Coming Out Experiences Related to Improved Well-Being Among Religious Sexual and Gender Minorities

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COMING OUT EXPERIENCES RELATED TO IMPROVED WELL-BEING AMONG

RELIGIOUS SEXUAL AND GENDER MINORITIES

by

Samuel Skidmore

A dissertation submitted in partial fulfillment
of the requirements for the degree

of

DOCTOR OF PHILOSOPHY

in

Psychology

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UTAH STATE UNIVERSITY
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ABSTRACT

Coming Out Experiences Related to Improved Well-being Among Religious Sexual and

Gender Minorities

by

Samuel Skidmore, Doctor of Philosophy

Utah State University, 2024

Major Professor: Dr. G. Tyler Lefevor
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Sexual and gender minorities (SGMs; individuals who experience some degree of same-sex attraction, who engage in some degree of same-sex sexual behavior, and/or whose gender identity does not correspond with that expected from their sex assigned at birth) often choose to disclose their minoritized identity to others. These "coming out" conversations are often stressful but have the potential to lead to improved connection and well-being. SGMs in religious communities may be less likely to perceive coming out conversations as positive, particularly given the higher likelihood of negative reactions to their coming out. Utilizing mixed methods, the following three studies explore specific ways in which SGMs may approach coming out and others may respond to their coming out in ways that are perceived as beneficial, as well as how these behaviors relate to well-being.

The first study utilized interviews across a sample of 25 current and former Latter-day Saint SGMs regarding positive coming out experiences. Using thematic analysis, five actions emerged relating to how SGMs beneficially approached coming out (being selective, increasing self-understanding/-acceptance, preparing before, decreasing

pressure on self, and validating the relationship with the person they came out to) and six responses from others that made the coming out conversations feel positive (showing loving acceptance, utilizing empathic listening skills, offering and expressing support, celebrating, affirming the relationship has not changed, and advocating).

The second and third studies utilized samples of SGMs from varying religions—including no religion—to develop and validate two measures based off these identified themes. The Coming Out Vigilance measure (COV) evidenced convergent, divergent, and incremental validity, whereas the Positive Coming Out Responses measure (PCOR) evidenced convergent, divergent, and incremental validity, and was found to be conceptually unrelated to general outness. Although the COV did not moderate the relationship between outness and well-being, it related to higher levels of well-being, particularly in the domains of positive emotions, engagement, meaning, and accomplishment. Finally, the PCOR did not mediate the relationship between outness and well-being, although it did relate to higher levels across all domains of well-being. Implications for research, practice, and community intervention are discussed.

(180 pages)

PUBLIC ABSTRACT

Coming Out Experiences Related to Improved Well-being Among Religious Sexual and

Gender Minorities

Samuel Skidmore

Sexual and gender minorities (SGMs; individuals who identify as LGBTQ+ and/or who do not identify as cisgender and heterosexual) often come out to others as a way to improve their connections, feel more authentic, and improve their mental health. However, coming out is often a frightening and stress-inducing process, and SGMs' overall well-being may depend on how they approach these conversations and how others respond. In an effort to better understand these experiences and to provide a scientifically-validated "guide" to SGMs and those to whom they come out, we conducted three studies that examine when coming out goes well and how these factors relate to SGMs' well-being.

The first study focused on interviews with SGMs who are or were members of the Church of Jesus Christ of Latter-day Saints, a religion in which coming out conversations are sometimes met with rejection. Participants indicated what they did to feel better about their coming out conversations, as well as how others responded that made them feel more positive about the conversations. The second study utilized these themes to develop two scales (Coming Out Vigilance and Positive Coming Out Responses) so that we could measure the frequency with which SGMs employ these approaches and perceive these positive responses from others when coming out. The third study then used these two

measures with SGMs across a variety of religious traditions (including no religious affiliation) to examine how these approaches and responses relate to SGMs' well-being. We found that these two measures are appropriately valid to use and that both the identified approaches and responses to SGMs' coming out relate to improvements in well-being. It is our hope that SGMs, their support systems, mental health practitioners, and community leaders utilize these findings to make coming out experiences less stressful and enhance the well-being of SGMs.

ACKNOWLEDGMENTS

I intentionally left this section until the very end, as I wanted to be able to spend time in reflecting on all of the incredible people who have helped me not only with this project, but with graduate school in general. In many ways, I feel that my focus on, love for, and dedication to social justice and flourishing stem from the people around me.

Primarily, I extend my deepest thanks to Dr. Tyler Lefevor, who has served as my primary mentor. It feels incredibly cheesy, but I feel that for whatever reason, we are often led to the people in life that we need the most. Although my path to graduate school and to Utah State University has been untraditional, I am immensely grateful to have had the opportunity to work with and learn from you. I have grown from you in innumerable ways and I cannot imagine going through this phase of life without you as my constant guide, cheerleader, and friend. Thank you for providing a space that was consistently filled with affirmation, humour, openness, and passion for the work that we do. I have always had such a deep desire to better understand and aid people, and through you I have learned how to do so. I will forever be grateful for these years and look forward to continuing to do this work together (although I am also insanely grateful I will not be data cleaning as much anymore).

I am also grateful for my committee members, Drs. Sara Boghosian, Melanie Domenech Rodríguez, Davey Erekson, and Renee Galliher. I recognize that reading through these giant documents is not the most exciting task in the world, so I appreciate your time and support. Above this, I am so grateful to have mentors from whom I have learned so much, both from the work you do and your general demeanor and attitude

toward others. I feel lucky to be surrounded by such a compassionate group with a clear dedication to social justice and equity.

I would be remiss if I didn't acknowledge my wonderful friends, cohort-mates, and family members. Your endless support, empathy, dedication, and good-naturedness have somehow kept me sane through this wacky process. In reflecting on where I have been in life compared to where I am now, I contribute so much of my growth and development to the people around me, who constantly uplift and teach through example. No matter the distance, I am forever grateful every day for your kindness, acceptance, and love. Thank you!

Samuel Skidmore

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CHAPTER I

INTRODUCTION

Sexual minorities (individuals who experience some degree of same-sex attraction and/or who consistently engage in some degree of same-sex sexual behavior; Lefevor, Sorrell et al., 2019) and gender minorities (individuals whose gender identity does not correspond with that expected from their sex assigned at birth; Toomey et al., 2018) are consistently faced with pressures to fit heterosexual and binary gender roles. As a result of these pressures, sexual and gender minorities (SGMs) often choose to conceal their sexual and/or gender identity from others. Such concealment efforts are typically undertaken to protect oneself from potential judgments, harassment, and violence from others; however, identity concealment empirically tends to do the opposite, relating to an increase in ill-being (e.g., depression, anxiety, suicidal thoughts and behaviors) and a decrease in well-being (e.g., social connection, life satisfaction; Huang & Chan, 2022; Livingston et al., 2020; Meyer, 2003). Consequently, many SGMs choose to come out (disclose their sexual and/or gender identity to others; Guittar, 2013) as a means to cope with these insidious outcomes and to break free of the pressures to fit into a hetero- and cisnormative world (Serano, 2007).

Coming out experiences are typically viewed as positive events that lead to enhanced well-being and social support. Generally, coming out has been linked to outcomes such as increased self-acceptance, authenticity, and sense of personal growth (Solomon et al., 2015). When coming out occurs in situations where SGMs feel safe (e.g., around supportive family and friends), SGMs also tend to report more self-esteem and less depression and anger than when they feel unsafe (Legate et al., 2012). Most

frequently, these outcomes have been studied in the context of coming out conversations between SGMs and their parents and siblings (e.g., Baiocco et al., 2015; Rosati et al., 2020), although such positive outcomes have also been seen when SGMs come out to friends, coworkers, or community members (Riggle et al., 2014; Willoughby et al., 2008).

Despite the potential for positive outcomes associated with coming out, coming out is often more complex for religious SGMs, particularly religious SGMs from traditions that do not affirm same-sex sexual behaviors or gender expansive expression. Coming out for religious SGMs may be stressful in that religious SGMs are more likely to receive negative reactions to their coming out than those outside such religious contexts (Dahl & Galliher, 2012). Indeed, coming out may be particularly harmful when negatively received by friends and family, which occurs more often for SGMs who affiliate with such religious traditions (Baiocco et al., 2020; Rosati et al., 2020; Snapp et al., 2015). SGMs in environments where they are uncertain if others will respond positively to them may also experience increased stress and anxiety in preparing to come out (Keating & Muller, 2019; Timmins et al., 2017), with many ultimately choosing to continue to conceal their identity (Duncan et al., 2019).

Although the predominant narrative around coming out suggests that disclosing one's identity ultimately has a positive impact on mental health, it may not be the coming out itself but the ways in which SGMs approach coming out and the responses they receive that impact mental health (Keating & Muller, 2019; Ryan et al., 2015). Given this nuance, SGMs may greatly benefit from understanding the pros and cons of coming out to various people in various settings. The studies presented here elucidate ways in which

religious SGMs perceive positive coming out experiences, as well as the effects of vigilant approaches and positive responses to coming out.

The Adverse Effects of Concealment for SGMs

SGMs often choose to conceal their sexual and/or gender identity from others in an effort to avoid minority stressors and to increase their chances of fitting in a hetero- and cisnormative world (Newheiser et al., 2017; Riggle et al., 2017). Minority stress theory (Meyer, 2003) posits that SGMs experience stressors that are specific to their sexual/gender identity in addition to general life stressors (e.g., work-related concerns, illness). Such sexual/gender identity-specific stressors include distal stressors ("objective events and conditions"; Meyer, 2003, p. 681; e.g., discrimination, violence) and proximal stressors ("personal processes, which are by definition subjective"; Meyer, 2003, p. 681; e.g., identity concealment, internalized stigma). It appears that SGMs may avoid some degree of distal stress by not coming out, as SGMs who are out are more likely to experience distal stressors than SGMs who are not out (Livingston et al., 2020). Despite this benefit, concealment efforts (i.e., a proximal stressor) often backfire, resulting in a reduced sense of connectedness, greater loneliness, and heightened emotional distress (Kissil & Itzhaky, 2015; Shilo et al., 2016). Identity concealment is thus complicated in that it may work to decrease distal stress *by* increasing proximal stress (Stammwitz & Wessler, 2021).

Despite the potential insidious effects of identity concealment, many SGMs continue to hide their identity from others. These trends appear to be more common among SGMs in more conservative social and religious environments (Shilo et al., 2016). Indeed, over half of SGMs who affiliate with religions that discourage same-sex sexual

behaviors and gender expansive expression conceal their sexual and/or gender identities from their religious community (Jeffries et al., 2014; Shilo et al., 2016; Suen & Chan, 2020). Coming out may be particularly stressful for these SGMs, as they are more likely to report rejection or judgment from those they come out to compared with those who do not affiliate with such religions (Dahl & Galliher, 2012). SGMs who affiliate with religious traditions that discourage same-sex sexual behaviors and gender expansive expression often choose to conceal their identity due to concerns of rejection, fueled by hetero- and cis-normative messaging in religious spaces (Lassiter et al., 2019).

The Church of Jesus Christ of Latter-day Saints (CJCLDS) is an example of a religious tradition in which SGMs often choose to conceal their identities as a means to fit in, avoid distal stressors, and follow religious doctrines. Latter-day Saint (LDS) SGMs are taught that sexual behaviors outside of a marriage between a cisgender man and a cisgender woman are sinful in the eyes of God (CJCLDS, 2017). They are further taught that gender identity is divinely appointed by deity and inextricably linked to sex assigned at birth (CJCLDS, 2021). Additionally, expression of gender is central to the structure of the CJCLDS, as women and men within the religion have specific roles and functions as outlined through the church's doctrines. Failure to adhere to such tenets can result in restriction of membership privileges, including being unable to participate in rituals that are taught as necessary for an individual's salvation (CJCLDS, 2021). Given the context in which LDS SGMs exist, it is unsurprising that many LDS SGMs conceal their identity from their religious community (Lefevor et al., 2020). Although such concealment has the potential to protect SGMs from distal stressors (Giano et al., 2020), it remains linked

to adverse outcomes such as decreased feelings of belonging and increased depression and suicidal ideation (Skidmore et al., 2022b).

How Coming Out Can Affect Religious SGMs

Generally speaking, coming out tends to be undertaken in an effort to counteract the insidious effects of concealment and to improve the mental health and well-being of SGMs. For example, those who conceal their identity may miss out on authentic social connections with others, as well as feel more anxious due to concerns that others will "discover" their minority identity (Corbin et al., 2020; Escher et al., 2018). In moving away from concealment, coming out has been associated with outcomes such as improved romantic relationships, increased authenticity, decreased stereotyping, increased joy/happiness, a sense of wholeness, heightened self-confidence, less distress, and a deeper sense of connection with others (Vaughan & Waehler, 2010).

Religious SGMs face barriers when coming out related to their religious context. Social and contextual variables, such as religious affiliation and engagement, impact the relationship between coming out experiences and associated responses (Rosati et al., 2020). Primarily, religious beliefs that discourage same-sex sexual behaviors or gender expansive expression may deter SGMs from coming out due to personal commitments to abstain from such behaviors and/or fear that others will reject them or make assumptions about them. When coming out is met with rejection, as is common within religious contexts (e.g., Baiocco et al., 2015; Snapp et al., 2015), SGMs report increased depression, loneliness, and isolation, and may be less likely to disclose their identity again in the future (Baiocco et al., 2020; Roasti et al., 2020). Negative coming out experiences may be particularly common among religious SGMs, who are more likely to

report that their coming out was a difficult process and came alongside acceptance concerns and internalized stigma (Fernandes et al., 2021); given that rejection is more common among religious SGMs, many may fear such an experience and thus choose to continue concealing their identity from others. Coming out in religious spaces is also linked to increased discrimination within religious communities (e.g., Rosati et al., 2020; Russell & Fish, 2016). Considering these additional barriers and concerns, it is unsurprising that coming out tends to occur less frequently among religious SGMs.

Though there are undoubtedly additional difficulties associated with coming out as an SGM in religious contexts such as that of the CJCLDS, there remain a variety of benefits to coming out when coming out conversations are perceived as positive. Generally speaking, disclosure provides people with a greater sense of connection and social safety (Ho et al., 2018). Similarly, SGMs benefit from coming out as they may feel free from the weight of having to hide aspects of themselves from those close to them, and may feel more authentic with themselves and those around them (e.g., Vaughan & Waehler, 2010). Coming out has also been linked to higher self-esteem and self-acceptance in addition to an increased sense of personal growth (Solomon et al., 2015), suggesting that coming out conversations that are well-received bolster SGMs' sense of self and identity, and can help lead to growth in other areas. Further, religious sexual minorities who reported feeling comfortable with their sexuality before coming out to their parents noted that they found their disclosure liberating (Perrin-Wallqvist & Lindblom, 2015). These findings add nuance to the prevailing narrative that identity concealment is largely negative, and that outness is largely positive. Given the difficulties associated with outness within religious communities such as the CJCLDS, as well as the

potential benefits when coming out goes well, it may be that the act of coming out is not the main indicator of health, but *how* coming out is both approached and responded.

Given this nuance, religious SGMs may benefit from understanding *how* to approach coming out and in what ways these approaches (and others' responses) relate to well-being. Coming out conversations can be approached in a variety of ways, with some approaches and responses evidencing a higher likelihood of improved well-being than others. Among the general SGM population, understanding why one is coming out also relates to a decrease in depressive symptoms and an increase in self-esteem (Li & Samp, 2019), suggesting that SGMs who understand what they want from coming out conversations and come out several times to several people/groups increase their likelihood of benefiting from their disclosure. SGMs tend to report higher well-being when they are responded to with affirmation, validation, and understanding (Perrin-Wallqvist & Lindblom, 2015). Such positive responses have also been found to increase SGMs' sense of safety, confidence, and connection (van Bergen et al., 2020). Given that religiousness affects SGMs' decisions about whether to come out, who to come out to, and when to come out, as well as how others may respond to an SGM's coming out, elucidating the ways in which coming out among religious SGMs can go well is vital in order to maximize the potential benefits and minimize the potential harms of coming out.

Current Studies

To fill these gaps, I conducted three studies that collectively explored the nuance surrounding how and when coming out can go well for SGMs, particularly religious SGMs. The first study uses a qualitative approach to examine what approaches to coming out LDS SGMs report being helpful for them as well as how they would hope that others

would respond to their coming out. The second study uses the themes identified in the

first study to develop and validate scales that quantify SGMs' hypervigilance in coming

out (Coming Out Vigilance scale) and others' affirming responses to SGMs' coming out

(Positive Coming Out Responses scale). Finally, the third study uses a quantitative

approach to examine how frequently SGMs from various religions participate in vigilant

behaviors when coming out and receive positive responses from others to their coming

out. Additionally, the final study answers the broader research question of *how does*

coming out go well for religious SGMs? by analyzing the ways in which coming out

vigilance and positive responses relate to well-being and minority stressors.

CHAPTER II

STUDY ONE

"I Come Out Because I Love You": Positive Coming Out Experiences among Latter-day Saint Sexual and Gender Minorities

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Abstract

Background: Coming out conversations are pivotal and stressful experiences for sexual and gender minorities (SGMs). Coming out can lead to more affirmation, safety, confidence, and improved relationships. However, adverse coming out experiences can lead to damaged relationships and ostracization, which may be more likely in conservative religious contexts.

Purpose: The purpose of the current study was to explore what leads to positive coming out experiences for SGM members of the Church of Jesus Christ of Latter-day Saints.

Method: A sample of 25 current or former Latter-day Saint (LDS) SGMs participated in semi-structured interviews, which were analyzed using thematic analysis.

Results: Participants reported five actions they did that contributed to a beneficial coming out experience: being selective, increasing self-understanding and acceptance, preparing before, decreasing pressure on self, and validating the relationship with the person they came out to. Participants further reported six responses from others that contributed to a beneficial coming out experience: showing loving acceptance, utilizing empathic listening skills, offering and expressing support, celebrating, affirming that the relationship is not changed, and advocating.

Conclusions and Implications: The present study extends current knowledge on coming out experiences by demonstrating specific beneficial approaches and responses to coming out. Given participants' lack of focus on religiousness in their reports, these findings may be applicable to both religious and nonreligious SGMs. Our findings extend current knowledge on coming out experiences by demonstrating that both SGM approaches and others' responses are critical to creating a more positive coming out conversation. Future

research is needed to understand the efficacy and effects of these coming out approaches and responses.

"I Come Out Because I Love You": Positive Coming Out Experiences among

Latter-day Saint Sexual and Gender Minorities

Sexual minorities (individuals who experience some degree of same-gender attraction, behavior, or identity; Lefevor, Park et al., 2020) and gender minorities (individuals who identify with a gender different than that expected for assigned birth sex; Stryker, 2008) are consistently faced with pressures to fit heterosexual and binary gender roles. Sexual and gender minorities (SGM)s consequently *come out* (i.e., the ongoing act of disclosing one's sexual and/or gender identity to others; Guittar, 2013; Orne, 2012) as a means of expressing their internal experiences of sexuality and gender to others. Coming out can be a pivotal and stressful experience faced by SGMs (Cass, 1979), often accompanied by concerns of minority stressors such as rejection, judgment, or violence (Meyer, 2003). However, through coming out experiences, SGMs may learn to cope with and overcome the adverse effects of stress (Morris et al., 2001). For SGMs, coming out may be a frightening prospect that nevertheless boasts potential benefits.

SGMs' experiences with coming out may vary based on how SGMs approach such conversations and how others respond. Given that coming out is often a personal and impactful process, there are myriad ways for SGMs to approach coming out conversations and equally myriad ways that others respond to coming out conversations. Research has demonstrated that many respond to coming out with distancing or rejecting reactions, which can adversely affect relationships (e.g., Willoughby et al., 2008; van Bergen et al., 2020). Conversely, some respond with affirmation and understanding, often strengthening relationships and helping SGMs experience an increased sense of safety and confidence (Perrin-Wallqvist & Lindblom, 2015; van Bergen et al., 2020). Perhaps

because of the dominant narrative of languishing minority stress within the study of the psychology of sexual orientation and gender diversity (Meyer, 2003), few have examined what constitutes responses of affirmation and understanding and how SGMs and those they come out to may work together to have a more positive coming out experience.

Understanding how to come out "well" may be particularly critical for SGMs in conservative religious contexts. Coming out may be particularly stressful for SGMs raised in religious traditions that discourage same-sex sexual behaviors or gender expansive expressions. SGMs raised in conservative religions may be more likely to receive negative reactions to the coming out process than those outside of conservative religions (Dahl & Galliher, 2012). Indeed, coming out may be particularly harmful when negatively received by close ones, such as friends and family (Baiocco et al., 2020; Rosati et al., 2020). Religious parents of SGMs may also be more likely to respond to their children's coming out with distancing and rejecting behaviors (Baiocco et al., 2015; Snapp et al., 2015).

Difficulties and Benefits of Coming Out to Religious Others

Over half of conservatively religious SGMs conceal their sexual and/or gender identities from their religious community (Jeffries et al., 2014; Shilo et al., 2016; Suen & Chan, 2020). Most often, SGMs conceal their sexual and/or gender identities due to concerns about rejection from others, which are fueled by hetero- and cis-normative messaging in religious spaces (Lassiter et al., 2019). Concealment may lead SGMs to have less intimacy in relationships (Itzhaky & Kissil, 2015) and may make it more difficult for SGMs to feel comfortable in religious spaces or with religious people because they continue to wonder if they would be rejected if their sexual orientation or

gender identity were known. Ultimately, this religiously motivated concealment may lead to greater loneliness, depression, substance abuse, and general emotional turmoil (Corbin et al., 2020; Escher et al., 2018; Itzhaky & Kissil, 2015; Shilo et al., 2016). Coming out to others is linked to an increase in minority stressors such as discrimination and internalized stigma (e.g., Russell & Fish, 2016), particularly when coming out to individuals in religions that do not affirm same-gender sexuality or gender expression outside of assigned birth sex (Rosati et al., 2020). It is therefore unsurprising that SGMs are much more likely to conceal their sexual orientation or gender identity if they are religious or spiritual (Kubicek et al., 2009; Lefevor, McGraw et al., 2021; Shilo & Savaya, 2012; Woodyard et al., 2000).

Coming out may be particularly challenging for SGM members of the Church of Jesus Christ of Latter-day Saints (CJCLDS). The CJCLDS is a theologically conservative Christian religion with doctrinal prohibitions of same-sex sexual relationships and gender expression that differs from that expected from assigned birth sex (CJCLDS, 2005). Latter-day Saint (LDS) SGMs are taught that marriage between a man and a woman is ordained of God and essential for achieving the highest degree of salvation in the afterlife. As such, LDS SGMs, alongside other church members, are expected to abstain from any sexual practices outside of marriage between a cisgender man and a cisgender woman. The CJCLDS further espouses that gender is a divine characteristic of eternal identity and purpose (CJCLDS, 2005). Resulting from these beliefs, the CJCLDS discourages gender transitions, seeing them as in opposition to God's plan. Given the CJCLDS's beliefs on sexuality and gender, LDS SGMs may face unique challenges to coming out.

Coming out may still be beneficial for LDS SGMs. Generally, disclosure of personal information can improve well-being and feelings of social support and connection (e.g., Ho et al., 2018). Coming out can also improve SGMs' self-acceptance and ability to cope in times of stress (Vaughn & Waehler, 2010). Additionally, coming out has been linked with a variety of social benefits, including social support and feeling a sense of belongingness with other SGMs (Vaughn & Waehler, 2010). Despite these potential benefits, relatively few studies have examined what coming out looks like for SGMs in religious contexts or how SGMs may navigate coming out successfully. The present study fills this gap by focusing on understanding what happens when coming out goes well in a sample of LDS SGMs**.** More specifically, this study seeks to answer two related questions, "What can LDS SGMs do to facilitate more positive coming out experiences?" and "What can those they come out to do to facilitate more positive coming out experiences?" Findings have the potential to inform religious SGMs and those they come out to of beneficial ways to approach coming out conversations.

