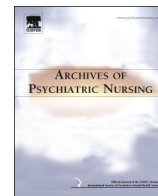




Contents lists available at ScienceDirect

## Archives of Psychiatric Nursing

journal homepage: [www.elsevier.com/locate/apnu](http://www.elsevier.com/locate/apnu)

## The Impact of Parental Reaction to Sexual Orientation on Depressive Symptoms and Sexual Risk Behavior Among Hispanic Men Who Have Sex With Men

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### ARTICLE INFO

#### Article history:

Received 20 September 2016

Revised 15 February 2017

Accepted 9 April 2017

Available online xxxx

#### KEYWORDS:

Depression

Hispanic

MSM

Coming out

Sexual orientation disclosure

Sexual risk

### ABSTRACT

**PURPOSE:** This study examined the relationship of parent reaction to sexual orientation with depressive symptoms and safer sex among Hispanic adult men who have sex with men (MSM). We also examined men's acculturation to the U.S. (*Americanism*) in relation with these variables.

**METHOD:** Cross-sectional data collected from July 2011 to December 2012, from 125 MSM with a mean age of 43.02 years. Instruments included the Perceived Parent Reaction Scale, the Centers for Epidemiological Studies Depression Scale, the Safer Sex Behavior Questionnaire and the Bidimensional Acculturation Scale. Data was analyzed using Hierarchical generalized linear models (GZLM).

**RESULTS:** Among men whose parents knew of their sexual orientation, rejection of son's sexual orientation from mother ( $p = 0.032$ ) and from father ( $p = 0.004$ ) was related to higher number of depressive symptoms. Parent reactions were not directly related to safer sex behaviors. Americanism was associated with lower depressive symptoms ( $p = 0.001$ ) but was not related to safer sex behaviors.

**CONCLUSIONS:** Current parent attitudes about their sons' sexual orientation had an effect on the sons' emotional wellbeing and acculturation may play a protective role. Mental health and primary care clinicians working with Hispanic MSM should assess for level of family support and provide resources to assist with disclosure and family acceptance of sexual orientation as indicated, particularly among recently immigrated men who may be at higher risk.

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The risk for HIV infection among men who have sex with men (MSM) is well known and of high public health significance, particularly for ethnic minorities. In 2010, MSM accounted for 56% of people in the United States (U.S.) living with an HIV diagnosis and 63% of newly identified HIV infections, while representing only 2% of the U.S. population (Centers for Disease Control and Prevention [CDC], 2015). Among Hispanics, who in 2010 accounted for 21% of new HIV infections while representing 16% of the U.S. population, 68% of new infections were among MSM.

MSM are also at increased risk for depression, which besides being an important public health issue itself, also increases the likelihood of engaging in behaviors that increase risk for acquiring HIV infection (De Santis, Colin, Provencio Vasquez & McCain, 2008; De Santis, Arcia, Vermeesch, & Gattamorta, 2011; Houston, Sandfort, Dolezal, & Carballo-Dieguez, 2012; Meyer, 2003; Perdue, Hagan, Thiede, & Valleroy, 2003). A systematic review and meta-analysis revealed that the risk of depression and anxiety disorders among sexual minority individuals ranged from 1.54 to 2.58 higher than for heterosexual

individuals, and lifetime prevalence of suicide attempts was 2.47 higher, with the highest risk among MSM (King et al., 2008).

### RISK OF HIV AND DEPRESSION AMONG HISPANIC MSM

Ethnic minority MSM have unique life experiences and experiences of stigma and exclusion due to multiple social identities that elicit discriminatory reactions from within the general community, their racial/ethnic community and the mainstream gay community, which engender depressive mood (Balsam, Molina, Beadnell, Simoni, & Walters, 2011; Choi, Paul, Ayala, Boylan, & Gregorich, 2013). A three-city study with a probability sample of 912 Hispanic MSM men revealed that 80% reported depressed mood and 17% reported suicidal ideation in the past 6 months, and that experiences of racial and sexual orientation discrimination predicted psychological symptoms and suicidal ideation (Diaz, Ayala, Bein, Henne, & Martin, 2001).

### IMPORTANCE OF SEXUAL ORIENTATION DISCLOSURE

Disclosure of one's sexual orientation to parents is a significant milestone in the coming out process of sexual minority individuals (Floyd &

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Bakeman, 2006). Parents often react negatively to their child's coming out (D'augelli, Grossman, & Starks, 2008) including reactions of shock, rejection and grief that has been described as mirroring the process of bereavement following a death in the family (LaSala, 2000; Willoughby, Doty, & Malik, 2008). In a study of the lived experiences of gay men in coming out to their parents, Machado (2015) describes the strain in parent-child relationships following disclosure.

Parental reaction to disclosure of sexual orientation impacts psychological health and engagement in risky sexual behaviors among sexual minority youth (Bouris et al., 2010). In a predominantly White non-Hispanic national sample of sexual minority youth ages 12–17, males who disclosed their sexual orientation and were not supported by parents reported significantly higher levels of suicidal ideation and substance abuse (Padilla, Crisp, & Rew, 2010). While negative reactions are likely to lead to adverse effects, a close relationship with parents following disclosure may help to buffer the effects of social discrimination (Beatty, 1999; Padilla et al., 2010).

