



9-1-2013

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Recommended Citation

Connally, Dalton LISW; Wedemeyer, Rose LPC; and Smith, Scott J. Oakland University (2013) "Cultural Practice Considerations: The Coming Out Process for Mexican-Americans along the Rural Mexico-US Border," *Contemporary Rural Social Work Journal*. Vol. 5: No. 1, Article 4.

DOI: <https://doi.org/10.61611/2165-4611.1041>

Available at: <https://digitalcommons.murraystate.edu/crsw/vol5/iss1/4>

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Cultural Practice Considerations: The Coming Out Process for Mexican-Americans along the Rural Mexico-US Border

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Abstract. *As the nation's Latino and Mexican-American population continues to rise, social workers must consider the unique experiences of these groups. The decision to reveal a lesbian, gay, or bisexual (LGB) identity is often difficult and painful. This decision can be compounded for Mexican-American individuals as Latino heterosexual attitudes about sexuality continue to act as a barrier for Mexican-American LGB individuals and their families who live along the rural Mexico-United States (US) border. This article reviews the implications of lesbian, gay, or bisexual disclosure within Mexican-American families residing in rural communities along the Mexico-US border. The authors review the traditional Mexican-American family and the role of acculturation in the disclosure process. Implications for culturally competent social work practice, recommendations for clinical practice, and recommendations for future research are discussed.*

Keywords: community practice; Latino-Hispanic gender; Latino-Hispanic lesbian, gay, or bisexual (LGB); rural

The “coming-out” process often has a profound impact on individuals and their families (Ben-Ari, 1995). Despite increasing social acceptance of homosexuality, dominant Latino heterosexual attitudes about sexuality continue to act as a barrier for Mexican-American lesbian, gay, or bisexual (LGB) individuals; particularly those who live along the rural Mexico-United States (US) border, as they openly express their sexual orientation (Greene, 1994). The authors use the definition from the 2010 U.S. Census that describes the Mexico-US border as an approximately 2,000 mile long boundary that separates California, Arizona, New Mexico, and Texas from six Mexican states: Baja California Norte, Sonora, Chihuahua, Coahuila, Nuevo León, and Tamaulipas with a width of almost 50 miles into each of the countries (23.6 million people; Ennis, Rios-Vargas, & Albert, 2011). Five urban areas exist on both sides of the border: San Diego-Tijuana, El Paso-Ciudad Juarez, Laredo-Nuevo Laredo, Brownsville-Matamoros, and Harlingen/McAllen-Reynosa. According to the 2010 U.S. Census, the Mexico-United States urban population is eight million people (Ennis et al., 2011). While the census does not actually define *rural*, the term encompasses all populations, housing, and territory not included within an urban area (<http://www.census.gov/population/censusdata/urdef.txt>). Therefore, whatever is not urban is considered rural. The 2010 U.S. Census states that the third highest concentration of Hispanics of all states is along the 32 border counties (Ennis et al., 2011). The Mexico-US border population under 19 years of age is 1.4 million (31%) of the border population and 64% (896,000) of those are Mexican-American children (Ennis et al., 2011). For the purpose of the paper, rural along the Mexico-US border will be considered communities outside the five US urban regions listed above, that according to the 2010 U.S. Census is comprised of 3.6 million Mexican-American individuals (Ennis et al., 2011).

Among Mexican-American families, the coming-out process, or disclosure process, has unique repercussions. Researchers (Morales, 1989; Newman & Muzzonigro, 1993) suggest that typical individual reactions (e.g., shock, distress) to a family member's coming-out are heightened among Mexican-American families. This article reviews the current research on dominant Latino attitudes surrounding sexuality and sexual orientation disclosure for Mexican-Americans. The authors chose to exclude rural Latino-Hispanic transgender and transsexual individuals from this article in the interest of clarity, brevity, and lack of sufficient data. The Latino-Hispanic transgender and transsexual population are very different from the LGB population and deserve their own place in the literature. Implications for social workers, including strategies for working with Mexican-American individuals and families who live along the rural Mexico-US border, and recommendations for future research are included.

LGB Life in Rural America

Although some may prefer an urban setting in which to live, there are still LGB persons who live (and enjoy) small, rural areas (Dews & Law, 2001). Rural society, however, differs from urban society in several significant ways. Rural communities tend to be more supportive of conservative values and less tolerant of diverse populations (Aten, Mangis, & Campbell, 2010). Strong religious beliefs play a major role in shaping the values, attitudes, and social norms of rural communities (Sowell & Christensen, 1996). Religion is viewed as a guide for acceptable behavior, and there is little appreciation for variations from the traditional family lifestyle (Smith & Edmonston, 1997). Moreover, because of the "small town grapevine," it is difficult to maintain privacy, and confidentiality is a major problem (Martinez-Brawley & Blundall, 1989).

