

FUSION IN LESBIAN RELATIONSHIPS: THE
RELATIONSHIP BETWEEN DIFFERENTIATION OF
SELF AND GAY STRESSORS

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DIFFERENTIATION OF SELF AND GAY STRESSORS

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CHAPTER 1

INTRODUCTION

Relationship difficulties are common to both heterosexual and homosexual adult relationships. It is not uncommon to hear within the lesbian community that there is a pattern of relationship difficulties that occur in lesbian romantic relationships, a pattern called “merging” (Peplau, Cochran, Rook, & Padesky, 1978). Merging is seen as an outgrowth from Bowen’s concept of differentiation of self (Krestan & Bepko, 1980). The literature refers to merging or fusion as a tendency toward minimal-to-no separation among two individuals who are close physically and psychologically (Burch, 1982). Krestan & Bepko (1980) defined fusion as individuals being undifferentiated in a relational context. Further expanded, they described that in the intimacy of the relationship a person’s personal identity is difficult to maintain, and the self becomes defined in terms of the other person in the relationship. The concepts of fusion and merging make up the foundation of Bowen’s concept of differentiation of self, which is defined as the ability to balance emotional and intellectual functioning and intimacy and autonomy in relationships (Bowen, 1978). The degree to which individuals demonstrate fusion or emotional cutoff reflects their level of differentiation. In relationships where the dynamics are those of close emotional and intimate interactions, or fusion, there is the potential for stressors and conflict.

Differentiation of Self

Bowen's theory of differentiation of self was developed to help explain patterns that often occur in intimate relationships (Bowen, 1978). The concept links experiences that occurred in an individual's family of origin, and to other outside relationships. Skowron & Friedlander (1998) added to the construct of differentiation of self by describing differentiated individuals as capable of experiencing thoughts and feelings without becoming emotionally reactive to the thoughts and feelings of loved ones. Bowen (1978) suggested that differentiation of self is fundamental in having long term intimacy in relationships and mutuality in marriages.

Bowen (1976) noted that there are two common responses to those who are unable to differentiate in their relationships. The first response is fusion which is the tendency to comply with others opinions and a corresponding inability to maintain a separate personal opinion from another. The second response of undifferentiated individuals is emotional cutoff. A way of individualizing oneself through emotional cutoff is by removing oneself psychologically or physically. The degree to which individuals fuse with others or emotionally cut themselves off from others demonstrates their level of differentiation (Nichols & Schwartz, 2008).

Bowen (1978) described two levels involved in the process of differentiation. On the intrapsychic level, differentiated individuals are able to distinguish feeling processes from intellectual processes. On the interpersonal level the differentiated individual is able to experience both autonomy from others and intimacy with others. The individual who is differentiated is able to experience autonomy in their relationships with others without having fears, anxieties of abandonment, or feeling stifled (Bowen, 1978), while those couples who experience fusion may share all activities, share some friends and isolate from others, have no separate space or belongings, and have enmeshed communication patterns (Kaufman, Harrison, & Hyde, 1984). Bowen (1976) suggested that when fusion is experienced in couples it often indicates an extreme emotional need by the individuals that may turn into conflict when the relationship is under stress.

Over the years researchers have used different terminology to explain these highly emotional and intimate relationship patterns beginning with “merging” (Peplau et al., 1978) in the 1970’s, to the use of fusion in the 1980’s (Krestan & Bepko, 1980), and eventually back to the main Bowenian concept of differentiation of self in the 1990’s (Skowron & Friedlander, 1998) when the Differentiation of Self (DIS) inventory was created in order to validate Bowen’s theory construct.

In the late 1970’s and early 80’s, research was conducted on merging and fusion in lesbian relationships where individuals were both close psychologically and physically (Krestan & Bepko, 1980). This research suggested that lesbians who were merged had a hard time behaving independently from their romantic counterparts without experiencing anxiety and they were reluctant to separately engage in activities such as seeing friends or even doing laundry. Krestan & Bepko (1980) found that there was an intense need to be close emotionally at all times and to share identical values, interests, and ideas in lesbian relationships. In their research they noticed that merging in relationships related to difficulties in seeing self as separate from one’s partner and considered this threatening. This pattern of merging in relationships was found to be particularly prevalent in lesbian couples in contrast to heterosexual or gay male couples (Burch, 1982; Krestan & Bepko, 1980).

As a dysfunctional pattern of behavior in lesbian relationships fusion has been associated with sexual and emotional withdrawal, buildup of unexpressed anger, affairs, and potentially termination of the relationship (Krestan & Bepko, 1980). Elise (1986) explained fusion as low sexual desire and infrequent sexual activity in lesbian relationships. Krestan and Bepko (1980) found that infrequent sexual activities accompanied by debilitating merging behaviors resulted in relationship termination within 2-3 years. Blumstein and Schwartz’s (1983) found that out of married and cohabiting heterosexuals, and gay male and lesbian couples, that lesbian couples have the lowest count of sexual activity. Kaufman et al. (1984) found that with lesbian couple’s sexual desire and frequency increased as separateness and autonomy increased in the relationship. It appears that there

may be difficulty in lesbian relationships to find a preferable balance between togetherness and autonomy or independence (Peplau et al., 1978).

In addition to relationship difficulties, one's level of differentiation also impacts the individual alone. Bowen (1978) proposed that less differentiated people can experience chronic anxiety, become more dysfunctional when stress occurs, and suffer from more physical and psychological difficulties such as anxiety, depression, and alcoholism when they are under stress. On the other hand, individuals who exhibit higher levels of differentiation demonstrate higher levels of psychological adjustment (Bowen, 1976).

Discussions of merger and fusion have two main points of view. One suggests it is dysfunctional and pathological, while others may suggest the opposite (Greene, Causby, & Miller, 1999). The literature above demonstrated the negative consequences of low levels of differentiation. Results have demonstrated how fusion in lesbian relationships may also be a sign of intimacy, closeness, and ability to engage with another. Kurdek (1998) and Causby, Lockhart, White, & Green (1995) found that lesbian couples who reported high levels of fusion in their relationships were nevertheless satisfied. The absence of fusion in nonclinical lesbian couples may be a consequence of the couple's higher levels of adaptability and cohesion (Hill, 1999). These findings describe that the closeness experienced in these relationships is not fusion but instead a union between two women.

Greene et al., (1999) also suggested that fusion may occur due to lesbian couples coping with the societal pressures they experience. In order to cope, the couple may develop a serious connection by engaging in a stronger bond with one another and pulling together so that they are not pulled apart. Rotenberg (1989 cited in Greene et al., 1999) suggested that it may be a form of resistance to the majority culture and a way to keep the love between two women alive. Further explained, it may be a strategy that allows the couple to maintain their boundaries as a couple, against those that question the integrity of their relationship. "Viewed as a structure which serves to protect the lesbian couple from

a hostile environment, merger assumes a different complexion from that described in the psychological literature. It can be seen as an adaptive survival mechanism” (Rotenberg, 1989, p. 3, cited in Greene et al., 1999).

Research suggests that lesbians may have a lack of control over aspects of their lives due to environmental factors which lead them to exert control in one area where they seem to still have power; which is in their relationship with their partner (Green et al., 1999). In turn, the couple moves closer together to prevent their bond from being broken. Despite the support for this alternative view of fusion, Greene et al. (1999), also recognize the possibility for problems. They explained that the fusion may develop a relationship that expects sympathy and sameness, which causes frustration in the relationship. If the relationship is based on the premise of “two as one” then any difference or distance experienced between the partners may be seen as a potential threat (Greene et al., 1999).

The idea that fusion may develop out of intense pressures and stressors from the majority population can also influence internalized homophobia (IH). Internalized homophobia is the process by which negative community and family attitudes are internalized by the individual, resulting in low levels of self worth and influences levels of differentiation (Spencer & Brown, 2007). Levels of internalized homophobia are inversely related to the relationship satisfaction experienced by lesbians (Eldridge & Gilbert, 1990). Research regarding IH has also shown associations between lower self-esteem, greater loneliness, and higher levels of depression, which may further impact lesbian relationships (Szymanski & Chung, 2001). In a study looking at fusion and conflict in lesbian relationships, Hill (1999) suggests that fusion may not characterize all lesbian relationship but may occur due to experiencing conflict with family and friends regarding sexual orientation. These stressors may encourage lesbians to rely strongly on their romantic relationships, creating pressures for the partner, and in turn causing conflict in the relationship.

Gay Stressors

Researchers have suggested that gay, lesbians, and bisexuals (GLB) may experience individual stressors that are unique to their sexual orientation. These stressors are linked to the psychological well-being of these individuals (Lewis, Derlega, Clarke, Kuang, Jacobs, & McElligott, 2005) and can be work place related or relationship oriented (i.e. family, friends, or partners). Stressors that are unique to GLB individuals models the concept of “minority stress”, defined as a state resulting from “...culturally sanctioned, categorically ascribed inferior status, social prejudice and discrimination, the impact of these environmental forces on psychological well-being, and consequent readjustment or adaptation” (Brooks, 1981, p. 107).