Method

Participants and Procedures

In order to help manage potential biases regarding coming out experiences and religiousness, the research team consisted of three intentionally-diverse people who represent a range of identities across gender identity (cisgender man, polygender), sexual identity (gay, queer, bisexual), racial identity (White, Latinx) and religious affiliation (Catholic, Agnostic, LDS). Such intentional diversity was particularly important to help check team members' initial assumptions regarding positive coming out experiences among LDS SGMs, which included assumptions that coming out experiences would be

reported as positive when the topic of religion was avoided and when SGMs and those they come out to focused instead on affirmation and love. Additionally, all members of the research team determined to uphold the American Psychological Association's (APA) stance of working with and respecting the experiences of SGMs (APA, 2009).

The current study was part of a larger study that investigated LDS SGMs' experiences talking with LDS clergy about their sexual orientation and/or gender identity. The present study is unique in purpose from other investigations and analyzes data not analyzed in other publications from this dataset (Levitt et al., 2018). All study procedures were approved by the Utah State University institutional review board before data collection and analysis. Participants were primarily solicited through a comprehensive community sampling approach. Solicitations were posted in relevant social media groups (see Appendix A), and additional participants were recruited from a list of individuals who indicated that they would like to be kept apprised of the research team's continued efforts. Participants were asked to complete a survey screener requesting demographic information and informing interested individuals that participants selected would be part of a 30-minute interview. Over 500 individuals filled out this initial screener survey; of these, 25 participants were purposefully selected that represented a diverse range of identities including gender (man, woman, transman/woman, gender nonbinary), age (18-30, 31-50, 51+) race/ethnicity (White, People of Color), and sexual orientation (gay/lesbian, bisexual/pansexual, asexual). We selected participants in order to have at least three individuals holding each identity within the parentheses above in our final sample. We further attempted to select participants so that roughly half of our sample reported continued engagement with the CJCLDS and half of our sample reported

disengagement with the CJCLDS in order to more accurately get reports of coming out experiences within the religion from those who continue to practice and those who do not. Despite these efforts, our sample remained predominantly White (80%) and young ($M = 36.12$, $SD = 12.95$, Range = 21-67), reflecting the larger (predominantly White) racial/ethnic distribution of LDS individuals. Participants completed the 30-60 minute-long interview and were compensated for their time ($25/participant). Participant demographics for the final sample are presented in *Table 1*.

All interviews were conducted using a 2-question semi-structured interview guide while allowing for follow-up questions: 1) Can you describe a positive experience you had with friends or family in the CJCLDS when you came out to them? and 2) Was there anything that helped make your coming out experience more positive? If so, could you tell me more about it? Due to COVID-19 concerns and to allow for a more geographically diverse sample, all interviews were conducted virtually via Zoom. Interviews were conducted following suggested best practices for phenomenological data collection, with an emphasis on maintaining an open attitude and evoking detailed descriptions of experiences that capture the complexity of participants' lived experiences (Wertz, 2005). Following completion of the interviews, a member of the research team transcribed and input each interview into NVivo electronic software for data analysis.

Table 1

Participant Demographics

Participant	Age	Gender Identity	Sexual Identity	Church Status	Race/Ethnicity
Brenda	34	Ciswoman	Lesbian	Less Active	Hispanic/Latinx
Brian	32	Transman	Heterosexual	Excommunicated	White
Chelsea	31	Ciswoman	Pansexual	Less Active	White
Colleen	48	Ciswoman	Pansexual	Inactive	White
Collin	40	Cisman	Gay	Less Active	Hispanic/Latinx, Native Hawaiian
Dave	26	Cisman	Gay	Active	White
Eric	24	Cisman	Asexual	Less Active	White
Heather	31	Ciswoman	Lesbian	Less Active	White
Helen	21	Ciswoman	Lesbian	Inactive	White
James B.	48	Cisman	Gay	Active	White
James W.	24	Cisman	Gay	Active	White
Jerry C.	59	Cisman	Gay	Active	Asian American
Jerry P.	67	Cisman	Gay	Resigned	White
Kam	22	Cisman	Gay	Less Active	White
Kate	35	Gender Nonbinary	Queer	Less Active	White
Keaton	25	Cisman	Gay	Active	White
Kristen	47	Ciswoman	Bisexual	Excommunicated	White
Kuhaupio	56	Cisman	Bisexual	Active	Hawaiian/Pacific Islander, Black/African American, Asian

Legrande	24	Cisman	Gay	Active	Native Hawaiian/Pacific Islander
Linnea	29	Genderqueer	Pansexual/Queer	Less Active	White
Philippa	30	Ciswoman	Bisexual	Less Active	White
Randall	31	Cisman	Pansexual	Excommunicated	White
Sara	34	Ciswoman	SSA	Active	White
Stanley	56	Cisman	SSA	Active	White
Tyler	29	Cisman	Gay	Less Active	White

Note: Participants were given the option between creating a pseudonym and using their real name; for the sake of protecting the

privacy of participants who chose a pseudonym we do not differentiate between these two groups; SSA = Same-sex attracted

Analysis Plan

  We utilized a six-step approach to analyzing qualitative data described by Braun and Clark (2006). These six steps include becoming familiar with the data, generating initial codes, searching for themes, reviewing themes, defining themes, and writing up the report. To improve the trustworthiness of findings, two independent coders, one auditor, and a systematic consensus-building process of analysis were used (Hill, 2012). The primary coders consisted of one graduate student and one post-bachelor researcher who received training from faculty members in the analytic tasks before beginning the coding process. Coders reviewed various relevant literature and qualitative analysis guides prior to data analysis. The external auditor was a faculty member from a clinical/counseling psychology program who supervised the project and analysis. Feedback was provided from the auditor at each stage of analysis to ensure and enhance reliability of findings.

  The authors identified the main research question that guided the analysis. The two independent coders began data analysis by reading the interview transcripts and making notes of initial analytic observations. Following this, the two coders engaged in an independent process of systematic data coding, identifying features of the data relevant to the broad research questions. The coders took an inductive approach that incorporated empirical observations, seeking patterns, and drawing conclusions. The coders determined to take an essentialist approach to the data by focusing analysis on elucidating individuals' experiences through semantic reports to honor the experiences of participants (e.g., Braun & Clark, 2006; Burr, 2003).

Coders met weekly during the coding process to discuss potential meaningful differences in their interpretation of the data. Each coder was encouraged to take notes on their reactions to the data as they coded, as well as to note any moments in which they felt that their potential biases may have influenced coding. During these meetings, subthemes were ultimately identified and named. The coders re-coded the data with the newly made subthemes to enhance inter-rater reliability. Data saturation occurred after the first 10 interviews, when less than five new codes emerged per interview. All interviews were nonetheless coded, and at the completion of coding, the coders recoded the first ten interviews following to ensure that codes added later were captured in earlier interviews. In a final meeting, the auditor and coders finalized overarching themes and sub-themes as well as identified frequencies of each theme. Following this process of review and refinement, five themes and 20 subthemes were identified as approaches to coming out experiences, and six themes and 21 subthemes were identified as responses of beneficial coming out experiences. Finally, the auditor and coders wrote the manuscript, which included selective data extracts to highlight definitions of themes.

Results

What Can SGMs do to Facilitate a Positive Coming Out Experience?

We found five main themes related to actions that SGMs took that positively influenced their coming out experience with members of the CJCLDS: being selective, increasing self-understanding and acceptance, preparing before, decreasing pressure on self, and validating their relationship with the person they came out to. These approaches are presented in *Table 2*.

Table 2

Main Themes, Frequencies, and Subthemes of Personal Factors

Main Themes (frequencies)	Subthemes
Being Selective (15)	Selective Coming Out
	Choose Trustworthy People
	Come Out When Others are Ready
Increasing Self-Understanding & Acceptance (15)	Sort Out Feelings
	See Self, Not Orientation
	Self-acceptance
	Unapologetic Authenticity
	Be Honest with Yourself
Preparing Before (15)	Gauge Potential Reaction
	Get Support from Therapy
	Rehearse the Conversation
	Expect the Best, Prepare for the Worst
	Choose Setting
Decreasing Pressure on Self (12)	Come Out in Steps
	Come Out in Own Way
	Well-being Separate from Reaction
Validating the Relationship (12)	Give Benefit of the Doubt
	Express Love and Trust
	Physical Affection
	Give Time to Process

Note: $n = 25$

Being Selective

Participants frequently related that their coming out experiences were most positive when they were selective of who they came out to. Many participants spoke about being selective more generally, with many describing centering themselves in not "owing" coming out to anyone. For example, Kuhaupio said, "I don't come out to everyone, I don't think everyone needs to hear it." Randall said, "[It's been positive] realizing that you don't owe it to everybody to have a one-on-one conversation with them about your sex life or your sexual relationships. It doesn't have to mean telling everybody, it's just being you." In addition to being selective more generally, some participants mentioned that they found it helpful to come out to people who they saw as trustworthy and safe. For example, Colleen said, "You do not need to be vulnerable with

people who have not earned your trust. If people haven't earned your trust, there's a reason you're not being vulnerable." Further, James B. reported, "The fact that there had been a relationship established where we could talk openly about issues in general, that helped create an environment where I felt like I could come out." Some participants reported that choosing trustworthy people was necessary for them in order to maintain a sense of safety. Brian illustrated this idea by saying, "I could find out who's going to be supportive of me and who's not. Who do I need to avoid for my own mental health safety?" Finally, participants noted that it was helpful to choose to come out to people when they were prepared to listen. For example, Jerry C. said, "In all my cases, I knew when someone was ready to listen—when people were ready to hear me come out to them." Further, Stanley reported, "I usually just wait until [my children] start bringing up some conversations where they are trying to wonder about the homosexual community, [and then] I share with them."

Increasing Self-Understanding and Acceptance

Participants also reported that they found it beneficial to increase their self-understanding and accept themselves before coming out to others. This theme was manifest in different ways; most commonly, participants shared that they found their coming out experiences to be more positive when they first sorted out their own feelings toward their sexual and/or gender identities. For example, Dave said, "What helped me to feel more comfortable in coming out was having more of my own personal experiences in terms of recognizing how embracing my sexuality actually brought good things into my life." Some participants also reported that seeing themselves as people and not just their sexual and/or gender identities was beneficial for them in navigating their coming out

experiences, as demonstrated by Randall, who said, "Realistically, [my sexual identity] is not that big a part of my life. It's not like I talk about it in every conversation." Participants also noted that accepting themselves was a positive precursor to coming out, such as with Brian: "I think the most positive coming out experience I've had is just learning to be ok with myself." Other participants felt that being unapologetically authentic about who they are was helpful. Philippa demonstrated this by saying, "If you want me to [be the image of a queer person] in your head, I am going to force you to live in the truth of it. If you want me to be a model to you, you're going to get me and not your idea of me." Collin further illustrated this idea by saying, "If you don't like me, I don't care. I'm happy I have this off my shoulders." Finally, participants reported that being honest with themselves helped increase their self-acceptance and made coming out more positive. Some participants found that it took time to be able to be honest with themselves, such as with Eric: "It took me a bit to get to the point where I admitted, 'Okay, I'm asexual.' However, once participants were honest with themselves, they found coming out to be more positive, such as with Kam, who said, "Once I started being more honest, I realized I am living who I want to be."

Preparing Before

In addition to increasing self-understanding and self-acceptance, participants frequently reported that it was helpful for them to prepare before they came out to others. These preparations included a variety of tactics, such as gauging others' potential reactions to their coming out. Chelsea demonstrated preparing before by sharing, "I was anticipating what [my parents] might ask me, or what they might say and how I wanted to react or respond to that. It was really helpful for me to be able to just anticipate those

kinds of things. It helped me find my own voice and learn more about myself in that process." Some participants also prepared to come out by getting support from therapy, such as with Helen, who said, "I was in residential therapy, and we did exposure therapy. For me, that was essentially the building up to coming out to somebody in the church." Linnea also noted, "Therapy has been one of the most helpful things I've done." Other participants reported that rehearsing the potential coming out conversation helped make the actual conversations go better. For example, Philippa shared, "For me, trying to have staged conversations is really helpful." Preparing before having the coming out conversation also entailed expecting the best out of people while also preparing for the worst outcome. James W. demonstrated this tactic by saying, "One thing I've learned in coming out is it's emotionally a lot safer to prepare for the worst." Further, Colleen shared, "The worries and concerns that are going on in your head are likely heavier than what it will actually be like to come out." Finally, some participants prepared for a coming out conversation by selecting an appropriate setting, as illustrated by Keaton: "I think it depends on the person. For my parents, it was important that I did it in person. But I know that it was really good for me to send an email to my grandparents because I don't see them as often as my parents."

Decreasing Pressure on Self

Some participants reported that their coming out experiences were more positive when they were able to decrease pressure on themselves before coming out to others. For many participants, pressure was decreased by coming out to others in steps. Colleen illustrated this by saying, "I have tried to keep it to condensed little things. Don't dump all of it in their laps all at once." Other participants shared that they came out in their own

way, which often entailed not coming out to everybody all at once, casually mentioning

their sexual and/or gender identities, or controlling the pace of their coming out. For

example, Kristen reported, "It somehow just followed the conversation: 'My ex-girlfriend

and I did this.' It wasn't a formal coming out, but just by things I would say, people

would know, and it was never a big deal." Further, Chelsea shared, "I think the important

thing is, as much as you can, [come out] on your own terms." Finally, some participants

reported that they felt less pressure on themselves when they realized that their well-

being was separate from other people's reactions. For example, Heather said, "Before

you tell someone, make sure that your sense of well-being and mental health and safety

don't depend on their reaction." Eric also shared, "Since I've been publicly out, I feel a

lot less scared of any sort of repercussion." Other participants realized that their well-

being was separate from others' reactions by understanding that many people they came

out to did not care about their sexual and/or gender identities. Jerry P. illustrated this

understanding when he said, "Most people I don't think really care if you're gay or not."

Validating the Relationship

Finally, some participants shared that they found their coming out experiences to

be more positive when they validated their relationship with the person or people to

whom they came out. Sometimes this validation was expressed by the participant giving

others the benefit of the doubt. For example, James W. said, "I think it's important for the

person coming out to plan to give people the benefit of the doubt." Eric similarly

reported, "It really gave me some hope that people individually are less judgmental than

the church often seems to be collectively." Other participants validated their relationships

by expressing love and trust to the people they came out to, such as with James B., who

said, "The fact that I would trust and confide in them and express that I could share, I think that helps. It goes over better." Jerry C. also demonstrated this love and trust by sharing, "I come out because I love you. I come out because I trust you. I come out so I can be my real self with you, which means I don't have to pretend to be something that I'm not." Finally, participants shared that they validated their relationship with others by giving them adequate time to process the coming out. Keaton demonstrated giving others time to process by saying, "We can't expect someone in our family to be accepting of everything that's going on in our lives right off the bat, right? It took us a long time to understand where we're going, and how to move forward. We need to give people in our lives at least that much time to understand and be ok with where we're at." Further, Kate shared how they gave others time to process their gender identity: "My mom had a decade's worth of time to figure it out because I came out to her when I was 19. So, by the time I'm really in the trenches and 32, she had been prepared for all that time for that." These various approaches were all shared as methods participants used to validate their relationships with others.

What Can Others do to Facilitate a Positive Coming Out Experience?

We found six main themes related to actions others took that positively influenced an SGM person's coming out experience in context of the CJCLDS: showing loving acceptance, using empathic listening skills, offering and expressing support, celebrating, affirming that the relationship is not changed, and advocating. These factors are presented in *Table 3*.

Table 3

Main Themes, Frequencies, and Subthemes of Others' Factors

Main Themes (frequencies)	Subthemes
Showing Loving Acceptance (23)	Loving Response
	Acceptance
	Care and Concern
Using Empathic Listening Skills (21)	Ask Questions to Understand
	Listen
	Thank for Trusting
	Validation
	Affirm
	Focus on Person, Not Self
Demonstrating Support (20)	Be Supportive
	Offer and Express Support
	Allyship
Celebrating (13)	Express Happiness or Joy
	Be Welcoming
	Connect Them with Other SGMs
	Physical Affection
Affirming the Relationship Is Not Changed (13)	No Change in Relationship
	"Not a Big Deal"
	Normalize
Advocating (6)	Learn or Educate Before
	Advocate

Note: *n* = 25

Showing Loving Acceptance

Participants most frequently reported that they had a positive experience when the people to whom they came out would respond with loving acceptance. Many participants reported instances in which people responded with love to their coming out. For example, Legrande shared a loving response from one of his friends: "[It was positive] having that, 'We love you and all that you are as a person.'" Dave also shared a loving response he received when he first came out to his friend: "He said, 'No matter what you do, no matter what you decide to do, I love you so much.'" Participants also highlighted the importance of others expressing unconditional love. For example, Brian shared, "There are some people that express love and then there are people that express love, but their love is conditional." In addition to these loving responses, participants reported that they

found it positive when they were responded to with acceptance. Sara shared, "If I'm going to [give advice] to somebody, I'd say, 'By the way, just accept me!'" Similarly, Randall said, "My only advice is let them talk. Let them talk about whatever they need to talk about and accept them and give them a hug." Another way that participants reported being responded to with loving acceptance was when others demonstrated their care and concern. Brian illustrated this by saying, "They would constantly check on me. They would text me every day saying, 'How are you doing?'" Heather also said, "And when I would tell someone, it'd be nice when they would say they still care about me."

Using Empathic Listening Skills

Empathic listening responses were reported as the second most frequent positive form of responses. Primary among these responses were others asking questions to better understand the participants' sexual and/or gender identities, as demonstrated by Helen: "I think there are people that know the right kinds of questions to ask. It's helpful when they are asking in order to understand." Further, Sara shared, "I feel like if they don't understand or haven't talked to anybody about [sexual identities], asking questions helps. Just ask instead of assuming." In addition to questions that help others better understand, participants reported that they found it positive when people were willing to listen to them. For example, Tyler said, "Just listening to stories and experiences…that more than anything is helpful." Chelsea further reported, "Listen to what these people are going through and understand that. Listen to the person; that's the best thing you can do." Some participants included that they found it helpful when others would thank them for their trust and openness, as demonstrated by Keaton, who said, "They said, 'Thank you for feeling brave enough to share your feelings with me and to confide in me and that you

would trust me to share your feelings.'" Validation and affirmation were also included as empathic listening skills that improve coming out experiences. Kate shared, "If somebody's asking what my pronouns are, I immediately know you know something about gender. I immediately feel more comfortable with you." Legrande reported, "I think the most wonderful thing about [my coming out] was she just listened and validated." Finally, participants shared that it was positive when others focused on the person coming out and not on themselves, such as with the following story by Chelsea: "She just said, 'This is not about my feelings. This is about you. We're talking about you right now, it's about your feelings.'" Participants noted that empathic listening helped them feel loved and cared for, leading to a more positive coming out experience.

Demonstrating Support

LDS SGMs also reported that they found it beneficial when other people demonstrated and offered support. Most frequently, this theme was told as others showing general support, such as with Eric, who said, "My family has been incredibly supportive of me and now also my little brother." Additionally, Stanley shared, "She was very supportive. I told her in the middle of church discipline, and she was just really supportive." In addition to general support, some participants noted that it was specifically positive when people expressed their support or offered to support them. For example, Helen shared, "She said, 'Look, I'm there for you. I appreciate you telling me and I'm there for you no matter what.'" Linnea also shared, "My main experience with the first bishop after I came out to my whole ward, there wasn't anything beyond we love and support you, which was great." Finally, participants noted that they felt support from others when they expressed or demonstrated their allyship. For example, Kate shared,

"She spent a lot of time learning how to be an ally. She provided me with the resources that I needed as an ally in the church." Further, Jerry P. said, "[My kids] are big proponents of the [LGBTQ+] community. They take my grandkids to the pride parades and make them participate so that they grow up with acceptance and love."

Celebrating

Participants further reported that they found it positive when others would celebrate with them. Sometimes such celebration was reported as the people they came out to expressing happiness or joy, such as with Legrande, who came out to his church congregation and reported, "I was just crowded by [church] members telling me, 'That was so beautiful, that was so amazing, that was wonderful, thank you for sharing.'" Chelsea also said, "She was the first person whose eyes lit up and she said, 'Oh my gosh, that is so great. I'm so excited for you!' You figure it was just the sort of love and support that went without saying…I didn't realize how much I really appreciated and wanted that until she reacted that way." In addition to expressing happiness or joy, others celebrated the coming out by being welcoming. For example, James W. reported, "It was very, 'You're loved, you're welcomed, you're affirmed.'" People were also welcoming of participants' partners, such as with Tyler, who said, "With my family this last Thanksgiving, they let me bring my boyfriend." Some participants reported that others connected them with SGMs, which was a positive experience with them. Brian shared such an experience: "There are people that are super helpful. I actually had a cousin who I didn't know had a transgender sister until I came out." Finally, participants reported that others celebrated the coming out experience by showing physical affection. For example, Kam said, "She just kept hugging me. I knew she wasn't being fake, and I could tell she

was genuinely happy for me." Collin also said, "All she did is she said she loved me. She hugged me and held me, and we cried."

Affirming that the Relationship Is Not Changed

Several participants reported that they found their coming out experiences to be more positive when their relationship with the people they came out to was not changed by coming out. Heather demonstrated this theme by saying, "When I would tell someone, it'd be nice when they would say they still care about [me] and nothing has changed." Helen shared similar sentiments: "He said, 'Look, I'm there for you. I appreciate you telling me. And I'm there for you no matter what.' I had made it very clear I wasn't planning to leave the church at that point, but she said, 'Whatever you decide, I'm there.'" Some participants were more specific in saying that they appreciated when others assured them that their sexual and/or gender identities were not a big deal to them. For example, Sara said, "You say something, and they say, 'Okay, well let's carry on.' They don't look at me differently." James W. also shared how his coming out was not a big deal to his family: "She said, I want to make certain he knows that we love him and that we don't care.'" Finally, some participants reported that it was helpful when others would normalize the coming out experience. Tyler shared that he found it helpful when others were "treating [the coming out conversation] as normally as possible." Stanley also shared his friend's response to his coming out: "He said, 'Well, you can tell me anything. You know, lots of people feel attraction to different things.' So, he created this environment where [my sexual orientation] was normal."

Advocating

Finally, some participants reported that when people to whom they came out advocated for them or the LGBTQ+ community at large, they had particularly positive experiences. Sometimes such advocacy was manifested as others learning or educating themselves before the coming out experience. For example, Tyler reported, "I gave my family [an LGBTQ+ book] and said, 'Hey, can you guys please read this.' …I think the book actually helped a ton because of having them see examples and stories. It all went a lot better than I anticipated." Kate further shared, "What has helped are people who have been engaged with gender and talking about gender and knowing the differences between gender and sex." Other times, participants reported that advocacy more generally made the coming out experience more positive. For example, Colleen shared, "My sister made sure to put my transgender son's name on the program and not their dead name." Further, Brenda reported that her friend told her, "I know somebody, maybe you can go on a date with them. That kind of thing [was positive]."