In general, rural Americans live in larger and more crowded households, have lower levels of education, and are more linguistically isolated (Fennelly, 2005; Kandel & Parrado, 2004) and more segregated (Kandel & Cromartie, 2004). The integration of LGB individuals and LGB communities into the larger social fabric of rural community settings occurs infrequently. This is due in great part to the stigma that is still universally associated with homosexuality (Preston, D'Augelli, Cain, & Schulze, 2002). In most rural areas, however, the stigma is exacerbated as LGB individuals may have limited opportunities to affirm one's "gay identity." Thus, the opportunity structure for lesbian, gay, or bisexual development in rural settings is distinctly limited (D'Augelli & Hart, 1987; D'Augelli, Hart, & Collins, 1987). Places for social and sexual contact are far fewer than in urban areas, as is the ability to develop same-sex relationships in an open way. Further, the chance for the development of a gay community is challenged by the controlling force of not being seen in rural communities (Preston et al., 2002).

Many LGB individuals living in rural areas feel they risk rejection or ostracism from friends and family, and therefore do not disclose their sexual orientation. Because of this, many rural LGB individuals internalize feelings of social rejection, and internalized homophobia can develop (Smith & Edmonston, 1997). This form of cultural and social oppression has also been shown to contribute to substance abuse which further alienates LGB individuals (Kus & Smith,

1995). The oppressive factors of rural living are compounded with the introduction of a culture (Mexican-American) that can intensify much of the stigma and hardship of LGB rural life.

Mexican-Americans

Although often grouped together as *Latinos* or *Hispanics*, this group is far from homogenous, representing a diverse group of cultures and national origins. According to the 2010 U.S. Census, 63% of the total Latino or Hispanic population are Mexican-American, 9.2% are Puerto Rican, 3.5% are Cuban American, 4.8% are Central American, 3.8% are South American, and the remaining 17.3% are “other” Latinos (Ennis et al., 2011). Recent research (Taylor, Lopez, Martinez, & Velasco, 2012) indicates that most Hispanics prefer to self describe their ethnic identity in terms of family country of origin (e.g., Cuban, Dominican, Mexican) rather than using pan-ethnic terms (e.g., Hispanic, Latino). Considering family country of origin may also help practitioners to tailor services. As such, the focus of this article will be on rural Mexican-Americans that live along the Mexican-US border as they comprise the largest subpopulation of Latinos-Hispanics and have been identified as increasingly at risk for psychological distress (Ramos-Sánchez & Atkinson, 2009).

While urban versus rural particularities exist, Mexican-Americans share many cultural values surrounding the importance of the family, role of religious ideology, and clearly defined, dominant gender roles (Falicov, 2010). In addition to the variance in Mexican-Americans according to their geographic location (rural or urban), there are language preferences, level of education, socioeconomic status, acculturation level, personal experience, and a host of other factors that make generalizations dangerous (Cuellar, Arnold, & Maldonado, 1995; Umaña-Taylor & Fine, 2001). Mexican-Americans, like other immigrant and migrant communities, experience acculturative and identity struggles for which social workers are well trained to address.

U.S. Census data from 1950 through 2000 indicate that population has grown more rapidly in the border regions than in the nation as a whole (Hobbs & Stoops, 2002). However, approximately one third of U.S. border families live at or below the poverty line compared with a national average of 11% (Hobbs & Stoops, 2002). An estimated 400,000 persons live in the United States along the Texas border in colonias (i.e., semi-rural communities) without access to public drinking water or wastewater systems (Hobbs & Stoops, 2002). Unemployment rates in the border area are approximately threefold higher than those in the rest of the United States (Hobbs & Stoops, 2002). A total of 10 of 32 counties evaluated in the 2010 U.S. Census along the Mexico-US border are medically underserved and of low socioeconomic status and are considered rural (Ennis et al., 2011). Such struggles surrounding acculturation, poverty, and immigration have resulted in Mexican-Americans being cited as experiencing more mental health problems than other ethnic populations (Ramos-Sánchez & Atkinson, 2009). Despite the demonstrated need for services aimed at alleviating stress surrounding such struggles, Mexican-Americans have been perceived as circumventing or foregoing available services altogether (Ramos-Sánchez & Atkinson, 2009).

Dominant Attitudes Surrounding Sexuality

The Traditional Mexican-American Family

Mexican-American individuals' behaviors may be understood by examining them within the context of dominant Mexican family ideologies including familismo, machismo, and respeto (Falicov, 2010). Familismo denotes the importance given to family membership in respect to their collectivistic nature and the sacrifices of involvement (Falicov, 2010; Freeberg & Stein, 1996). Familismo is evidenced by many Mexican-Americans living at home or in close proximity to their parents until their marriage. In the traditional Mexican-American family, familismo (i.e., loyalty, reciprocity, solidarity within the immediate and extended family) is such an important concept, that interdependence and cooperation is valued over individualism. Consequently, this interdependence may serve as a barrier to the coming-out process for LGB individuals especially in rural areas that lack few resources (Falicov, 2010; Freeberg & Stein, 1996).

