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“We are Two of the Lucky Ones”: Experiences with Marriage and Wellbeing for Same-Sex Couples

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Abstract

Happy marriages provide protective health benefits, and social support is a key factor in this association. However, previous research indicates one of the greatest differences between same-and different-sex couples is less social support for same-sex couples. Our goal was to examine the extent to which formal markers of couple status (e.g., marriage) impact wellbeing among same-sex married partners. Using a mixed-methods approach, data were collected from 218 primarily White gay and lesbian individuals in the Midwest. Quantitative analysis revealed individuals in a prior formal union with a different-sex partner reported the lowest levels of sexuality specific social support and acceptance. Qualitative analysis revealed four primary impacts of marriage on support from family, friends, and co-workers: no change, increased support, decreased support, and a synthesis of mixed support. Three mechanisms prompting change in the family were identified and are presented.

Keywords: Same-sex couples, marriage, wellbeing, social support, gay and lesbian, mixed methods, boundary ambiguity
On June 26, 2015, the Supreme Court of the United States (SCOTUS) declared marriage legal for same-sex couples in all 50 states. The 5–4 landmark ruling in Obergefell v. Hodges—with significance comparable to Brown v. Board of Education and Roe v. Wade, came after 46 years of political debate and battles for legal recognition and equality. Prior to the ruling, marriage was banned for same-sex couples in a majority of states, thereby excluding millions of couples from legal rights and responsibilities granted their different-sex peers. Yet marriage provides more than legal benefits; it is a publicly endorsed representation of commitment and the benchmark for “couple” status. In the majority opinion, Justice Anthony Kennedy declared, “No union is more profound than marriage, for it embodies the highest ideals of love, fidelity, devotion, sacrifice and family,” (Gorman, 2015, para. 1). Not surprisingly, an array of psychosocial benefits (e.g., happiness, life satisfaction) are also associated with marriage. Yet until the landmark decision, demographics (i.e., state residence) determined marriage eligibility for same-sex couples; although some couples were granted access to legalize their unions, the majority were not. The present study investigates the effect of legalized marriage on perceptions of social support and wellbeing—prior to the historic 2015 ruling.

**Literature review**

Marriage comprises “a transformative act—[it] not only names a relationship but it creates a relationship between two people, one that is acknowledged, not just by the couple itself, but by the couple’s kin, friends, religious community, and larger society” (Waite & Gallagher, 2000, p. 73). An extensive body of research enumerates psychosocial benefits of marriage (Ross, Mirowsky, & Goldsteen, 1990; Williams & Umberson, 2004). Briefly, married persons report greater happiness (Wienke & Hill, 2009), life satisfaction (Kamp Dush & Amato, 2005; Williams, 2003), and less depression than their non-married peers (Beam, Dinescu, Emery, & Turkheimer, 2017). Social support is a main mechanism linking marriage and wellbeing (Musick & Bumpass, 2012). Marriage quality is an undeniable component to positive outcomes; low-quality marriages not only eliminate any wellbeing gains—they are more harmful than being unmarried (Umberson, Thomeer, & Williams, 2012).
Before the 2015 SCOTUS ruling, approximately 37%–46% of gay men and 51%–62% of lesbians were in cohabiting partnerships (Carpenter & Gates, 2008); the majority of whom expressed a desire to legally marry (Kaiser Family Foundation, 2001). Same-sex couples described family recognition and support as key factors in wanting to marry (Alderson, 2004; Schecter, Tracy, Page, & Luong, 2008) and, more specifically, wanting their relationship treated equally to different-sex relationships in the family (Lannutti, 2008). Civil unions and domestic partnerships afforded some legal and social (e.g., formalized, public recognition) benefits to same-sex couples without access to marriage. With only limited data on married same-sex couples, the literature reviewed below provides a snapshot of couples in different unions prior to the SCOTUS ruling and the background for the present investigation.

**Psychosocial wellbeing: Same-sex vs. different-sex couples**

Lawrence Kurdek devoted a lifetime to marital satisfaction research—most of which examined relationship quality and compared same-and different-sex couples. In 1994, Kurdek found coupled gay men and lesbians did not differ in relationship satisfaction from their married heterosexual peers. In 2004, Kurdek examined mechanisms regulating relationship health (e.g., psychological adjustment, conflict resolution) and, since same-sex couples fared either better or no worse than different-sex couples, with the exception of less social support for same-sex couples, concluded that these relationships function similarly. Other studies are equally informative. No differences were found in relationship satisfaction, observed interactions, or physiological reactivity between married heterosexuals and partnered gay men and lesbians (Roisman, Clausell, Holland, Fortuna, & Elieff, 2008). Wienke and Hill (2009) found partnered gay men and lesbians were no different from cohabiting heterosexuals, significantly happier than partnered heterosexuals, but less happy than married heterosexuals. In evaluation of results from his own work and that of others, Kurdek (2005) concluded the largest disparity between same-and different-sex couples concerned social support, and lack of family support was a unique stressor for non-heterosexuals.
Social support

For many LGB persons, the most frequently anticipated benefit of marriage is increased acceptance and relationship recognition from family (Lannutti, 2007a); this is true even for individuals already in domestic partnerships (Shulman, Gotta, & Green, 2012). Results indicate that these high expectations are, at times, achieved. Badgett (2011) and others (Phillips, 2008; Rothblum, Balsam, & Solomon, 2011) have described increased acceptance from family members and closer family relations among civil union and same-sex marriage participants—changes attributed to altered perceptions of the couple unit. Lannutti (2007b) described improved family relationships among same-sex couples following marriage in spite of limited familial support prior to the nuptials. Furthermore, benefits of marriage (or other types of formalized unions) may extend beyond one’s immediate family. MacIntosh, Reissing, and Andruff (2010) found spouses were welcomed into their partner’s families and given “in-law” status—markers of social inclusion akin to that afforded married heterosexual couples.