Discussion

Through interviews with 25 LDS SGMs, we identified several actions and approaches LDS SGMs took that led to beneficial coming out experiences. We further identified actions and approaches taken by people who were come out to that led to beneficial coming out experiences for LDS SGMs. Given the CJCLDS's doctrines discouraging same-sex sexual behaviors and altering gender expression, LDS SGMs likely face additional hurdles and concerns when approaching coming out conversations with other Latter-day Saints. Although we explicitly asked participants about their experiences related to coming out in the context of the Church of Jesus Christ of Latter-day Saints, none of the actions and approaches reported by participants focused explicitly

on religiousness. It may be that the concerns and preparations for coming out conversations look different for LDS SGMS than SGMs more generally, but it may also be that coming out looks more similar than different for religious and nonreligious SGMs. Given the lack of responses regarding religion, we suggest that our reported approaches to coming out experiences may be applicable to SGMs more generally as well as to LDS SGMs specifically.

SGM Approaches Relating to Positive Coming Out Experiences

We found that LDS SGMs reported a variety of approaches they took when choosing to come out to other people within the CJCLDS. In particular, we noticed that LDS SGMs found it particularly helpful to be selective with who they come out to. For example, many LDS SGMs reported only coming out to people with whom they had a preexisting close relationship grounded in trust. This finding mirrors previous findings, suggesting that SGMs more generally report benefitting from coming out in autonomy-supportive contexts (Legate et al., 2012). This may be particularly true for LDS SGMs, who are often aware that individuals within the CJCLDS may not respond well to their coming out due to doctrinal beliefs that restrict same-sex sexuality and gender expression (CJCLDS, 2005; Dahl & Galliher, 2012). For both LDS SGMs and SGMs more broadly, coming out experiences may be more positive when selecting people to come out to who are more likely to positively respond.

We further found that LDS SGMs reported coming out experiences were beneficial when they focused on self-understanding and self-acceptance. Self-understanding and acceptance are helpful for SGMs more generally in navigating their sexual and/or gender identities (Camp et al., 2020b). It may be that increasing self-

understanding and self-acceptance allows SGMs to approach coming out conversations with greater knowledge of who they are and how to vocalize that to others. It may also be that increasing self-understanding and self-acceptance protects against negative coming out reactions (e.g., Camp et al., 2020a). SGMs may feel better equipped to come out to and explain their identities to others when they first increase their self-understanding and self-acceptance.

LDS SGMs reported that preparing for coming out experiences beforehand and decreasing pressure on themselves made coming out more positive. Preparing for coming out experiences appears to mirror preparation for other important conversations; the more an individual feels that they understand what the conversation may look like and questions that may be asked, the more confident they feel in approaching the conversation. Such preparation may serve to decrease the pressure SGMs experience in initiating coming out conversations with others. Additionally, decreasing pressure on oneself when coming out to others may include shedding the pressure to come out in a specific way. Given that coming out experiences are becoming more public via outlets such as social media, SGMs may experience pressure to come out in similar ways as other people (e.g., creating a social media post). Empowering SGMs to come out in whatever way they find most comfortable and safe may be a powerful method of decreasing pressure on SGMs. This pressure also likely decreases naturally the more that SGMs come out to others (Vaughan & Waehler, 2010). Taken together, SGMs may benefit from preparing for what coming out conversations may look like, and from allowing themselves to come out in whatever way feels best for them.

Finally, LDS SGMs found that validating their relationship with those they have come out to helped make the coming out experience more beneficial. Coming out is often a frightening endeavor for SGMs, with concerns that others will reject them for their sexual and/or gender identities (e.g., Baiocco et al., 2015). It appears that LDS SGMs who focus part of their coming out conversations with others on validating the relationship may help decrease some of these concerns. Similarly, validating the relationship was reported as a beneficial factor when done by individuals who SGMs come out to. This parallelism suggests that vocalizing how relationships will not be adversely affected by SGMs' coming out can help alleviate SGMs' coming out concerns in addition to strengthen relationships (e.g., Legate et al., 2012; Vaughan & Waehler, 2010).

Other Person Factors Relating to Positive Coming Out Experiences

LDS SGMs further reported a variety of actions or approaches that other people took when LDS SGMs came out to them. It appears that both what SGMs do and what other people do are important in coming out experiences that are perceived as beneficial.

LDS SGMs almost univocally reported that receiving a loving and accepting response from others made their coming out experiences more positive. Loving responses are often seen as the hallmark of positive coming out responses (Rothman et al., 2012). Additionally, religious individuals are taught that loving others is foundational (*English Standard Version Bible,* 2001, John 13:34-35, Holy Bible). Coming out has also consistently been associated with more positive well-being when it occurred in supportive contexts (e.g., Legate et al., 2012; Rosati et al., 2020); it is unsurprising that SGMs who receive supportive responses to their coming out conversations report more

positive overall coming out experiences. Therefore, one takeaway for religious individuals is that responding with love to an SGM's coming out is a clear method of making the coming out experience more positive.

We observed that LDS SGMs found it beneficial when those they came out to utilized empathic listening skills in their responses (e.g., Davis, 2020; Parks, 2015). Empathic listening skills include actively listening, validating, and demonstrating compassion and understanding. Such skills are foundational to helping others feel heard, seen, and valid (Jones et al., 2016). Using an empathic listening approach to respond to an SGM's coming out may be particularly helpful, as empathic listening utilizes concrete skills that improve the coming out experience for SGMs. These skills may be particularly helpful takeaways for religious individuals who may not know how to respond positively to or affirm an SGM's coming out.

Finally, we found that LDS SGMs found it beneficial when others celebrated their sexual and/or gender identities and advocated for them. Celebration and advocacy appear to be coming out responses that go a step beyond acceptance and support. These approaches denote active involvement in SGMs' coming out experiences and helping them to accept themselves and find community (Garcia Johnson & Otto, 2019). Celebration and advocacy regarding one's coming out are associated with a stronger sense of social connection and belonging (Moagi et al., 2021). Although not as frequently expressed among our sample, celebration and advocacy are exceptional ways of improving the coming out experience, validating relationships, and making systemic changes.

Limitations

The present study was limited by several factors. First, we only focused on differences in overall coming out experiences and did not specifically ask for variation between sexual and gender minorities. Thus, we cannot be certain that the reported positive coming out factors apply equally for sexual and gender minorities. Additionally, given the qualitative nature of semi-structured questions asked during interviews, it is possible that participants varied in their understanding of what constitutes a "positive coming out experience." Replication of this study among other religious SGMs may help validate our findings.

Conclusion and Implications

In addition to informing SGMs and religious communities about positive ways to approach coming out experiences, our findings have implications for furthering research. First, our findings coincide with existing research suggesting that coming out experiences are impactful events in the lives of SGMs that are often the subject of much thought and planning. Given that coming out in a religious context has the potential to increase minority stressors, it may be that SGMs who take the approaches reported by our participants (e.g., being selective, preparing beforehand, etc.) see these approaches as beneficial because they can decrease subsequent minority stressors. Future research efforts aimed toward understanding how these coming out approaches relate to minority stressors would help elucidate these potential associations. Second, this study is the first known study to specifically look at what responses to coming out conversations are seen as beneficial. Thus, these findings add to and expound on previous research suggesting that "affirming" responses were the sole indicator of beneficial coming out conversations. Finally, given the novel nature of our findings, replication of this study among other

religious SGMs may help validate our findings. Given that this is the first study to identify the specific approaches and responses that LDS SGMs find most beneficial, future research efforts geared toward elucidating the efficacy and mental health outcomes of these factors can also help to validate our findings.

LDS SGMs reported that coming out experiences were more beneficial when they were selective in who they came out to, increased their self-understanding and acceptance, prepared before coming out, decreased pressure on themselves, and validated their relationships with those they came out to. We further found that LDS SGMs found coming out experiences more positive when those they came out to responded with loving acceptance, empathic listening, support, celebration, affirming that the relationship had not changed, and advocacy. The present study extends current knowledge on coming out experiences by demonstrating that both SGM approaches and others' responses are critical to creating a more positive coming out conversation.

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CHAPTER III

STUDY TWO

Development and Initial Validation of Scales for Coming Out Vigilance and Positive

Coming Out Responses

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Abstract

Coming out involves sexual and gender minorities (SGMs) disclosing their identity to others, and is often related to improved health, well-being, and social support. However, coming out is not always perceived as a positive event, and outcomes of identity disclosure may vary depending on how coming out is approached and how others respond. The present study reports on the development and validation of the Coming Out Vigilance (COV) and the Positive Coming Out Responses (PCOR) measures. Two subsamples of SGMs with varying degrees of outness—totaling 399 individuals—were utilized in the development and validation of these measures. Exploratory and confirmatory factor analyses suggested final scales comprising three items for the COV and eight items for the PCOR. These measures demonstrated acceptable (COV) to excellent (PCOR) internal consistency, as well as metric and scalar invariance between relevant demographic groups. The COV evidenced strong convergent and discriminant validity, negatively correlating with other measures of outness and concealment typically between $r = .2$ and $r = .5$. The PCOR did not evidence convergent or discriminant validity with measures of outness or concealment, suggesting that positive coming out responses are conceptually distinct from outness. Both measures also evidenced predictive validity with measures of mental health, well-being, and sexual identity. Taken together, initial findings indicate that the COV and PCOR are psychometrically sound and may be utilized in both research and clinical settings.

Keywords: LGBTQ, Coming Out, Measures, Vigilance, Affirmation

Development and Initial Validation of Scales for Coming Out Vigilance and Positive

Coming Out Responses

Sexual minorities (individuals who experience some degree of same-sex attraction and/or who consistently engage in some degree of same-sex sexual behavior; Lefevor, Sorrell et al., 2019) and gender minorities (individuals whose gender identity does not correspond to that expected from sex assigned at birth; Toomey et al., 2018) are consistently faced with pressures to fit heterosexual and binary gender roles. As a result of these pressures, sexual and gender minorities (SGMs) often choose to conceal their sexual and/or gender identity from others. Such concealment efforts, though typically undertaken to avoid judgment, discrimination, or victimization from others (Duncan et al., 2019), often have insidious effects, including a decrease in authenticity and well-being, and an increase in depression, anxiety, and suicidality (Huang & Chan, 2022; Livingston et al., 2020; Meyer, 2003). Consequently, many SGMs choose to come out (disclose their sexual and/or gender identity to others) as a means to cope with these effects and to break free of the pressures to fit into a hetero- and cis-normative world.

Coming out experiences are typically conceptualized as events that lead to enhanced mental health and well-being. Coming out tends to occur first with close family or friends, although SGMs typically come out to people throughout their entire lives through various means (e.g., attending events with partners, social media posts). Broadly speaking, coming out has been linked to outcomes such as an increased sense of personal growth, self-acceptance, authenticity, and social relationships (Solomon et al., 2015). Coming out can also lead to a myriad of other positive outcomes such as increased self-esteem and decreased anger and depression when it occurs in settings where SGMs feel

safe and hold more autonomy, such as around close friends or family (Legate et al.,
2012). Many times, these positive outcomes are a direct result of the conversations SGMs
have with their parents and siblings (e.g., Baiocco et al., 2015; Rosati et al., 2020;
Willoughby et al., 2008).

Although coming out is often associated with positive outcomes, this is not
universally the case. For example, SGMs whose disclosure is met with perceived or
actual rejection also report decreased social support and increased depression (Ryan et
al., 2015). SGMs in environments where they are uncertain if others will respond
positively to them may also experience increased stress, anxiety, and vigilance in
preparing to come out (Keating & Muller, 2020; Timmins et al., 2017), with many
ultimately choosing to continue to conceal their identity (Duncan et al., 2019). Although
coming out is often a positive event or process, conceptualizing coming out as entirely
positive fails to consider the ways in which various approaches and responses to coming
out conversations affect the overall coming out experience and associated outcomes.

One of the reasons for the difficulty in understanding *how* and *when* coming out
goes well is the lack of measures specific enough to look at the processes and outcomes
related to coming out. Although there are measures of outness (e.g., Wilkerson et al.,
2016) and growth associated with coming out (e.g., Vaughn & Waehler, 2010), there are
no measures that examine specific coming out-related processes (e.g., methods for
approaching coming out conversations, others' responses to coming out, affirmativeness
of the coming out environment) or outcomes (e.g., well-being, social relationships,
belongingness). Given that the ways in which SGMs come out and how they experience
others' responses to their coming out ultimately impact their mental health and well-

being (McDermott et al., 2019; Rosati et al., 2020), it is important to have reliable and valid measures of these constructs. The present study fills this gap by presenting two novel measures: one that quantifies vigilance experienced by SGMs regarding coming out and another that quantifies how positively SGMs experience others' reactions to their coming out. Although the two measures are distinct, they are presented together due to their conceptual coherence and the similarity of research environments in which they would be used (c.f., Maddock et al., 2022).

Measuring Coming Out Vigilance

Vigilance refers to an awareness or alertness to one's surroundings, typically due to a perceived or actual threat to safety. Although a degree of awareness may be helpful in avoiding threats, vigilance may become maladaptive when individuals become excessively sensitive to environmental stimuli (hypervigilance; APA, 2013), which is often due to trauma- or anxiety-related stress and tends to be related to more adverse mental health outcomes (Hur et al., 2019; Riggle et al., 2021). Vigilance may be a response to a series of actual, perceived, or expectations of discriminatory events as well as chronic stigmatization (Keating & Muller, 2020). Vigilance has been qualitatively used to describe SGMs' reactions to or anticipation of prejudice and stigma (e.g., Keating & Muller, 2020; Timmins et al., 2017).

Minority stress theory (Meyer, 2003) posits that SGMs' vigilance results from stigma associated with being a minority, and is linked to negative impacts to health and well-being. Whether vigilant behaviors result in or are a result of decreased well-being remains unclear, although physiological perspectives (e.g., polyvagal theory) suggest that repeated vigilance and stress may lead to decreased well-being due to chronic wear and

tear of an individual's mental capacities (Beauchaine et al., 2007; Lucas et al., 2018).

Additionally, prominent theories such as the Interpersonal Theory of Suicide (Chu et al.,

2017; Joiner, 2005) and Relational Cultural Theory (Jordan, 2017) note that

belongingness is a vital human need, and that social vigilance is a common response to

perceived threats to belonging, although it often paradoxically can lead to additional

feelings of disconnection. As such, vigilance can be conceptualized as a well-intentioned

way of keeping oneself safe due to perceived or actual threats to social safety.

Vigilance may not always be easily recognized and is more common in contexts

where rejection is more likely to occur, such as within religious communities where

same-sex sexual behaviors and gender expansive expression is discouraged. Coming out

as a religious SGM presents some additional challenges including heightened vigilance

regarding discrimination and rejection from others, which are fueled by hetero- and cis-

normative messaging in religious spaces (Russell & Fish, 2016). It is therefore

unsurprising that SGMs are much more likely to conceal their sexual orientation or

gender identity if they are religious or spiritual (Kubicek et al., 2009; Lefevor, McGraw

et al., 2021; Shilo & Savaya, 2012).

Vigilance may be reported by SGMs as a helpful strategy for managing anxiety

around coming out. In an effort to better understand factors related to positive coming out

experiences for SGMs, Skidmore et al. (2022) identified specific ways that SGMs

approached coming out that they perceived as contributing to "a positive coming out

experience." Participants indicated that they found it helpful to approach coming out by

being selective with who they come out to, preparing before conversations (e.g.,

rehearsing the conversation, anticipating questions), and decreasing pressure on

themselves by coming out in their own way (e.g., phone calls, in-person, social media posts). Although some of these ways are related to increasing social support and connection, most of these self-reported "positive approaches" entailed some degree of vigilance.

Vigilance has yet to be specifically measured in the context of the coming out process, but it has been measured more generally. Measures of hypervigilance—differing from general vigilance given its excessive degree of sensitivity to environmental stimuli; APA, 2013—tend to focus on individuals' perceptions of themselves and others (Timmins et al., 2017), as well as the frequency of vigilant behaviors and feelings in various contexts (e.g., in different environments, being exposed to traumatic events; Veldhuis et al., 2018). The only existing measure of vigilance specific to SGM populations focuses on hypervigilance (Riggle et al., 2021), asking participants to indicate the degree to which they feel hypervigilant in various situations relevant to SGMs (e.g., when around strangers, when in religious spaces) and how often they engage in various hypervigilant behaviors (e.g., scanning for potential threats, avoid making eye contact with others). These types of questions are common among existing vigilance measures (Riggle et al., 2021; Timmins et al., 2017).

SGMs' experiences surrounding coming out may not be detected by current measures of vigilance and hypervigilance. For example, existing measures focus predominantly on assessing vigilant and hypervigilant behaviors when in public or with a significant other. Measures that do consider different situations in which vigilant behaviors may occur tend to focus on situations in which concealment efforts take place, as opposed to a situation in which SGMs choose to disclose their identity to others, which

inherently look different than vigilance related to concealment. Without a measure for vigilance related to the coming out process, there remains a gap in our understanding of how and when coming out can go well, and how and when it can go poorly. Conceptually, a vigilance measure should relate to increased minority stressors, as well as decreased life satisfaction and social support (e.g., Meyer, 2003; Riggle et al., 2021). There remains no current method to accurately and quantifiably assess the frequency with which SGMs engage in vigilant behaviors when coming out, and how this affects other minority stressors and overall health.

Measuring Positive Coming Out Responses

Because coming out affects both SGMs who come out and those to whom they come out, adequately understanding how coming out goes well necessitates an exploration of how people respond to SGMs' coming out (or how SGMs perceive others reactions). Social and contextual variables play a large role in understanding the relationship between coming out experiences and associated responses (Rosati et al., 2020). SGMs are also more likely to come out to people with whom they feel close, as well as in environments that are more affirming of same-sex sexuality and gender expansive expressions (Ryan et al., 2015). Conversely, when coming out experiences are met with rejection or judgment, SGMs typically suffer a variety of adverse physical and mental health outcomes (Baiocco et al., 2020; Rosati et al., 2020). Family reactions to coming out conversations may be some of the most powerful predictors of well-being, with families who respond with love and acceptance leading to SGMs reporting improved social relationships and life satisfaction (McDermott et al., 2019).

Minority stress theory may also explain how perceived or actual affirmative responses to coming out may affect SGMs' mental health. Minority stress theory posits that discrimination, prejudice, judgment, and rejection—common adverse reactions to coming out experiences—are best understood as "distal" stressors (Meyer, 2003). These stressors are experienced uniquely by SGMs (relative to heterosexual and cisgender individuals), and the degree to which SGMs experience distal stressors is thought to directly (and negatively) relate to their mental health (Russell & Fish, 2016). Indeed, SGMs who experience others' reactions to their coming out as non-supportive experience more depressive symptoms and worse physical health (Rothman et al., 2012).

Despite this clear link between others' responses to SGMs' coming out and mental health, there is not a measure of how SGMs experience others' reactions to their coming out. Parental acceptance of their SGM children is among the closest concept that has been measured related to coming out responses. Parental acceptance can be conceptualized as "behaviors of love, affection, care, and support toward one's SGM child" (Abreu et al., 2022, p. 4). Such acceptance is typically measured by prevalence of behaviors such as parents support their child's gender expression, welcoming their child's SGM friends to family events, and telling their child that they are proud to be their parent (Miller et al., 2020; Ryan et al., 2009). Similar to affirmative coming out responses, parental acceptance helps to protect against depression and suicidality in addition to promoting self-esteem, social support, and overall health (Ryan et al., 2009). Despite the overlap between parental acceptance and positive responses to coming out, parental acceptance does not fully capture what it means to respond positively to somebody's

coming out given its focus only on parents and on acceptance over a period of time as opposed to direct reactions to SGMs' disclosure.

Although no measure exists that includes specific responses to SGMs' coming out, SGMs anecdotally and qualitatively report feeling better about coming out when they are responded to with affirmation, validation, and understanding. From qualitative interviews, we know that SGMs report that their coming out experiences are more positive when those they came out to responded by showing love and acceptance, using empathic listening skills such as validating and listening, demonstrating support, celebrating, affirming that their relationship had not been negatively impacted by the coming out, and by advocating for SGMs (Skidmore et al., 2022). This qualitative study was the first to provide a specific list of affirmative responses to coming out; these responses coincide with findings that SGMs tend to report higher well-being when they are responded to with affirmation, validation, and understanding (Perrin-Wallqvist & Lindblom, 2015). As such, we propose a measure that assesses whether SGMs perceive if others have reacted to their coming out conversations with affirmation, validation, and understanding.

Current Study

In an effort to better understand the nuance surrounding when coming out goes well, we propose two measures. These measures, although conceptually different, are both based on the themes identified from previous qualitative research where religious SGMs were asked to identify factors that related to positive coming out experiences (Skidmore et al., 2022). Although participants in the study reported their behaviors as positive approaches to coming out to others in a conservative religion (the Church of

Jesus Christ of Latter-day Saints), we found that these behaviors were all vigilant in nature, leading to the creation of a coming out vigilance measure alongside a positive coming out responses measure. Following procedures for item development and construct validity (Clark & Watson, 2019), we examine these two measures with exploratory and confirmatory approaches, examine measure invariance, analyze internal consistency of these measures, assess the measures' convergent, discriminant, predictive, and incremental validity, and provide norms and cut off scores for each scale. Given the themes reported in the qualitative study, we hypothesized that the measures would each have a unidimensional structure, and that each would be reliable and valid. We further expected that our measures would demonstrate convergent and discriminant validity with outness and concealment. We expected our Coming Out Vigilance measure to demonstrate predictive validity with acceptance concerns, life satisfaction, and depression, and our Positive Coming Out Responses measure to demonstrate predictive validity with increased life satisfaction and social support, and decreased depression.

Method

One sample was collected for the present study and was randomly split into two to conduct the exploratory and confirmatory factor analyses. Given that the samples shared the same measures and were analyzed collectively for the exploratory and confirmatory factor analyses, we describe the samples both individually and collectively.

Procedures and Participants

The research team included six members who are intentionally religiously and socio-politically diverse in an effort to manage biases and recruit a variety of participants. The team all agree with and uphold the predominant psychological position on working

with SMs and respecting religious practices (American Psychological Association, 2009; Pargament, 2013). Further, the team represent various identities across sexual identity (e.g., gay, bisexual, queer, heterosexual, and non-identified), religious identity (e.g., active Latter-day Saint, nonactive/former Latter-day Saint, agnostic, Christian), and gender identity (e.g., cisgender man, cisgender woman).

All data for the present study were collected from February to March 2022. The Institutional Review Board at Utah State University approved all study procedures prior to data collection. Participants were recruited as part of the research team's ongoing longitudinal study (4optionssurvey.com) with some participants being recontacted from earlier participation and other participants engaging for the first time. Both groups of participants were initially recruited via advertisements in relevant conference (e.g., the annual North Star and Affirmation conferences), therapeutic organizations for Latter-day Saint SGMs in Utah (e.g., LGBTQ Therapist Guild of Utah), postings in relevant social media groups and forums (e.g., Mormons Building Bridges, Exmormon Reddit, Affirmation), and through word-of-mouth. All participants were compensated $10 for completing the survey. A complete description of sampling procedures for the current study can be found at 4optionssurvey.com.

To be included in the study, participants had to be at least 18 years old, identify as an SGM (e.g., gay, lesbian, bisexual, transgender, queer), be a current or former member of the Church of Jesus Christ of Latter-day Saints, be out regarding their sexual and/or gender identity to at least some people, and have completed the entirety of the survey. In total, 399 participants met eligibility criteria and were included in the present study. Many participants identified as cisgender men (53.8%) with a bachelor's degree (42.9%),

White (94.5%), gay or lesbian (51.6%), religiously unaffiliated (44.4%), and between the

ages of 22-46 (*M* = 34.41; *SD* = 12.16). The overall sample was then randomly split in

two, with one being used for the exploratory factor analysis and the other being used for

the confirmatory factor analysis. See Table 1 for a full list of participant demographics

across both samples.