Mexican-American families are further influenced by a patriarchal orientation, wherein male figures serve as patriarchs or leaders of the family (Marin, 2003). Mexican-American culture's patristic orientation can encourage family members to acquiesce to male demands. The patristic elements of Mexican-American culture are likewise encouraged and reinforced through the doctrine of machismo; encouraging males to be strong, virile, and dominant (Marin, 2003).

Respect of elders or respeto is another common value within Mexican-American families. Respect for authority is positively associated with increased pro-social behavior, even when direct parental monitoring is absent (Frost & Driscoll, 2006; Ramirez et al., 2004; Vega & Gil, 1999). Hispanic adolescents, it appears, resist behaviors that would violate the family values because it would be disrespectful to their parents, which extends parental oversight of children when they cannot be present.

Also, it is important to consider the stress that can result from immigration and acculturation issues to the already stress compromised rural family system in the form of identity struggles (Gil, Wagner, & Vega, 2000). Family system and functioning may further suffer as adolescents have been found to acculturate more quickly than their parents (Smokowski, Rose, & Bacallao, 2008). This acculturation gap can lead to diminished family functioning in families already struggling in a resource poor rural environment.

Religiosity

Religion has been described as both a component and determinant of culture (Nonnemaker, McNeely, & Blum, 2003). Traditional Mexican-American culture is oriented around religion, specifically Catholicism (Perl, Greely, & Gray, 2006). Religion is widely regarded as a protective factor against numerous health problems wherein the more important religion is to an individual (religiosity), the better his or her health outcomes tend to be (Lee & Newberg, 2005; Pargament et al., 2004; Powell, Shahabi, & Thoresen, 2003). Religion is presumed to be a protective factor against sexual risk for two reasons. First, many of the

behaviors correlated with poor sexual health are forbidden by religion. Second, religious individuals may feel a greater incentive to comply with religious ideology over personal feelings (Wallace & Forman, 1998). Yet, research has emerged in the past decade suggesting sexual health outcomes among the religiously devout are not better compared to their less- or non-religious peers (Brückner & Bearman, 2005).

For the Mexican-American LGB population, Catholicism's historical rejection of any sexual identity other than heterosexuality may lead to psychological distress and risky behavior (Herek & Gonzalez-Rivera, 2006). Mexican-Americans have a strong stigma against homosexual behavior, at least partially explained by their shared religious identity. Such stigma limits the likelihood of disclosing sexual orientation and seeking assistance with the issues related to the coming out process (Herek & Gonzalez-Rivera, 2006). Without support, the exploration of sexual identity may involve greater risk.

Parents who are more religious often avoid talking to their children about sex which is compounded when these families reside in rural areas (Regnerus, 2005). Religious environments also frequently limit their conversations about sex to abstinence only messages, encouraging the prohibition of sex outside of marriage (Lindberg, Jones, & Santelli, 2008). Such messages may increase risk by limiting knowledge (Bersamin, Fisher, Walker, Hill, & Grube, 2007), providing misinformation about sexual development and health (Ott & Santelli, 2007), and deterring adolescents from asking relevant sexual questions (Regnerus, 2005).

Gender Socialization

The concepts of familismo and respeto have been identified as cultural variables relevant to gender socialization in Latinos (Raffaelli & Ontai, 2004). The concept of marianismo is another dominant ideology within traditional Hispanic culture relevant to gender socialization. Marianismo refers to the ideal purity, femininity, and virtue of young women (Gil et al., 2000; Wood & Price, 1997). While purity and virtue suggest protective benefits, the patristic orientation of traditional Mexican-American culture actually causes it to be a risk. Young girls are sheltered from information, especially sexual health information (Zambrana, Cornelius, Boykin, & Lopez, 2004), thereby increasing risk. Additionally, recent research points to potentially higher risk exposure for sexually transmitted diseases for minority female adolescents living in rural areas (Champion, Kelly, Shain, & Piper, 2004). Marianismo encourages women to adhere to the Mexican American culture's patristic orientation and then acclimate their behaviors to male demands. As a result, women often lack negotiation and refusal skills related to sexual decision-making, also increasing their risk (Gil et al., 2000; Wood & Price, 1997).

The prescribed femininity inherent in the concept of marianismo is contrasted with the accompanying ideology that guides masculinity: machismo. For Mexican-American lesbians, machismo figures greatly into plans of disclosure and can inhibit, if not diminish, the woman's plans for disclosure (Carrier, 1995). Marianismo further encourages women to adhere to the Mexican-American culture's patristic orientation and acclimate their behaviors to male demands. As a result, women often lack negotiation and refusal skills related to sexual decision-making, also increasing their risk (Gil et al., 2000; Wood & Price, 1997). Because women are

expected to be the exact opposite of the macho male (i.e., submissive, dependent), lesbian Mexican-Americans are potentially culturally limited in their ability to express their gender identity (Carrier, 1995).

