retelling of their stories, one has to question the effect of hindsight bias on the authenticity of the information shared. The quality of what is being shared depends on each participant's ability to reflect and report on his/her personal experiences. Nevertheless, the limitation which arises from dealing with memory is what makes qualitative research so interesting in that the stories which are told are always being interpreted and re-interpreted. Since memory is constructed, the aim of qualitative research is to make sense of other's lives as well as how the researchers engage with their participants' perceptions of their lives (Lubbe, 2005). It is, thus, vital to acknowledge that, in such instances, there is no absolute truth (Reissmann, 1993). It must, therefore, be acknowledged that the emotional and ethical relationship with participants is important as it shape the research text (Clandinin & Connelly, 1994).

In addition, my subjective interpretation of the transcribed interviews as well as the visual data may be perceived as a limitation of the study. However, I believe that the ongoing member checking as well as the numerous conversations with my study leader minimised the impact of such a possibility.

Another limitation is that not all levels in this study were equally represented in terms of resilience as some levels were represented by smaller data sets. This once again is due to the small participant number. In this study, media material (such as news paper articles) was employed as part of fieldnotes for the purpose of reflexivity. The use of media material/articles as part of data analysis may have added valuable information in instances where smaller data sets were lacking.

6.4 RECOMMENDATIONS

With regard to **future research**, it is suggested that future research studies should explore gay and lesbian parents and children from a variety of cultural backgrounds, sexual orientations and socio-economical classes.

In addition, studies should explore resilience in GLPFs over a longer period of time. Longitudinal studies may shed more light on the protective factors that influence resilience. More specifically, longitudinal studies may also shed light on how accounts of resilience either remain constant and/or fluctuate over time. This may provide valuable information, especially with regard to the chrono level factors that may influence resilience in GLPFs.

In addition to the above recommendations, embarking on large scale, mixed method studies with regard to resilience in GLPFs may allow in depth investigation as well as increasing the number of participants, thus improving both the quantity and quality of the research findings. Analysing media materials, such as newspaper articles, may add valuable information to data collected from the participants.

Future research in South Africa specifically may benefit from exploring rural GLPFs as these families face an entirely different set of different challenges as regards available resources and support. With South Africa's history of segregation and discrimination, the study of minority families in rural settings may be exceptionally informative and revealing.

In addition, future studies could focus on resilience in minority families by analysing the risk factors more methodically and thereby shifting the focus from a strengths perspective to a needs perspective. This may enable researchers to address the barriers to resilience and identify the resources required to mobilise more effectively.

This study highlighted the interconnectedness between subsystems and how this relates to resilience. Future research may also explore the dynamic and reciprocal relationship between subsystems and minority family resilience. It may also be beneficial to explore if (and how) resilience may differ in lesbian parented families as compared to gay, bisexual etc. parented families.

Furthermore, I am of the opinion that my working assumption with regard to the resilience of GLPFs' resilience being related to social identity complexity and subsequent sense of belonging warrants further exploration. Future studies could, thus, explore the influence of sense of belonging in minority families in the positive formation of resilience in more depth. It may also be beneficial to explore the possible link between the cognitive reappraisal on the part of family members and its influence on resilience.

Recommendations **for practice** relate strongly to the recommendations mentioned above as it would surely benefit institutions (such as schools, universities, places of employment, health care services, etc) to engage directly with GLPFs in an attempt to improve service delivery and ensure equitable treatment.

Health care workers, such as nurses, medical doctors, psychologists and social work professionals, may come to a better understanding of the needs and challenges of GLPFs if they understood how factors promote and hinder resilience in minority families such as GLPFs. Information on minority family health related needs should be made available to these professionals and also how to adequately address these needs in practice. This study has provided an insight into the type of psychosocial support expected by GLPFs.

Policy makers should include considerations that guide, support and formalise issues pertaining to GLPF resilience in an attempt to develop improved non-discriminatory and inclusive policies.

Based on the outcomes of this study, I recommended that social institutions, and specifically churches, revisit the implementation of non-discriminatory policies and consider the positive effect that inclusive policies may have on the well-being of GLPFs.

With regard to **training**, it is recommended that the training content in various spheres (i.e. teaching, healthcare, occupational) include content related to diversity and, specifically, gender and sexual diversity as to prepare professionals to provide a standardised level of quality service to all the families and individuals they may encounter. Inclusive training content may also identify possible barriers to fair practices as well as highlight the resources available to improve service delivery.

In addition, teachers, healthcare workers and other experts in the helping professions may benefit from theoretical training in resilience related approaches as well as positive psychology in order to help them to support minority families. Moreover, the usefulness of exploring resilience from a bio-ecological perspective with regard to minority families may have positive implications for the training of those in the helping profession.

This study has highlighted the potential benefit of GLPFs acting as research partners in future studies. Accordingly, it is suggested that research institutions should establish partnerships with willing GLPFs as well as other minority families in order to enrich future studies, data generation and findings.

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Additional references: www.Oxforddictionaries.com.

APPENDICES

APPENDIX A

Transcribed interviews

APPENDIX B

Fieldnotes

APPENDIX C

Articles as part of fieldnotes

APPENDIX D

Visual data

APPENDIX E

Data analysis/theme table

APPENDIX F

Visual representation of TI (Thematic Infusion)

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