Table 1

Demographic Information for Participants in Samples One and Two

Variable	Exploratory Sample $n = 200$	Confirmatory Sample $n = 199$
Gender		
Ciswoman	23.0%	29.1%
Cisman	54.0%	53.3%
Transwoman	3.5%	2.0%
Transman	2.5%	3.5%
Non-binary/Genderqueer	17.0%	12.0%
Ethnicity		
Person of Color	5.0%	6.0%
White/European American	95.0%	94.0%
Education		
High school/GED	4.0%	4.0%
Some college	30.0%	25.6%
Bachelor's degree	42.0%	43.7%
Graduate degree	24.0%	26.6%
Religious Affiliation		
None/unaffiliated	43.0%	46.2%
Christian – Latter-day Saint	38.0%	38.2%
Christian – Other	9.5%	12.1%
Other Religion	9.5%	3.5%
Sexual Identity		
Gay	41.5%	39.2%
Lesbian	8.5%	15.1%
Bisexual	13.5%	18.1%
Pansexual	1.5%	3.5%
Queer	35.0%	24.1%
Age (*M, SD*)	33.81 (11.80)	34.93 (12.54)

Measures

Measures of Coming Out Processes and Responses

Coming Out Vigilance. Coming Out Vigilance was assessed using a 7-item scale created from themes collected from previous qualitative analysis of SGM experiences (Skidmore et al., 2022). The scale asks participants to indicate the degree to which they agree with each item, using a Likert-type scale ranging from *strongly disagree* (1) to *strongly agree* (7). See Table 2 for a full list of scale items.

Positive Coming Out Responses. Positive Coming Out Responses was assessed using an 8-item scale created from themes collected from previous qualitative analysis of SGM experiences (Skidmore et al., 2022). The scale asks participants to indicate the degree to which they agree with each item, using a Likert-type scale ranging from *strongly disagree* (1) to *strongly agree* (7). See Table 2 for a full list of scale items.

Measures of Health & Well-being

Life Satisfaction. Life Satisfaction was assessed using the 5-item Satisfaction with Life Scale (Diener et al., 1985). The scale asks participants to indicate the degree to which each item describes them, using a Likert-type scale ranging from *strongly disagree* (1) to *strongly agree* (7). Items included "The conditions of my life are excellent," and "So far, I have gotten the important things I want in life." Internal consistency for the present study was good ($\alpha = .87$).

Depression. Depressive symptoms were assessed using the PHQ-9 (Kroenke et al., 2001). Participants indicated how often in the past two weeks they have been bothered by nine symptoms of depression including "feeling down" and "little interest or pleasure in doing things." Participants responded on a 4-point Likert scale ranging from *Not at All* (0) to *Nearly Every Day* (3). The criterion validity of the PHQ-9 was supported by positive predictive ability with a diagnosis of major depression. The construct validity

of the PHQ-9 was supported by correlations with other aspects of psychosocial functioning. Internal consistency for the present study was excellent (α = .92).

Authenticity. Authenticity was assessed using the 12-item Authenticity Scale (Wood et al., 2008). The scale asks participants to indicate the degree to which each item describes them, using a Likert-type scale ranging from *does not describe me at all* (1) to *described me very well* (7). Items included "I always stand by what I believe in," and "I live in accordance with my values and beliefs." Internal consistency for the present study was good (α = .86).

Family Support. Family support was measured using the Family Support subscale of the Multidimensional Scale of Perceived Social Support (Zimet et al., 1988). Participants were asked to indicate their agreement with statements such as, "I get the emotional help and support I need from my family." This subscale uses a 5-point Likert-type scale ranging from *strongly disagree* (1) to *strongly agree* (7), and has evidenced strong internal consistency, convergent validity, and discriminant validity. Internal consistency for the present study was excellent (α = .90).

Measures of Sexual Identity

Identity Concealment. Identity concealment was measured using the 6-item Concealment Behavior Scale (Jackson & Mohr, 2016). Using a 5-point Likert scale ranging from *not at all* (1) to *all the time* (5), participants indicated the frequency with which they engaged in various concealing behaviors during the previous two weeks. Questions included behaviors such as allowing others to assume they are straight or avoiding contact with other lesbian, gay, or bisexual individuals. The authors of the scale

reported good reliability and validity for the scale. Internal consistency for the present study was good (α = .89).

Outness. Outness was measured using a single item that was determined to be as good a measure of outness as multi-item predictors (Wilkerson et al., 2016). Participants responded to the following question: "How open/out are you about your experience with same-sex attraction (current or former) and/or being LGBTQ+?" Participants indicated their response using five options ranging from *not at all open* (1) to *open (out) to all or most people I know* (5).

Identity Affirmation. Identity affirmation was measured using the three-item Identity Affirmation subscale of the Lesbian, Gay, or Bisexual Identity Salience scale (Mohr & Kendra, 2011). Using a 6-point Likert scale ranging from *disagree strongly* (1) to *agree strongly* (6), participants indicated their agreement with statements such as "I am glad to be an LGB person." This subscale has been shown to have good convergent, discriminant, and construct validity (Mohr & Kendra, 2011). Internal consistency for the present study was excellent (α = .91).

Internalized Homonegativity. Internalized homonegativity was measured using the three-item Internalized Homonegativity subscale of the Lesbian, Gay, or Bisexual Identity Salience scale (Mohr & Kendra, 2011). Using a 6-point Likert scale ranging from *disagree strongly* (1) to *agree strongly* (6), participants indicated their agreement with statements such as "If it were possible, I would choose to be straight." This subscale has been shown to have good convergent, discriminant, and construct validity (Mohr & Kendra, 2011). Internal consistency for the present study was good (α = .89).

Data Preparation and Analysis Plan

Factor Analysis. Parallel analysis and scree plots were utilized to identify the number of factors underlying coming out items. The sample was randomly split into two subsamples to run the exploratory factor analysis (EFA; $n = 200$) and confirmatory factor analysis (CFA; $n = 199$). The EFA was performed first to identify items to throw away with low loadings and high cross loadings, and to identify the overall factor structure underlying items. Items were retained if their factor loadings were greater than .350 and their cross loadings were less than .150 (Tabachnick & Fidell, 2007). The CFA was then performed to verify the factor structure identified by the EFA. Both the EFA and the CFA were performed with weighted least squares estimation. All items were estimated as being ordered categorical variables given their response categories are on a 5-point Likert-type scale (Kline, 2016). Model fit was assessed using conventional guidelines (Kline, 2016), and was considered acceptable based on the following criteria: χ^2 p-value > .05, RMSEA/SRMR < .08, CFI/TLI > .90.

Measurement Invariance. Measurement invariance testing was then used to determine whether the identified factors performed equally well across demographic groups. The demographic groups used for invariance testing included current religious affiliation, gender, and sexual identity. Per Chen (2007), measurement invariance testing included fitting three multiple group CFA models (configural model, metric model, and scalar model) for each tested demographic variable and assessing whether the fit worsened between models. Model fit was considered worse if it exceeded ΔCFI value of .01 (Chen, 2007). The configural model fit a multiple group CFA that allowed all item loadings and intercepts to be estimated freely across groups. The metric model fit a multiple group CFA that constrained all item loadings to be equal across groups but

allowed item intercepts to be freely estimated across groups. The scalar model fit a

multiple group CFA that constrained both loadings and intercepts to be equal across

groups. If the ΔCFI is less than .01 between the configural and metric model, then the

scale can be said to pass the metric invariance test. If the ΔCFI is less than .01 between

the metric and scalar model, then the scale can be said to pass the scalar invariance test. If

the scale passes the metric invariance test, it can be used to make valid comparisons on

association statistics (e.g., correlations, regression coefficients) across groups. If the scale

passes the scalar invariance test, it can be used to make valid comparisons on mean

difference statistics (e.g., *t*-tests, ANOVA). A measure that passes both tests

demonstrates that it is more likely to be valid among diverse samples (Kline, 2016).

<div align="center">**Results**</div>

Preliminary Analyses

Before running the factor and measurement invariance analyses, we examined

whether our data met the assumptions for structural equation modeling (Kline, 2016).

These assumptions included that the data are factorable, the data are normal, and there are

no univariate or multivariate outliers. No missing data was identified in our data. The

factorability of the data was assessed with Bartlett's test of sphericity (Tabachnick &

Fidell, 2007), results of which indicated that the correlation matrix was factorable

($\chi^2(105) = 2543.99$, $p < .001$). Normality was assessed by examining skewness and

kurtosis values. Data could be considered normal if skewness values were below 4 and

kurtosis values below 10. The normality assumption was met given skewness values

ranged from -1.28 to -0.08 and kurtosis values ranged from -1.39 to 1.59. There were

eight univariate outliers identified, given these participants had *z* values exceeding 3.29.

There were also three multivariate outliers ($p < .001$) as identified by Mahalanobis distance statistics (Tabachnick & Fidell, 2007). As such, analyses were conducted with and without these cases; given the results were similar in both instances and there were no meaningful differences in fit statistics, loading values, or significance values, we report results with the outliers included.

Additionally, although we intended to run the EFA, CFA, and measurement invariance analysis separately for both scales, the vigilance scale turned out to include only three items. Given that fit indices for EFAs and CFAs are only provided for scales with at least four items, we decided to run analyses for both scales together. We present the results of these analyses together (see Table 2 and Table 3).

Coming Out Vigilance Factor Analyses

Exploratory Factor Analysis

Results from parallel analysis based on 1,000 simulated random data sets of EFA eigenvalues showed that there were three factors. However, the scree plot revealed either two or three factors underlying the data. Only two factors had an eigenvalue loading above 1. Given that all items on the suggested third factor had higher loadings on one of the other two factors, the parallel analysis was run again with just two factors. The EFA was conducted with sample one to trim items and assess the factor structure of the scale (see Table 2). Results suggested that the two-factor EFA demonstrated good model-data fit on three of the five fit indices. Items loaded significantly onto their respective factors with loadings ranging from .69 to .94. The two factors were named Coming Out Vigilance (COV; items 1-3), and Positive Coming Out Responses (PCOR; items 4-11). The COV variable had a mean of 4.55, standard deviation of 1.57, skewness of -0.37, and

kurtosis of -0.72. The PCOR variable had a mean of 4.83, standard deviation of 1.16, skewness of -0.57, and kurtosis of 0.20.

Confirmatory Factor Analysis

A CFA was run to confirm the factor structure identified in the EFA (see Table 2). Results of the CFA suggested that the model demonstrated good fit on three out of the five fit indices and provided support to the two-factor structure demonstrated in the EFA. All item loadings were significant and ranged from .61 to .89. A correlated factors model was then used to test the two-factor model, which failed to converge, suggesting that the two factors operate as separate scales and not subscales on the same measure. All items had significant loadings that met suggested guidelines (loading > .60).

Table 2

Exploratory and Confirmatory Factor Analyses for the Coming Out Vigilance and Positive Coming Out Responses Scales

Item	EFA		CFA	
	F1	**F2**	**F1**	**F2**
1. I am selective regarding who I come out to	**.71**	.02	**.71**	
2. I prepare before coming out so I know what to say	**.94**	-.02	**.89**	
3. I prepare for how others may react before coming out to them	**.60**	.03	**.61**	
4. People I came out to showed that they love me	-.01	**.77**		**.78**
5. People I came out to tried to understand my experiences as a sexual or gender minority	-.01	**.72**		**.77**
6. People I came out to were supportive of me	-.07	**.79**		**.87**
7. My relationship with others wasn't negatively affected by my coming out	-.02	**.69**		**.67**
8. People I came to showed that they accept me as a sexual or gender minority	.02	**.84**		**.89**
9. People I came out to celebrated my sexual and/or gender identity with me	.02	**.80**		**.82**
10. People I came out to advocated for me	.00	**.77**		**.78**
11. People I came out to validated my experiences	.01	**.82**		**.85**
χ^2 (df)		167.15 (34)	184.25 (43)	

p-value	< .01	< .01
CFI/TLI/SRMR	**.95/.92/.05**	**.96/.95/.05**
RMSEA [90% CI]	.14 [.12, .16]	.13 [.11, .15]

Measurement Invariance Analyses

The two measures were tested for measurement invariance by running a series of multiple group CFA models to assess whether the measures passed both scalar and metric invariance tests. Invariance tests were run for comparisons by current religious affiliation (Current Latter-day Saint, Former Latter-day Saint), gender (cisgender women, cisgender men, and transgender/non-binary individuals), and sexual identity (lesbian/gay individuals, bisexual/pansexual/polysexual individuals). Results showed that the scale passed both metric and scalar invariance tests for sample type, gender, and sexual identity.

Coming Out Vigilance Reliability and Validity Analyses

Reliability

The COV evidenced overall adequate internal consistency (α = .74). As such, the items of the COV appear to work appropriately together as one cohesive measure.

Convergent and Discriminant Validity

The COV evidenced acceptable convergent and discriminant validity with measures of identity (see Table 3). Correlations between the COV and both Outness and Identity Centrality were significant and negative. These correlations were less than .70, suggesting that the COV is conceptually distinct from these constructs. Additionally, the correlation between the COV and Concealment was significant and positive, suggesting that those who reported more frequent vigilant behaviors surrounding coming out also reported more concealment. This correlation was also less than or equal to .70, suggesting that the COV is conceptually distinct from Concealment.

Predictive Validity

Predictive validity was assessed by running correlations between the COV and various mental health, well-being, and identity measures largely influenced by our literature review. As expected, the COV was related to decreased Authenticity and Life Satisfaction, suggesting that those who are more vigilant in their coming out approaches may also be less authentic and satisfied with their lives. Additionally, the COV was related to increased Internalized Homonegativity, suggesting that those who are more vigilant in their coming out approaches also tend to have more internalized stigma (see Table 3).

Table 3

Correlations Between the COV, PCOR, Mental Health, Well-being, and Identity

	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
1. COV	-	-.05	**-.61**	**.45**	-.13	**.28**	.09	**-.28**	**-.14**	-.07
2. PCOR	-.06	-	.08	**-.12**	.04	**-.10**	**-.21**	**.14**	**.25**	**.46**
3. Outness	**-.60**	.09	-	**-.55**	**.27**	**-.39**	**-.17**	**.32**	**.18**	**.10**
4. Concealment	**.46**	**-.16**	**-.62**	-	**-.19**	**.51**	**.32**	**-.45**	**-.21**	**-.13**
5. Identity Centrality	**-.12**	.03	**.23**	**-.24**	-	**-.31**	-.01	.08	**-.10**	.00
6. IH	**.28**	**-.13**	**-.40**	**.52**	**-.31**	-	**.26**	**-.36**	**-.20**	-.05
7. Depression	.06	**-.21**	**-.19**	**.30**	-.05	**.30**	-	**.51**	**-.54**	**-.26**
8. Authenticity	**-.30**	**.14**	**.35**	**-.44**	.07	**-.33**	**.51**	-	**.45**	**.20**
9. Life Satisfaction	**-.13**	**.26**	**.17**	**-.22**	-.10	**-.21**	**-.55**	**.46**	-	**.42**
10. Family Support	-.09	**.46**	**.14**	**-.17**	.05	-.08	**-.30**	**.26**	**.42**	-

Note. COV = Coming Out Vigilance; PCOR = Positive Coming Out Responses; IH = Internalized Homonegativity. Bolded values indicate relationships significant at $p < .05$. Numbers above the diagonal indicate correlations; numbers below the diagonal indicate partial correlations, including controls for Age, Gender Identity, Religious Affiliation, and Race/Ethnicity.

Cut Off Scores

We established cut-off scores for both scales by categorizing the scores into low, medium, and high. Scores 1 standard deviation (*SD*) below the mean were considered low, scores between 1 *SD* below the mean and 1 *SD* above the mean were considered moderate, and scores above *1* SD were considered high (Ng Fat et al., 2017).

Positive Coming Out Responses Reliability and Validity Analyses

Reliability

The PCOR scale evidenced overall excellent internal consistency ($\alpha = .91$). As such, the items of the PCOR appear to work appropriately together as a measure.

Convergent and Discriminant Validity

The PCOR also did not evidence acceptable convergent and discriminant validity with measures of identity (see Table 3). Correlations between the PCOR and Concealment were significant and negative, suggesting that those who reported a higher frequency of positive coming out responses also reported less identity concealment, although this relationship was weak. Further, the PCOR did not significantly correlate with Outness or Identity Centrality, suggesting that these constructs may not be related and positive coming out responses may not be contingent on how out an SGM is or how much pride they hold regarding their identity.

Predictive Validity

Predictive validity was assessed by running correlations between the PCOR and various mental health, well-being, and identity measures largely influenced by our literature review. The PCOR was related to decreased Depression and increased Authenticity, Life Satisfaction, and Family Support (see Table 3).

Cut Off Scores

We established cut-off scores for both scales by categorizing the scores into low, medium, and high. Scores 1 standard deviation (*SD*) below the mean were considered low, scores between 1 *SD* below the mean and 1 *SD* above the mean were considered moderate, and scores above *1* SD were considered high (Ng Fat et al., 2017).

Discussion

In the present study, we developed the COV and PCOR and assessed their reliability and validity using a sample of 399 SGMs. The COV contains three items that assess various vigilant behaviors undertaken by SGMs when coming out to others. The PCOR contains eight items that assess the frequency with which SGMs report others giving positive responses to their coming out. Both measures were developed from qualitative research, ensuring content validity. As expected, our analyses support both the COV and PCOR as reliable measures with evidence of convergent, divergent, and predictive validity. Further, both measures passed metric invariance tests across various demographic groups (i.e., current religious affiliation, gender, sexual identity), suggesting that the same underlying construct is being measured across groups. Although further testing is needed to verify these reliability and validity results across other samples, the present study indicates that the COV and PCOR have strong bases for generalizability. Below, we describe the strengths and potential uses for each of the two measures.

The Coming Out Vigilance Measure

The Coming Out Vigilance measure provides the first direct assessment of SGMs' engagement in vigilant behaviors when coming out. The measure was developed from qualitative interviews in which religious SGMs described ways in which they approached coming out. Through these interviews, we noted that several of these approaches were

vigilant in nature (rehearsing the coming out conversation, being selective with who one comes out to, anticipating others' reactions; Skidmore et al., 2022). Given that the majority of the conversations regarding when coming out goes well focus on how others respond (e.g., Baiocco et al., 2020; Rosati et al., 2020), we developed the COV in order to determine how these vigilant approaches to coming out, which SGMs may be utilizing in an effort to avoid potential rejection from others and protect themselves (Keating & Muller, 2020), relate to SGMs identity development and well-being.

Although SGMs interviewed viewed vigilant efforts as helpful (Skidmore et al., 2022), the COV was related to high concealment, and low outness and life satisfaction. Considering that vigilance tends to be heightened among SGMs who report concealing their identity from others (Bry et al., 2017), it follows that those who report more vigilant behaviors when coming out are more likely to be concealing their identity from most people and do not have much experience with coming out. It thus follows that SGMs who have come out more frequently or to more people exhibit less vigilant behaviors when approaching additional coming out conversations. Given existing literature regarding the relationship between vigilance and mental health outcomes (e.g., Riggle et al., 2021; Timmens et al., 2017), it follows that vigilance surrounding coming out is correlated, albeit to a small degree, with a decrease in life satisfaction. Surprisingly, such vigilance was not related to depression, suggesting that engaging in vigilant behaviors when coming out may not be particularly detrimental to one's mental well-being. It may also be that the benefits of coming out outweigh some of the detriments that typically occur alongside vigilant behaviors.

Unlike existing measures of vigilance, the COV assesses the specific ways in which vigilance relates to the coming out processes, which may help shed light on both how and when coming out can go well and how and when it can go poorly. For example, the COV includes items that assess the degree to which SGMs prepare and consider regarding how to come out, to whom, and how others may react. In contrast, existing measures of vigilance and hypervigilance focus on individuals' perceptions of themselves and others (Timmins et al., 2017) and the frequency of hypervigilant behaviors in different environments (e.g., at work, in public; Veldhuis et al., 2018). Vigilance measures that consider different environments include concealment, but continue to miss out on the ways in which vigilance may appear not when an SGM is attempting to hide their identity, but when they actively choose to disclose it. Due to its novel nature and specifity, the COV is a particularly useful tool in helping to uncover the degree to which vigilance occurs when coming out, and how such vigilance impacts the overall coming out experience. Given that coming out looks different depending on time and context, the COV is also beneficial in that it provides an overall frequency of vigilant behaviors across situations.

Coming out is an interactive process that has the potential to influence various aspects of mental health and sexual identity development. Those who reported more vigilant behaviors when coming out evidenced an increase in internalized homonegativity, as well as a decrease across various aspects of well-being (e.g., authenticity, life satisfaction, and identity centrality). Coinciding with our findings, SGMs who report vigilant behaviors more generally tend to have more internalized stigma and decreased well-being (Keating & Muller, 2020; Meyer, 2003; Timmins et al.,

2017). It may be that vigilance comes as a byproduct of internalizing negative messages regarding one's sexual or gender identity, such that those who have internalized the message that being an SGM is "bad" may assume others do as well, and thus engage in vigilant behaviors to avoid victimization and judgment from others. Vigilance both generally and when approaching coming out relates to less well-being, which makes sense when considering that those who engage in more vigilant behaviors tend to conceal their identity more, which is also related to less authenticity, life satisfaction, and identity centrality (Riggle et al., 2021).

The Positive Responses to Coming Out Measure

The Positive Responses to Coming Out measure provides the only direct assessment of SGMs' perceptions of others' reactions to their coming out. Given that coming out is a critical moment (or moments) in an SGM's identity development, understanding how SGMs perceive others' reactions to their coming out provides insight into their continued identity development and well-being.

Unlike measures of parental acceptance/rejection, the PCOR assesses a broader range of positive responses from others. For example, the PCOR includes items that assess the degree to which others celebrate, advocate for, and validate SGMs' identities. In contrast, measures of parental acceptance tend to focus more strongly on parental rejection (e.g., Greene et al., 2015) or include a limited number of items assessing a smaller range of positive responses (e.g., Miller et al., 2020). Further, the PCOR may be used across varied contexts, including reactions of friends, partners, and coworkers to coming out. Because of this versatility, the PCOR may be particularly useful for

individuals who come out after having left the home as other relationships are likely more salient than their familial relationships (Lewis, 2011).

The PCOR strongly relates to a myriad of benefits, including increased family support, life satisfaction, and authenticity, as well as decreased depression. As expected, receiving positive or affirming responses to one's coming out improves mental well-being, with the LGBTQ+ person feeling safer, more satisfied, and less anxious and depressed overall following the positive response of others (McDermott et al., 2019). The PCOR's relationship with family support suggests that individuals' perceptions of others' reactions to their coming out is related to their overall perceptions of family support. These findings coincide with how others demonstrate acceptance, love, and validation to SGMs more generally (Abreu et al., 2022; McDermott et al., 2019; Ryan et al., 2009), suggesting that SGMs' well-being may be improved when they receive these responses from others right when they come out. Many SGMs note that their initial identity disclosure impacted if and how they approached future disclosures, and that their first time coming out had lasting effects on their mental health and relationships (Li & Samp, 2019). As such, longitudinal studies using cross-lagged designs are needed to assess the temporality of these relationships, but we suspect a directional effect from PCOR scores to family support scores.