In his examination of empirical approaches to measuring machismo, Neff (2001) contrasted measures of machismo as a conventionally accepted gender orientation with conceptions of machismo emphasizing hyper-masculinity that can become oppositional “protest masculinities” (Connell, 2005), which arise in some economically affected rural communities as the traditional complementary gender roles are undermined by men’s lack of work. The view of machismo as a gender orientation allows practitioners to consider how such conceptions or ideals impact behavior within Mexican-American families (Falicov, 2010). Social work practitioners should consider how the values of machismo, marianismo, and rural economic conditions further create a social environment where Mexican-American LGB individuals are stigmatized because they fail to adhere to dominant sex role norms.

The Decision to Disclose

Recent national estimates indicate that about .9% of Hispanic women in the United States ages 18 to 44 identify as lesbian, and 2.2% identify as bisexual (Chandra, Mosher, Copen, & Sionean, 2011). Moreover, 1.2% of Hispanic men in the United States ages 18 to 44 identify as gay and .9% identify as bisexual (Chandra et al., 2011). Additionally, Ryan (2003) notes that LGB individuals are “coming out” at younger ages (i.e., during middle and high school years) and earlier disclosure can lead to challenges in integrating ethnic and gender identity. This is true for Mexican-Americans living in rural communities particularly, as these youth are attempting to adjust to differing cultural expectations and messages surrounding gender roles and sexuality (Ryan, 2003). Otis (2008) warns that public perception continues to be that LGB persons are primarily urban dwellers, suggesting that in some regions, rural LGB people remain invisible within their communities.

Whereas the act of disclosure has been identified as an “. . . indication of self-acceptance . . .” for LGB individuals (Rosario, Schrimshaw, & Hunter, 2009), the fear of being ostracized, which is more pronounced in rural communities, creates a dilemma by forcing Mexican-American LGB individuals to choose between their sexual identity and the identity of their family, their LGB collective identity, and their ethnic community (Herek & Garnets, 2007; Ryan, 2003). The resulting stress has a profound effect not only on the healthy development of self-esteem, but also serves to impact sexual health choices and relationship development. Additionally, the resulting stress impairs adaptation to their social context (Rodriguez, 1996).

The decision to disclose a LGB sexual identity requires the consideration of several factors, such as the most appropriate time, place, whom to tell first, the consequences of disclosing, and resources available. It is not surprising to find that often, disclosing to family members is delayed, coming many years after the individual obtains self-awareness (Strommen, 1993). Evidence suggests that LGB persons are more comfortable revealing their sexual orientation to others in their communities before disclosing to family members (D’Augelli, Hershberger, & Pilkington, 1998). This may not be true for the LGB individual that is coming out in a rural environment where community resources would be scarce. The decision to

disclose to family members is also influenced by anticipated consequences (Crosbie-Burnett, Foster, Murray, & Bowen, 1996). Thus, LGB individuals are likely to first come out to the person with whom they feel safest before taking the risk of telling the entire family. According to D'Augelli, et al. (1998) in a seminal study, the desire to protect the family from shame and embarrassment along with the possibility of psychological harm to a fragile elderly family member is another consideration for the disclosing individual.

The concept of machismo is a very influential factor in disclosure for Mexican-Americans (Carrier, 1995). Ryan (2003) has posited that homosexuality is viewed as a gender problem among Latino communities wherein gay men do not meet the cultural definitions of masculinity inherent in the concept of machismo. For Mexican-American gay men, reconciliation of the concepts of machismo and the stereotypes of feminine gay identity can be problematic. For ethnic minority youth, who often strongly identify with their families, the decision to disclose may be complicated in that the youth feel pressure to adhere to heterocentric norms (Morrow, 2004).

Researchers examining the coming-out process in a multicultural sample of male gay youth acknowledged that the disclosure process for Mexican-American participants was informed by cultural factors and norms (Merighi & Grimes, 2000). The authors identified cultural factors that could hamper disclosure. One conflict described surrounds individuals' wanting to establish a gay identity but feeling fearful of how their disclosure might negatively affect perceptions of their family (Merighi & Grimes, 2000). This would be especially problematic in close-knit rural communities where it has already been established that many rural LGB individuals already fear having to choose between their LGB identity and their family.