There have been relatively few studies examining the impact of parental reaction among sexual minority adults, and these studies have been predominantly with young adults. A study by Ryan, Huebner, Diaz, and Sanchez (2009) of 224 sexual minority young adults ages 21–25, half of whom were Hispanic, found that those who reported family rejection in adolescence were 8.4 times more likely to report a suicide attempt, 5.9 times to report depression, and 3.4 times to report drug use and unprotected sex. In that same sample, Hispanic MSM reported the highest levels of parental rejection, depression, suicidal behavior and HIV risk behavior of any ethnic and gender group. We located one study examining these factors with a middle-age adult sample (mean age = 38.41) of sexual minority individuals, who were predominantly White non-Hispanic. In that study, MSM who had not come out to parents, or whose parents were not supportive of their sexual orientation, had higher levels of depression and binge drinking (Rothman, Sullivan, Keyes, & Boehmer, 2012). One qualitative study with Hispanic MSM explored family support, sexual orientation disclosure and alcohol use (del Pino, Moore, McCuller, Zaldivar, & Moore, 2014). No studies were located that examined the relationship between parent reactions and mental health or sexual risk behavior outcomes among Hispanic MSM beyond their 20's.

## HISPANIC CULTURAL NORMS

Homophobia and stigmatization of non-gender conforming individuals is prevalent among Hispanics. Derogatory words commonly used to denigrate MSM marginalize and stigmatize Hispanic MSM (Guarnero, 2007). The culture-related rejection of homosexuality may lead Hispanic MSM to conceal and/or deny their true sexual identity (Diaz, 1998) or delay disclosure compared to white non-Hispanics (Garofalo, Deleon, Osmer, Doll, & Harper, 2006; Grov, Bimbi, Nanín, & Parsons, 2006; Padilla et al., 2010). For Hispanic MSM that do disclose, they are likely to experience the highest number of negative family reactions compared to sexual minority Hispanic females, and sexual minority Whites regardless of gender (Ryan, Huebner, & Diaz, 2009).

Gender roles and norms held by many Hispanics result in a rigid categorization of masculinity whereby the man is seen as the provider, being in charge, and in control (Alvarez, 1997). In a mixed ethnicity sample of sexual minority youth and parents, Richter (2015) found that Hispanic parents held more traditional gender role beliefs than White non-Hispanic parents, and that traditional gender role beliefs were associated with higher levels of rejection of their child's sexual orientation. Furthermore, many Hispanics ascribe to Christian religious values, which have historically condemned homosexuality as unnatural, and are incompatible with non-heterosexual orientations and lifestyles (Rodriguez, 2009). A study with a mixed-ethnicity sample of 225 sexual minority young adults found that low family acceptance was associated with being Hispanic and an immigrant, family religiosity and parental low occupational status (Ryan, Russell, Huebner, Diaz, & Sanchez, 2010).

Acculturation may provide some relief from the aforementioned processes. While numerous studies have documented an association between acculturation and high risk sexual behavior and poor mental health outcomes among Hispanics (e.g., Alegria et al., 2008; Beadnell et al., 2003; de Figueiredo, 2014; Raffaelli, Zamboanga & Carlo, 2005), there is some evidence that the effects of acculturation on health behaviors and mental health may play out differently among MSM. One study exploring the experiences of Hispanic MSM found that recently migrated men engaged in high-risk sexual behavior due to poverty and feelings of isolation and loneliness. Men reported that not being fluent in English, fear of homophobic attacks, and perceiving that multiple sexual partners is normative gay behavior in the U.S. influenced their engagement in high risk sexual behavior such as anonymous sex in public venues (Bianchi et al., 2007).

## THEORETICAL FRAMEWORK

Vulnerable populations have an increased risk of disease, or susceptibility to adverse health outcomes related to social/economic status, stigma, marginalization, or disenfranchisement (Flaskerud & Winslow, 1998). The Vulnerable Populations Conceptual Model (VPCM) was applied to this study to describe the relationship between resource availability, relative risk, and health status of the sample of Hispanic MSM. Includes the components of resource availability, relative risk, and health status. Resource availability is access to socioeconomic (such as income) and environmental resources (such as social connectedness). This model has been used with previous research with Hispanics (De Santis, Vasquez, Weidel, Watson & Sanchez, 2009; Gonzalez-Guarda, Peragallo, Vasquez, Urrutia, & Mitrani, 2009).

## THE CURRENT STUDY

The aim of this study is to examine the association between parental reaction to sexual orientation and depressive symptoms and safer sex behaviors among adult Hispanic MSM. We hypothesize that negative parental reaction will be related to depressive symptoms and lower levels of safe sex behaviors, a relationship that has not been empirically tested in previously reported research with adult Hispanic MSM. In addition, we explore the relationship of acculturation with coming out to parents, the outcomes of depressive symptoms and safer sex, and whether acculturation interacts with parental reaction on depressive symptoms or safer sex. A final aim is to describe sexual orientation disclosure to parents among a community sample of Hispanic adult MSM.

## METHODS

### DESIGN

This is an ancillary study to a larger mixed methods study that assessed cultural influences on risk behaviors such as mental health, substance abuse, and violence among Hispanic MSM. Data was collected from July 2011 to December 2012. The segment of the study in this report used a quantitative cross-sectional design and reports unpublished data. A priori sample size calculation using an alpha of 0.05, a medium effect size ( $f^2 = 0.15$ ), five predictor variables, and a desired statistical power of 0.8 resulted in a sample size of 100 participants. To compensate for potential missing data, additional 25% participants were recruited, resulting in a final sample of 125 men (Sorper, 2016).

### SAMPLE, SETTING AND RECRUITMENT

The sample consisted of 125 community-dwelling Hispanic MSM. Established criteria for enrollment included: 1) self-identification as Hispanic or Latino and ability to speak either Spanish or English; 2) self-identification as gay or bisexual; 3) residence in Miami-Dade

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