Clinical Uses for the COV and PCOR

Given the predominant narrative that coming out largely leads to improved social relationships and decreased stress, clinicians may often advocate for clients to disclose their identity to others without considering how SGMs may approach such conversations and how others may respond. As such, clinicians may use the COV and PCOR as a

starting point for discussions surrounding the effects of vigilantly approaching coming out, as well as the benefits from receiving affirmation and love from their coming out conversations. Further, the COV and PCOR may be utilized in clinical work to help SGMs reflect on how they approach coming out and how they perceive others' responses. Such insight could help SGM clients avoid or minimize the negative impacts of engaging in vigilant behaviors, as well as understand and maximize the benefits of receiving loving and affirmative responses to their disclosure from others.

Limitations and Future Directions

Although the current study represents an important contribution to the field, findings must be considered in light of the following sampling and measurement limitations. The present study utilized a population of SGMs who are or were members of the Church of Jesus Christ of Latter-day Saints as part of a larger study (www.4optionssurvey.com). While our sample represents diversity across sexual and gender identities, there were inherent limitations given the religious background of these participants. Our sample was also predominantly White, which largely coincides with the U.S. population of members of the Church of Jesus Christ of Latter-day Saints, but represents limitations in terms of generalizability of these measures across various racial/ethnic identities. As such, future studies that utilize these measures with more religiously and racially diverse samples can help solidify the generalizability of our measures. Our sample also consisted on individuals who have all come out to at least one person, thus calling into question whether those who have not come out (and are potentially the highest in vigilance) were not accounted for. As such, the scales may be constructed without those who are very high in vigilance. Further, the present study was

administered via an online survey, thus limiting our sample to those with internet access and may therefore lead to oversampling of higher SES and urban populations (Skinner et al., 2003).

Due to space limitations in our survey, we did not evaluate a variety of constructs relevant to the COV and PCOR. Coming out has the potential to improve physical health and resilience, as well as identity improvements such as increased self-esteem and self-acceptance (e.g., McDermott et al., 2019; Ryan et al., 2009). Further, growth related to coming out has been conceptualized as occurring both at the individualistic (e.g., honesty, satisfaction, personal comfort) and collectivistic levels (e.g., advocacy work, community involvement, combating bias; Vaughn & Waehler, 2010). Given the specific ways in which growth and improvements related to coming out have previously been conceptualized, future studies looking at the relationship between the COV and PCOR and such individualistic and collectivistic constructs will help elucidate the additional ways in which vigilance behaviors when coming out and positive coming out responses may benefit SGMs.

The COV and PCOR offer effective methods of analyzing coming out-related outcomes across identities. Longitudinal studies may be among the most effective ways of determining the long-term emotional and social impacts of coming out. The COV can be used to help examine how coming out and the associated responses predict future outness, the presence of minority stressors, social support, and mental health outcomes. More specifically, the COV measures can be used to examine if vigilant behaviors around coming out more potently predict these outcomes than general outness. Identifying if vigilance truly predicts worse outcomes can help SGMs understand both when and how

coming out conversations go well and when they can go awry. The PCOR can also be used longitudinally to offer additional evidence for the findings that receiving love and acceptance for others increases the likelihood of future outness and improved well-being over time (Li & Samp, 2019).

Cross-culturally, the COV and the PCOR can offer insights into how coming out may look different for SGMs with various identities. Extant measures of outness and concealment vary in frequency across samples, suggesting that different demographic groups may come out or utilize concealment efforts to varying degrees. As such, the COV can be used to examine if vigilant behaviors are more common among different populations, and if this vigilance is associated with a group's increased concealment efforts over other populations. SGMs' perceptions of positive coming out experience likely vary across cultural contexts. Given the demographics of our current sample, we are confident that the PCOR is reliable and valid for religious, White sexual minorities. However, this relationship remains less clear for SGMs with other backgrounds; for example, we are less confidence that a bisexual cisgender woman of color living in the United States would both perceive and experience the responses on the PCOR in the same way as an asexual nonbinary person living in Asia. Therefore, the PCOR ought to be utilized to examine a) whether people with various identities (e.g., sexual and gender minorities, religious affiliation, race/ethnicity) are positively responded to more frequently than other groups, and b) if these responses relate to the same outcomes in the same way across demographics. Understanding the ways in which coming out responses are perceived across cultures and influence different outcomes may help uncover some of the ways in which context, intersectionality, and group membership influences the overall

coming out experience. The authors of the present study are conducting a follow-up study to further validate the COV and the PCOR with participants across a variety of religious and racial/ethnic backgrounds.

Conclusion

The present study introduces two psychometrically sound measures related to coming out experiences: the COV and the PCOR. The three-item COV measure demonstrated acceptable internal consistency, and good concurrent, discriminant, and predictive validity. The PCOR measure demonstrated excellent internal consistency and good predictive validity. Further, both measures were shown to function well across diverse religious, sexual, and gender identity groups. The COV is the first measure of vigilant behaviors surrounding coming out, and the PCOR is the first measure that assesses the frequency of receiving positive responses to SGMs' coming out. The present study includes participants with a broad range of sexual and gender identities. Future research is necessary to explore the applicability of these measures among various samples and compared to other measures. These measures provide researchers the opportunity to better explore both how and when coming out relates to various health, well-being, and sexual identity outcomes.

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CHAPTER IV

STUDY THREE

Understanding How Coming Out Goes Well for Sexual and Gender Minorities

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Abstract

Coming out is often seen as a positive event that bolsters well-being for sexual and gender minorities (SGMs). However, the relationship between coming out and well-being is more complex among SGMs. We set out to evaluate the reliability and convergent, divergent, and incremental validity of two recent scales related to coming out: the Coming Out Vigilance and Positive Coming Out Responses scales. Using a sample of 437 SGMs and supporting previous work, we found evidence supporting the reliability and convergent, divergent, predictive, and incremental validity of both scales. Both scales evidenced substantial relationships with well-being, with the Coming Out Vigilance scale being related to all facets of well-being except relationships, and the Positive Coming Out Responses scale being related to all facets of well-being. Most importantly, we found that the Coming Out Vigilance and Positive Coming Out Responses scales accounted for variation in well-being above and beyond that accounted for by LGBTQ+ Hypervigilance and Parental Acceptance, respectively. We found that participants' religious background was not substantially related to scores on either scale, with religion accounting for only 3.6% of the variance in SGMs' well-being. Finally, we did not find evidence that the Coming Out Vigilance scale moderated the relationship between outness and well-being, nor did we find evidence that the Positive Coming Out Responses scale mediated the relationship between outness and well-being.

Keywords: Coming Out, Vigilance, Concealment, LGBTQ, Acceptance, Religion

Understanding How Coming Out Goes Well for Sexual and Gender Minorities

Coming out—or the act of disclosing one's sexual and/or gender identity to others—is often a pivotal and stressful experience (Rosati et al., 2020). Sexual minorities (individuals who experience some degree of same-sex attraction and/or who consistently engage in some degree of same-sex sexual behavior; Lefevor, Sorrell et al., 2019) and gender minorities (individuals whose gender identity does not correspond with that expected from their sex assigned at birth; Toomey et al., 2018) face a variety of pressures and stressors due to their minority identity. To cope with these pressures, many sexual and gender minorities (SGMs) hide their identity from others, which often results in feelings of depression, social disconnection, and a lack of life satisfaction (Huang & Chan, 2022; Livingston et al., 2020). Many SGMs ultimately share their SGM identity with others, typically with the hope that coming out will allow them to better connect with people and break free of some of the pressures to fit heterosexual and binary gender roles (Skidmore et al., 2022).

Identity disclosure—colloquially referred to as coming out—is often related to an improvement in an individual's sense of subjective well-being (i.e., an individual's happiness, subjective wellness, and psychological quality of life, including perceived physical health, social relationships, and environmental factors; Medvedev & Landhuis, 2018). Well-being is oftem conceptualized as composed of five interconnected dimensions: positive emotion, engagement, relationships, meaning, and accomplishment (PERMA; Seligman, 2011). Positive emotion entails both good feelings and a subjective positive assessment (Seligman, 2011). Engagement entails profound psychological connection with activities or cause, often involving absorption in tasks (Forgeard et al.,

2011). Relationships, sometimes referred to as positive relationships, include one's perception of the quality of connection with others, including feeling sof love, value, and care. Meaning pertains to finding significance in life or belonging to something greater than oneself. Finally, accomplishment signifies both external and internal success and mastery (Seligman, 2011). Seligman (2011) argues that each of these dimensions relates to positive psychological adjustment, is defined and measured independently from the other dimensions, and must be pursued for its own sake.

Often, SGMs who come out also report an improvement across various dimensions of well-being. In terms of positive emotionality, identity disclosure is linked to raised self-esteem and reduced depression (Baiocco et al., 2015). In terms of engagement, coming out has been linked to an uptick in community involvement (Vaughn & Waehler, 2010). In terms of relationships, SGMs who come out note that they feel closer to those around them, and that these connections feel deeper and more meaningful (Ho et al., 2018; Skidmore et al., 2022). In terms of meaning, SGMs who come out and become more engaged within their communities—particularly with communities emphasizing purpose such as religious groups—also note a surge in their sense of meaning (Riggle et al., 2014; Willoughby et al., 2008). Finally, in terms of accomplishment, SGMs who come out may feel a sense of achievement due to their identity disclosure and the formation of more authentic connections (Legate et al., 2012).

Although coming out may boost well-being across all five domains, some SGMs may face challenges to coming out that may ultimately decrease their sense of well-being. For example, SGMs who belong to religious communities that discourage same-gender relationships or non-conforming gender expression are more likely to report varying

outcomes after coming out (Fernandes et al., 2021). For SGMs affiliated with such communities, the process of coming out can be distressing due to a higher likelihood of encountering negative responses compared to those in more affirming settings (Dahl & Galliher, 2012). Negative reactions from friends and family—more prevalent among SGMs affiliated with these less affirming religious communities—can exacerbate the harm associated with coming out, ultimately leading to decreased well-being (Baiocco et al., 2020; Rosati et al., 2020; Snapp et al., 2015). Additionally, SGMs in uncertain social environments may experience heightened stress and anxiety as they contemplate coming out (Keating & Muller, 2019; Timmins et al., 2017), with some ultimately opting to maintain secrecy regarding their SGM identity (Duncan et al., 2019), further highlighting the complexities and challenges surrounding coming out.

Although it is clear that there are ways in which coming out may go better and worse for SGMs, it is less clear what those ways are. It appears that there may be a handful of factors related to the *person being come out to* that may lead coming out to go better or worse. When others respond with love and acceptance, SGMs tend to report increased positive emotionality and an increased sense of connection (McDermott et al., 2019), whereas when SGMs are met with perceived or actual rejection, they tend to report decreased well-being and increased depression (Rosati et al., 2020; Ryan et al., 2009). There may also be a handful of factors related to the *person coming out* that may lead coming out to go better or worse. SGMs who first come out to those with whom they feel closest and in situations where they feel heightened autonomy report a more beneficial coming out experience (Baiocco et al., 2015; Legate et al., 2012; Pistella et al., 2020). Conversely, SGMs who engage in more vigilant behaviors such as rehearsing the

coming out conversation beforehand and anticipating reactions report a decrease in life satisfaction (Skidmore et al., 2023). Taken together, it appears that coming out alone does not consistently relate to increased well-being, but this relationship may be affected by how one comes out and how others respond.

Two scales were recently developed to measure factors relating to both the person being come out to and the person coming out: The Positive Coming out Responses scale and the Coming Out Vigilance scale (Skidmore et al., 2023). Both scales were developed from qualitative interviews with SGMs that focused on what factors helped SGMs have positive coming out experiences (Skidmore et al., 2023). The Positive Coming Out Responses scale (PCOR) assesses the degree to which SGMs are met with affirming responses when they come out, such as others' demonstrations of support, love, celebration, and advocacy. The PCOR appears to relate to increased life satisfaction and family support, suggesting that improvements to well-being may be more likely when an SGM's coming out is met with affirmation (Skidmore et al., 2022, 2023). In contrast, the Coming Out Vigilance measure (COV), assesses the degree to which SGMs approach coming out with vigilant behaviors, such as anticipating others' reactions, preparing for/rehearsing the coming out conversation, and determining to whom they with come out. The COV appears to relate to decreased positive emotionality and potentially decreased social connection (Skidmore et al., 2023).

Although neither scale has been examined as a mediator or moderator of the relationship between outness and well-being, it is likely that both scales influence this relationship. Positive responses to an SGM's coming out is repeatedly related to improved well-being, suggesting that outness may relate to well-being through such

positive responses. Although less clearly studied, vigilant approaches to coming out may also relate to well-being, such that more vigilant behaviors when coming out may lead outness to relate less strongly to well-being.

Current Study

In the present study, we examine whether these two variables (coming out vigilance, positive responses to coming out) help us understand how coming out goes well when it does. Because the scales for coming out vigilance and positive responses to coming out were recently developed and have minimal information to their reliability and validity, we first examine the reliability and validity of the COV and PCOR (RQ1). Following measurement analyses, we examine the degree to which variation in well-being can be accounted for by SGMs' varying religious affiliations, acknowledging that SGMs who belong to religious traditions that discourage same-sex sexual relationships and gender expansive expression are likely to have different experiences with coming out than those who do not belong to such traditions (RQ2). Finally, we examine whether the COV and the PCOR mediate/moderate the relationship between outness and well-being (RQ3). Based on our review of the literature, we make the following hypotheses:

H1: The COV and PCOR will demonstrate adequate reliability and validity

H1a: Both the COV and PCOR will demonstrate acceptable reliability as well as convergent and discriminant validity with outness and concealment

H1b: The COV will demonstrate incremental validity in predicting well-being compared to general LGBTQ hypervigilance

H1c: The PCOR will demonstrate incremental validity in predicting well-being compared to a measure of parental acceptance

H2: A substantial proportion of variation in well-being will be accounted for by religious tradition

H2a: Participants who belong to religious traditions that discourage same-sex sexuality or gender expansive expression will report less well-being than participants who do not

H3: The COV will moderate the relationship between outness and well-being, such that those who are out to others but employ vigilant behaviors when coming out will have lower well-being than those who do not

H4: The PCOR will mediate the relationship between outness and well-being, such that those who are more out to others and receive more positive responses to their coming out will have higher well-being than those who do not receive such positive responses

Method

Participants

The proposed project has several disparate research questions and involves a quantitative study of religious SGMs to understand their coming out experiences and associated outcomes. Per a prior power analysis, to detect a small moderation effect in the present study, we estimated needing at least 76 participants (Soper, 2022). However, sample sizes needed for multilevel modeling vary, with some estimates suggesting that a minimum sample of 50 participants *per group* is needed to produce valid estimates for multi-level regression models (e.g., Moineddine et al., 2007). Given our desire to sample

SGMs from a variety of religious backgrounds (which will be used as the grouping variable for multilevel modelling analyses), we aimed to collect data from approximately 500 SGMs from differing religious backgrounds (including no religious affiliation), allowing us to likely effectively compare several religious traditions as multi-level groups.

Participants were recruited using a Prolific panel to reach SGMs from various religions in an attempt to get a more comprehensive and equal sample of SGMs across different religious affiliations. Participants first responded to eligibility criteria to determine if they could be included in the study. Eligibility criteria include a) being at least 18 years old, b) reporting some level of same-sex sexual attraction, consistent same-sex sexual behavior, gender expansive expression, and/or identify as an SGM, and c) reporting having come out to at least one person. In total, 528 participants completed the survey. However, only 437 participants met all eligibility criteria and were included in subsequent analyses. Demographic information regarding these participants is included in Table 1.

Table 1

Demographic Frequencies (n = 437)

	n	$\%$
Race/Ethnicity		
Asian/Asian American	24	5.5%
Black/African American	80	18.3%
Latinx/Hispanic American	32	7.3%
Non-Hispanic White/European American	267	61.1%
Multi-ethnic	28	6.4%
Other	6	1.4%
Education		
High school or less	52	11.9%
Some college	144	33.0%

Undergraduate degree	172	39.4%
Graduate degree	69	15.8%
Gender Identity		
Cisgender Man	132	30.2%
Cisgender Woman	209	47.8%
Transgender Man	24	5.5%
Transgender Woman	9	2.1%
Gender non-binary/Genderqueer	48	11.0%
Other	15	3.4%
Sexual Identity		
Gay/Lesbian	103	23.5%
Queer	32	7.3%
Bisexual	224	51.3%
Pansexual	43	9.8%
Asexual	16	3.7%
Other	19	4.4%
Current Religious Affiliation		
Buddhist	12	2.7%
Catholic	48	11.0%
Christian - Protestant	57	13.0%
Christian - Pentecostal	22	5.0%
Jewish	8	1.8%
None	247	56.5%
Other	43	9.8%
Religious Affiliation Growing Up		
Buddhist	8	1.8%
Catholic	116	26.5%
Christian - Protestant	148	33.9%
Christian - Pentecostal	72	16.5%
Jewish	10	2.3%
None	60	13.7%
Other	23	5.2%

Measures

Coming Out Vigilance. Coming Out Vigilance was assessed using a 7-item scale created from themes collected from the authors' previous qualitative analysis of SGM experiences (Skidmore et al., 2022). The scale asks participants to indicate the degree to which they agree with each item, using a Likert-type scale ranging from *strongly disagree* (1) to *strongly agree* (7). The Coming Out Vigilance scale evidenced acceptable

internal consistency (α = 0.74) in the validation sample, as well as convergent,

discriminant, and predictive validity (Skidmore et al., 2023). See Appendix B for a full

list of scale items.

Positive Coming Out Responses. Positive Coming Out Responses was assessed

using an 8-item scale created from themes collected from the authors' previous

qualitative analysis of SGM experiences (Skidmore et al., 2022). The scale asks

participants to indicate the degree to which they agree with each item, using a Likert-type

scale ranging from *strongly disagree* (1) to *strongly agree* (7). The Positive Coming Out

Responses scale evidenced excellent internal consistency (α = 0.91) and predictive

validity in the validation sample (Skidmore et al., 2023). See Appendix B for a full list of

scale items.

Well-being. Well-being was assessed using the five subscales of the PERMA

Profiler (Butler & Kern, 2016). Participants indicated how frequently they experienced

each of fifteen items ranging from *never* (1) to *always* (10). Items include "In general,

how often do you feel joyful," "How often do you become absorbed in what you're

doing," and "How often do you achieve the important goals you have set for yourself?"

The PERMA Profiler includes three questions for each of the five subscales that compose

Seligman's five domains of well-being (positive emotionality, engagement, relationships,

meaning, and accomplishment), yielding a total of fifteen items comprising the general

construct of well-being. The authors of the scale report excellent reliability and validity

for the general scale as well as each of the individual subscales (Butler & Kern, 2016).

For the present study, internal consistency was excellent for overall Well-being (α = .95),

as well as all five subscales: Positive Emotionality (α = .92), Engagement (α = .97), Relationships (α = .88), Meaning (α = .92), and Accomplishment (α = .86).

Outness. Outness was measured using a single item measure of outness (Wilkerson et al., 2016). Participants responded to the following question, "How open/out are you about your experience with same-sex attraction (current or former) and/or being LGBTQ+?" Responses range from *not at all open/out* (1) to *open/out to all or most people I know* (5). This single-item indicator of outness was found to be as good a measure of outness as multi-item predictors (Wilkerson et al., 2016).

LGBTQ-Hypervigilance. LGBTQ Hypervigilance was measured using the LGBTQ-Hypervigilance Scale (Riggle et al., 2021). Participants responded to a series of 13 statements related to where and around whom SGMs paid extra attention, and 12 statements related to safety-focused behaviors. The scale uses a Likert-type scale ranging from *strongly disagree* (1) to *strongly agree* (7). The measure includes items such as, "I feel hypervigilant (pay extra attention) when I am around strangers," and "I feel hypervigilant (pay extra attention) when I am at work." The authors reported good internal consistency for the overall scale and subscales, as well as good construct validity (Riggle et al., 2021). For the present study, internal consistency was excellent (α = .94).

Parental Acceptance. Parental acceptance was measured using five-point Likert responses to eight items including "How often do your parents say that they like you as you are in regard to being an LGBTQ person?", "How often do your parents say they were proud of you for being an LGBTQ person?", and "How often do your parents taunt or mock you because you are an LGBTQ person" (reverse coded; Miller et al., 2020). This measure has been used in multiple studies with large samples of SGMs and has been

shown to have high reliability and validity (e.g., Abreu et al., 2022; Gamarel et al., 2020). For the present study, internal consistency was excellent ($\alpha = .90$).

Analysis Plan

Before running the proposed analyses, data was checked for missing values. Data were thrown out that did not pass several quality assessment items throughout the survey in an effort to maintain the quality of collected data. Skewness and kurtosis were then assessed to test the assumptions underlying the use of regression and multilevel model analyses. These values should be between -2 and 2 for each study variable (George & Mallery, 2010). Means and standard deviations were then calculated for demographic variables, predictor, moderator, mediator, and dependent variables. The scores were then standardized to better aid the plotting of potentially significant moderator effects as well as reduce the threat of multicollinearity between variables and provide clearer interpretations (Frazier et al., 2004). Study analyses were conducted in R version 4.1.2 (R Core Team, 2021) and SPSS version 26.0.

Hypothesis 1 was tested by assessing internal consistency of the COV and PCOR scale items, running a correlation matrix between the COV, PCOR, and variables of interest, and and running hierarchical multiple regressions, checking the F-change and R^2 statistics to determine if the COV and PCOR explain variance in Well-being above and beyond Hypervigilance and Parental Acceptance. Hypothesis 2 was examined by running a null multilevel model using Well-being as the predictor and Religion as the clustered variable via the lme4 package (Bates et al., 2015). From this null model, the intraclass correlation (ICC) will be determined, which ought to be at least > .05 in order to consider pursuing a multilevel model. The ICC will reveal the amount of variance in Well-being

accounted for by participants' religious affiliations. Finally, hypotheses 3 and 4 were examined using the PROCESS macro (Hayes, 2013) for moderation regressions (Hypothesis 3) and mediation regressions (Hypothesis 4).

Results

Preliminary Analyses

Prior to running reliability, validity, and regression analyses, we first ensured that data met required assumptions for multilevel modelling and regression analyses (Hox et al., 2017). Assumptions for normality were met as all study variables evidenced skewness and kurtosis values between -2 and 2. Further, no missing data were found, given that Prolific only includes participants who have completed the entirety of surveys. Descriptive statistics and correlations between variables of interest are presented in Table 2. Participants on average indicated being open (out) to "about half of the people" they know and "somewhat agreeing" with COV and PCOR items, suggesting that participants were largely out to many people in their lives, felt that they utilized vigilant behaviors when coming out, and received positive responses from coming out. On average, participants further indicated slight agreement with LGBTQ+ Hypervigilance items and reported "rarely" experiencing Parental Acceptance, suggesting that participants were more likely than not to pay extra attention around others regarding their SGM identity and feel that their parents were not accepting of them as an SGM. Finally, participants reported aspects of Well-being over half of the time.

Table 2

Study Variable Descriptive Statistics and Correlations

	M (SD)	Range	1.	2.	3.	4.	5.	6.	7.
1. COV	5.04 (1.52)	1-7	-						
2. PCOR	5.43 (1.08)	1-7	.10*	-					
3. Well-being	6.85 (1.76)	1-10	.20*	.32**	-				
4. Outness	3.38 (1.12)	1-5	-.22**	.06	.26**	-			
5. LGBTQ+ Hypervigilance	4.72 (1.10)	1-7	.31**	-.13**	-.28**	-.23**	-		
6. Parental Acceptance	2.04 (1.08)	1-4	<.01	.24**	.16**	.23**	-.07	-	
7. Age	34.57 (11.74)	19-82	.05	-.01	.24**	.15**	-.13**	-.05	-

Note. COV = Coming Out Vigilance; PCOR = Positive Coming Out Responses; * = $p < .05$; ** = $p < .01$.