Recently, researchers considering how perceptions of heterosexist stigma impact LGB ethnic minority individuals' decisions to disclose have recognized a risk versus resiliency paradigm among scholars (Moradi et al., 2010). Moradi and colleagues explain that some scholars have examined LGB people of color as possessing greater resiliency compared to their peers in response to negative reactions to disclosure, whereas other scholars examining LGB people of color cite greater risk in response to negative reactions. These researchers cautioned against using a risk versus resiliency paradigm as it relates to ethnic minority LGB disclosure in that such perspectives may serve to perpetuate stereotypes categorizing LGB people of color as experiencing more heterosexual stigma or as "impervious" to such stigma (Moradi et al., 2010, p. 298). As such, practitioners addressing LGB issues should focus on individual client perceptions of heterosexist stigma and not on whether such stigmas, in reality, exist. Further, Ryan (2003) proposed that several challenges and strengths are inherent in integrating ethnic and sexual identity for ethnic minority lesbians and gay males. Among the challenges to integrating ethnic and sexual identity is the tendency for ethnic minority lesbians and gay males to deny their homosexuality as a way to avoid conflict and out of a fear of rejection based on sexual orientation and cultural gender norms. Additionally, fear of homophobic reactions may lead to a denial of homosexuality. Strengths to integrating ethnic and sexual identity include perceived family support and perceived acceptance and validation of ethnic identity. Such perceived supports also serve as a buffer against racism and discrimination faced in mainstream society (Ryan, 2003).

The consequences that threaten to follow disclosure often compel Mexican-American LGB individuals to keep their sexual orientation a secret (Ryan, 2003). LGB individuals' decision to disclose may be impacted by their subjective awareness of stigma against their group, referred to as "felt stigma" (Ryan, 2003). As a result of their felt stigma, LGB individuals consider the costs and benefits of disclosing their LGB orientation and may take several precautions to conceal their LGB identity (Herek & Garnets, 2007). They exercise extreme care about their sexual activity by avoiding being seen with known LGB people, which includes limiting their visits to areas where LGB people are known to congregate. This would be especially problematic to rural LGB individuals as opportunities for interacting with other LGB individuals would be limited. Emphasis on masculine or feminine activities may also be used as a method to minimize the possibility of discovery. Membership in a hidden community leads to a sense of isolation from their ethnic community, family, LGB community, and larger society. This sense of isolation has serious psychological consequences including depression, anxiety, and suicidal ideation (Zamora-Hernandez & Patterson, 1996). According to the Pew Report (Taylor et al., 2012), there is a significant difference between urban and rural areas of the country with unfavorable views much more intense in the latter. Four-in-ten people living in rural areas say they have a very unfavorable opinion of gay men; twice as many as among residents of large cities.

Familial Reactions to Disclosure

The family's reaction to disclosure can vary. Ben-Ari (1995) identified four basic stages that parents go through during disclosure. Depending on whether or not the parent has suspected a LGB identity, shock is usually the initial reaction. Denial, anger, and frustration then follow. Amidst the anger stage, the parent may react with agitation, dismay, or rage. During this stage, the disclosing individual may experience rejection or physical abuse by the parent (Savin-Williams & Dubé, 1998). Possibly, this anger stems from a feeling of parental guilt or being at fault for the disclosing individual's sexual identity.

The family system perspective affords researchers an opportunity to identify patterns of coping methods used by family members (Ben-Ari, 1995; Crosbie-Burnett et al., 1996; DeVine, 1984; Savin-Williams & Dubé, 1998; Strommen, 1993). Despite a lack of empirical data regarding reactions to disclosures, researchers typically rely on stage models to explain familial reactions. DeVine (1984) proposes a series of stages families move through in order to reach an acceptance of a disclosure by another family member. Subliminal awareness, the first stage, involves a period when family members suspect an individual's LGB identity. Next, during the impact stage, the family experiences a state of crisis after discovery or disclosure of the person's sexual identity. The family then enters the adjustment stage in which the LGB family member is encouraged to either deny the LGB identity or keep it a secret in order to maintain respectability of the family. Subsequently, during the resolution stage, family members, in a sense, mourn the loss of the perceived heterosexual child and resolve negative feelings about lesbian, gay, or bisexual identity. Finally, the family endures an integration stage and begins to employ new behaviors toward the individual (DeVine, 1984). More recently, researchers suggest that these series of reactions may not be linear in nature, but may comprise a set of reactions experienced initially and simultaneously (Willoughby, Doty, & Malik, 2008).

Saltzburg (2004) identified five themes related to parents learning that an adolescent child identifies as gay or lesbian. Themes include awareness of difference, knowing with certainty after disclosure, detachment, fear of estrangement, adjustment, and education. In her discussion of the findings, Saltzburg (2004) posits that the themes surrounding youth disclosure relate to reactions described in stage models of disclosure in families with offspring at later developmental stages.