Perceptions of inclusion, support, and improved family relations positively impact wellbeing for oneself (Badgett, 2011) and one’s spouse (Ramos, Goldberg, & Badgett, 2009). However, unanticipated and negative outcomes from legalized same-sex coupling have also been reported, including revived homonegativity (Eskridge & Spedale, 2006), family disapproval (Badgett, 2009; Lannutti, 2008), and a new sense of family rejection (Ocobock, 2013).

Summary

Taken together, the bulk of studies suggest that relationship quality and satisfaction are nearly indistinguishable between same-and different-sex couples. However, same-sex couples face unique stressors—attributed largely to familial support. Support from key network members (family, friends, coworkers) is critical to wellbeing. Furthermore, marriage provides unique benefits for wellbeing—over and above benefits derived from otherwise committed (e.g., cohabiting) partnerships—and social support is a critical component in married couples’ wellbeing.
Ambiguous loss, a theory dating back over 40 years, occurs when there is a situation of unclear and unresolved loss in the family (Boss, 2016). Boss (2006) described two types of ambiguous loss. Type I arises when a physical loss is experienced but a psychological presence remains (e.g., missing person), and Type II occurs when a physical presence exists but a psychological presence does not (e.g., family member with dementia; Boss, 2006).

Boundary ambiguity results from ambiguous loss, and it is defined as “not knowing who is in or out of one's family system, and thus there is incongruence among individual perceptions about family membership and roles” (Boss, 2016, p. 270). Boundary ambiguity is a stressor to the family system and is associated with psychological distress (Boss, 2016; LaSala, 2002). The greater the uncertainty about family member belonging, and the longer it persists, the more detrimental the effects (Boss & Greenberg, 1984). As family systems become more complex—such as the creation of divorced, remarried, cohabiting, and blended families—the greater the potential for boundary ambiguity (Carroll, Olson, & Buckmiller, 2007).

Precedence has been set for the application of this theory to sexual and gender minority (SGM) families. For instance, many parents describe experiencing loss upon a child’s coming out (Broad, 2011; LaSala, 2010; Moore, 2012; Savin-Williams & Dubé, 1998). In fact, even parents who try to conceal negative reactions to a child’s coming out overwhelmingly report experiences of grief and loss from a child’s disclosure (LaSala, 2010). Similarly, boundary ambiguity often results when a family ignores or denies the facts surrounding an event (Boss & Greenberg, 1984), and this can also be used to help understand families’ experiences during the coming-out process—especially if the family struggles, implicitly or explicitly, to understand or accept the facts of having a sexual minority family member. Ignorance of facts regarding a SGM family member have been documented—for example, parents trying to conceal a child’s sexual identity from other family members (D’Augelli, Grossman, & Starks, 2008; Scherrer, Kazyak, & Schmitz, 2015). In other instances, LGBT persons are excluded from participation in the family (Ryan, 2010), or they may physically distance themselves as a means of self-protection from rejection (LaSala,
2002; Reczek, 2016) yet simultaneously desire to maintain family relationships (Carastathis, Cohen, Kaczmarek, & Chang, 2017).

In other research, gay fathers (both biological and stepfathers) experienced boundary ambiguity in struggling to define family membership/roles, often due to rejection from children (Jenkins, 2013). Other same-sex couples described family ambiguity due to shallow or limited support from family, support from select family members only, or support and incidents of rejection (Dziengel, 2012). Thus application of this theory is appropriate as SGM persons and their families often experience ambiguous loss and boundary ambiguity over time (McGuire, Catalpa, Lacey, & Kuvalanka, 2016; Wahlig, 2014).

**Purpose, significance, and hypothesis**

Guided by ambiguous loss theory, the primary purpose of this investigation was to examine the extent to which formal markers of couple status impact wellbeing among same-sex married partners. To achieve our goal, three research questions were posed: (1) To what extent do members of same-sex couples feel supported by family, friends, and co-workers, and do markers of marriage impact support and wellbeing?; (2) How, if at all, does marriage impact perceived support from family members among same-sex partners?; and (3) How, if at all, does marriage impact same-sex partners’ relationships with friends and co-workers?

Marriage is a legal, social, public, and formal process by which couples declare commitment as a “unit.” Simply stated, marriage is a visible “marker” that delineates couple status. In addition to marriage, three additional markers were identified that, it was assumed, would impact (i.e., increase or decrease) perceptions of boundary ambiguity among support network members—which, in turn, would impact support provided. Lacking access to support network members, we assessed perceived support and wellbeing among same-sex marriage partners. Markers of couple status and presumed associations with boundary ambiguity were as follows: First, legal recognition of marriage in state of residence, a formal public and legal marker of couple status, and length of marriage were expected to reduce boundary ambiguity among network members. On the other hand, formal union (i.e., marriage, civil marriage, domestic partnership) to a different-sex partner was expected to increase boundary ambiguity. Based on
these assumptions and the available literature, the following hypotheses were developed.

- **H1**: Psychosocial wellbeing will be positively associated with network support.
- **H2**: Residing in a state with legal recognition will positively impact perceived support and wellbeing;
- **H3**: Length of marriage will be positively associated with perceived support and wellbeing;
- **H4**: Prior formal union to a different-sex partner will be negatively associated with perceived support and wellbeing.