Meyer (2005) suggests that “minority stress” can result in negative events, including but not limited to stigmatization and discrimination from members of the majority group. Lewis et al. (2005) reported that stress related to the sexual orientation of GLB individuals is different from that of life stress (major life events) and that the stressors these individuals experience are related to the sexual orientation realm of discrimination, prejudice, family conflict, relationship conflict, and workplace issues. Similarly, Lindquist and Hirabayashi (1979) explained the notion of gay-related stress in terms of being minority acting in opposition to other roles the individual may have. They suggested that gay-related stress is different from other minority stressors in that gay, lesbian, and bisexual individuals can hide their minority status.

Gay-related stress can lead to psychological distress and higher accounts of mental health disorders. A meta-analysis conducted by Meyer (2003) found that GLB individuals reported higher levels of mental disorders compared to heterosexuals. Meyer (2003) suggested that minority stress, minority status, minority identity, distal minority stressors and proximal stressors, concealment, and internalized homophobia could be predictors for this disparity between homosexuals and heterosexuals. Lewis, Derlega, Griffin, and Krowinski (2001) also reported that gay-related stressors

are associated with psychological distress, suggesting that gay stressors and internalized homophobia impact depression in GLB individuals since being more “out” was associated with less distress. Lewis et al., (2001) found that gay men and lesbians who reported higher levels of stress also reported more dysphoria, with the gay stressors group accounting for 26-27 percent of the variance in dysphoria in lesbian and gay men. Sexual orientation conflict ($r=.38$) and HIV/AIDS concerns ($r=.36$) had the largest association with dysphoria.

Lewis, Derlega, Griffin, and Krowinski (2003) completed another study looking at the effects of gay stress and life stress on depression symptomology. They found that higher stigma consciousness was associated with depression, which means these individuals who expect others to judge them experience more symptoms (Lewis et al., 2003). It was also suggested that those individuals who are not as open about their sexual orientation may have additional difficulties dealing with gay stressors because they have fewer outlets and support (Lewis et al., 2003).

Gay stressors may be related to fluctuations in physical well-being as well. Williamson (2000) suggested that internalized homophobia plays a vital role in the development of illness, the progression of illness, and in the decision processes required to prevent illness, along with higher levels of distress in lesbians with breast cancer.

While previous research suggests that the differences between same-sex couples and heterosexual couples are far less than the similarities (Kurdek, 2005), one difference is that same-sex couples must engage in their romantic relationships in an environment that often marginalizes and devalues their relationships (Mohr & Fassinger, 2006). As described earlier, Meyer (2003) cited that ongoing stressors related to sexual orientation may be linked to poor psychosocial functioning in GLB individuals, who may in turn affect the romantic relationship. Green and Mitchell (2002) suggested that fear of prejudice and discrimination may lead GLB individuals to hide their same-sex relationships, decreasing their social support. Others reported that individuals who have not accepted

their sexual orientation may have a difficult time committing or bonding to their romantic partner (Green & Mitchell, 2002). Lewis et al., (2001) indicated that gay men and lesbians who were more open with their sexual orientation indicated less stress based on visibility and less sexual orientation conflict. However, gay and lesbian participants also indicated that the more “out” they were, the more stress they had related to societal misunderstanding and family issues.

Summary of Research Findings and Key Concepts

As the literature has suggested, gay-related stressors can influence same-sex relationships in multiple ways, including but not limited to satisfaction, commitment, communication, and sexual functioning. Gay-related stressors appear related to the level of “outness” or “openness” of one’s sexual orientation, which may in turn impact available social support, in turn removing emotional barriers in the relationship causing the couple to attach emotionally. Low differentiation of self has been found to influence levels of sexual and emotional withdrawal, unexpressed anger, affairs, and termination in same-sex relationships. Lower-levels of differentiation are also associated with anxiety, depression, and alcoholism, and lower levels of psychological adjustment. Low levels of differentiation also associated with internalized homophobia, leading to lower levels of self worth and relationship satisfaction which may impact the romantic relationship and lead to fusion. It is unclear how gay-related stressors may play a part in lesbian couples, particularly fusion in lesbian couples. Additionally, it is unclear how levels of differentiation interact with gay-stressors to impact lesbians and their same-sex relationships. These stressors may impact the individual’s mental well-being, along with their perceived relationship quality.

In this research, I will be referring to the romantic relationship which is defined as the expression of one’s love, or one’s deep emotional desires to connect with another person. In the context of this research this means romantic relationships between individuals of the same sex. While the discussion of GLB stressors may be included under the minority stress status, for the purposes of

this research project it will be referred to as gay-stressors or gay-related stressors. Throughout this research the words merger, fusion, and differentiation of self will be used to explain the process of limited interpersonal and intrapersonal differences between one's self and one's romantic partner.

Statement of the Problem

Both differentiation of self and perceived gay stressors have been shown to impact lesbians and their romantic relationships. Research indicates that differentiation of self is a developmental and personal process. However, research concerning gay related stressors suggests that there are environmental influences that impact one's personal and interpersonal functioning, which may in turn impact one's level of differentiation (Lewis et al., 2003). The relationship between levels of differentiation, in particular fusion, and gay related stressors is unknown. This research hopes to explore five research questions concerning the relationship between these two variables.

Research Questions

The questions addressed in this study were as follows:

1. To what extent is differentiation of self related to gay stressors (as measured by differentiation of self total score and gay stressors severity score).
2. To what extent are gay related stressors related to the DSI-R subscales, specifically fusion (as measured by gay stressors severity score and DSI-R subscale scores)?
3. To what extent does number of years being "out", years cohabitating with partner, and length of current romantic relationship relate to the level of differentiation of self, differentiation of self subscales (fusion with others, emotional cutoff, emotional reactivity, and taking "I" position) and amount of gay stressors (as measured by number of years out, length of time cohabitating, length of time in

current relationship and total differentiation of self score, DSI subscale scores, and gay stressors severity score)?

4. To what extent is fusion in lesbian women predicted by the follow independent variables: family reaction, family reaction to partner, visibility with family and friends, visibility with work and public, general discrimination, and sexual orientation (as measured by gay stressors subscale severity scores and fusion subscale score)?
5. To what extent is differentiation of self in lesbian women predicted by the following independent variables: family reaction, family reaction to partner, visibility with family and friends, visibility with work and public, general discrimination, and sexual orientation conflict (as measured by gay stressors subscale severity scores and total differentiation of self score)?

CHAPTER II

METHODOLOGY

Participants

Participants were 253 self-identified lesbians. Participants ranged in age from 25 years to over 70 years in age. Age was divided into age categories. Majority of participants (24.1%, N=62) were in the age group of 25-30, followed by the 31-35 (17.5%, N=45) years of age, 46-50 years (12.8%, N=33), 12.1% (N=31) in the 41-45 years of age, 51-55 years (10.9%, N=28), 36-40 years (10.1%, N=26), 56-60 (5.1%, N=13), 61-65 (4.3%, N=11), and the categories of 66-70 years and over the age of 70 had .8% (N=2) of the participants each.

Majority of the participants identified as White (87.5%, N=225), followed by African American/Black (5.4%, N=14). Seventy-nine percent of participants were employed at the time of data collection. Over 80% (208) of the participants had a bachelor's degree or higher (masters, doctoral, and professional degree). Half of the participants reported a household income of \$60,000 or more. The high educational level and pay range of participants could be attributed to participants having to be over the age of 25 to participate and already having college educations and employment. Seventeen percent (N=44) of participants identified as Christian, with the majority reporting no religious preference (22%, N=57).

Out of this sample of lesbian women $N=248$ reported being “out” about their sexual orientation with the mean length of time for being “out” was 15.59 years ($SD= 10.37$). Only 5 individuals identified as not being “out” about their sexual orientation. Length of current relationship ranged from one year to 42 years ($M= 6.99$, $SD= 6.74$), with 82% of the participants currently cohabitating with their partners. The mean for length of time cohabiting was 6.78 years ($SD = 7.01$). Participants reported their current partner’s age as ranging from 19 years to 77 years of age ($M= 40.45$, $SD=11.88$). The majority of the current sample reported being in 3-5 same sex relationships over their lifetime (47%, $N=121$). Thirty-six percent ($N=93$) of participants reported that either they or their partner had children. This sample of lesbian women reported being active in the GLBT community (69%, $N=177$). See Appendix B in Table 1 for demographics of the sample.