According to Strommen (1993), family reactions to disclosure can be included in a broad model of reactions to disclosure dependent on three factors. The first and most obvious factor is the value held by the family with respect to homosexuality. When the family is open minded to LGB identity, the likelihood they will react positively is higher (Strommen, 1993). The second factor influencing reactions is the effect the family's values have on the relationship with the disclosing individual. Typically, family members share values and these values unite the family. However, when the family has negative perceptions about homosexuality, family members can also divide the family by alienating the LGB individuals (Strommen, 1993). The third factor is the actual conflict resolution mechanisms utilized by family members. Families tend to use different methods for reaching a resolution to a disclosure depending, again, on their values (Strommen, 1993).

The family's attitude toward LGB sexual identity, as mentioned earlier, is the most salient aspect in understanding their reaction to disclosure. Rural Mexican-American families, like other families in the United States, emphasize heterosexual identity and avoid the discussion of sexual topics, including LGB sexual identity. Practitioners must be cautious in assuming that an LGB sexual identity is homogenous. For instance, in a small sample of African-American, Latino, Asian, and Caucasian gay male adolescents, researchers (Newman & Muzzonigro, 1993) investigated the effects of race and family values on disclosure. The researchers found that the stronger the emphases on traditional values, the less receptive families were toward an LGB identity. Another study found that among White and Latino self-identified lesbian, gay, and bisexual young adults, Latino men were most likely to report negative family reactions to their sexual orientation (Ryan, Huebner, Diaz, & Sanchez, 2009).

Researchers have cautioned that psychological and behavioral implications of disclosure in all populations may differ because individuals could experience positive health benefits when reactions to disclosure are accepting (Rosario et al., 2009). Further, positive reactions to disclosure may serve to buffer individuals from harmful consequences. Conversely, individuals may experience negative health effects including risk of victimization if reactions to disclosure are negative and include rejection (Rosario et al., 2009; Savin-Williams, 1994).

A number of researchers (e.g., D'Augelli et al., 1998; Hunter, 2007; Ryan et al., 2009; Savin-Williams, 1994; Waldner & Magrader, 1999) have made visible the ways in which disclosure in all populations can have dangerous consequences. Research shows that physical violence against adolescents and even homelessness are frequently a direct result of disclosure (Waldner & Magrader, 1999). Waldner and Magrader (1999) reported that 10% of LGB adolescents who had shared their sexual identity to fathers reported being kicked out of their homes. In a study of LGB White youth living in metropolitan areas, D'Augelli et al. (1998)

found that 24% of gay, and 38% of lesbian youth reported verbal abuse from their mother, and 20% from their father after disclosure. Moreover, respondents who came out to parents were significantly more likely to report suicidal tendencies. Additionally, Hunter (2007) reports that in a sample comprised of 46% LGB Latino youth, 41% reported suicide attempts linked to having suffered violence from families, peers, or strangers; 46% of the violent incidents were gay-related.

In a study of disclosure reactions, Rosario and colleagues (2009) found that LGB youths who perceived rejecting reactions to disclosure reported greater substance use and abuse. Recent research (Ryan et al., 2009) also suggests Latino LGB youths report higher rates of illicit drug use than peers who reported no or low family rejection. These reports highlight the significance of addressing potential consequences of disclosure. Stigma may be even more influential in rural areas where there is less experience with and tolerance of diverse lifestyles, greater fear of HIV, and less anonymity (Preston et al., 2004; Willits, Luloff, & Higdon, 2004).

Considerations for Practitioners

Akerlund and Cheung (2000) suggest that racial and ethnic minority LGB individuals are challenged with integrating their ethnic and sexual identities. In their review of identity frameworks, the authors challenge the applicability of minority identity development models for racial and ethnic minority gay and lesbian individuals. Rather, Akerlund & Cheung call for approaches to identity development that take personal characteristics and cultural orientation into consideration. Among the central variables identified as prominent in the research and relevant to working with ethnic minority LGB individuals were assimilation, cultural values, disclosure, family values and expectations, gender roles, machismo, religion, and sexual behavior within the context of the rural community. Practitioners should therefore integrate such notions of identity development when working with Mexican-American individuals and families in rural communities. As compared to other cultures, Mexican-American culture envelops a unique ideology surrounding what it means to be LGB. Therefore, practitioners should assess the Mexican-American family's level of acculturation, assimilation, religiosity, and level of involvement in the rural community. In order to understand sexual behavior, one must consider factors that determine not only the development of LGB identity, but also how variations within the rural, Latino community influence this development.

Acculturation

Acculturation takes place when groups of individuals from differing cultures come together through continuous first hand contact promoting changes in the beliefs, values, and behaviors within one or all groups (Ragsdale, Gore-Felton, Koopman, & Seal, 2009). The social phenomenon of acculturation has been studied extensively and has been found to be associated with numerous psychosocial and physical health outcomes (Burnam, Telles, Karno, Hough, & Escobar, 1987; De la Rosa, 1998; Golding & Baezconde-Garbanati, 1990; Rogler, Cortes, & Malgady, 1991). Unfortunately, data examining the association between acculturation and disclosure of LGB identity and behavior in rural Mexican-American households is scarce.