**Method**

Both quantitative and qualitative (i.e., use of a forced-choice survey and open-ended questions) data were collected; they were deemed most appropriate as this mixed-method design allowed us to: (1) build on previous investigations that have relied largely on qualitative or quantitative methods; and (2) provide multiple types of data from which to more comprehensively address the research questions. In this investigation, family was defined as family of origin.

**Participants**

A total of 218 surveys were submitted. However, five individuals indicated they were separated/divorcing, and three others failed to indicate current marriage status. Based on the goals of this investigation, these eight participants were excluded from the analysis. Thus the total sample included 210 participants. The majority self-identified as White (90%; $n = 189$), female (70%; $n = 147$), and gay/lesbian (82%; $n = 173$). They were 43 years of age, on average, with an age range of 22 years to 71 years. All were legally married. State of residence was closely divided between marriage equality ($n = 99$) and inequality ($n = 108$)—with the majority residing in either Iowa ($n = 77$) or Nebraska ($n = 62$), respectively. Participants were married, on average, 3.1 years (range = 6 months to 11 years). There were 35 matched dyads (see Table 1 for complete demographic information).
Procedures

Data were collected from May–August 2014. For recruitment, various community venues were targeted (e.g., Pride festivals, academic, spiritual) to maximize sample diversity, and snowball sampling was used to reach those less involved in the community (Meyer & Wilson, 2009). Recruitment materials that provided the Web address for the online survey (e.g., flyers, e-mail announcements) were distributed at events and to key persons in community venues. Participants were asked to share the survey link with others in their networks when they completed the survey. To be included, participants must have been a member of a legally married same-sex couple, able to communicate proficiently in English, and at legal age of majority in state of residence. After granting informed consent, participants completed an online survey composed of demographic items, open-ended questions, and several self-report measures using the Qualtrics Research Suite. For reciprocity, participants could elect to be in a drawing for a $50 Amazon gift card and/or receive study findings.

Table 1. Demographic characteristics of participants (n = 210).

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<th>M</th>
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<td>22–71 years</td>
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(Continued)
Table 1 (continued). Demographic characteristics of participants (n = 210).

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<tr>
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<tr>
<td>Education</td>
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<td>$100,000 or more</td>
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<td>Do not reside in U.S.</td>
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</table>

*One participant per each state listed.
**Measures**

The *Perceived Social Support–Family Scale (PSS-Fa)* is a 20-item instrument by Procidano and Heller (1983). A total score (i.e., 0–20) is obtained, and higher scores reflect more perceived social support from family. It has demonstrated concurrent validity (Procidano & Heller, 1983) and excellent reliability in the present study, $\alpha = .95$, and in past studies where $\alpha = .88–.91$ (Fischer & Corcoran, 2000).

The *Sexual Identity Acceptance Scale (SIA)* is an eight-item instrument adapted by the principal investigator (PI) from items in previous studies to measure perceived acceptance of LGB identity by specific people (see Elizur & Mintzer, 2003; Sheets & Mohr, 2009). For example, item one asks, “To what extent does your mother accept you being GLB?” A mean score was computed to account for not applicable items (e.g., do not have a brother), and higher scores (range = 1–6) indicate greater perceived acceptance. It demonstrated excellent reliability in a pilot study ($\alpha = .94$), but in this study $\alpha = .64$.

The *Sexual Identity Support and Minority Stress Scale (SIS-MS)* is an 18 item instrument adapted by the PI from items in previous studies (see Balsam, Beadnell, & Molina, 2013; Leslie, Huston, & Johnson, 1986; Lewis, Derlega, Berndt, Morris, & Rose, 2001; Sprecher & Felmlee, 1992; Vaux, Riedel, & Stewart, 1987). It assesses sexuality-specific social support and minority stressors based on experiences with and perceptions of other’s behavior. Thirteen items ask about experiences in the family in which an individual was raised, such as: “My family accepts my partner as part of the family.” Five items ask about stressors outside the family, such as: “I monitor what I say/do around heterosexual people for fear of being treated unfairly because of my GLB identity.” A total score is obtained (range = 18–108), with higher scores indicating greater sexuality-specific support and less minority stress. It demonstrated excellent reliability in the present study ($\alpha = .91$), as well as a pilot study where $\alpha = .94$.

The *Satisfaction with Life Scale (SWLS)* is a five-item instrument to assess subjective wellbeing, which refers to an individual’s cognitive judgment of their situation rather than an emotional state (Diener, Emmons, Larson, & Griffin, 1985). A total score is obtained (range = 5–35), with higher scores indicating greater life satisfaction. It has
demonstrated concurrent validity (Fischer & Corcoran, 2000) and excellent reliability in the present study ($\alpha = .89$), and in past studies where $\alpha = .87$ (Diener et al., 1985).

**Data analysis**

**Quantitative data**

Analysis was conducted using IBM: Statistical Program for the Social Sciences (SPSS) version 22. Standard data preparation steps were taken, such as creating a codebook and database, cleaning the database, and reverse coding necessary items. Given the presence of some dyads in the sample, an unconditional means model (Peugh & Enders, 2005) using SAS (version 9.2) was estimated to test for non-independence in the dependent variables. For the SIA, SIS-MS, and PSS-Fa the levels of non-independence were undetectable. For the SWLS, there was minimal non-independence, $\chi^2_{(1)} = 0.88$, $p = .35$; with an intra-class correlation coefficient (ICC) of 0.18.