Measures

Demographics. The following demographic data was collected: age, race/ethnicity, education level, employment status, socioeconomic status, length of current relationship, partner’s age, living arrangements with partners and for how long, number of children and residential status of children, religion, participation and membership in gay or lesbian organizations. Information regarding respondents’ sexual identity/orientation, length of time identifying as lesbians, and information regarding past relationship with women was also collected (i.e. number of relationships and length of relationships).

Differentiation of Self Inventory-Revised (DSI-R). Differentiation of self was measured by the Differentiation of Self Inventory (DSI; Skowron & Friedlander, 1998). The DSI was revised in 2003 by Skowron & Schmitt to improve the reliabilities and the construct validity of the fusion with others subscale (FO). The DSI-R is a 43- item self-report measure that focuses on respondents’ significant relationships, including families of origin. Respondents are required to

rate each item on a 6-point scale, ranging from *not at all like me* to *very true of me*. The DSI-R contains four subscales: emotional reactivity (ER), I-position (IP), emotional cut-off (EC), and fusion with others (FO).

Participants had to be individuals who are at least 25 years old due to the authors of this measure definition of adulthood. The measure was designed for individuals considered to be adults from a family life cycle perspective (Carter & McGoldrick, 1988 in Skowron & Friedlander, 1998).

The 11-item ER scale assesses the tendency to respond to environmental stimuli on the basis of autonomic emotional responses, emotional flooding, and liability. Scores are reversed so that higher scores indicate lower emotional reactivity, which is greater differentiation of self. The 11-item IP scale contains items that reflect a clearly defined sense of self and the ability to thoughtfully adhere to one's convictions even when pressured to do otherwise. Higher scores indicate an ability to take the "I-position" which is indicative of greater differentiation. Only one item is reversed scored on the IP scale. The 12 item EC scale consists of items reflecting fears of intimacy or engulfment in relationships, and accompanying behavioral defenses against those fears. Higher scores indicate less emotional cutoff, or greater differentiation. All items on the EC scale are reversed scored. The 12 item FO scale measures emotional overinvolvement with significant others and overidentification with significant others and overidentification with one's parents, taking in parental values, beliefs, and expectations without question. All items on FO are reversed scored except number 37. Higher scores indicate less fusion or greater differentiation of self. To compute scores on the subscales I first reversed scored respective items (noted above). Then items were summed across the subscale and divided by the number of items. Scores on each subscale range from 1 to 6, with high scores suggesting greater differentiation of self.

Support for construct-related validity was found in the revision of the FO subscale. The DSI-R FO subscale was found to correspond with greater fusion in one's relationship with spouse, fear of abandonment in relationships, and higher levels of desire to merge with others (Skowron & Schmitt, 2003). The FO subscale was also found to have a relationship with the Personal Authority in the Family Systems Questionnaire (PAFS) SFI (spousal fusion/individuation) subscale which suggests that these measures are similar in assessing the phenomenon of fusion. Support for the DSI's construct validity (level of differentiation) was found by a strong correlation with a measure of chronic anxiety; more specifically full-scale scores significantly predicted Trait Anxiety (Skowron & Friedlander, 2001).

Reliabilities for the DSI-R full scale and subscales were calculated using Cronbach's alpha. The DSI-R full scale had a Chronbach's alpha level of .92. The Emotional Reaction subscale had an alpha level of .87. The "I" Position subscale had a Chronbach's alpha level of .82. Emotional Cutoff subscale had a Cronbach's alpha of .82. Lastly, the Fusion with Others subscale had a .82 Cronbach's alpha level. These reliability scores are consistent with those found by Skowron & Schmitt (2003) where they presented reliabilities as follows: DSI-R full scale $\alpha = .92$; ER $\alpha = .89$; IP $\alpha = .81$; EC $\alpha = .84$; and FO $\alpha = .86$ (Skowron & Schmitt, 2003).

Sexual Orientation Stress Scale (SOSS). The SOSS, the Measure of Gay-Related Stressors (MOGS) was developed by Lewis et al., (2001) and renamed the SOSS in 2008. The SOSS is a 70-item measure of gay-related stressors. These items were originally developed by asking gay men and lesbians to report on the stressors in their lives that were related to being homosexual. Participants were asked to indicate whether a given stressor had occurred within the last year. If the stressor was endorsed as occurring, participants were asked to indicate the amount these stressors were experienced from 0 (not at all stressful) to 4 (extremely stressful). Higher scores indicate more experience with gay-related stressors.

The SOSS can be scored in two different ways. First, a frequency score can be calculated by simply counting the number of stressors the participant endorsed. For example, if the participant endorsed 10 out of the 70 items, their score would be a 10. The frequency score simply reflects the number of stressful experiences the participant has experienced. The second way the SOSS can be scored is by calculating a severity score. The severity score is the mean on only those items endorsed. For example, a participant endorses 10 items as occurring in the past year. You would then calculate the mean of those items for the severity score. The severity score reflects the amount of stress experienced (i.e. appraisal) for the stressors endorsed. This current project only utilized scoring method number 2. Subscale scores were calculated for the following subscales: family reaction, family reaction to partner, visibility with family and friends, visibility with work and public, general discrimination, and sexual orientation conflict. Subscale scores were calculated by taking the mean scores of subscale items endorsed as stressful by the participant. Reliability for the SOSS cannot be reported since participants did not report on every item. See Appendix B in Table 6 for frequency and means of the SOSS items.

Procedure

IRB-approved recruitment scripts were sent to potential participants through electronic mailing lists from LGBT organizations and social networks. Additionally, a non-random snowball sampling technique was used to recruit individuals that identify as lesbian, are over the age of 25, and currently in a same sex relationship of at least one year. Personal acquaintances who expressed an interest were asked to participate and distribute information to other lesbians. Recruitment of participants last for approximately seven months. Respondents were asked to complete a short online survey concerning lesbian intrapersonal and interpersonal interactions and gay-related stressors.

IRB-approved recruitment scripts were used to introduce the researcher, specify participant criteria, and provide an overview of the research project including the purposes of the

study and instructions for participation. Individuals were instructed that participation was completely voluntary and that participation in the online survey constituted consent to participate. Individuals who chose to participate were given a website link that connected them to an online study that would take approximately 25-30 minutes to complete.

Once directed to the website, an informed consent page appeared where the general purposes of the study were described, along with benefits and risks of participation. Although it was clearly stated that there were no foreseeable risks associated with the study, participants were encouraged to end their participation at any time or skip any of the questions if they began to experience discomfort or stress. Participants were also informed that their participation would be anonymous and confidential. All information gathered was kept in a secured and password protected flash drive and computer. No names or identifying information was asked, and instead each completed set of questionnaires was given a code number to link data gathered in questionnaires to data collection.

Upon clicking the “Agree to Participate” box, they were directed to a webpage asking for general demographic information; a measure assessing interpersonal and intrapsychic interactions, the Differentiation of Self Inventory (DSI-R); and a measure of gay related stress, the Sexual Orientation Stress Scale (SOSS). Predictive Analytics SoftWare (PASW) Statistics 18.0 version for Windows was used to complete all statistical analyses.

CHAPTER III

RESULTS

The purpose of the current study was to examine the relationship between differentiation of self and gay stressors in a lesbian population. Five specific research questions were tested using correlation and multiple regression analyses. Analyses also explored the relationship among gay stressors subscales as predictors of fusion with others and differentiation of self. Descriptive analyses were conducted to ascertain relevant descriptive information. Please see Table 1 for demographic information. It should be noted that higher scores received on the DSI-R indicate greater differentiation due to reverse scoring of questionnaire items. Therefore higher scores mean lower levels of fusion with others, emotional cutoff, emotional reactivity, and greater ability to take the “I” position.

Preliminary Analyses

Pearson product-moment correlations were performed to assess significant relationships between differentiation of self and gay stressors. Correlational analyses were also conducted to explore the relationship among the DSI-R subscales and gay related stressors. The impact that demographic information may have on differentiation of self and gay stressor was also explored. These analyses addressed research questions one, two, and three.

Relationship between Differentiation of Self (DSI-R) and Gay Stressors (SOSS)

To what extent is *differentiation of self* related to *gay stressors* (as measured by differentiation of self total score and gay stressors total score)?

There was a relationship between differentiation of self and gay stressors. This was calculated by looking at total differentiation of self and total gay stressors. Results yielded a significant negative relationship between differentiation of self scores and reported gay stressors, $r(178) = -.288, p \leq .01$. This correlation indicates a medium effect size. The coefficient of determination indicates that 8.29% of the variance in either variable is shared with the other.

Relationship between Gay Stressors and DSI-R Subscales

To what extent are *gay related stressors* related to the *DSI-R subscales*, specifically fusion (as measured by gay stressors total score and DSI-R subscale scores)?