Holding to traditional Mexican-American family values including familismo and respeto can serve to increase communication between parents and children, which has been perceived to be protective against risky sexual behavior (Griffin, Botvin, Scheier, Diaz, & Miller, 2000; Holtzman & Rubinson, 1995; Whitaker & Miller, 2000). For example, familismo may partially explain the higher number of two-parent families among Mexican-Americans compared to Whites and Blacks, a well-documented protection against virtually all adolescent risk activity (Frost & Driscoll, 2006; Griffin et al., 2000; Jessor, Van Den Bos, Vanderryn, Costa, & Turbin, 1995). Despite close family relationships, Mexican-American teens talk to their parents less about sex than White teens (Guzmán, Casad, Schlehofer-Sutton, Villanueva, & Feria, 2003). One study found that 47% and 68% of Hispanic teens report no communication with mothers and fathers respectively about sex (Guzmán et al., 2003).

For those teens that do talk to their parent about sex, the potential exists to receive inaccurate information (Eisenberg, Bearinger, Sieving, Swain, & Resnick, 2004). Low-acculturated Hispanic adults have lower sexually transmitted infection knowledge than high-acculturated adults, which matches the trend among Hispanic teens where low-acculturation predicts lower knowledge (Marsiglia & Navarro, 2000; Miller, Guarnaccia, & Fasina, 2002). Despite closer parent-child communication, Hispanics are still more likely to engage in risky sexual behavior than most of their peers.

Help-Seeking Behavior

Cultural barrier theory as described by Ramos-Sánchez and Atkinson (2009) posits that factors including acculturation and traditional family values (including familismo, machismo, and religiosity) impede help-seeking behaviors among Mexican-Americans. However, in their examination of help-seeking intentions and adherence to Mexican culture, Ramos-Sánchez and Atkinson found that holding to traditional family values and lower generational status were positively related with help-seeking behaviors. Additionally, they posit that “. . . maintaining one’s culture of origin may have a positive impact on the perception of mental health services . . .” in that respect toward authority figures may contribute to seeking professional help (Ramos-Sánchez & Atkinson, 2009, p. 87). The positive impact of respect may be offset by the knowledge that in a rural community it will be difficult to keep seeking professional help a secret.

Further, machismo establishes male dominance and facilitates multiple sex partners (including extra-marital sexual activities) by insinuating that males have substantial sexual needs that exceed those of females (Diaz, 1998). Machismo and marianismo are contradictory messages, and there is strong evidence that this dual message increases sexual risk (Diaz, 1998). Among low-acculturated Latinas there is a low rate of condom use (Fernandez-Esquer, Atkinson, Diamond, Useche, & Mendiola, 2004) and limited self-efficacy related to sexual negotiation (Pulerwitz, Amaro, De Jong, Gortmaker, & Rudd, 2002). As indicated by other researchers (e.g., Gil et al., 2000; Wood & Price, 1997), such health risks are attributed to expectations of females to acquiesce to male demands and a lack of negotiation and refusal skills related to sexual decision-making.

Working with the Latino-Hispanic Family

Examining the role of the family in the disclosure process is vital to understanding Mexican-American LGB identity development and the disclosure process. Models of LGB identity development in the United States primarily focus on the individual and the struggle to become self-actualized as a LGB person (Cass, 1984; D'Augelli, 1994; Lewis, 1984). LGB Latinos however, are often caught in the dilemma of how to become self-actualized in the context of their family and community. The process of self-awareness and behaviors of disclosure of a LGB sexual identity operate within a structural familial system. As such, the focus switches from more than simply individual sexual identity to the impact that identity has on the person's relationships with immediate and extended family (Merighi & Grimes, 2000). The individual is also faced with the difficulty of dealing with the shame placed upon extended family after disclosure, whether real or imaginary, and the need to prove his or her loyalty to them.

In cases of Mexican-American LGB sexual identity, working with Latino families proves to be more involved and requires the practitioner to understand the culture before entering the client-professional relationship (Greene, 1994). When working with a family, the professional needs to consider the viewpoint of both the parent and the LGB individual as the concept of familismo entails family cohesion. Reactions by parents are generally motivated by dominant attitudes surrounding sexuality, accepted gender norms and behaviors, and traditional family values taught within their culture. Deviation from these acceptable behaviors can result in punishment and ostracism (Rodriguez, 1996). As suggested by Waldner and Magrader (1999), coping mechanisms of the LGB individual may contribute to severing the relationship. They further conjecture that the individual may withdraw from the family in order to cope. For rural Mexican-American LGB individuals, reliance on family membership for confidence and security through the concept of familismo and the collectivistic nature of Mexican-Americans guides individuals toward a feeling of obligation to the parents (Waldner & Magrader, 1999). Knowingly denying this obligation may give the person an overwhelming sense of guilt.