**Qualitative data**

Open-ended survey responses were imported into the MAXQDA (version 12) software program. The PI and third author analyzed the data separately using core elements of qualitative data analysis that include writing notes, identifying codes, combining codes into broader categories or themes, and comparing the data (Creswell, 2007). First, they read each transcript once to gain familiarity with the data, then they noted initial observations. They inductively identified codes (i.e., significant statements), often using in vivo coding (Saldana, 2011), and then grouped repetitive/overlapping codes into categories. For example, initial coding of the data concerning the meaning and impact of marriage resulted in approximately 40 different codes. These codes were examined and reduced to approximately 20 codes. All data segments were analyzed again and assigned the appropriate code. These codes were analyzed for patterns and relations, which began the next step of classifying and interpreting (Creswell, 2007). Codes were grouped into categories and the data re-examined to ensure categories were representative. This reiterative analysis process continued
until the codes were finally grouped into seven major themes and, in
certain cases, subthemes. The PI and third author engaged in writ-
ing notes and met regularly to examine representativeness in the data
and to resolve any coding differences. Validation strategies included
triangulation via the mixed-methods design (Creswell, 2007) and in-
dependent data analysis (Merriam, 2009). The second author served
as a peer reviewer (Merriam, 2009), and authors used rich descrip-
tions (Creswell, 2007).

Results

The primary goal of this research was to further understand the im-
pact of marriage for wellbeing among same-sex couples. To this end,
three research questions were posed, and the results are presented
below.

Research question 1: To what extent do members of married
same-sex couples feel supported by family, friends, and
co-workers, and to what extent do markers of marriage impact
support and wellbeing?

As evident in Table 2, participants reported fairly high levels of psy-
chosocial wellbeing (M = 28.5), sexuality-specific support (M = 85.3),
and sexual identity acceptance (M = 5.2), with slightly less general
family support (M = 12.9).

Hypothesis 1—psychosocial wellbeing will be positively associated
with perceived network support—was supported. As indicated in Ta-
ble 3, psychosocial wellbeing was positively, significantly associated
with all three indicators of support (i.e., sexual identity acceptance, r
= .41, p < .01; sexual identity support, r = .46, p < .01; and perceived
social support from family, r = .36, p < .01).

As indicated in Table 4, results did not support Hypothesis 2 that
residing in a state with legal recognition would increase perceived
support from network members or psychosocial wellbeing. All vari-
ables had negative skewness values, within recommended limits for
normality, and homogeneity of variances. Independent-samples t
tests indicated no significant differences between the groups on any
**Table 2.** Psychometric properties of the study variables.

<table>
<thead>
<tr>
<th>Scale</th>
<th>n</th>
<th>M</th>
<th>SD</th>
<th>α</th>
<th>Potential</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIS-MS</td>
<td>187</td>
<td>85.35</td>
<td>15.51</td>
<td>.91</td>
<td>18–108</td>
<td>40–108</td>
</tr>
<tr>
<td>SIA</td>
<td>188</td>
<td>5.19</td>
<td>.57</td>
<td>.64</td>
<td>1–6</td>
<td>3–6</td>
</tr>
<tr>
<td>PSS-FA</td>
<td>188</td>
<td>12.91</td>
<td>6.77</td>
<td>.95</td>
<td>0–20</td>
<td>0–20</td>
</tr>
<tr>
<td>SWLS</td>
<td>190</td>
<td>28.54</td>
<td>5.69</td>
<td>.90</td>
<td>5–35</td>
<td>7–35</td>
</tr>
</tbody>
</table>

SIS-MS = Sexuality Identity Support-Minority Stress; SIA = Sexual Identity Acceptance; PSS-FA = Perceived Social Support-Family; SWLS = Satisfaction with Life Scale.

**Table 3.** Pearson correlations for dependent variables.

<table>
<thead>
<tr>
<th>Measure</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIA</td>
<td>–</td>
<td>.77**</td>
<td>.57**</td>
<td>.41**</td>
</tr>
<tr>
<td>SIS-MS</td>
<td>.77**</td>
<td>–</td>
<td>.71**</td>
<td>.46**</td>
</tr>
<tr>
<td>PSS-Fa</td>
<td>.57**</td>
<td>.71**</td>
<td>–</td>
<td>.36**</td>
</tr>
<tr>
<td>SWLS</td>
<td>.41**</td>
<td>.46**</td>
<td>.36**</td>
<td>–</td>
</tr>
</tbody>
</table>

SIA = Sexual Identity Acceptance; SIS-MS = Sexuality Identity Support-Minority Stress; PSS-FA = Perceived Social Support-Family; SWLS = Satisfaction with Life Scale.

**Table 4.** t-test results for dependent variables by legal recognition.

<table>
<thead>
<tr>
<th>Measures</th>
<th>Legal Recognition</th>
<th>No Legal Recognition</th>
<th>t (df)</th>
<th>P</th>
<th>Cohen’s d</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>M (SD)</td>
<td>n</td>
<td>M (SD)</td>
<td>t (df)</td>
</tr>
<tr>
<td>SWLS</td>
<td>95</td>
<td>28.26 (6.10)</td>
<td>95</td>
<td>28.83 (5.26)</td>
<td>-1.68 (188)</td>
</tr>
<tr>
<td>PSS-Fa</td>
<td>94</td>
<td>12.60 (6.85)</td>
<td>94</td>
<td>13.22 (6.72)</td>
<td>-1.93 (186)</td>
</tr>
<tr>
<td>SIS-MS</td>
<td>93</td>
<td>83.79 (15.82)</td>
<td>94</td>
<td>86.90 (15.11)</td>
<td>1.37 (185)</td>
</tr>
<tr>
<td>SIA</td>
<td>93</td>
<td>5.09 (.62)</td>
<td>95</td>
<td>5.28 (.50)</td>
<td>-2.26 (186)</td>
</tr>
</tbody>
</table>

SWLS = Satisfaction with Life Scale; PSS-Fa = Perceived Social Support-Family; SIS-MS = Sexuality Identity Support-Minority Stress; SIA = Sexual Identity Acceptance.
variables, except that those living in states without legal recognition had significantly higher levels of sexual identity acceptance.