To further explore the relationship between differentiation of self and gay stressors a correlational analyses was conducted between total gay stressors and subscales of the DSI-R including I-position, fusion with others, emotional cutoff, and emotional reaction. Significant relationships were found between three out of the four DSI-R subscales and total gay stressors. A significant negative relationship was found between total gay stressors and I-position $r(183) = -.236, p \leq .01$ indicating a small effect size; emotional cutoff $r(184) = -.225, p \leq .01$ indicating a small effect size; and emotional reaction $r(183) = -.285, p \leq .01$ indicating a medium effect size. A non-significant relationship was found between fusion with others and gay stressors $r(183) = -.126, p < .089$. See Appendix B in Table 2 for Correlational results.

Relationship between Demographic Information and DSI-R, DSI-R Subscales, and Gay Stressors

To what extent does number of *years being “out”*, *years cohabitating with partner*, and *length of current romantic relationship* relate to the level of *differentiation of self*, *differentiation of self subscales* (*fusion with others*, *emotional cutoff*, *emotional reactivity*, and *taking “I” position*) and reported *gay stressors* (as measured by number of years being “out”, length of time living with current partner, and length of current relationship and total differentiation of self score, DSI-R subscale scores and total gay stressors score)?

To explore the impact that age may have on differentiation of self and reported gay stressors, correlational analyses were conducted between total gay stressors and differentiation of self scores and the years being “out”, length of time cohabitating, and length of time in current romantic relationship.

A significant positive relationship was found between years being out and level of differentiation $r(211) = .367, p \leq .01$. This correlation would indicate a medium effect size. Suggesting that the longer someone has been “out” about their sexual orientation the more differentiated one is. When looking at length of current romantic relationship and length of cohabitating with partner, both were positively correlated with total differentiation of self. Length of current relationship yielded a correlation of $r(218) = .185, p \leq .01$, while length of current length of cohabitation was slightly higher $r(135) = .245, p \leq .01$. Both correlations yield a small effect size. No significant relationship was found between years being “out”, length of current relationship, and length of current cohabitation with total gay stressors.

When looking at the relationship with the DSI-R subscales, length of time cohabitating with current partner had significant positive relationships with three out of the four subscales including: FO= $r(138) = .263, p \leq .01$; EC= $r(139) = .188, p \leq .05$; and ER= $r(138) = .209, p \leq .05$. All three correlations had a small effect size. “I” position was not correlated with

cohabitation length. Years being “out” was significantly correlated with all four of the DSI-R subscales FO= $r(216) = .349, p \leq .01$ yielding a medium effect size; EC= $r(218) = .297, p \leq .01$ yielding a medium effect size; ER= $r(217) = .258, p \leq .01$ yielding a small effect size; and IP= $r(217) = .218, p \leq .01$ with a small effect size. Lastly, length of current relationship was significantly correlated with two out of the four subscales: FO= $r(223) = .164, p \leq .05$ and EC= $r(225) = .186, p \leq .05$. Both these correlations have small effect size. Taking “I” position and emotional reactivity were non-significant.

Previous research suggested that being open about one’s sexual orientation was found to have less visibility concerns and sexual orientation conflict stressors. In the current study significant negative relationships were found among number of years being “out” and stressors regarding visibility with work and public $r(185) = -.169, p \leq .05$ and sexual orientation conflict $r(185) = -.271, p \leq .01$, both with small effect sizes. Results also suggested that the longer individuals reported being out the fewer stressors they reported regarding family reaction to sexual orientation and family reaction to partner. See Appendix B in Table 3 for all correlational results.

To further investigate the impact that age may have on differentiation of self, a correlation was conducted on partner’s reported age in years and differentiation of self total. A significant positive relationship was found between partner’s age and total differentiation of self $r(218) = .297, p \leq .01$. This correlation suggests a medium effect size.

Primary Data Analysis

Multiple regression analyses were conducted to answer research questions four and five. Multiple regression analyses were conducted to explore the relationship between the DSI-R subscale of fusion with others and total differentiation of self and the following gay stressors subscales: family reaction, family reaction to my partner, visibility with family and friends,

visibility with work and public, general discrimination and sexual orientation conflict. All multiple regression equations were analyzed for statistical significance using an F-test. If significant, b-weights, partial and semi-partial correlations were examined to assess the significance of each predictor.

SOSS Subscales in Predicting Fusion with Others

To what extent is *fusion* in lesbian women predicted by the following independent variables: *family reaction, family reaction to partner, visibility with family and friends, visibility with work and public, general discrimination, and sexual orientation conflict* (as measured by gay stressors subscale scores and fusion subscale score)?

The multiple regression model with all six predictors produced $R^2 = .167$, $F(6, 173) = 5.793$, $p < .000$. This relationship had a medium effect size ($f^2 = .20$). This indicates that variability in fusion with others was related to the combination of family reaction, family reaction to my partner, visibility to family and friends, visibility with work and public, general discrimination, and sexual orientation conflict.

As can be seen in Appendix B in Table 4, only the subscales of visibility with work and public and general discrimination have significant regression weights. Visibility with work and public had a significant negative regression weight, while general discrimination had a significant positive regression weight. This indicates that higher levels of differentiation, as measured by higher scores on the fusion with others subscale is negatively correlated with visibility with work and public. Secondly, stressors with general discrimination are positively correlated with fusion with others. The general discrimination subscale has a significant positive weight as opposed to the nonsignificant correlation found with the criterion, thus after accounting for the other predictor scores general discrimination stressors is positively correlated with fusion with others

(suppressor effect). Family reaction, family reaction to partner, visibility with friends and family, and sexual orientation conflict did not contribute to the model.

In order to explore the unique contributions of the two significant predictors in the regression model partial and semi-partial correlational analysis were examined. The subscale of fusion with others was explored in relation to the SOSS subscales of visibility with work and public relationship, with the effect of the other five predictors removed from the relationship. Results suggest that the partial correlation between fusion with others and visibility with work and public was .160 ($p = .034$). This indicates that 2.56% of the variance was shared when the other predictors were held constant. The squared semi-partial coefficient suggests that about 2.19% of the variability in fusion with others scores are due to the unique contribution of visibility with work and public. This correlation suggests a small effect size.

Partial correlation results between general discrimination and fusion with others yielded the following .149 ($p = .050$), indicating a small effect size. The partial correlation suggests that 2.22% of the variance was shared when the other predictors did not vary. Semi-partial coefficients suggest that 1.87% of the variance in fusion with others is uniquely accounted for by general discrimination.

SOSS Subscales in Predicting Differentiation of Self

To what extent is differentiation of self in lesbian women predicted by the following independent variables: *family reaction, family reaction to partner, visibility with family and friends, visibility with work and public, general discrimination, and sexual orientation conflict* predict *differentiation of self* in lesbian women (as measured by gay stressors subscale scores and total differentiation of self score)?

To further explore the relationship between the gay stressors subscales and total differentiation of self a multiple regression analysis was conducted. All six predictors were

entered into the model. The multiple regression model with all six predictors produced $R^2 = .297$, $F(6, 168) = 11.849$, $p < .000$. This interaction had a large effect size ($f^2 = .42$). This indicates that variability in differentiation of self was related to the combination of family reaction, family reaction to my partner, visibility to family and friends, visibility with work and public, general discrimination, and sexual orientation conflict.

Appendix B in Table 5 shows that three out of the six predictors had significant regression weights. Family reaction, visibility with work and public, and sexual orientation conflict all had significant negative regression weight. These results indicate that reported differentiation of self is negatively correlated with family reaction, visibility with work and public, and sexual orientation conflict stressors.

Partial and semi-partial correlations were conducted to further explore the relationship between these significant predictors and the criterion while removing the contribution of the other predictors. Results suggest that the partial correlation between differentiation of self and family reaction was $-.178$ ($p = .020$) indicating that 3.16% of the variance was shared when the other predictors were held constant. About 2.31% of the variance in differentiation of self was uniquely contributed by reported stressors of family reaction. This correlation yields a small effect size.

Visibility with work and public was $-.208$ ($p = .006$). This indicates that 4.32% of the variance was shared when the other predictors were held constant. The squared semi-partial coefficient suggests that about 3.20% of the variability in differentiation of self was due to the unique contribution of visibility with work and public. Partial correlation results between sexual orientation conflict and differentiation of self yielded the following $-.201$ ($p = .009$) indicating 4.04% of the variance was shared when the other predictors did not vary. Semi-partial coefficients suggest that 2.95% of the variance in differentiation of self is uniquely accounted for by sexual orientation conflict. Both correlations yield a small effect size.