The feeling of obligation to the family can impede LGB individuals from seeking help, which can have life threatening implications. The Centers for Disease Control and Prevention (2012) recently reported that among the Latino-Hispanic population most at risk for acquiring HIV from men who have sex with men (MSM), new infections occurred most in the youngest age group (ages 13–29 years). Additionally, among the Latino-Hispanic MSM population, males aged 30–39 represented 35% of new infections. One reason for the greater susceptibility among Latinos or Hispanics is that many gay or bisexual Hispanic men maintain a relationship with a woman to conform to expected social behaviors (Marin, 2003). In turn, their female partners experience increased risk for sexually transmitted infections (Marin, 2003). This greater risk is intensified in rural communities where confidentiality is difficult to maintain.

Implications for Social Workers

Social work services are likely to be needed, if not required, in situations of disclosure. However, these services may be very scarce in rural areas. Social workers helping families cope with disclosure tend to deal with negative outcomes related to severed family relationships. Although developing these goals may sound uncomplicated, the task becomes more demanding

when working with Latino families in rural communities. McCroskey (2001) points out that social workers may have a difficult time communicating across cultural differences in understanding and experience with rural Latino families. According to Rodriguez (1996), cultural competence is of utmost importance for providing effective services. Rodriguez suggests that by helping each member of the family understand and accept that the cultural limits are out of their control, the process of accepting the gay or lesbian family member goes much smoother. Downs, Moore, McFadden, Michaud, & Costin (2004) suggests:

Respecting clients' beliefs and culture, learning about the family's culture within a rural community context, sorting out differences between these beliefs and one's own values, advocating for clients, and dispelling stereotypes and myths are ways in which the practitioner can operationalize social work knowledge, values, and skills about diversity. (p. 132)

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Recommendations for Future Research

Latino men and women report significantly higher levels of familismo, more collectivist attitudes, and more helping behavior in relationships with parents, as compared to White counterparts (De la Rosa, 1998; Golding & Baezconde-Garbanati, 1990). As such, examining the role of the family in the rural community during the disclosure process is vital to understanding Mexican-American LGB identity development and the disclosure process in rural communities.

In their longitudinal study of sex role attitudes and labor participation, Valentine and Mosley (2000) reported a decline in traditional sex role attitudes over time. Their measure of level of acculturation was based on generational status where first-generation Mexican-Americans tended to be more aversive to non-traditional sex roles than later generation or individuals of Mexican descent. A similar look at traditional sex role attitudes as they relate to generational status and LGB disclosure within rural Mexican-American families would further serve to guide current practice.

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1994; Lewis, 1984). LGB Latinos, however, are often caught in the dilemma of how to become self-actualized in the context of their family and rural community. Recently, Organista (2009) has highlighted the need for a more comprehensive paradigm that considers all of the intersections of Latino identity, such as race, gender identity, sexual orientation, and geographical location (rural vs. urban) in order to meet the service needs of a diverse population.

Clearly, a new model of LGB identity development specific to “Hispanics” is needed. This alternative model ideally would take into account the patterns of coping and adaptation within Mexican-American families. Given the lack of empirical data, qualitative interviewing and ethnographic based data as a research method takes priority. Such interviews would allow researchers to generate new knowledge about rural LGB Latino families and would allow respondents to tell their personal story. It is important to have a sense of the participant’s level of support, in the family system as well as the community. Qualitative interviews would allow the respondent to give an account of the moment when the first disclosure was made. The investigator should seek information pertaining to when, where, how, and with whom that disclosure was made. Similarly, an awareness of the resources (e.g., mental health counseling, community organizations) available to the respondent in rural communities would be helpful. Information related to the way in which different individual family members reacted to the person would also be important. The interviewer would need to inquire about shame felt by the disclosing individual as it relates to the family and the rural community. Connection to the family system after making the disclosure is another point of interest, as well as involvement in family gatherings and rituals. An assessment of the level of individual, familial, and community religiosity is critical to the success of a healthy LGB identity disclosure. A change in the way an individual feels about family after sharing his or her sexual identity is also possible and should be investigated. Social workers and researchers should also explore integration in the family and rural community and any changes in this dynamic following disclosure.

Through detailed interviews, social workers can begin to construct a better understanding of what it means to be a LGB Mexican-American along the rural Mexico-US border and the variations of these meanings. Such information reinforces knowledge pertaining to understanding the disclosure process, and the construction of LGB identity development specific to rural Mexican-Americans. This informational model can be used in the clinical setting to help guide social workers in assessment and development of the intervention plan. Utilization of an informational model and the other concepts described in this paper, allow the practitioner to become an instrument through which the client is empowered, and essential to the development of a positive LGB, rural and Mexican-American identity.

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