Our third hypothesis was not supported. Kendall’s tau-b correlations indicated that length of marriage was not significantly associated with any of the three indicators of support; SIS-MS ($\tau_b = -0.006$, $p = .91$), PSS-FA ($\tau_b = -0.073$, $p = .17$), or SIA ($\tau_b = -0.005$, $p = .92$). Length of marriage was not significantly associated with the SWLS ($\tau_b = .027$, $p = .61$).

Finally, we hypothesized that previous formal union to a different-sex partner would result in less perceived social support and lower perceptions of wellbeing. One-way ANOVAs were conducted to compare participant groups: no previous partner ($n = 133$), prior formal union to a different-sex partner ($n = 41$), and prior formal union to a same-sex partner ($n = 17$). All variables had negative skewness values, within recommended limits for normality, and homogeneity of variances. Results indicated partial support for our hypothesis. That is, there were statistically significant differences between groups on two (i.e., SIS-MS and SIA) of the three support indicators, with participants having no prior partner indicating the greatest support and those with a prior formal union to a different-sex partner the least (see Table 5). Tukey-Kramer post hoc analysis revealed statistically significant differences between participants with no prior partner and those with a prior formal union to a different-sex partner on two variables: sexuality-specific social support (7.00, 95% CI [0.40, 13.61], $p = .035$) and sexual identity acceptance (0.33, 95% CI [0.09, 0.57], $p = .003$). No differences were observed in psychosocial wellbeing.

**Research question 2: How, if at all, does marriage impact perceived support from family members among same-sex partners?**

Inductive analyses revealed four unique patterns, or themes, including: (1) no change in familial support; (2) increased familial support; (3) decreased familial support; and (4) those experiencing a synthesis of increased and decreased support from family members. Themes and related subthemes are discussed below.
No change

Sixty-five participants described marriage as having no impact on their perceptions of family support. However, “lack of change” was evident in participants whose families were both extremely supportive and extremely unsupportive.

No change: Supportive. Fifty-nine participants described their families as “highly supportive” prior to and following marriage. As noted by Participant 104, “Family support for our relationship has always been plentiful. Being married has not changed that.” Similarly, Participant 218 remarked: “Both of our families are highly supportive. We are two of the lucky ones. Nothing changed when we ‘came out’ or announced our engagement.”

No change: Unsupportive. In contrast to their peers, six participants described families who were unsupportive and unaccepting prior to and after their marriages. For example, Participant 95 stated, “I have virtually no support from my family anyway, so no [marriage did not influence family support].”

Table 5. One-way analysis of variance for the effects of previous formal union on dependent variables.

<table>
<thead>
<tr>
<th>Variable</th>
<th>No Previous Partner</th>
<th>Different-Sex Partner</th>
<th>Same-Sex Partner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>SIS-MS</td>
<td>87.06</td>
<td>14.46</td>
<td>80.05</td>
</tr>
<tr>
<td>SIA</td>
<td>5.57</td>
<td>.52</td>
<td>4.94</td>
</tr>
<tr>
<td>PSS-Fa</td>
<td>13.58</td>
<td>6.47</td>
<td>11.10</td>
</tr>
<tr>
<td>SWLS</td>
<td>28.99</td>
<td>5.37</td>
<td>27.20</td>
</tr>
</tbody>
</table>

SIS-MS = Sexuality Identity Support-Minority Stress; SIA = Sexual Identity Acceptance; PSS-Fa = Perceived Social Support-Family; SWLS = Satisfaction with Life Scale.

ᵃ (2,184)
ᵇ (2,187)
**Increased support**

Forty-three participants perceived family support increased following marriage. Increased support was evident in how participants were treated—with participants expressing perceptions of approaching the heteronormative standard in the eyes of family after marriage. They described feeling “accepted as part of the family” as well as being treated as “a normal married couple,” a “real couple,” and a “true family.” To better understand mechanisms of change, the data were further analyzed. Three subthemes emerged to help explain how legal marriage (an act) impacted relational dynamics (processes). Subthemes are described below.

**Recognition as a “Unit.”** Most \((n = 27)\) noted how legal marriage solidified the couple as a “unit” in the eyes of family. Participant 158 explained: “Being married has helped my nieces and nephews understand that we are now family, legally connected. Though they only knew us as a couple throughout their entire lives, it wasn’t real for them until we had the ceremony. Pretty much the same sentiment was shared by all our family members.”

Some also noted an increase in support because their families viewed the relationship as more legitimate. Participant 49 said: “[Marriage] increased the support as it legitimized our relationship.” Similarly, Participant 115 noted, “I think they see our relationship as more ‘real’ and more like hetero married couple’s marriages. We aren’t just living together, we are married in every sense of the word.” Likewise, Participant 206 described:

There was a palpable shift in the dynamics of our families. We had been together a few years when we had a commitment ceremony, and our families immediately treated us as a single unit instead of 2 individuals for the first time. That feeling magnified immensely in 2009 when we went to the courthouse and got married.