CHAPTER V

CONCLUSION

The present study provides insight into the relationship between differentiation of self and gay stressors in a lesbian population. Variables explored in this study included demographic variables, scores on the Differentiation of Self Inventory- Revised (DSI-R) (Skowron & Schmitt, 2003), and scores on the Sexual Orientation Stressors Scale (SOSS) (Lewis et al., 2001). This chapter addresses findings in the relationship between differentiation of self and gay stressors. The implications of these findings and their potential benefit in a therapeutic setting will also be addressed. In addition, areas for related future research are discussed, along with the limitations of this study.

Summary of Results

Investigation of the relationship between the DSI-R and the SOSS supported the first research question of the present study. Specifically, a moderate negative correlation was found between these two measures. In other words, individuals reporting higher levels of differentiation of self reported fewer gay stressors.

These results suggest that individuals who are more differentiated experience fewer gay stressors or found them less distressing and vice versa. Peleg (2008) and Skowron (2000) suggested that individuals who were less differentiated had higher levels of stress and anxiety in their relationship which in turn impacted their relationship satisfaction.

We could hypothesize that individuals who were more differentiated in turn reported fewer gay stressors. Bowen (1976; 1978) suggested that individuals with greater differentiation of self have better psychological adjustment and in turn are better able to handle stress. This lends support to the findings of the current study, since in this sample of lesbian women; those who were more differentiated reported fewer gay stressors. This sample of lesbian participants overall reported higher levels of differentiation, which in turn means they indicated less emotional reactivity. Having lower levels of emotional reactivity may also contribute to the account that the gay stressors experienced were not as severe as they may have been if one were more emotionally reactive.

To further explore the relationship between gay stressors and differentiation of self, correlational analysis was conducted between the SOSS total score and the DSI-R subscales. Correlational results showed significant negative correlations between the SOSS total score and three out of the four DSI-R subscales. The following subscales had significant negative correlations with the reported gay stressors: taking “I” position, emotional cutoff, and emotional reaction. The DSI-R subscale of fusion with others had a non-significant relationship with reported gay stressors. These results suggest that lower levels of gay stressors were reported when individuals were better able to take the “I” position and be less emotionally reactive and emotionally cutoff in their relationships with others, which suggest greater differentiation of self.

The non-significant correlation between fusion with others and gay stressors could be due to this sample of lesbian women overall reporting higher levels of differentiation of self. When looking at the means and standard deviations of the DSI-R and its subscales there was little variability in the sample. The means and standard deviations found in this sample of lesbian women are comparable to those found by Skowron and Schmitt (2003). However it should be noted that they had a mixed sample of men and women. Another contribution to this non-significant finding could be due to an overwhelming majority of participants having reported

being “out” about their sexual orientation. This sample also reported lower levels of gay related stressors overall which may have an impact on differentiation of self and scores on the DSI-R subscales.

Previous research findings may help support the non-significant results between gay stressors and fusion with others. Since a majority of the participants were “out” about their sexual orientation, had been in long term relationships, and were cohabitating with partners these individuals may have built a significant support system outside of their romantic relationships leading them to report lower levels of fusion with others. Green & Mitchell (2002) cite that being more out about one’s sexual orientation may help build their support system. Lewis et al., (2003) reported similar findings in that gay and lesbian individuals were better able to handle gay related stressors because a majority of their sample was “out” regarding their sexual orientation. They suggested that this finding was due to this sample having more outlets and support. Another explanation can be taken from Hill (1999) in that the absence of fusion may be due to adaptability and cohesion of lesbian individuals.

Past research suggested that being “out” about one’s sexual orientation impacts differentiation of self and gay stressors. A correlation was conducted to see if number of years being “out” as lesbian was related to differentiation of self and gay stressors. Results indicated that there is a significant positive relationship between number of years being “out” and level of differentiation. Meaning that the longer one is “out” about their sexual orientation the more differentiated they are or vice versa. To further support this finding years being “out” yielded significant positive correlations with all four of the DSI-R subscales suggesting the longer someone has been “out” the more differentiated they are. There was no relationship between number of years being “out” and reported gay stressors, suggesting that no matter how long one is “out” about their sexual orientation they can experience gay related stressors.

Previous research (Lewis et al., 2001) suggested that individuals who were more open about their sexual orientation were found to have less visibility concerns and sexual orientation conflict stressors. In the current study a significant negative relationship was found between number of years being “out” and stressors regarding visibility with work and public and sexual orientation conflict. The longer individuals reported being “out” the fewer stressors they reported regarding family reaction to sexual orientation and family reaction to partner. Length of current relationship and years cohabitating with current partner were negatively correlated with the stressor of “family reaction to partner”, suggesting that the longer someone is in a relationship and cohabitating the fewer stressors they reported regarding family reaction to partner.

Results from the current study support those found by Green et al., (1999) in that length of current relationship was related to level of differentiation and levels of fusion. Lower levels of fusion and higher levels of differentiation were correlated with increased relationship duration and length of cohabitation.

To further analyze the relationship between gay stressors and differentiation of self, six gay stressors subscales (family reaction, family reaction to my partner, visibility to family and friends, visibility with work and public, general discrimination, and sexual orientation conflict) were used to investigate the relationship between fusion with others and differentiation of self. When all six subscales were included, they accounted for approximately 16.7% of the variance in fusion with others among this sample. Specifically, it was shown that lower levels of fusion were related to higher reports of general discrimination stressors and lower reports of visibility with work and public stressors.

The relationship between higher reports of general discrimination with lower levels of fusion may be due to the fact that the longer an individual is “out” and open about their sexual orientation and same-sex partnership the more open they are to receiving and experiencing

discrimination and prejudice. However, despite experiencing more general discrimination one might hypothesize that these individuals are able to cope and adapt to these experiences because they have greater differentiation of self. It is also possible that being “out” may help these individuals build support systems and bonds that help them deal with the discrimination and harassment that they do come in contact with. Because they have these support systems in place they can better cope and adjust to adversities related to their sexual orientation (Meyer, 2003).

Results showed a significant negative relationship between individuals who reported experiencing stressors related to visibility with work and public and fusion with others. This suggests that individuals who are less differentiated may in turn experience more visibility stressors and vice versa. On the other hand because these are correlational statistics and do not imply causation, the relationship found could be due to other factors involved. One factor that may play a part in this relationship is level of “outness”. Staying closeted about one’s sexual orientation at work and in the public may lead them to rely on the romantic relationship, possibly leading to more fusion with others, which in turn leads these stressors to be more distressful.

When looking at the variance in differentiation of self, 29.7 percent of the variation was accounted for by the six gay stressors subscales. Family reaction, visibility with work and public, and sexual orientation conflict all had significant negative regression weights suggesting that individuals report greater differentiation as stressors in these areas decrease or vice versa. Each of these stressors are related to individuals being more visible and “out” about their sexual orientation. Lending further support to being “out” about one’s sexual orientation may lead to greater differentiation of self and to fewer experiences with stressors related to visibility and hiding one’s sexual orientation. It may also impact the severity of these stressors.

Implications for Practice

Considering heterosexual and homosexual couples and individuals utilizing counseling services it is important to be aware of the unique circumstances and stressors they may endure. When specifically looking at homosexual's couples and individuals, in particularly lesbians, it is important to be aware of the unique stressors they may endure related to their sexual orientation and how this may in turn impact romantic relationship dynamics. It is crucial that therapists are able to thoroughly conceptualize the impact that gay stressors and differentiation of self can have on clients and understand how to best help clients process and cope with this. The results of the current study can help mental health professionals understand the complexities in their clients' relationship dynamics regarding differentiation of self and the impact that gay stressors has on the individuals and in turn their relationships.

Past researched has suggested that "merging" or "fusion" (Bowen, 1978; Krestan & Bepko, 1980; Peplau et al., 1979) are relational patterns that are more common to lesbian couples when compared to heterosexual or gay male couples. Fusion has been suggested to impact the low frequency of sexual contact in lesbian relationships (Blyth, 1996), relationship difficulties (Peplau et al., 1978) and decreased lesbian relationship satisfaction (Spencer & Brown, 2007). However Hill (1999) suggested that fusion may be a sign of having high amounts of cohesion and adaptability. In this sample of lesbian women low levels of fusion were reported, suggesting that the women in this sample were highly differentiated. The findings of this study suggest that lesbians can have differentiation of self in their relationships and that it is important to acknowledge this when working with this population.

This research supports the idea that unique stressors related to one's sexual orientation may in turn impact their level of differentiation, or vice versa, instead of the previous assumptions that lesbians in general have lower levels of differentiation. However, knowing the

stressors these individuals experience and in turn the impact they have on relationship dynamics is important for counselors to know. As Burch (1982) suggested it is important to understand the different dynamics that may impact lesbian romantic relationships. In relation to this study, when working with lesbian couples, it appears important for clinicians to know each individual's differentiation patterns so that the most adequate counseling can be provided. If lower levels of differentiation and greater fusion are indicated by clients then therapy can help promote differentiation, in hope of leading to better ways of coping with stressors experienced. According to previous research this may in turn also lead to better relationship satisfaction.