To determine whether demographic variables should be included in regression models as covariates, correlations and ANOVAs were run with relevant demographic variables (i.e., Age, Race/Ethnicity, Gender Identity, Sexual Identity) to determine their relationships with study variables. Age was significantly related to Well-being ($r = .24$, $p < .05$) and Outness ($r = .15$, $p < .05$) and was thus included in subsequent regression models. Analyses of variance suggested significant differences in Race/Ethnicity for Well-being, $F(5, 432) = 3.13$, $p < .05$, and for Outness, $F(5, 432) = 2.83$, $p < .05$. Given that the majority of participants identified as Non-Hispanic White, we dichotomized Race/Ethnicity (White [0], Person of Color [1]). Independent sample t-tests indicated that although White participants indicated significantly more Outness than participants of color ($t = 2.50$, $p < .05$), participants did not differ in their Well-being ($t = -1.14$, $p = .13$) and Race/Ethnicity was ultimately not identified as a covariate for future analyses. ANOVAs further indicated significant differences in Gender Identity for Well-being, $F(5, 432) = 3.49$, $p < .05$, and Coming Out Vigilance, $F(5, 432) = 2.87$, $p < .05$. After splitting up gender identities (Cisgender Women vs. Cisgender Men vs. Transgender and Nonbinary), independent sample t-tests indicated significant differences between Cisgender Women and all other gender identities in relation to Well-being ($t = -2.07$, $p < .05$), Outness ($t = -2.76$, $p < .05$), and Coming Out Vigilance ($t = -3.21$, $p < .05$), and as such, we include Cisgender Women as a covariate in subsequent analyses. Cisgender Men evidenced significant differences compared to participants with other gender identities only in terms of Well-being ($t = 2.51$, $p < .05$), and were thus not included as a covariate in future analyses. Finally, ANOVAs indicated significant differences in Sexual Identity for Well-being, $F(5, 432) = 2.88$, $p < .05$, and Outness, $F(5, 432) = 7.99$, $p < .05$.

After dichotomizing Sexual Identity (Monosexual [0], Other [1]; e.g., Abreu et al., 2022), independent sample *t*-tests indicated that Monosexual participants indicated significantly higher levels of Well-being (*t* = 2.96, *p* < .05) and Outness (*t* = 7.25, *p* < .05) than participants with other sexual identities; as such, Monosexual was included in subsequent regression analyses.

Reliability and Validity of the COV and PCOR

Internal Consistency

The COV evidenced overall acceptable internal consistency (α = .75), whereas the PCOR evidenced excellent internal consistency (α = .92). These reliability statistics echo those of the initial assessment of the internal consistency for the COV (α = .74) and the PCOR (α = .91; Skidmore et al., 2023). Both the COV and the PCOR thus appear to be reliable and cohesive measures.

Convergent and Discriminant Validity

The COV demonstrated both convergent and discriminant validity with Outness (*r* = -.22, *p* < .05) and Concealment (*r* = .39, *p* < .05), as correlation coefficients were less than .70 but greater than .10. Thus, we conclude that the COV is related to Outness and Concealment while remaining conceptually distinct. The PCOR did not demonstrate convergent or discriminant validity with Outness (*r* = .06, *p* = .25) or Concealment (*r* = -.10, *p* < .05). Given that outness and concealment focus on SGMs' behaviors, it follows that the PCOR—which highlights how others respond to these behaviors—is a distinct phenomenon. As such, SGMs who come out to many people as opposed to just a few people may be just as likely to experience positive responses from others.

Both the COV and PCOR demonstrated convergent and discriminant validity with constructs more closely aligned with what they purport to measure. The COV evidenced convergent validity with LGBTQ+ Hypervigilance ($r = .31$, $p < .05$), suggesting that the COV is similar to but distinct from general hypervigilance. The PCOR evidenced convergent validity with Parental Acceptance ($r = .24$, $p < .05$), similarly suggesting that the PCOR is similar to but distinct from accepting behaviors from SGMs' parents. As such, the COV and PCOR could be used both alongside and independent from measures of vigilance and parental acceptance.

Predictive and Incremental Validity

Both the COV and the PCOR measures evidenced predictive validity with overall Well-being. Correlation analyses indicated that the COV was significantly related to Well-being ($r = .20$, $p < .05$), suggesting that those who are more vigilant in their coming out approaches may also evidence more overall well-being. Similarly, analyses indicated that the PCOR was significantly related to Well-being ($r = .31$, $p < .05$), suggesting that those who receive more positive responses to their coming out also evidence more overall well-being.

The COV measure evidenced incremental validity in explaining variance in Well-being above and beyond that explained by general, LGBTQ+ Hypervigilance. Regression analyses indicated that LGBTQ+ Hypervigilance alone was significantly related to lower levels of Well-being ($F[1, 436] = 37.75$, $R^2 = .08$, $p < .05$) and that adding the COV to the model accounted for additional variation in Well-being after accounting for LGBTQ+ Hypervigilance ($\Delta F = 23.84$, $R^2 = .13$, $p < .05$). Interestingly, although COV accounted for more variation in Well-being beyond LGBTQ+ Hypervigilance, it related to an

increase in Well-being (b = .23, p < .05) while LGBTQ+ Hypervigilance was related to a

decrease in Well-being (b = -.36, p < .05), although these measures were positively

correlated (r = .31, p < .05). This finding suggests that the COV explains a theoretically

distinct portion of the variance in Well-being than general, LGBTQ+ Hypervigilance.

The PCOR evidenced incremental validity in explaining variance in Well-being

above and beyond that explained by Parental Acceptance. Regression analyses indicated

that Parental Acceptance alone was significantly related to Well-being (F[1, 436] =

10.58, R^2 = .02, p < .05) and that adding the PCOR to the model accounted for additional

variation in Well-being after accounting for Parental Acceptance (ΔF = 41.71, R^2 = .11, p

< .05), with both the PCOR (b = .30, p < .05) and Parental Acceptance (b = .16, p < .05)

being positively related to Well-being. The PCOR also evidenced a much stronger

relationship with Well-being (β = .30) than Parental Acceptance (β = .16), suggesting the

positive responses to coming out may be more strongly related to well-being than

perceptions of parents' acceptance.

Intraclass Correlation, Moderation, and Mediation Analyses

Prior to running the multilevel model, Religious Affiliation was simplified into

the following four groups to ensure that each religious group had approximately 50

participants: Catholic, Christian – Mainline Protestant, No Religion, Other Religion.

Analysis of the null model with Well-being as the outcome and Religious Affiliation as

the grouping variable demonstrated an ICC of .036, indicating that 3.6% of the variance

in Well-being scores can be attributed to the group (Religion) level. Given that the ICC

was below .05, we concluded that the variation in Well-being scores due to Religion was

not substantial enough to make a meaningful difference in subsequent analyses; as such, we did not utilize a multilevel modeling approach to regression analyses.

Five regression models were run (one for each component of Well-being) to assess the relationship between Outness and Well-being, as well as whether Coming Out Vigilance moderated these relationships. See Table 3 for regression analyses with main study variables, and Appendix C for full moderation regression analyses. Contrary to our hypothesis, the COV did not moderate the relationship between Outness and any of the five components of Well-being. Nonetheless, both Outness and COV were positively related to nearly all aspects of Well-being independently (β_{Outness} range from .20 to .30; β_{COV} range from .13 to .22), suggesting that vigilant approaches to coming out may lead to (or be the consequence of) higher levels of Well-being.

Table 3

Coming Out Vigilance Moderating Outness and Well-being

Positive Emotions			Engagement			Relationships		
Variable	*b(SE)*	*β*	Variable	*b(SE)*	*β*	Variable	*b(SE)*	*β*
Main Effect			*Main Effect*			*Main Effect*		
Outness	.18**(.04)	.21	Outness	.17**(.04)	.20	Outness	.26**(.04)	.30
COV	.13**(.05)	.13	COV	.19**(.05)	.19	COV	.09(.05)	
Interaction			*Interaction*			*Interaction*		
Outness x COV	-.01(.04)		Outness x COV	-.07(.04)		Outness x COV	-.01(.04)	
Model Fit	*F(df)*	R^2	*Model Fit*	*F(df)*	R^2	*Model Fit*	*F(df)*	R^2
	7.65**(6, 431)	.11		7.08**(6, 431)	.09		8.34**(6, 431)	.10

Meaning			Accomplishment		
Variable	*b(SE)*	*β*	Variable	*b(SE)*	*β*
Main Effect			*Main Effect*		
Outness	.18**(.04)	.21	Outness	.22**(.04)	.26
COV	.14**(.05)	.14	COV	.22**(.05)	.22
Interaction			*Interaction*		
Outness x COV	-.01 (.04)		Outness x COV	-.06(.04)	
Model Fit	*F(df)*	R^2	*Model Fit*	*F(df)*	R^2
	9.90**(6, 431)	.12		12.75**(6, 431)	.15

Note: COV = Coming Out Vigilance; * = $p < .05$; ** = $p < .01$.

Five regression models were run (one for each component of Well-being) to assess whether Positive Coming Out Responses mediated the relationship between Outness and Well-being using the PROCESS macro (Hayes, 2013), with Outness included as the independent variable, the PCOR as the mediator variable, and one of the five components of Well-being as the dependent variable. See Table 4 for analyses with main study variables and Appendix D for full mediation regression analyses. Contrary to our hypothesis, the PCOR did not mediate the relationship between Outness and any of the five components of Well-being. Although the PCOR did not mediate the relationship between Outness and any component of Well-being, it appears that both Outness and PCOR positively relate to Well-being independently, with PCOR relating to higher levels of Well-being almost twice as potently as general Outness.

Table 4

Positive Coming Out Responses Mediating Outness and Well-being

Positive Emotions			Engagement			Relationships		
Variable	*b(SE)*	CI	Variable	*b(SE)*	CI	Variable	*b(SE)*	CI
Effect of Outness on PCOR			*Effect of Outness on PCOR*			*Effect of Outness on PCOR*		
Outness	.08(.04)	[-.01, .16]	Outness	.08(.04)	[-.01, .16]	Outness	.08(.04)	[-.01, .16]
Effect of Variables on Well-being			*Effect of Variables on Well-being*			*Effect of Variables on Well-being*		
Outness	.13**(.04)	[.05, .21]	Outness	.11**(.04)	[.03, .19]	Outness	.21**(.04)	[.13, .28]
PCOR	.25**(.04)	[.16, .34]	PCOR	.24**(.05)	[.15, .33]	PCOR	.39**(.04)	[.30, .47]
Outness→PCOR→Well-being			*Outness→PCOR→Well-being*			*Outness→PCOR→Well-being*		
Indirect Effect	.02(.01)	[<.01, .04]	Indirect Effect	.02(.01)	[<.01, .04]	Indirect Effect	.03(.02)	[<.01, .07]

Meaning			Accomplishment		
Variable	*b(SE)*	CI	Variable	*b(SE)*	CI
Effect of Outness on PCOR			*Effect of Outness on PCOR*		
Outness	.08(.04)	[-.01, .16]	Outness	.08(.04)	[-.01, .16]
Effect of Variables on Well-being			*Effect of Variables on Well-being*		
Outness	.13**(.04)	[.05, .21]	Outness	.15**(.04)	[.07, .23]
PCOR	.27**(.04)	[.18, .35]	PCOR	.26**(.04)	[.17, .34]
Outness→PCOR→Well-being			*Outness→PCOR→Well-being*		
Indirect Effect	.02(.01)	[<.01, .05]	Indirect Effect	.02(.01)	[<.01, .05]

Note: CI = Confidence Intervals; PCOR = Positive Coming Out Responses; * = *p* < .05; ** = *p* < .01.

Discussion

With a sample of 437 SGMs, we further assessed the reliability and validity of the COV and PCOR scales. We found both the COV and PCOR to be reliable scales that demonstrated convergent, divergent, and predictive validity. We further found the COV and PCOR to evidence incremental validity in explaining variation in well-being above and beyond that explained by measures of hypervigilance and parental acceptance, respectively. We failed to find evidence that the COV moderated or that the PCOR mediated the relationship between outness and well-being. Taken together, our results suggest that the COV and the PCOR represent reliable and valid measures that assess *how* coming out is approached and responded to, allowing us to better understand what it looks like when coming out goes well.

Are the COV and PCOR Scales Psychometrically Sound?

Reliability and validity analyses suggest that the Coming Out Vigilance and Positive Coming out Responses measures are reliable and valid scales. Further, they are respectively the first scales to measure to directly assess SGMs' engagement in vigilant behaviors when coming out and SGMs' perceptions of others' reactions to their coming out. Both measures were initially created based on qualitative interviews with SGMs who were current or former members of the Church of Jesus Christ of Latter-day Saints (Skidmore et al., 2022). They were then further developed among a larger sample of SGMs who also at one point affiliated with the Church of Jesus Christ of Latter-day Saints (Skidmore et al., 2023). We intentionally sought to further validate them using a sample of more religiously representative SGMs in the United States, with the purpose of examining whether coming out vigilance functions similarly across religious affiliations.

Given that the COV and PCOR evidenced acceptable reliability as well as convergent and discriminant validity similar to the prior study (Skidmore et al., 2023), we can assume that they are reliable and valid measures for SGMs from varying religious traditions, including SGMs with no religious affiliation.

The COV also appears to uniquely explain variation in well-being, above and beyond that explained by hypervigilance and general outness. Particularly noteworthy is that coming out vigilance is *positively* related to well-being, suggesting that engaging in vigilant behaviors were ultimately helpful for SGMs. This relationship contrasts with the negative relationship between LGBTQ+ hypervigilance and well-being, possibly suggesting that although vigilant behaviors may be helpful, hypervigilant behaviors may not be. Hypervigilance refers to safety-seeking behaviors above what is considered adaptable (American Psychiatric Association, 2013), whereas vigilance may be considered as more functionally appropriate safety-seeking. As such, it may be that the COV, while related to hypervigilance, better captures a set of behaviors that are best described as vigilant rather than hypervigilant. Indeed, the COV was created based on interviews where participants were asked what they did to help their coming out conversations with others go *well* (Skidmore et al., 2022).

Similarly, the PCOR appears to uniquely explain variation in well-being, above and beyond that explained by parental acceptance and general outness. Indeed, the PCOR seems to be unrelated to general outness though it does appear to be negatively related to concealment. It is thus likely that positive responses to SGMs' coming out are distinct from general outness, as SGMs who come out for the first time versus for the hundredth time may be just as likely to be received with support and acceptance (or lack thereof).

As such, positive reactions to SGMs' coming out may depend more on the people to whom they come out (and possibly the approaches SGMs take in coming out) and less on how frequently SGMs come out to others. It follows that SGMs who receive positive reactions to their coming out are then less likely to conceal their SGM identity from others, as they may feel safer to disclose their identity to other people.

The Role of Vigilance and Positive Responses in SGMs' Well-being

Our aim in developing both the COV and the PCOR was to create instruments that would allow researchers to better understand how and when coming out goes well. In addition to seeking to validate these instruments in this study, we also explored whether each could shed additional light on how and when coming out goes well.

Vigilance in Coming Out

Contrary to our expectations, we found that SGMs who utilized vigilant behaviors when coming out also enjoyed more well-being than those who did not. That coming out itself is related to well-being is well established (Baiocco et al., 2015); however, we found that using vigilance when coming out was uniquely related to well-being beyond general outness. Likely, this additional effect represents the reality that SGMs who come out in a way that feels safe experience additional well-being.

More granularly, we found that coming out vigilance was positively related to positive emotions, engagement, meaning in life, and accomplishment. Similar to general outness, utilizing vigilant approaches to coming out may lead SGMs to feel a sense of relief and satisfaction because they are likely to help coming out conversations go well (Baiocco et al., 2015; Medvedev & Landhuis, 2018). SGMs who vigilantly approach coming out may be more likely to experience profound psychological connection with

activities or causes, as well as feel a sense of success or mastery. Indeed, coming out in a way that feels safe may indicate a proactive engagement both with an SGM's identity and community, leading to a deeper sense of connection with activities or causes related to SGM communities (Vaughn & Waehler, 2010). Similarly, SGMs who come out and become more engaged within their communities also note a surge in their sense of meaning (Riggle et al., 2014; Willoughby et al., 2008). Finally, successfully navigating coming out conversations in a way that feels safe likely leads to a sense of accomplishment, particularly considering that many SGMs see coming out a frightening but ultimately fulfilling process (Legate et al., 2012). Taken together and contrary to previous assumptions, adopting a vigilant approach to coming out could significantly bolster the well-being of SGMs, making it an important consideration for those contemplating coming out.

These relationships may be in opposition to previous findings highlighting that vigilant behaviors when coming out positively relate to depression (Skidmore et al., 2023). There are several potential explanations for this seeming contradiction. First, it may be that these vigilant behaviors are not innately harmful, but that another factor such as facing minority stressors is influencing this relationship. For example, SGMs who face more prejudice or discrimination may be more likely to report depressive symptomology (Meyer, 2003) as well as more likely to approach coming out with caution. Thus, depression may not be the consequence of but the antecedent to vigilant behaviors. Second, it may be that these vigilant behaviors only relate to depression among current or former members of the Church of Latter-day Saints (the context in which this relationship was observed), and that SGMs more generally may instead benefit from these behaviors.

Given that coming out to individuals in more conservative religious traditions is often linked to negative reactions and increased minority stressors (Fernandes et al., 2021), utilizing vigilant behaviors could still lead to adverse responses and may lead SGMs in such contexts to feel disempowered, given that their attempts at establishing safety when coming out were not effective. Third, it is possible that these approaches to coming out are truly related to both depression and well-being, although this explanation is less likely given the direct relationship between COV and positive emotions.

Outside of directly relating to well-being, vigilant behaviors when coming out do not seem to influence the relationship between outness and well-being. SGMs who come out may thus garner the benefits of outness independent of employing or not employing such vigilant behaviors, suggesting that, on average, being open about one's sexual and/or gender identity to others may relate to enhanced well-being regardless of the ways in which one comes out.

Other's Reactions in Coming Out

Perhaps a bit more intuitively, it appears that others' positive reactions to SGMs' coming out is positively related to SGMs' well-being. That the responses to SGMs' coming out relates to well-being above and beyond general outness highlights the importance of these reactions. The fact that outness still relates to well-being after accounting for positive responses to coming out also suggests that, while related, outness and positive coming out responses are unique contributors to well-being. Thus, while coming out appears to be beneficial by itself, SGMs may *particularly* benefit from coming out when it is well-received by others.

More granularly, we observed that others' positive reactions to SGMs' coming out was positively related to their well-being across all five domains: Positive emotions, engagement, relationships, meaning, and accomplishment. In particular, positive reactions may most strongly relate to improved relationships with others, which coincides with existing findings that coming out is often linked to enhanced feelings of genuineness and closeness with others (van Bergen et al., 2020). SGMs thus may *particularly* benefit from coming out when others respond well. Beyond relationships, SGMs seem to enjoy more positive emotionality, engagement, meaning in life, and accomplishment when others respond to their coming out positively. These relationships support existing literature demonstrating that SGMs who are met with love, acceptance, and support following coming out also evidence more satisfaction with life, safety, and community engagement (McDermott et al., 2019; Ryan et al., 2009), and less depression, anxiety, and stress (Li & Samp, 2019; Meyer, 2003). As such, organizations, community leaders, and people who love and support SGMs may benefit from educating themselves and others regarding *how* to positively respond to SGMs who choose to come out, thereby enhancing not only their relationships but the overall well-being of SGMs.

Positive reactions to SGMs' coming out appear to be independent of general outness, and while both function independently, both positively relate to well-being. To some degree, outness may be beneficial to well-being regardless of how others respond, suggesting that the benefits of coming out (e.g., decrease in dissonance, reduced stress, increased self-acceptance and authenticity; Suppes et al., 2021) may outweigh the potential detriments of more adverse reactions to coming out. However, positive reactions to SGMs' coming out seems to be more potently positively linked to well-being

across all five domains. Although positive reactions to SGMs' coming out may not be the reason why outness is beneficial to well-being, such positive reactions are an important and vital indicator of SGMs' well-being, highlighting the importance of educating the general public regarding *how* to positively respond to SGMs who choose to come out and *why* these responses are so vital to well-being. These findings further demonstrate the need for assessment tools such as the PCOR measure, as solely using outness to measure mental health and well-being for SGMs disregards a powerful component of the coming out process.

Implications

The further validation of the COV and PCOR measures signify a clear advancement in understand the nuanced approaches and responses to SGMs' coming out experiences. These measures, rooted in the experiences of SGMs, offer researchers robust tools with demonstrated reliability and validity to understand SGMs' nuanced experiences. Researchers may use the COV to examine how SGMs are approaching coming out in order to capture not only the potential benefits of coming out, but the impacts of coming out in specific ways. Given the convergent, discriminant, predictive, and incremental validity of the COV, researchers may further use this measure to examine how coming out can predict future outness, the presence or absence of minority stressors, social support, and mental health outcomes. Researchers may also benefit from using the PCOR to understand how other people's responses impact the mental health and well-being of SGMs, thereby adding crucial nuance to conversations regarding coming out that typically place all the responsibility on SGMs. Using the PCOR may provide additional evidence for existing findings suggesting that love and acceptance

from others typically leads to further outness and improved well-being (Li & Samp, 2019). Further, SGMs and those who love and support them may feel a sense of hope in the finding that SGMs who receive positive responses to their coming out may experience well-being benefits above and beyond the benefits of parental acceptance, suggesting that even SGMs whose parents do not accept their LGBTQ+ identity can still garner the benefits of coming out. Given the expansion of community efforts to improve allyship and create safe spaces for SGMs, the COV and PCOR measures represent novel methods for researchers to enhance understanding regarding overall coming out experiences so that advocacy efforts may be better tailored to enhance the well-being of SGMs.

Limitations and Future Directions

The current study was limited by several factors that can be rectified in future studies. First, while our sample was diverse in age and sexual, gender, and racial/ethnic identities, the breakdown of our sample across religious affiliations was not adequate enough to perform a multilevel analysis without clustering several religious identities together, which may have underpowered the multilevel analysis. Thus, although our sample was more representative of SGMs in the United States in terms of religious affiliation, future studies hoping to assess the effects of religion on these relationships would benefit from collecting a more diverse and equal sample across religious identities, which would likely necessitate community sampling methods. Further, given the novel nature of the COV and PCOR, only cross-sectional work has been done thus far regarding these measures. Future research efforts geared toward longitudinally assessing the COV and PCOR would thus enhance our understanding on how the COV and PCOR

may be *predicting* well-being over time. Finally, given that coming out can be a daunting process and depend heavily on context and community, it is vital to note that the COV and PCOR represent approaches and responses to coming out that may be beneficial for some individuals, but are not meant as a one-size-fits-all approach to positive coming out experiences. Future research efforts should thus be geared toward better understanding the coming out experience among a variety of cultures, taking an intersectional approach to ensure that findings do not get conflated to entire groups when they may not be accurate.