Increased perceptions among family as a “real” couple came with additional benefits. Specifically, participants noted increased inclusion in important family rituals such as family attendance at the wedding, invitations to attend family gatherings or other celebrations, and symbolic actions where spouses were included in public notices (e.g., “mother’s obituary”) or cards and gifts.
Common terminology. Another mechanism by which the act of marriage impacted family dynamics was, interestingly, via provision of simplified (and standardized) terminology. That is, it appeared legal marriage allowed family to assign members of the couple (and their children) with traditional roles. Language, in effect, impacted perceptions and, thus, feelings of support. Participant 132 explained: “Before getting married, my brother’s kids called my kids their ‘pseudo cousins.’ I am very glad that their terminology is now simplified.” In other words, following marriage the children were “real” cousins—no longer pseudo-cousins.

Homosexuality is not a phase. Finally, a few noted marriage facilitated family support because it decreased ambiguity about the return to a heterosexual identity. For example, Participant 141 stated, “[Marriage] has changed the dynamic ... this is not just a phase.”

Decreased support

Five participants experienced decreased support from family following marriage that profoundly impacted family dynamics. This was exemplified by Participant 30, who explained: “I ended a relationship with my brother because he did not feel I had the right to be married, since that is a right of male and female relationships.”

Synthesis of support

Family relationships are exceptionally complex—and become even more so when life-changing issues such as marriage are considered. Thus it was not surprising to find that, for many participants, perceptions of family support could not be easily classified into one of the prior groupings. In fact, the majority (n = 73) of participants described an amalgamation of experiences reflecting mixed messages of support from family members or receiving increased support from some family members but decreased (or no) support from others. Interestingly, participants described the same mechanisms of change noted above (i.e., recognition as a “unit,” use of common terminology, and recognition homosexuality was not a phase). Finally, the “amalgamation of support” described by participants was evident at all stages of formal marriage—from engagement announcement, to the wedding day,
to life as a married couple. To illustrate, when her engagement was announced, Participant 35 noted: “[My] in laws were excited. Most of my older relatives—parents, aunt, grandmother—expressed disapproval. My mother suggested I get out of it [the engagement].” Participant 174 described similar reactions, noting:

Initially and surprisingly, we received a lot of difficulties from our parents when we chose to get married. Negative comments, no commitment to attend the ceremony, anger, prejudicial statements. This was surprising because for the four years of our relationship, both sets of our parents spent vacations with us, talked about how much they loved us—loved us together. However, when we announced our date to marry, suddenly our parents’ issues with homosexuality came back to the forefront in surprising ways.

Regarding the actual wedding ceremony itself, participants reminisced about the bittersweet reactions from family, with Participant 32 describing: “My mother was OK [with coming]. [My] daughter prayed about coming to the wedding, but feels it [gay marriage] is not right and [so] didn’t come. . .[My] oldest son declined the invitation [and my] youngest son stood up in our wedding.” Participant 217 similarly reported:

People on my mom’s side of the family showed up, but chose not to stay for the reception and didn’t give any gifts. . . It’s hard not to feel snubbed, and wonder why they bothered to show up at all—[among] the ones who did show up, which a lot of them didn’t.

For some, mixed messages were evident after months, or even years, of marriage. Participant 213 described her family situation as follows:

Some family no longer speaks to us, others pretend we are just friends. [But] being married has forced most of them to acknowledge that we are together, and has increased the level of support. They no longer try to ignore it and will actually talk to us about it—ask about our marriage and relationship. Overall it has had a positive effect on the level of support we have received, with some exceptions on both sides.

And the statement by Participant 193 demonstrates not only complex family dynamics, but also the mechanisms by which support was conveyed (i.e., use of terminology, inclusion at family events).
My mother was not and is not [supportive]. Our relationship at this point may as well be non-existent. My 5 siblings have their children refer to her as aunt Bobbie, and it is wonderful. My father was happy to help plan the wedding and walk me down the aisle. Her family for the most part, unfortunately, has disowned her to an extent. I’m not able to attend certain family events to respect their wishes of not wanting me around—but I encourage her to attend so she is not completely shut out of their lives. Then, some of her family embraces me and welcomes me into their lives.

Given the emergence of distinct family support experiences from qualitative data and the statistically significant association between social support and wellbeing, we further examined the data for convergence. Based on the qualitatively diverse experiences of family support, three participant groups were created: supportive/increased support ($n = 100$), synthesis ($n = 72$), and unsupportive/decreased support ($n = 10$). A 1-way Welch ANOVA indicated no statistically significant difference on psychosocial wellbeing (i.e., SWLS), Welch’s $F(2, 23.55) = 2.24$, $p = .129$. However, scores increased as follows: unsupportive/decreased ($M = 23.9$, $SD = 8.3$), synthesis ($M = 28.2$, $SD = 5.9$), and supportive/increased ($M = 29.1$, $SD = 5.1$).

**Research question 3: How, if at all, does marriage impact perceived support from friends and co-workers?**

We were also interested in understanding impacts marriage may have on relationships with significant others (e.g., friends, co-workers). Three themes emerged: (1) no change in relationships; (2) increased support; and (3) mixed support.

**No change**

The majority of participants ($n = 94$) indicated marriage had no influence on their relationships with significant others. Many ($n = 47$) responded simply with statements such as: “No impact” or “No change.” The remainder ($n = 47$) denied any change in these relationships following marriage but indicated that this was due to high levels of support. For example, Participant 109 indicated, “they have always been supportive.” Others referred to specific people such as friends (most often), co-workers, or both. For example, Participant 157 stated, “Very
little effect. Our friends are supportive.” Similarly, Participant 206 commented, “My friends and coworkers love my wife as well! We are fortunate to have a circle of people around us that support us.”

**Increased support**

Several participants (n = 54) clearly indicated an improvement in their relations with significant others following marriage. Some described general improvement such as feeling more “respected” or that relationships became “closer” and more “sincere.” Thirteen specifically noted improved relationships with co-workers because they felt more “secure” or, as described by Participant 141, “It was a huge relief not hiding my relationship.”