It will also be important to acknowledge the unique stressors the couple or each individual is experiencing, and in turn may be impacting the romantic relationship. Looking at the subscale scores may help clinicians in knowing where the focus of therapy needs to be placed, both at an individual and couples level. We need to be mindful as clinicians that these individual experiences of life and gay related stressors have an impact (Lewis et al., 2003). It should also be noted that not all individuals have negative consequences to gay stressors that are experienced. Some individuals are able to cope successfully.

Limitations

Reaching the GLBT population can be difficult since they are part of a minority population that is faced with stigmatization and prejudice. In this case convenience sampling was used instead of a random sampling technique. Despite the researcher's effort to reach a heterogeneous sample, the majority of participants were lesbians who were white, educated, employed, and middle to upper class, which is comparable to the sample obtained by Otis et al., (2006). These disproportionate percentages in the demographic variables may have-influenced the findings particularly because this lesbian population was primarily "out" about their sexual orientation, engaged in a long term relationship, and cohabitating with their romantic partner.

There was little variation in the means and standard deviations of the measures, suggesting that the results of this study may not be generalizable to the overall lesbian population. -There is a strong possibility that these demographic factors may have contributed to the findings of higher levels of differentiation and fewer gay stressors experienced in this sample of lesbian women.

Additionally, participants in this study may be comfortable with their sexual orientation and with taking a risk on making the public aware of their sexual orientation. Conversely individuals who are not out or do not accept themselves are less likely to participate in this kind of research and this also may impact results (Meyer, 1993). Finally, given the sensitive nature of many of the survey questions it is quite possible participants gave socially acceptable as opposed to candid responses.

Another potential limitation of this study is the use of an online survey. Using online research methods for recruiting participants is still considered new for the social sciences. This leaves questions as to whether people really are who they propose to be. Safe guards were, however, put in place to try to counteract this by recruiting individuals through GLBT listserves only, and through word of mouth in the lesbian community.

Future Research

When conducting research on this topic in the future, multiple improvements can be made to the research design to increase external validity. First, random sampling should be utilized to gather a sample of lesbians whose demographic variables such as age, racial identity, and socio-economic status accurately represent that of the general population. Accounting for the demographic limitations of the current study, completing a similar study or replicating the current study is recommended. This would allow for greater generalizations of the current findings. This is also the first known study to look at the relationship between differentiation of self and gay

stressors. Continuing to explore this relationship and the impact that gay related stressors have on not only the lesbian population but other GLBT individuals appears imperative.

Another possible study would be to examine similar research questions among a mixed sample of lesbian women and gay male individuals. By sampling gay and lesbian individuals researchers could explore corresponding differences in gay stressors and differentiation of self patterns. Exploring the similarities and differences between gay and lesbian individuals will be important in providing adequate research and clinical support to the GLBT population.

Other independent variables could be tested to see if they account for any of the variance in the relationship between differentiation of self and gay related stressors. For example, researchers have shown that relationship satisfaction is a reliable predictor of level of differentiation and autonomy (Green et al., 1999; Miller et al., 2004; Spencer & Brown, 2007). Previous studies have investigated similar research questions; however previous research has not investigated the impact that gay stressors may have on relationship satisfaction and differentiation of self. Exploring the impact that relationship satisfaction has on level of differentiation and gay stressors could further impact the quality of counseling that is provided to lesbian individuals.

Finally, conducting this research at a couple's level would be important. This allows one to examine the impact of a partner's experience on differentiation of self, gay stressors, and relationship satisfaction. By looking at the couple as a whole, comparisons could be made between heterosexuals, lesbian women, and gay male couples.

Summary

This study examined the relationship between differentiation of self and reported gay stressors in a lesbian population. Specifically, the relationships between differentiation of self, reported gay stressors, subscale scores on the DSI-R and SOSS, and demographic variables were explored. Findings of this study indicate support for most of the hypothesized relationships

between differentiation of self and gay stressors and the appropriate subscale scores and demographic variables. Significant negative relationships were found between gay stressors and differentiation of self and the following DSI-R subscales: emotional cutoff, emotional reaction, and taking the “I” position. Specific gay stressor subscales were related to differentiation of self and fusion with others. Visibility with work and public was found to be negatively related to fusion with others, while general discrimination was positively correlated. The SOSS subscales of family reaction, visibility with work and public, and sexual orientation conflict were all found to have significant negative relationships with differentiation of self.

It remains for future research to provide insight about the unique stressors that the lesbian population may experience and their impact on relationship patterns, specifically differentiation of self. The current study results demonstrate a significant relationship between gay related stress and the relationship pattern of differentiation of self. The findings of the present study also provide directions for future areas of research on GLBT relationship issues and the contribution that unique stressors may have on the GLBT population.

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APPENDICES

APPENDIX A:

REVIEW OF THE LITERATURE

As noted in the introduction section of this paper, there is a need to better understand the relationship between differentiation of self and gay stressors in lesbian relationships. This literature review will examine the current knowledge base relative to differentiation of self and gay stressors.

Differentiation of Self

Bowen developed a theory to help explain individual's interactions in their personal relationships with one another. He based the explanations of these interactions from how we interact with our family of origin (Bowen, 1976). He explained that that we all have a level of differentiation in our relationships with others, including romantic partners. The degree to which one is differentiated depends on how well he or she is able to separate one's own feelings and thoughts from those of others while maintaining closeness (Bowen, 1976).

Individuals who are not able to differentiate may experience one of two responses: fusion or emotional cutoff. Fusion occurs when an individual is not able to hold his/her own thoughts

thoughts and feelings while in the presence of another; whereas emotional cutoff occurs when an individual completely removes himself/herself physically and/or psychologically (Bowen, 1976). Where an individual lies on this continuum of emotional cutoff or fusion is how differentiated one is. The theory of differentiation of self was developed when investigating heterosexual couples. The concept of fusion, illustrating a lack of differentiation, has been a common stereotype when discussing lesbian relationships.

Throughout research other terms have been used synonymous with Bowen's concept of differentiation of self. These terms include fusion and merging. Fusion has been described by several researchers as the tendency for a person to become embedded in and undifferentiated within the relationship context (Elise, 1986; Krestan & Bepko, 1980). Another term used in related research is "psychological merger" (Burch, 1982). Burch explained that psychological merger can occur in all relationships during moments of emotional and sexual intimacy. These moments lead to an experience of union and relating to one another. She further describes that merger is not a problem until it becomes a permanent state where "merged partners in the relationship find it difficult or undesirable to think, act, or feel separately from each other—such behavior being seen as betrayal or rejection" (Burch, 1982, p. 201).

All of the terms used in this line of research describe a relationship dynamic that leads partners to have difficulties with functioning autonomously from their significant other, and fear that such experiences are experienced as rejection from one's partner. While problems of differentiation and autonomy have been found in heterosexual and gay male romantic relationships (Bluestein & Schwartz, 1983), a number of research studies have found fusion to be a relationship pattern that occurs more often in lesbian relationships when compared to heterosexual and gay male couples (Krestan & Bepko, 1980).

Relationship Satisfaction and Differentiation of Self

Married couples that have marriages with lower amounts of differentiation are thought to have lower levels of emotional maturity and limited ability for closeness and separateness, which leaves both partners sacrificing growth and independence to prevent an unstable marriage (Bowen, 1978). However in marriages where partners have greater differentiation of self, individuals are able to have role flexibility, intimate contact with one's partner, less emotional reactivity, ability to tolerate differences, and better emotional regulation (Bowen, 1978).

Miller, Anderson, & Keala (2004) conducted a research study that collected survey data from 60 married couples. They found a positive correlation between partners' reported level of differentiation and marital satisfaction. The degree to which level of differentiation impacted marital satisfaction was stronger for men than for women. Women's marital satisfaction declined with age, while a man's reported satisfaction increased with age.

In 2000, Skowron investigated 39 heterosexual married couples looking differentiation levels of partners, and specific dimensions of differentiation in relation to marital disturbance. The mean age of women participants was 46.72 years ($SD=14.67$), and men 48.56 years ($SD=14.88$). Couples were married on average 16.43 years ($SD=16.03$). Half of the participants were on their first marriage, while 46% of couples were on their second marriage. A majority of couples had children (74%), with a mean of 2.00 children ($SD=1.27$). Over half of the sample (62%) reported some type of therapy experience in the past, 19% as couples. Only 17% of participants were in therapy at the time of the study (23% as couples therapy). Each couple completed a demographic questionnaire, The Differentiation of Self Inventory (DSI), and the Dyadic Adjustment Scale (DAS). Each partner filled out the questionnaires separately from one another, and was asked not to discuss their answers with one another.