Conclusion

The present study provided further support for the reliability and validity of the COV and PCOR, two psychometrically sound measures of coming out approaches and responses that positively relate to well-being for SGMs in the United States. We found evidence that even after accounting for other closely related measures like general hypervigilance, parental acceptance, and outness, the COV and PCOR continued to explain additional variation in well-being, suggesting that employing vigilant behaviors when coming out may help SGMs experience greater well-being and that others' responses to SGMs' coming out impact SGMs' well-being. These findings further suggest that seeking to come out in a safe way is distinct and operates oppositely from *hyper*vigilance, which represents safety-seeking behaviors and attitudes that are often disproportionate to situations. These findings can provide a guide for SGMs who seek to understand safe and beneficial ways to approach coming out, as well as inform individuals and communities how specific responses to SGMs' coming out can enhance

their relationships and the mental health of their SGM family, friends, peers, and

community members.

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CHAPTER V

GENERAL DISCUSSION

The purpose of this series of studies was to provide foundational understanding of the specific approaches and responses to coming out that can enhance SGMs' well-being. Through interviews with 25 SGMs, the first study found five approaches that current and former Latter-day Saint SGMs noted led to positive coming out experiences: being selective, increasing self-understanding and acceptance, preparing before, decreasing pressure on self, and validating the relationship. This study also found six responses from others that contributed to a beneficial coming out experience: showing loving acceptance, utilizing empathic listening skills, offering and expressing support, celebrating, affirming the relationship has not changed, and advocating. The second study integrated the themes from the first study to develop and validate measures of vigilance around coming out and others' responses to coming out: the Coming Out Vigilance (COV) and Positive Coming Out Responses (PCOR) measures. These measures were developed via exploratory and confirmatory factor analyses, and both measures evidenced reliability, metric and scalar invariance between demographic groups, and predictive validity with measures of mental health, well-being, and sexual identity. The COV further evidenced strong convergent and discriminant validity with measures of outness and concealment. Finally, the third study explored how coming out vigilance and positive coming out responses may impact well-being, focusing particularly on the unique variation in well-being these measures may explain. The third study also focused on the further validation of these measures. Both measures were found to be psychometrically sound. The COV was positively related to well-being and inversely related to hypervigilance, whereas the PCOR was

positively related to both well-being and parental acceptance, suggesting that both the COV and PCOR appropriately measure approaches and responses to coming out that may be beneficial for SGMs. However, the COV and the PCOR failed to moderator or mediate the relationship between outness and well-being. Below, we explore how our findings contribute to research and provide implications for clinical practice, individual intervention, and community advocacy.

Major Contributions

The predominant impetus for this dissertation project was to provide novel understanding regarding how SGMs can come out well, including in spaces which may be less affirming to SGM identities (e.g., some religious communities). Alongside the emergence of studies regarding the potential benefits (Solomon et al., 2015) and harms (Baiocco et al., 2020; Rosati et al., 2020) of coming out comes confusion for SGMs and those who support them of how SGMs can come out in a way that feels safe, natural, and affirming. To our knowledge, no studies exist regarding specific approaches or responses to coming out. Our first study was thus developed to address this gap by allowing SGMs to voice their coming out experiences. Findings from this qualitative study with 25 current or former Latter-day Saint SGMs provide initial understanding regarding what SGMs perceive as a "positive coming out" conversation. These findings provide the foundation for future research efforts that can look above and beyond general outness to better explore the nuance regarding coming out conversations and associated outcomes. Specifically, these themes suggest that both how SGMs approach coming out as well as how others respond are impactful to SGMs' well-being, which differs from the predominant narrative that coming out experiences differ based on how others respond.

Further, findings suggest that coming out conversations, particularly among LDS SGMs, are impactful events that are often the subject of much thought and planning.

The second and third studies built off findings from the first study by developing and validating two scales to effectively measure these nuanced approaches and responses to SGMs' coming out conversations. The COV and the PCOR scales are both psychometrically sound measures that appear to operate similarly across religious, sexual, gender, generational, and racial/ethnic identities. The existence of these measures will enable future, nuanced studies regarding coming out among SGMs.

From the validation analyses in study two, it appears that SGMs utilized the identified approaches to coming out to avoid potential rejection from others and to protect themselves, which ultimately led to labeling these approaches as "vigilant." Among LDS SGMs, the COV measure positively relates to concealment and negatively relates to outness, suggesting that these vigilant approaches to coming out may be utilized more by individuals who have not yet come out to many people; as such, LDS SGMs may be most likely to utilize these approaches to coming out when they are first approaching these coming out conversations. The COV is a particularly useful tool for researchers as it nuances existing measures of outness by specifying specific ways in which SGMs coming out. Further, the COV differs from existing measures of vigilance and hypervigilance, which tend to focus on concealing behaviors (Timmins et al., 2017; Veldhuis et al., 2018) as opposed to behaviors employed when disclosing one's identity. Further, the PCOR is a useful and novel tool for researchers as it fills in the gap of existing measures of acceptance, which tend to focus primarily on specific groups of people (e.g., parents; Abreu et al., 2022; McDermott et al., 2019; Ryan et al., 2009) and

include primarily items regarding rejection (Greene et al., 2015; Miller et al., 2020).

Researchers may benefit from using the PCOR as a more specific indicator of acceptance

and support, which can offer additional evidence for the findings that receiving love and

acceptance for others increases the likelihood of future outness and improved well-being

over time (Li & Samp, 2019). By providing a tool with a range of positive responses

across all groups, the PCOR allows researchers to assess *when* coming out is positively

responded to and *how* these specific responses improve mental health and well-being

over time.

Beyond validating the COV and PCOR measures, the third study provides a clear

example of how these scales can be used to develop a more nuanced understanding of the

coming out processes of SGMs. The COV and PCOR both positively relate to well-being

above and beyond outness, suggesting that, while coming out in and of itself appears to

be beneficial for well-being on average, utilizing these vigilant approaches and being

responded to in such positive ways *further* relates to well-being. Unlike with LDS SGMs,

we found in a general SGM sample that vigilant approaches to coming out may be

beneficial. Indeed, such approaches seem to operate in opposition to hypervigilant

behaviors, which negatively relate to well-being. Researchers using the COV should thus

be informed that these approaches differ from hypervigilant behaviors, which represent

behaviors above what is considered adaptable (American Psychiatric Association, 2013).

Similarly, positive responses to coming out positively relate to well-being above and

beyond general outness and parental acceptance, suggesting that while coming out

positively relates to well-being, receiving positive responses when coming out relates to

even more well-being.

This dissertation project offers valuable contributions to the research field in particular given its rigorous multi-method approach. By utilizing qualitative interviews, we were better able to explore SGMs' experiences with coming out without being constrained by the pre-selecting of potential themes. The utilization of subsequent factor, reliability, validity, and measurement invariance analyses also represent appropriately robust approaches to scale development, with items coming directly from SGMs' stories and experiences. Finally, the utilization of multiple samples across identities in studies two and three allowed for a more versatile and well-rounded approach to the validation of the COV and PCOR measures, as well as their relationship with well-being. Although future research efforts are required to better understand the relationships between COV, PCOR, and SGM well-being, especially over time and across cultures, we urge researchers to utilize these themes and scales to capture the nuanced experiences of SGMs as they approach the oftentimes daunting and life-long process of coming out.

Implications for Clinical Practice, Individual Intervention, and Advocacy

Findings from these three studies also have direct implications for mental health practitioners, advocacy efforts, and individuals who are considering coming out, as well as those to whom they come out. In clinical settings, where the narrative frequently emphasizes the benefits of coming out, mental health practitioners may benefit from recognizing the diverse approaches SGMs may have toward disclosure and the varied responses they may encounter. Mental health practitioners may do a disservice to SGM clients by encouraging them to come out to others while failing to discuss and acknowledge the importance of how they approach these conversations. The identified themes from study one can be used as a guide in clinical settings to help clients explore

the ways in which they may come out in a way that feels safe. Similarly, mental health practitioners can also use the themes from study one to inform clients who wish to be more supportive of their SGM friends, family members, and/or peers as to the specific ways in which they can positively respond to potential coming out conversations. From an advocacy perspective, raising awareness of the nuanced experiences of SGMs in coming out conversations can contribute to the creation of more inclusive and supportive environments. Individuals in positions of power (e.g., workplace leaders, educators, religious leaders) may benefit from educating themselves and those over whom they have influence on "best practices" for responding to SGMs who choose to disclose their identity. At the individual level, these findings can act as a type of guide for SGMs who are considering coming out to others. By having access to others' experiences and approaches that felt safe and positive, SGMs may feel more comfortable and confident in approaching such coming out conversations should they choose to do so.

Studies two and three may also inform mental health practitioners, advocacy efforts, and community- and individual-level intervention efforts. Practitioners working with SGM clients who are considering engaging in coming out conversations may feel unclear regarding how to best help their clients navigate such conversations. Practitioners could use the COV scale as a starting point for discussions surrounding the various ways to approach coming out in a way that feels safe, as well as the potential effects of such approaches. These measures could also be used following coming out conversations to help SGM clients reflect on their coming out conversations, which could help such clients focus on and maximize the potential benefits of coming out. For example, using the PCOR scale could help clients reflect on identify situations in which their coming out has

been met with positive responses, thus helping guide SGMs in selective when and to whom they come out in the future. Initial findings from the COV and PCOR can also inform advocacy efforts for SGM populations. Understanding the factors that are positively linked to well-being after coming out can guide the development of policies and programs that foster affirming and supportive environments. For example, work spaces and campuses may consider incorporating the findings from these studies in Allies Trainings to highlight the ways in which people can better act as allies to SGMs who choose to come out to them. Finally, SGMs can benefit from the knowledge that specific approaches to coming out tend to positively relate to well-being. Further, SGMs may find a sense of hope in approaching coming out conversations by understanding the broader and potent benefits that relate to the love, affirmation, and acceptance that others can provide as a result of these coming out conversations.

Taken together, this dissertation project has direct implications for clinical practice, advocacy, and individuals who are considering coming out, as well as those to whom they come out. These findings provide foundational knowledge regarding ways in which coming out may be more helpful for SGMs' well-being. Given the stressful nature of coming out, we strongly encourage researchers, mental health practitioners, leaders, and individuals who love and support their SGM family, friends, and peers to continue to enhance understanding regarding how to improve coming out conversations and provide a safer space for SGMs.

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APPENDICES

Appendix A

Online Groups Participants were Recruited from

Affirmation millennials group
- https://www.facebook.com/groups/affirmationmillennials
- Private Facebook group
- Moderator: Kyle Ashworth

Affirmation mixed orientation families group
- https://www.facebook.com/groups/718251581557428
- Private Facebook group
- Moderator: Kyle Ashworth

Active LDS Affirmation group "Prepare"
- https://www.facebook.com/groups/TheLordWillPrepare
- Private Facebook group
- Moderator: John Gustav-Wrathall

Mormons Building Bridges
- https://www.facebook.com/groups/mormonsbuildingbridges
- Public Facebook group
- Moderator: Kendall Wilcox

Affirmation Community Conversations
- https://www.facebook.com/groups/1944097702543519
- Private Facebook group
- Moderator: Augustus Crosby

USGA at BYU Facebook
- https://www.facebook.com/UsgaAtByu
- Private Facebook group
- Moderator: no clear moderator indicated (will send a private Facebook message to the group to ask permission to post)

JIM alumni
- https://www.facebook.com/groups/jimalumni
- Private Facebook group
- Moderator: Rich Wyler

North Star main group
- https://www.facebook.com/groups/NorthStarMembership
- Private Facebook group
- Moderator: Julio Ospina

ALL Arizona LDS LGBT & Friends & Family
- https://www.facebook.com/groups/ArizonaLDSLGBT/
- Private Facebook group
- Moderator: Trevor Cook or Anthony Yang

LDS family fellowship
- https://www.facebook.com/groups/134605330021674/
- Private Facebook group
- Moderator: Wendy Reynolds

Ex-Mormon Reddit
- https://www.reddit.com/r/exmormon
- Public Reddit forum
- Moderator: no clear moderator indicated (will send a private Facebook message to the group to ask permission to post)

Appendix B

Coming Out Scales – Study Two

Coming Out Vigilance

Stem: Select one response with each statement to indicate how accurate the statement is with your coming out experience(s).

Response Categories (unless otherwise indicated)
1. Strongly Disagree
2. Disagree
3. Somewhat Disagree
4. Neither Agree nor Disagree
5. Somewhat Agree
6. Agree
7. Strongly Agree

Names	Items
COV1	I am selective regarding who I come out to.
COV2	I prepare before coming out so I know what to say.
COV3	I prepare for how others may react before coming out to them.

Positive Coming Out Responses

Stem: Select one response with each statement to indicate how accurate the statement is with your coming out experience(s).

Response Categories (unless otherwise indicated)
1. Strongly Disagree
2. Disagree
3. Somewhat Disagree
4. Neither Agree nor Disagree
5. Somewhat Agree
6. Agree
7. Strongly Agree

Names	Items
PCOR1	People I came out to showed that they love me.
PCOR 2	People I came out to tried to understand my experiences as a sexual or gender minority.
PCOR3	People I came out to were supportive of me.
PCOR4	My relationship with others wasn't negatively affected by my coming out.

PCOR5	People I came out to showed that they accept me as a sexual or gender minority.
PCOR6	People I came out to celebrated my sexual and/or gender identity with me.
PCOR7	People I came out to advocated for me.
PCOR8	People I came out to validated my experiences.

Appendix C

Full Table - *Coming Out Vigilance Moderating Outness and Well-being – Study Three*

Positive Emotions			Engagement			Relationships		
Variable	b(SE)	β	Variable	b(SE)	β	Variable	b(SE)	β
Control			*Control*			*Control*		
Age	.02**(<.01)	.22	Age	.01(.01)		Age	.01**(<.01)	.15
Ciswomen	.08(.10)		Ciswomen	.17(.10)		Ciswomen	.03(.10)	
Monosexual	-.14(.11)		Monosexual	-.21(.12)		Monosexual	-.13(.12)	
Main Effect			*Main Effect*			*Main Effect*		
Outness	.18**(.04)	.21	Outness	.17**(.04)	.20	Outness	.26**(.04)	.30
COV	.13**(.05)	.13	COV	.19**(.05)	.19	COV	.09(.05)	
Interaction			*Interaction*			*Interaction*		
Outness x COV	-.01(.04)		Outness x COV	-.07(.04)		Outness x COV	-.01(.04)	
Model Fit	F(df)	R^2	*Model Fit*	F(df)	R^2	*Model Fit*	F(df)	R^2
	7.65(6, 431)	.11		7.08(6, 431)	.09		8.34(6, 431)	.10

Meaning			Accomplishment		
Variable	b(SE)	β	Variable	b(SE)	β
Control			*Control*		
Age	.02**(<.01)	.23	Age	.02**(<.01)	.22
Ciswomen	.11(.10)		Ciswomen	.03(.10)	
Monosexual	-.18(.11)		Monosexual	-.22*(.11)	-.10
Main Effect			*Main Effect*		
Outness	.18**(.04)	.21	Outness	.22**(.04)	.26
COV	.14**(.05)	.14	COV	.22**(.05)	.22
Interaction			*Interaction*		
Outness x COV	-.01(.04)		Outness x COV	-.06(.04)	
Model Fit	F(df)	R^2	*Model Fit*	F(df)	R^2
	9.90(6, 431)	.12		12.75(6, 431)	.15

Note: COV = Coming Out Vigilance; * = $p < .05$; ** = $p < .01$.

Appendix D

Full Table - *Positive Coming Out Responses Mediating Outness and Well-being – Study Three*

Positive Emotions					Engagement				
Variable	*b(SE)*	CI	*F*	*R²*	Variable	*b(SE)*	CI	*F*	*R²*
Indirect Effect			2.37	.02	*Indirect Effect*			2.37	.02
Constant	-.54*(.25)	[-1.04, -.05]			Constant	-.54*(.25)	[-1.04, -.05]		
Age	<.01(.01)	[-.01, .01]			Age	<.01(.01)	[-.01, .01]		
Ciswomen	.15(.10)	[-.05, .34]			Ciswomen	.15(.10)	[-.05, .34]		
Monosexual	.31*(.12)	[.07, .55]			Monosexual	.31*(.12)	[.07, .55]		
Outness	.08(.04)	[-.01, .16]			Outness	.08(.04)	[-.01, .16]		
Direct Effect			15.39**	.15	*Direct Effect*			10.13**	.11
Constant	-.99**(.24)	[-1.46, -.53]			Constant	-.51*(.24)	[-.99, -.04]		
Age	.02**(<.01)	[.01, .03]			Age	.01 (<.01)	[.00, .01]		
Ciswomen	.02(.09)	[-.16, .20]			Ciswomen	.11(.09)	[-.07, .30]		
Monosexual	-.10(.11)	[-.32, .12]			Monosexual	-.18(.12)	[-.41, .05]		
Outness	.13**(.04)	[.05, .21]			Outness	.11**(.04)	[.03, .19]		
PCOR	.25**(.04)	[.16, .34]			PCOR	.24**(.05)	[.15, .33]		
Outness➔PCOR➔Well-being					*Outness➔PCOR➔Well-being*				
Indirect Effect	.02(.01)	[<.01, .04]			Indirect Effect	.02(.01)	[<.01, .04]		
Relationships					Meaning				
Variable	*b(SE)*	CI	*F*	*R²*	Variable	*b(SE)*	CI	*F*	*R²*
Indirect Effect			2.37	.02	*Indirect Effect*			2.37	.02
Constant	-.54*(.25)	[-1.04, -.05]			Constant	-.54*(.25)	[-1.04, -.05]		
Age	<.01(.01)	[-.01, .01]			Age	<.01(.01)	[-.01, .01]		
Ciswomen	.15(.10)	[-.05, .34]			Ciswomen	.15(.10)	[-.05, .34]		
Monosexual	.31*(.12)	[.07, .55]			Monosexual	.31*(.12)	[.07, .55]		
Outness	.08(.04)	[-.01, .16]			Outness	.08(.04)	[-.01, .16]		
Direct Effect			27.48**	.24	*Direct Effect*			18.01**	.17
Constant	-1.00**(.22)	[-1.44, -.56]			Constant	-1.00**(.23)	[-1.46, -.55]		
Age	.01**(<.01)	[.00, .02]			Age	.02**(<.01)	[.01, .03]		
Ciswomen	-.06(.09)	[-.23, .11]			Ciswomen	.05(.09)	[-.13, .22]		
Monosexual	-.06(.11)	[-.27, .15]			Monosexual	-.14(.11)	[-.36, .08]		
Outness	.21**(.04)	[.13, .28]			Outness	.13**(.04)	[.05, .21]		
PCOR	.39**(.04)	[.30, .47]			PCOR	.27**(.04)	[.18, .35]		
Outness➔PCOR➔Well-being					*Outness➔PCOR➔Well-being*				
Indirect Effect	.03(.02)	[<.01, .07]			Indirect Effect	.02(.01)	[<.01, .05]		

	Accomplishment			
Variable	b(SE)	CI	F	R^2
Indirect Effect			2.37	.02
Constant	-.54*(.25)	[-1.04, -.05]		
Age	<.01(.01)	[-.01, .01]		
Ciswomen	.15(.10)	[-.05, .34]		
Monosexual	.31*(.12)	[.07, .55]		
Outness	.08(.04)	[-.01, .16]		
Direct Effect			17.39**	.17
Constant	-.99**(.23)	[-1.45, -.53]		
Age	.02**(.01)	[.01, .03]		
Ciswomen	-.03(.09)	[-.21, .15]		
Monosexual	-.16(.11)	[-.38, .06]		
Outness	.15**(.04)	[.07, .23]		
PCOR	.26**(.04)	[.17, .34]		
Outness→PCOR→Well-being				
Indirect Effect	.02(.01)	[<.01, .05]		

Note: Degrees of freedom for Indirect Effect models are (4, 433); Degrees of freedom for Direct Effect models are (5, 432); CI = Confidence Intervals; PCOR = Positive Coming Out Responses; * = $p < .05$; ** = $p < .01$.

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Skidmore, S. J., Sorrell, S. A., & Searle, K. N. L. (2024). A relational-cultural approach to examining concealment among Latter-day Saint sexual minorities. *Religions, 15*(2), 227. https://doi.org/10.3390/rel15020227

Lefevor, G. T., Bouton, L. J. A., Davis, E. B., **Skidmore, S. J.,** & Meyer, I. H. (2023). Correlates of Christian religious identification and de-identification among sexual and gender minorities: A U.S. probability sample. *Psychology of Sexual Orientation and Gender Diversity.* Advance online publication. https://doi.org/10.1037/sgd0000686

Skidmore, S. J., Lefevor, G. T., Huynh, K. D., & Berg, C. O. (2023). Development and validation of scales for coming out vigilance and positive coming out responses. *Sexuality and Culture.* Advance online publication. https://doi.org/10.1007/s12119-023-10144-5

Abreu, R. L., **Skidmore, S. J.,** Badio, K. S., Lefevor, G. T., Gattamorta, K. A., & Watson, R. (2023). Sexual harassment, sexual coercion, violence, self-esteem, and the role of LGBTQ-specific parental support in a sample of Latinx sexual and gender minority youth. *Journal of Adolescence.* Advance online publication. https://doi.org/10.1002/jad.12210

Lefevor, G. T., Etengoff, C., Davis, E. B., **Skidmore, S. J.**, Rodriguez, E. M., McGraw, J. S., & Rostosky, S. S. (2023). Religion/spirituality, stress, and resilience among sexual and gender minorities: The religious/spiritual stress and resilience model. *Perspectives of Psychological Sciences.* https://doi.org/10.1177/17456916231179137

Lefevor, G. T., **Skidmore, S. J.,** Huynh, K. D., & McGraw, J. S. (2023). The impact of changes in religion on health among sexual minority Mormons. *The International Journal for the Psychology of Religion*. Advance online publication. https://doi.org/10.1080/10508619.2023.2214032

Sorrell, S. A., Lefevor, G. T., **Skidmore, S. J.,** Willis, E. J., & Henrie, J. (2023). "I'll give them all the time they need": How LGBTQ+ teens build positive relationships with their active Latter-day Saint parents. *Religions, 14*(3), 348. https://doi.org/10.3390/rel14030348

Sorrell, S. A., Lefevor, G. T., Bell, J. H., Berg, C. O., & **Skidmore, S. J.** (2023). "You're not gay; you're a child of God": Microaggressions experienced by LGBTQ+ teens and their parents in the Church of Jesus Christ of Latter-day Saints. *Family Process.* Advance online publication. https://doi.org/10.1111/famp.12863

McGraw, J. S., **Skidmore, S. J.,** Lefevor, G. T., Docherty, M., & Mahoney, A. (2023). Affirming and non-affirming religious beliefs predicting suicidal thoughts and behaviors among Latter-day Saint LGBTQ/SSA adults. *Journal of Clinical Psychology, 70*(3), 293-306. https://doi.org/10.1037/cou0000659

Skidmore, S. J., Lefevor, G. T., Perez-Figueroa, A. M., & Gonzalez, K. A. (2022). "I just wanted support": Examining how LDS clergy may effectively minister to sexual and gender minority congregants. *Review of Religious Research, 64*(4), 665-685. https://doi.org/10.1007/s13644-022-00510-4

Skidmore, S. J., Lefevor, G. T., & Perez-Figueroa, A. M. (2022). "I come out because I love you": Positive coming out experiences among Latter-day Saint sexual and gender minorities. *Review of Religious Research, 64*, 539-559. https://doi.org/10.1007/s13644-022-00501-5

Lefevor, G. T., Etengoff, C., & **Skidmore, S. J.,** (2022). Does internalized stigma change the way that religiousness relates to health for sexual minorities? *Journal of Stigma and Health*. Advance online publication. https://doi.org/10.1080/00918369.2022.2092807

Skidmore, S. J., Sorrell, S. A., & Lefevor, G. T. (2022). Attachment, minority stress, and health among conservatively religious sexual minorities. *Journal of Homosexuality.* Advance online publication. https://doi.org/10.1080/00918369.2022.2087483

Lefevor, G. T., Perez-Figueroa, A. M., **Skidmore, S. J.**, & Gonzalez, K. A. (2022). "He just wanted me to do what was best for me": Counsel given by Latter-day Saint clergy to sexual and gender minority congregants and its impact. *Religions, 13*(6), 492. https://doi.org/10.3390/rel13060492

Skidmore, S. J., Lefevor, G. T., & Dillon, F. R. (2022). Belongingness and depression among sexual minority LDS: The moderating effect of internalized homonegativity. *Journal of Gay & Lesbian Mental Health.* Advance online publication. https://doi.org/10.1080/19359705.2022.2041521

Skidmore, S. J., Lefevor, G. T., Golightly, R. M., & Larsen, E. R. (2022). Religious sexual minorities, belongingness, and suicide risk: Does it matter where belongingness comes from? *Psychology of Religion and Spirituality.* Advance online publication. https://doi.org/10.1037/rel0000470

Skidmore, S. J., Lefevor, G. T., Larsen, E. R., Golightly, R. M., & Abreu, R. L. (2022). "We are scared of being kicked out of our religion!": Common challenges and benefits for sexual minority Latter-day Saints. *Psychology of Sexual Orientation and Gender Diversity.* Advance online publication. https://doi.org/10.1037/sgd0000571

Lefevor, G. T., Meter, D. J., & **Skidmore, S. J.** (2022). The varied ways to be an LGBTQ individual from a conservative religion: A latent path analysis. *The Counseling Psychologist.* Advance online publication.