Similar to the mechanism impacting family relationships, several participants perceived increased support because significant others “recognized” and “accepted” their relationship. They were recognized as permanent couples, as Participant 131 noted, “So I guess the marriage has solidified us as a unit in their eyes.” They felt increased understanding and validity because language is meaningful and as such infers a specific level of “commitment” and even being treated as “any other married [different-sex] couple.” Participant 96 commented: “Made it better. I don’t have to find alternate terms to describe our relationship. I refer to my spouse as my husband and don’t have to explain anything more.” The power of language to create change was explained by Participant 106:

Right away after getting married, both my wife and I noticed one big difference. Where in the past we could introduce each other or refer to the other as ‘partner’ (a term that has built-in ambiguity), we quickly realized that the term ‘wife’ is unambiguous and therefore much more glaring. I think both of us thought we were very “out” to all of the people around us, but we became much more so after getting married.

**Mixed support**

Some participants (n = 32) had more complicated experiences with significant others. This was often described as positive experiences with one group (e.g., friends) and negative with another (e.g., co-workers). For example, they described some significant people as
“very positive” and “supportive,” but then also reported damaging experiences with others ranging from “quiet looks” to “lost” relationships. This experience was summarized by Participant 21:

No difference with friends: they saw us as a committed couple all along. Coworkers at spouse’s employment were generally supportive and at worst non-committal. Co-workers at my employer were equally divided between supportive and complete jerks, with behind-the-hand tittering, gossiping, doing the “Christian” propaganda speech, etc.

**Additional**

It is important to note there were very few examples of friends being unsupportive. Further, while several participants were “fortunate” and “thankful” to have support from significant others, it appeared these relationships were less influenced by marriage. This may be due to having more choice in these social relationships (and the level of investment) as described by Participant 182: “As they say—‘friends are the family we choose ourselves.’” In addition, even those describing negative encounters appeared less bothered than in family interactions as exemplified by Participant 53: “Those of whom I deeply care for have stuck it out and those who haven’t, I could care less.”

Again, given the emergence from qualitative data of distinct experiences in support from friends and co-workers and the statistically significant association between social support and wellbeing, we further examined the data for convergence. Based on the qualitatively diverse experiences, three participant groups were created: no change \((n = 94)\), increased support \((n = 52)\), and mixed support \((n = 31)\). A 1-way ANOVA indicated a statistically significant difference on psychosocial wellbeing (i.e., SWLS), \(F(2, 174) = 3.433, p = .035, \eta^2 = 0.38\). Scores increased from no change \((M = 27.7, SD = 5.9)\), to mixed \((M = 28.5, SD = 5.9)\), to increased \((M = 30.3, SD = 4.6)\). Tukey post hoc analysis revealed the mean increase from no change to increased support \((2.54, 95\% CI [0.24, 4.83])\) was statistically significant \((p = .026)\). In addition, given the qualitatively lower magnitude of marital impact on relationships with friends and co-workers, a paired-samples t test found that participants did indeed report less sexual identity acceptance from family \((M = 4.87, SD = 0.88)\) than from friends/co-workers.
(M = 5.56, SD = 0.44), with a statistically significant mean decrease of 0.68, 95% CI [0.55, 0.80], t(190) = 10.68, p < .001, d = 0.77.

Discussion

The primary goal of this research was to further our understanding of wellbeing and perceived social support among married same-sex partners following marriage. First, we wanted to know how supported members of married same-sex couples felt by family, friends, and co-workers, and to what extent did marriage markers impact support and wellbeing? Overall, participants demonstrated fairly high levels of wellbeing and sexuality-specific support, with slightly less general family support. Family support, both general and sexuality specific, was significantly associated with wellbeing. This supports earlier findings of the direct and unique association between wellbeing and sexuality-specific support (Beals & Peplau, 2005; Sheets & Mohr, 2009), as well as contrasts findings of no association between parental support and individual wellbeing (Blair & Holmberg, 2008).

In contrast to our expectations, the marriage marker of legal recognition did not show higher levels of social support or psychosocial wellbeing for those living in states with marriage equality. This study makes a significant contribution to the literature in that it adds to only a couple of published studies where social support and psychosocial wellbeing was directly compared for same-sex married couples residing in differing legal contexts. Similar to our findings, Riggle, Wickham, Rostosky, Rothblum, and Balsam (2016) found no significant relationship between social support and living in a state with or without legal recognition. However, Tatum (2016) found sexual minority persons living in states without marriage equality reported significantly lower life satisfaction than those living in a marriage equality state, albeit only 16% of the sample were married.

Our findings may lend support the proposition that the institution of marriage has unique social value (Waite & Gallagher, 2000). At least in regard to social support and wellbeing, there did not appear to be any benefit from the added legal value that accompanied living in a marriage equality state. However, the results may also support a selection effect as described by Wight, LeBlanc, and Badgett (2013), where more well-adapted and socially supported LGB persons were
more likely to marry, especially given the novelty and limited availability of legal marriage for same-sex couples at the time of data collection. Further, this may be particularly true for those living in conservative geographical areas since our results indicated that the only significant difference was actually greater sexual identity acceptance reported by participants living in states without legal recognition.