In order to run analyses, pseudocouples were made by pairing the woman's DSI score with a random male participant's DSI. To assess for similarity between actual couple's scores and

pseudocouple's scores a paired-samples *t* test was conducted on the mean DSI difference score of the pseudocouples and the mean DSI difference score for the actual couples (Skowron, 2000).

Skowron (2000) found a relationship between differentiation and the amount of intimacy and long-term mutuality in the marriage. Partners who had lower reports of emotional reactivity, emotional cutoff, and fusion were more capable of holding an I-position in their romantic relationship and reported greater marital satisfaction. Conversely, partners with lower differentiation demonstrated more emotional reactivity, emotional cutoff, and fusion and greater stress and anxiety in their relationships, and less marital satisfaction. Differentiation of self scores accounted for two-thirds of the husband's marital adjustment scores and one half of reported marital adjustment by the wife. This lends support to Bowen's idea that one's ability to connect to another on an intimate level and maintain their autonomy in a relationship are components of a good marriage (Skowron, 2000).

Instances where the husbands engage in higher levels of emotional cutoff and wife in emotional reactivity were more likely to report marital distress (Skowron, 2000). This may be due to the reciprocal nature of these behaviors. Emotional cutoff is often seen as a manifestation of fear and anxiety of losing one's sense of independence, where emotional reactivity is in reaction to fear of separation or losing connection with close individuals (Bowen, 1978). No support was found for Bowen's proposal that individuals seek partners who resemble their level of differentiation. Findings showed that actual couples and pseudocouples were not more or less similar to one another in overall levels of differentiation (Skowron, 2000).

An Israeli study investigated the relationship between marital satisfaction, differentiation of self, and marital duration (Peleg, 2008). The study consisted of 121 Israeli participants (64 women, 57 men) from Jewish, non-religious, middle class families. Participants were not in relationship with other participants but had to be married for a minimum of 3 years at the time the

survey was taken. Their families had to be intact, with both spouses living in the home with at least one child in the home, and this had to be their first marriage. The mean years of marriage was 13.6 years for men and 12.5 years for women. Participants completed The Differentiation of Self Inventory (DSI; Skowron & Friedlander, 1998) that was translated to Hebrew (Peleg, 2002), along with a marital satisfaction inventory that was translated into Hebrew.

Results provided some support to the notion that higher levels of differentiation of self are positively related to marital satisfaction (Peleg, 2008). For males, marital satisfaction was correlated with low levels of emotional reactivity, emotional cutoff, and high levels of I-position. For females, low levels of emotional cutoff were found to be associated with high amounts of marital satisfaction. Gender differences were also noted in the relationship between marital satisfaction and duration of marriage. A positive relationship was found between marital satisfaction and duration of marriage in men, while a negative correlation was found with women (Peleg, 2008).

Fusion in Lesbian Relationships

Within the lesbian community there is a trend of relationship difficulties that tend to occur. Little research has been done looking at the dyadic relationship between lesbian partners. Research that has been completed looked at the relationship pattern termed as “merging”, “fusion” or “differentiation of self” (Bowen, 1978; Krestan & Bepko, 1980; Peplau et al., 1979). All these terms describe the relational pattern that occurs when partners in romantic relationships find it difficult to function independently from their partner, and acting autonomously is related to being rejected by one’s partner. The question lies in whether this pattern really exists as often as it is suggested in lesbian relationships or is it related to female relational patterns or living in a homophobic society. Merging with one’s partner may help strengthen the lesbian couple by defending itself against negative societal views and a culture that challenges the acknowledgment

of the couple. However, this relationship pattern could also lead to relationship dysfunction and problems.

Merging or fusion has been described as the tendency for two individuals to relate physically and psychologically close to one another (Krestan & Bepko, 1980). Couples who engage in merging have a hard time separating from one another when engaging in activities including interests, values, and ideas. There are difficulties to engage independently in the presence of a desire to be close at all times. In particular to lesbians, it is hard for these women to separate from their lover physically or emotionally and see this as threatening (Elise, 1986). This pattern has been seen to be prevalent in lesbian relationships when compared to heterosexual and gay male couples (Burch, 1982; Krestan & Bepko 1980).

Merging with one's partner may not be a dysfunctional relationship pattern to some degree. Fusion in the relationship may be a sign of intimacy within the relationship, and could be seen as a strength in lesbian relationships. This pattern of fusion may be due to the ability that women have in relating close to one another, and can be more empathetic and nurturing because there is a smaller degree of differentiation from their partners (Burch, 1982). The point in which merging becomes a problem is when there is difficulties in being autonomous from one's partner which may lead to emotional difficulties, sexual withdrawal, affairs, and break up in the relationship. Research suggests that when these patterns of merging occur in lesbian romantic relationships it often results in asexual behaviors and the relationship ends after a period of 2-3 years (Krestan & Bepko, 1980). The difficulty in finding the balance between being independent and being together becomes the issue (Peplau et al., 1978).

Fusion as been cited as a possible explanation for the lower frequencies of sexual contact in lesbian relationships (Blyth, 1996). Research has explored and highlighted problems related to low sexual desire and infrequent sexual activity in lesbian relationship. Several explanations for

this occurrence have been provided. The most common explanation provided for these occurrences is the presence of fusion within the romantic relationship. Fusion within the relationship results in lower amounts of sexual activity and sexual desire (Burch, 1982; Elise, 1986). Blumstein and Schwartz (1983) looked at married, cohabiting heterosexual, gay male and lesbian couples and found that lesbians reported the lowest occurrence of sexual activity amongst all the couples. After an 18-month follow-up by Blumstein and Schwartz (1983) found that breakups by lesbian couples who were together for more than two years was related to sexual dissatisfaction and conflict within the relationship.

Fusion has been linked to intimacy. Specifically, that intense intimacy is an aspect of fusion, but that fusion is different from intense intimacy (Blyth, 1996). Kaufman, Harrison and Hyde (1984) reported that sex-roles lead women to focus on relational issues and encourages the pursuit of intimacy, which in turns leads to a higher likely hood that women will fuse. In the pursuit of intimacy one often dismisses sexual activity. In clinical observations of lesbians in couples therapy for issues related to low sexual desire and frequency it was found that frequency and desire of sex tend to increase as autonomy and separateness within the relationship occurred (Kaufman, Harrison & Hyde, 1984).

In order to further understand the possible relationship between sexual activity and desire with fusion in lesbian relationships Blyth (1996) completed a study investigating 36 women who were in lesbian relationships for longer than one year. Participants were all from South Africa and ranged in age from 22 to 60 years of age, with the mean age being 36 years. Length of romantic relationships varied from one to ten years, with the mean being 4.95 years. Eighty three percent of participants were living with their partners, and 19 participants had been living with their partners since the beginning of the relationship.

Participants completed self report questionnaires including a demographic form, reported frequency of sexual contact, and the PAIR Inventory. Correlational results show that frequency of sexual activity declines with increase in age in both partners and length of relationship. This supports findings by Blumstein and Schwartz (1983) who reported a decline in sexual activity with duration of the relationship in any of the couples they sampled, which included lesbian couples. No significant correlations were found between measures of intimacy (PAIR) and frequency of sexual activity.

Spearman correlations between PAIR Inventory and frequency of sexual contact were as follows: sexual intimacy, 0.31 ($p=.06$); emotional intimacy, -0.06 ($p=0.72$); social intimacy, -0.28 ($p=0.10$); intellectual intimacy, 0.04 ($p=0.83$); recreational intimacy, 0.12 ($p=0.47$); partial intimacy, -0.09 ($p=0.58$); total intimacy -0.02 ($p=0.92$). The only correlation that was close to significance is between sexual intimacy and sexual frequency, which would be expected (Blyth, 1996). Results between levels of intimacy and frequency of sexual activity are not consistent with previous studies that suggested there should be a relationship between these variables. In this particular study, participants may have presented themselves in a favorable light since the PAIR Inventory was skewed towards high intimacy and higher reports of sexual activity were given. Another explanation is that fusion is a construct closely related to but not synonymous with high reports of intimacy. If this is in fact true, it may be suggested that high levels of intimacy, as indicated in this study, may lead to healthy sexual and emotional lesbian relationships. However, it could also lead to fusion within the relationship due to merging of boundaries and fears of separation (Blyth, 1996).

Differentiation of Self in Heterosexual Relationships

Research with heterosexual couples who have less differentiated marriages are reported to have less emotional maturity and limited abilities in establishing balanced boundaries between

separateness and closeness, which in turn causes the couple to sacrifice self growth in turn for stability in the marriage (Bowen, 1978). In contrast, marriages that are characterized with higher levels of differentiation provide more role flexibility, allow greater intimate contact and differences in opinions, and less emotional reactivity (Bowen, 1978).