Lefevor, G. T., Goldblum, P., Dowling, K.*, Goodman, J.*, Hoeflin, B.*, & **Skidmore, S. J.*** (2021). First do no harm: Principles of care for clients with sexual identity confusion and/or conflict. *Psychotherapy*. Advance online publication. https://doi.org/10.1037/pst0000426

Lefevor, G. T., McGraw, J. S., & **Skidmore, S. J.** (2022). Suicidal ideation among active and nonactive/former Latter-day Saint sexual minorities. *Journal of Community Psychology, 50*(1), 445-464. https://doi.org/10.1002/jcop.22591

Lefevor, G. T**., Skidmore, S. J.**, McGraw, J. S., Davis, E. B., & Mansfield, T. R. (2021). Religiousness and minority stress in conservatively religious sexual minorities: Lessons from Latter-day Saints. *The International Journal for the Psychology of Religion*. https://doi.org/10.1080/10508619.2021.2008131

Skidmore, S. J., & Robinson Kurpius, S. (2021). Euthanasia in an aging America: An ethical challenge for mental health counselors. *Journal of Mental Health Counseling, 43*(2), 125-138. https://doi.org/10.17744.mehc.43.2.03

SUBMITTED MANUSCRIPTS AND RESEARCH IN PROGRESS
(18, 8 first authored)

Skidmore, S. J., (submitted). Self-compassion as a protective factor against religious and sexual identity struggles among religious and post-religious sexual minorities. *Counselling Psychology Quarterly*.

Sorrell, S. A., Lefevor, G. T., **Skidmore, S. J.,** Searle, K. N. L., & Golightly, R. M. (submitted). How much porn is too much? Understanding how religiousness shapes perceptions of compulsive sexual behavior. *Journal of Sex Research.*

Skidmore, S. J., Pradell, L., Gonzalez, H. L., & Lefevor, G. T. (submitted). Religiousness and depression among transgender and genderqueer Latter-day Saints: Foundations for therapeutic intervention. *Archives of Religious Studies.*

Kim, S. J., Lefevor, G. T., & **Skidmore, S. J.,** (submitted). Mitigating the Impact of Religiously Based Family Expectations on Depression among Sexual and Gender Minorities: The Role of Authenticity. *Journal of Homosexuality.*

Skidmore, S. J., & Lefevor, G. T. (submitted). The varying effects of clergy counsel on religiousness and health among Latter-day Saint sexual minorities. *Journal of Religion and Health.*

Abreu, R. L., **Skidmore, S. J.,** Barrita, A. M., Sostre, J. P., Lefevor, G. T., & Watson, R. J. (submitted). Substance use, parental and teacher support, and mental health outcomes among Latinx sexual and gender minority youth. *Substance Use and Misuse.*

Skidmore, S. J., Lefevor, G. T., & McGraw, J. S. (submitted). The varying effects of religiousness on well-being for sexual minorities. *The Journal of Positive Psychology and Wellbeing.*

Lefevor, G. T., Hall,l S. M., **Skidmore, S. J.,** Graham, K. L., Hatch, D., * Koenig, B. L. (submitted). The Impact of Religious Strain, Family Support, and Gender/Sexual Identity on Depression Among Emerging Adults. Journal of Religion and Health.

Lefevor, G. T., & **Skidmore, S. J.** (submitted). Establishing the temporal relationship between religious commitment, sexual identity struggles, and religious struggles among sexual minorities. *Psychology of Religion and Spirituality.*

Shepherd, B. F., **Skidmore, S. J.,** Sorrell, S. A., Brochu, P. M., & Lefevor, G. T. (submitted). Clarifying the relationship between proximal minority stress and relationship satisfaction among Latter-day Saint sexually minoritized people: The roles of authenticity and community belonging. *Journal of Family Psychology.*

Skidmore, S. J., W. Justin Dyer, & G. Tyler Lefevor (submitted). The temporal relationship between religious motivations and purpose: A cross-lagged panel model approach. *Psychology of Religion and Spirituality.*

McGraw, J. S., Oakey-Frost, N., **Skidmore, S. J.,** Tucker, R., Docherty, M., & Mahoney, A. (submitted). "I'd rather be dead than gay": A longitudinal test of the interpersonal-psychological theory of suicide among Latter-day Saint sexual minorities. *Suicide and Life-Threatening Behavior.*

Lefevor, G. T., Sorrell, S. A., **Skidmore, S. J.,** Golightly, R. M., Standifird, E., Searle, K. N. L., & Call, M. (submitted). When connecting with LGBTQ+ communities helps and hurts: A meta-analysis of the connectedness-health relationship. *American Psychologist.*

Parmenter, J. G., **Skidmore, S. J.,** & Lefevor, G. T. (submitted). The Moderating Roles of LGBTQ+ Community and Religion on Depression. The Counseling Psychologist.

Skidmore, S. J., Peterson, E., Call, M., Standifird, E., & Lefevor, g. T. (in progress). *The PEEPS model: Developing a new model of well-being for LGBTQ+ individuals.*

Lefevor, G. T., & **Skidmore, S. J.** (in progress). *Predicting Conflict and Health Among LGBTQ+ Latter-day Saints.*

Skidmore, S. J., & Lefevor, G. T. (in progress). *Understanding how coming out goes well for religious sexual and gender minorities*.

Skidmore, S. J., Lefevor, G. T., Huynh, K. D., & Perez-Figueroa, A. M. (in progress). *Development of the LGBTQ+ Cultural Belonging Measure*.

PROFESSIONAL PRESENTATIONS
Total Presentations: 18 (9 first authored)

Skidmore, S. J., Lefevor, G. T., & McGraw, J. S. (2023). *How religiousness promotes (and does not promote) well-being for sexual minorities*. Oral presentation at the Society for the Scientific Study of Religion Conference. Salt Lake City, UT.

Lefevor, G. T., **& Skidmore, S. J.** (2023). *Establishing the temporal relationship between religiousness and sexual identity struggles*. Oral presentation at the Society for the Scientific Study of Religion Conference. Salt Lake City, UT.

Skidmore, S. J., Lefevor, G. T., & McGraw, J. S. (2023). *The varying effects of religiousness on well-being for sexual minorities*. Poster presentation at the American Psychological Association Conference. Washington D.C.

Searle, K. N. L., Lefevor, G. T., **Skidmore, S. J.,** Sorrell, S. A., & Golightly, R. M. (2023). *Moral disapproval of porn and compulsive sexuality: The roles of religious context and frequency of use*. Poster presentation at the American Psychological Association Conference. Washington D.C.

Sorrell, S. A., Lefevor, G. T., **Skidmore, S. J.,** Bell, J. H., & Berg, C. O. (2023). *Microaggressions toward Latter-day Saint LGBTQ+ teens and their parents*. Poster presentation at the American Psychological Association Conference. Washington D.C.

Lefevor, G. T., **Skidmore, S. J.,** Sorrell, S. A., & Perez-Figueroa, A. M. (2022). *How can LGBTQ+ Latter-day Saints come out in a beneficial way?* Oral presentation at the Association of Mormon Counselors and Psychotherapists Annual Conference. Salt Lake City, UT.

Skidmore, S. J., Lefevor, G. T., & Perez-Figueroa, A. M. (2022). *Positive coming out experiences among LDS LGBTQ+ Individuals*. Oral presentation at the American Psychological Association Conference. Minneapolis, MN.

Skidmore, S. J., Lefevor, G. T., & Perez-Figueroa, A. M. (2022). *Factors related to positive coming out experiences among sexual and gender minority Latter-day Saints*. Oral presentation at the National LGBTQ Health Conference. Chicago, IL.

Sorrell, S. A., Lefevor, G. T., Willis, E. J., & **Skidmore, S. J.** (2022). *How LGBTQ+ teens build positive relationships with their LDS parents*. Oral presentation at the National LGBTQ Health Conference. Chicago, IL.

Golightly, R. M., Larsen, E. R., **Skidmore, S. J., &** Lefevor, G. T. (2022*). Religious sexual minorities, belongingness, and suicide risk: Does it matter where belongingness comes*

from? Poster presentation at the American Psychological Association Annual Conference. Minneapolis, MN.

Skidmore, S. J., Lefevor, G. T., Larsen, E. R., Golightly, R. M., & Abreu, R. L. (2022). *"We are scared of being kicked out of our religion!": Common challenges and benefits for sexual minority Latter-day Saints.* Poster presentation at the Rocky Mountain Point Association Conference. Salt Lake City, UT.

Sorrell, S. A., **Skidmore, S. J.**, & Lefevor, G. T. (2022). *Attachment, minority stress, and health among conservatively religious sexual minorities*. Oral presentation at the Rocky Mountain Point Association Conference. Salt Lake City, UT.

Skidmore, S. J., Lefevor, G. T., & Dillon, F. R. (2021). *Religious sexual minorities and suicide risk: The moderating role of LGBQ and religious belongingness*. Oral presentation at the Society for the Scientific Study of Religion Conference. Portland, OR.

Lefevor, G. T., **Skidmore, S. J.**, Perez, A. (2021). *The experiences of LGBTQ+ Latter-day Saints with their church leaders*. Oral presentation at the Society for the Scientific Study of Religion Conference. Portland, OR.

Skidmore, S. J. (2020). *The moderation effect of belongingness on internalized homonegativity and depressive symptoms among sexual minorities.* Poster presented at the Institute for Social Science Research. Arizona State University, Tempe, AZ.

Skidmore, S. J. & Robinson Kurpius, S. (2021). *Euthanasia in an aging America: An ethical challenge for mental health counselors.* Poster presented at the American Mental Health Counselors Association Conference, Las Vegas, NV.

Skidmore, S. J., Lefevor, G. T., McGraw, J. S., Davis, E. B., & Mansfield, T. R. (2021). *Religiousness and minority stress in conservatively religious sexual minorities: Lessons from Latter-day Saints*. Poster presented at the National LGBTQ Health Conference, Virtual.

Skidmore, S. J., Lefevor, G. T., & Dillon, F. R. (2021). *Belongingness among religious sexual minorities.* Poster presented at the Utah State University Research Symposium, Logan, UT.

FUNDED GRANTS AND AWARDS

Doctoral Researcher of the Year Award, 2024 (Award presented for the top researcher of the year at Utah State University).

Understanding when coming out goes well for religious sexual and gender minorities. Open Science of Religion Registered Report Grant (In progress. Principal Investigator, $20,000, 2023).

Utah State University Psychology Department Conference Travel Award (Principal Investigator, $400 to present at the annual APA conference, 2023).

Elwin C. Nielsen Scholarship. Utah State University student award for clinical assessment excellence. ($1,500, 2023-2024).

Utah State University Psychology Department Conference Travel Award (Principal Investigator, $400 to present at the annual APA conference, 2022).

Positive coming out experiences among sexual and gender minority Latter-day Saints. Division 36 Social Justice Trask Force Research Grant (Completed. Principal Investigator, $2,000, 2022).

Anthony LaPray Research Scholarship. Utah State University Student Award. ($1,000, 2022-2023).

Walter R. Borg Research Scholarship. Utah State University Student Award. ($3,500, 2022-2023).

Utah State University Psychology Department Conference Travel Award (Principal Investigator, $400 to present at the annual SSSR conference, 2021).

Factors related to positive coming out experiences and outcomes among LGBTQ+ Mormons. Utah State University Graduate Research and Create Opportunities Grant (Completed. Principal Investigator, $1,000, 2021).

RESEARCH EXPERIENCE

Utah State University, Logan, UT – *Graduate Research Assistant*
2020 - Present
- Authoring and co-authoring research studies aimed at understanding the experiences of sexual minorities in religious settings, preparing and distributing surveys and interviews for data analysis, leading a team of undergraduate student researchers

The Counseling Psychologist – *Graduate Student Reviewer*
2021 – 2022
- Reviewed submitted manuscripts monthly, provided specific edits and feedback, and recommended articles for publication or rejection

Arizona State University, Tempe, AZ – *Graduate Research Assistant*
2019 –2020
- Cleaning and analyzing data, preparing and distributing surveys for employees of Google and Georgia Pacific, and edited and revised scholarly papers for publication

Brigham Young University, Provo, UT – *Research Assistant*
2017 - 2018
- Aided Dr. Hardy in his research on religious development and morality in teens by helping prepare Qualtrics surveys, running statistical analysis, and editing research material
- Applied for and received a grant to help Dr. Hardy write a chapter on religious development, through conducting literature searches and organizing sources using Zotero

Brigham Young University, Provo, UT – *Journal Editor*
2017 - 2018

- Edited and offered critical feedback on at least three research paper submissions weekly for the Brigham Young University Psychology Journal
- Helped maintain BYU Psychology webpage and recruit students to submit their papers

TEACHING EXPERIENCE

Utah State University, Logan, UT – *Guest Lecturer – PSY 4230: Psychology of Gender*
Fall2023
- Responsibilities: Development and management of course material, lecturing three classes throughout the semester, supervision of teaching assistants
- *Supervisor: Susan Crowley, Ph.D.*

Utah State University, Logan, UT – *Graduate Instructor – PSY 4230: Psychology of Gender*
Summer 2023
- Responsibilities: Office hours, grading, lecturing, development and management of course material, supervision of teaching assistants
- *Supervisor: Susan Crowley, Ph.D.*

Utah State University, Logan, UT – *Graduate Instructor – PSY 4230: Psychology of Gender*
Spring 2023
- Responsibilities: Office hours, grading, lecturing, development and management of course material, supervision of teaching assistants
- *Supervisor: Susan Crowley, Ph.D.*

Utah State University, Logan, UT – *Graduate Instructor – PSY 4230: Psychology of Gender*
Fall 2022
- Responsibilities: Office hours, grading, lecturing, development and management of course material, supervision of teaching assistants
- *Supervisor: Susan Crowley, Ph.D.*

Utah State University, Logan, UT – *Graduate Instructor – PSY 4230: Psychology of Gender*
Summer 2022
- Responsibilities: Office hours, grading, lecturing, development and management of course material, supervision of teaching assistants
- *Supervisor: Susan Crowley, Ph.D.*

Utah State University, Logan, UT – *Graduate Teacher's Assistant*
2021 - 2022
- Helped grade and provide feedback to graduate students on various psychotherapies and counseling skills, including monitoring roleplays and evaluating progress.
- *Supervisor: Tyler Lefevor, Ph.D.*

Brigham Young University, Provo, UT –*Teacher's Assistant*
2018 - 2019
- Helped grade and provide feedback to undergraduate students on writing samples of psychological principles
- Guest lectured on social psychological basics, including conformity and groupthink
- *Supervisor: Cameron Hopkin, Ph.D.*

CLINICAL INTERESTS

Theoretical Orientations/Approaches: Relational-Cultural Therapy, Intersectional Feminist/Multicultural Framework, Acceptance and Commitment Therapy, Dialectical Behavior Therapy, Interpersonal Process Therapy, Cognitive-Behavioral Therapy

Presenting Concerns: Sexual and gender identity development, religious trauma, identity exploration, relationship concerns, emotion dysregulation, anxiety, depression, suicidality, eating disorders, sexual health

Populations: Emerging Adulthood, Adulthood, LGBTQ+, Religious, Individuals with Multiple Minoritized Identities, Vulnerable Populations

CLINICAL EXPERIENCE

Sexual and Gender Minority Support Services, Logan, UT – *Practicum Student*
January 2022 – Present
- Conducted weekly individual therapy with university students identifying as sexual and/or gender minorities
- Provided care via relational-cultural therapy, acceptance and commitment therapy, feminist therapy, multicultural therapy, and dialectical behavior therapy
- Typical presenting problems included: PTSD, anxiety, depression, suicidality, personality disorders, relationship concerns, dissociative identity, social anxiety, emotion dysregulation, disordered eating, body image concerns

> Supervisor: Tyler Lefevor, Ph.D.
>
> Direct Hours: 229.5   Indirect Hours: 204.5

Utah State University Counseling & Psychological Services, Logan, UT – *Practicum Student*
2021 – 2023
- Conducted weekly individual therapy with university students
- Typical presenting problems included: self-harm, suicidality, depression, social anxiety, generalized anxiety, identity exploration, religious trauma, childhood trauma, personality disorders, addiction, relationship concerns, body image concerns
- Conducted various psychoeducational and psychodiagnostics assessments for Learning Disorders, ADHD, ASD, Neurobiological Disorders, and Personality Disorders
  - Administered the WAIS-IV, Woodcock Johnson IV, Weschler Memory Scales, PAI, MMPI, MCMI-IV, IVA-AE2, Wender Utah Scale, Brown EF/A, Brown ADD Scales, RAVLT, CARS-II, SRS-II, and the COWAT
  - Wrote 12 psychodiagnostic and integrative reports regarding clients' psychodiagnostics scores and interpretations, as well as their presenting concerns and therapeutic interactions

> Clinical Supervisor: Zhen Li, Psy.D.
>
>   Charley Bentley, Ph.D.
>
> Assessment Supervisor: Justin Barker, Psy.D.
>
>   Direct Hours: 219   Indirect Hours: 296.50
>   Integrated Reports: 12

Utah State University Behavioral Health Clinic, Logan, UT – *Practicum Student*
2020 – 2021

- Conducted individual, group, and family therapy sessions with community members and Utah State University students
    - Led and co-led a Dialectical Behavior Therapy group for two months
- Conducted intake, psychoeducational and psychodiagnostics assessments (e.g., WAIS-IV, Woodcock Johnson IV)
- Typical presenting problems included: depression, social anxiety, generalized anxiety, childhood trauma, personality disorders, addiction, relationship concerns

<div align="center">
Clinical Supervisor: Sara Boghosian, Ph.D.
Susan Crowley, Ph.D.
Direct Hours: 102.50   Indirect Hours: 281.50
Integrated Reports: 2
</div>

Arizona State University Counseling Services, Tempe, AZ – *Internship Student*
2019 –2020

- Conducted individual, group, and family therapy sessions with community members and Utah State University students
- Conducted intake and risk assessments
- Typical presenting problems included: depression, social anxiety, generalized anxiety, suicidality, personality disorders, relationship concerns

<div align="center">
Clinical Supervisor: Jennifer Pereira, Ph.D.
Direct Hours: 22   Indirect Hours: 68
</div>

COMMUNITY OUTREACH AND TRAININGS

Skidmore, S. J., (2023, October). *Improving the Lives of LGBTQ+ Latter-day Saints*. Outreach presentation given at the Faith Matters Restore Conference.

Skidmore, S. J. (2023, August). *Campus Mental Health Resources*. Outreach presentation given at Utah State University.

Skidmore, S. J. (2023, April). *Stress Bust: Tackling Stress as a Student*. Outreach presentation developed and given at Utah State University.

Skidmore, S. J. (2023, February). *Body Image Concerns and Eating Disorders among Sexual and Gender Minorities*. Outreach presentation given at Utah State University.

Skidmore, S. J., Lefevor, G. T., & Sorrell, S. A. (2022). *Affirmation Annual Conference.* Oral presentation given regarding findings on coming out studies to Latter-day Saint church leaders.

Skidmore, S. J. & Lefevor, G. T. (2022, April). *The LGBTQ Journey Through the Bishop's Office.* Podcast appearance on the Leading Saints podcast to share research findings.

Skidmore, S. J. & Lefevor, G. T. (2022, February). *Listen, Learn, & Love Podcast Episode 504.* Podcast appearance on the Listen, Learn, & Love podcast to share research findings.

Skidmore, S. J. & Lefevor, G. T. (2022, February). *How Should Local Leaders Counsel LGBTQ+ Members?* Podcast appearance on the This Week In Mormons podcast to share research findings.

Skidmore, S. J. & Lefevor, G. T. **(**2022, February). *Counseling LGBTQ+ Saints.* Podcast appearance on the Cultural Hall podcast to share research findings.

Skidmore, S. J. (2022, January). *Religious sexual minorities and suicide risk: The moderating role of LGBTQ and religious belongingness.* In-service presentation given to Utah State University Counseling and Psychological Services Staff.

Skidmore, S. J. (2021, November). *Navigating sexual orientation, gender identity, and religious affiliation*. Outreach presentation given at Utah State University.

Skidmore, S. J. (2021, April – September). Group facilitator and co-creator of the Utah State University LGBTQ+ Allies Training

Skidmore, S. J. (2021, July – present). Creator of pamphlet materials for the LGBTQ+ support center, Encircle.

PROFESSIONAL AFFILIATIONS AND SERVICES

Affiliations

American Counseling Association	2019
American Mental Health Counselor Association	2020
American Psychological Association	2021
American Psychological Association of Graduate Students	2022
Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling	2019

Peer Reviewer

The Counseling Psychologist	2021-2022
Journal for the Scientific Study of Religion	2022-2023
LGBT Health	2023
Journal of Homosexuality	2023
Scandinavian Journal of Psychology	2023
SMM – Qualitative Research in Health	2024

Services

Utah State University Equity, Diversity, and Inclusion Committee	2023-2024

VOLUNTEER WORK

- **Cache Pride Center**
    - Facilitate monthly support groups with community LGBTQ+ youth
- **Sunshine Terrace**
    - Aid monthly in the care and emotional support of individuals at the in-patient nursing center
- **United Food Bank**
    - Organized and executed a food drive for ASU's Counseling department
    - Volunteered at the food bank during weekends to help distribute food to individuals

- **Autism Speaks**
  - Helped organize, gather participants, and participate in the Tempe Autism Walk to raise funds and awareness for autism spectrum disorder
- **Utah State Hospital**
  - Volunteered as a youth mentor for 13 months, teaching necessary coping skills to youth with a variety of mental disorders

SKILLS

Research: Academic writing, publishing and presenting; statistical analysis; grant proposals; data acquisition

Computer: SPSS, R, Zotero, Qualtrics, Microsoft Excel, Prolific

Language: Fluent in Haitian Creole, conversational ASL & French