Interestingly, participants who had a previous formal union to a different-sex partner reported the lowest levels of sexuality-specific social support and acceptance. This adds to nominal studies exploring the influence of a prior formal relationship on family support for married same-sex couples. Badgett (2011) found previous marriage to a different-sex partner was associated with decreased family support, although not statistically significant. Less sexuality acceptance and support for this group of participants may reflect higher levels of ambiguity in the family system. Qualitative research has documented indicators of ambiguity (e.g., distance, conflict) in families of bisexual individuals, which stemmed from the family discounting the bisexual identity (e.g., a phase), using past/present romantic partners to reinforce heteronormative expectations (especially if partner is a different sex), or incorrectly ascribing a gay or heterosexual identity to the bisexual person (Lannutti, 2007b; Scherrer et al., 2015). Other individuals have reported that their families would prefer they identify a gay/lesbian rather than bisexual (Ross, Dobinson, & Eady, 2010), which may also increase ambiguity in the family system and thus impact support. Research continues to document greater wellbeing disparities for bisexual individuals, even in comparison to lesbians or gay men (Semlyen, King, Varney, & Gareth Hagger-Johnson, 2016). Yet it has also found parental support can mediate some negative mental health outcomes for bisexual women and men (Needham & Austin, 2010). Thus it is important for future research to include measures of social support (including sexuality-specific support) when assessing wellbeing. Also, future research should continue to examine the presence and effects of boundary ambiguity in SGM families.

Next, we sought to further understand the impact of marriage on perceived support from family. Four main findings emerged from the qualitative data: no change, increased support, decreased support, and a synthesis of mixed support. About one third of participants indicated marriage had not impacted family support because their families were highly supportive prior to marriage. Rothblum et al. (2011)
found some individuals perceived their civil union lacked significance because it failed to increase support from significant others. However, our findings demonstrate individuals with highly supportive families are also likely to experience limited influence on marriage, at least in terms of familial support. While many individuals had highly supportive families, the majority of participants actually experienced an amalgamation of mixed support, which suggests many individuals face concurrent, complex, and often longstanding encounters of acceptance and rejection in their families. This reflects a similar finding in a small sample of married gay men (Ocobo, 2013) and adds to earlier research findings of more dichotomous, that is, positive or negative, experiences with marriage and familial support (Alderson, 2004; Green, 2010; Lannutti, 2007b; Rothblum et al., 2011)

We extended the literature concerning boundary ambiguity in SGM families by examining how the normative life transition of marriage, although very new to same-sex couples, is experienced within the family and how it impacts social support. Three primary mechanisms (i.e., recognition as a unit, common terminology, and homosexuality is not a phase) were identified as altering ambiguity in family system, often in terms of boundaries and roles (Boss, 2016), thus prompting changes in perceived familial support. Marriage, as understood through a heteronormative lens, created meaning for family members and shifted family dynamics, positively and/or negatively. Through the same mechanisms, participants experienced increased inclusion in the family and/or increased ambiguity (e.g., decreased communication, exclusion from family events). While Dziengel (2012) found same-sex couples often experienced conflict and ambiguity in family relationships, our findings suggest that marriage may serve as a means to reduce boundary ambiguity in at least some families. Yet it may perpetuate boundary ambiguity for others.

Finally, we explored the impact of marriage on relationships with significant people outside the family, and three themes emerged: no impact, increased support, and a mixture of support and hostility. Overall, marriage appeared qualitatively less impactful in relationships with significant others, possibly due to participant perceptions that others (especially friends) were more accepting of their sexual identity than their families. This aligns with findings of LGB individuals reporting more sexuality-specific support from friends than family (Doty, Willoughby, Lindahl, & Malik, 2010).
In summary, our findings support similar experiences of increased recognition following marriage (Rostosky, Riggle, Rothman, & Balsam, 2016), as well as marriage prompting expressions of homonegativity by family and friends (Eskridge & Spedale, 2006; Lannutti, 2008). Taken together, the findings appear to support the argument that a lack of social support is a unique minority stressor for same-sex couples (Kurdek, 2005; Meyer, 2003), which appears to linger even despite access to marriage. While disheartening, it should not be too surprising. Following a significant SCOTUS ruling for marriage equality, Windsor v. Perry, many heterosexual siblings of LGB persons indicated either apathy or clear objection to the ruling (Clark, Riggle, Rostosky, Rothblum, & Balsam, 2015).

**Limitations**

The use of an online survey prevented researchers from gaining supplemental information that may have offered further clarity in answering the research questions. Although this study was expansive, future research may benefit from an accessible method to gather additional qualitative data if needed. Also, while we were interested in understanding impacts on the family system, our data was limited to the LGBT family member’s perspective. Future research that includes experiences of multiple family members would add rich insights to the literature, especially in furthering our understanding of ambiguous loss and boundary ambiguity in SGM families.

**Implications**

Despite unparalleled progress toward marriage equality, results of this study challenge marriage being seen as a panacea and demonstrate the continuation of unique stress experiences for LGBT persons in their relationships with family, friends, and co-workers. Yet findings also offer optimism concerning the potential benefits marriage may offer same-sex couples. If the participants in this study indeed reflected more well-adapted and socially supported LGBT persons, and many still endured hardships in close relationships, how will marriage impact same-sex couples with less social support? This is especially concerning given that higher levels of depression occurred when support was received from only one social group such as family
or friends (Kornblith, Green, Casey, & Tiet, 2016). Gaining clarity regarding the potential health and wellbeing benefits of marriage for same-sex couples is important and timely.

Future research should focus on furthering our knowledge of marital effects and causal links to wellbeing in same-sex couples. It should account for family support, including sexuality-specific support, as this may prove an important mediating factor between marital status and wellbeing. Finally, using suggested interventions for ambiguous loss (Boss, 2006) may prove a helpful approach for clinicians or other professionals working to help individuals, couples, or families who may be struggling with conflicts related to an LGBT identity and, by extension, their romantic relationships.

References