Skowron and Friedlander (1998) reported that individuals who displayed less emotional reactivity and emotional cutoff in their relationships, and had higher levels of differentiation, had greater satisfaction with their partners. Individuals who provide their spouses with opportunities for greater autonomy and greater relatedness (Rankin-Esquer, Burnett, Baucom, & Epstein, 1997), along with being less enmeshed with one another have more satisfying marriages (Waring & Patton, 1984 cited in Skowron, 2000). Skowron (2000) confirmed that couples who reported to be less cutoff, less fused with others (i.e. family and partners), less reactive, were better able to take I-positions in their relationships. These couples experienced higher levels of relationship satisfaction than those in marriages with lower levels of differentiation and more reported marital distress. Peleg (2008) found a positive relationship between level of differentiation and marital satisfaction.

Couples with low levels of differentiation exhibit higher levels of emotional reactivity, more cutoff and fusion with others, higher levels of stress and anxiety in relationships, and less satisfaction with marital life (Peleg, 2008; Skowron, 2000). Jacobson and colleagues (Jacobson, Follette, & McDonald, 1982; Jacobson, Waldron & Moore, 1980) reported that the presence of behavioral reactivity, which is the occurrence of one spouse to react at an affective level to an immediate stimulus from one's partner, was related to marital distress. Skowron (2000) reported that the need for togetherness is predictive of a communication breakdown between the individuals in the relationship. She explained that individuals with high dependency needs are less able to cope with problems. Couples who reported higher levels of marital satisfaction were less emotionally reactive in their exchanges with partners; whereas distressed couples showed

more emotional reactivity to immediate events, positive and negative, in their relationships (Jacobson, Follette, & McDonald, 1982; Jacobson, Waldron & Moore, 1980).

In research investigating marital problems, spouses in distress expressed greater emotionality and distancing behaviors (Revenstorf, Vogel, Wegener, Halweg, & Schnindler, 1980). The presence of behavioral reactivity and negative reactivity were seen more as patterns of distressed couples than nondistressed couples (Jacobson et al., 1982).

Similarities and Differences between Heterosexuals and Homosexuals

When comparing same-sex relationships to heterosexual relationships research has shown some similarities in attachment patterns and relationship satisfaction (Kurdek, 1998). Several studies have compared gay male, lesbian couples, and heterosexual couples to learn about the differences and similarities in relationship dynamics and relationship satisfaction. Studies have either matched homosexual and heterosexual couples on age, income, education, and other demographic information or controlled for the influence of these factors during analyses of data (Kurdek, 1998).

Kurdek (1998) investigated differences between heterosexual and homosexual couples and their experiences with autonomy and intimacy within the romantic relationship. He looked at a study investigating married heterosexual couples, along with gay and lesbian homosexual couples. When controlling for education, age, years cohabitating, and income there was no significant difference in relationship satisfaction based on sexual orientation of the couple. Over the course of the five year study by Kurdek (1998) relationship satisfaction for all couples tended to decrease over time. However, no differences were found between heterosexual or homosexual couples and the rate of change in satisfaction.

He predicted that there would be a difference between gay and lesbian couples and heterosexuals couples. Kurdek (1998) gathered intimacy data by partners self-reports of: 1)

identification as a couple, 2) engagement in joint activities, 3) time spent together, and 4) thinking in terms of “we” instead of the individual. After controlling for a variety of demographic variables, results indicated that lesbians reported greater intimacy within their relationships than gay men and heterosexuals (Kurdek, 1998). It should be noted that the effect size was small. This supported Kurdek’s (1998) hypothesis that lesbian couples would report higher levels of intimacy due to socialization patterns for women which emphasize the importance of relationships in identity formation.

Kurdek (1998) hypothesized that gay males couples would demonstrate higher levels of autonomy when compared to heterosexuals because men are socialized to emphasize independence and autonomy. He assessed for autonomy by using self reports of partners having interests and friends outside of the romantic relationship, making decisions by one’s self, and maintenance of a sense of individual identity. Kurdek’s hypothesis was supported. He found that gay and lesbian partners reported greater autonomy when compared to their heterosexual counterparts (Kurdek, 1998).

When looking at the relationship between differentiation of self and relationship satisfaction in heterosexual couples Skowron and Friedlander (1998) found that higher levels of differentiation predicted greater relationship satisfaction. Spencer and Brown (2007) found similar findings in that there was a significant positive relationship between relationship satisfaction and differentiation of self in lesbian couples.

Green et al. (1999) completed a study looking at patterns of fusion in heterosexual and lesbian women romantic relationships. Participants included 66 lesbian participants and 77 heterosexual women participants. Lesbian participants were shown to have a moderate relationship between perceived high fusion in their romantic relationships and relationship satisfaction ($r=.40$). Individuals who had low levels of perceived fusion were more apt to be less

satisfied in their relationships. Results also indicated that lesbian participants that scored high on a measure of dependence also scored high on fusion ($r=.39$). A small inverse correlation was found between reported autonomy and fusion ($r= -.31$). Meaning lesbians who scored high in fusion reported lower levels of autonomy in their relationships. Another important correlation to report is an inverse relationship between participant age and reported fusion ($r= -.28$). Older participants reported lower levels of fusion (Green et al., 1999). Relationship duration was also found to correlate with reported fusion, in that lower levels of fusion correlated with increased relationship duration ($r= -.34$).

In the same study similar results were reported for heterosexual women participants who evidenced strong positive correlations between reported fusion and satisfaction ($r=.35$) in their romantic relationships with men. Similar to lesbian participants, heterosexual women were satisfied with their relationships despite reporting higher levels of perceived fusion. Heterosexual women also demonstrated strong correlations between fusion and dependence ($r=.34$) and closeness with their partners ($r=.43$). No significant relationships were found between age and autonomy in the heterosexual women participants. Similar to lesbian participants, heterosexual women reported lower levels of fusion and the length of the romantic relationship ($r= -.22$) (Green et al., 1999).

No difference was found between heterosexual women and lesbian participants with respect to reported fusion (Green et al., 1999). Heterosexual women did report higher levels of dependence in their romantic relationships than lesbian women. Lesbian women scored higher on measures of autonomy and closeness than their heterosexual counterparts. The findings suggest fusion is a problem in both heterosexual and lesbian relationships. Length of relationship and levels of fusion were found to have an inverse relationship in both lesbian and heterosexual women, suggesting that fusion may decrease as the relationship grows and develops.

Differentiated individuals have the ability to experience their feelings and thoughts in situations without being reactive with other individuals who are involved in those situations. Studies have suggested that homosexual relationships are comparable to opposite sex romantic relationships in several ways. It is suggested that heterosexual couples and lesbian couples both report similar patterns of attachment and relationship satisfaction (Kurdek, 1998). As previously stated, research suggests that lesbians have difficulties in maintaining distance and having differences within their relationships which results in lower levels of differentiation, demonstrated by the phenomena of fusion (Bepko & Johnson, 2000; Kreston & Bepko, 1980). However there may be another explanation for this relationship pattern that is common amongst lesbian couples. First, it may not be fusion at all but in fact a sign of having high amounts of cohesion and adaptability with one's romantic partner (Hill, 1999). These women in romantic relationships may be responding in a united front, and adapting to their surroundings of being discriminated against or rejected by family and friends. This pattern of coping to environmental influences may lead to internalized homophobia which is explored later.

Same or Different Level of Differentiation

Bowen (1976) suggested that couples generally have the same level of differentiation. He suggested that when individuals enter marriage they have lifestyle patterns developed within their own nuclear families including level of differentiation of self. According to Bowen's (1978) theory individuals who have low differentiation of self tend to seek partners who are mirror their level of differentiation. However, several studies examining this idea of similar differentiation patterns between partners have shown mixed results (Kosek, 1998; Lim & Jennings, 1996; Skowron & Friedlander, 1998; Skowron, 2000; Spencer & Brown, 2007).

Research looking at heterosexual couples explored the idea that individuals pick partners that are similar to themselves have not found support (Skowron, 2000). Despite this, Skowron

and Friedlander (1998) found that relationship satisfaction was greater when couples reported higher levels of differentiation, while controlling for age and gender.

Research suggests that highly differentiated spouses experience less fusion within their relationships leading to fewer relationship complications and higher levels of marital satisfaction (Bowen, 1978). Lim and Jennings (1996) completed a study investigating Bowen's hypothesis that well adjusted couples with higher amounts of relationship satisfaction is potentially correlated with healthy levels of differentiation. The study consisted of 113 married couples from north-central Texas. Thirty-seven subjects (16%) ranged in age from 18-29 years; majority were in the 30-39 years of age category (40%); 55 participants (24%) were in age range of 40-49 years, and lastly 20% (44 participants) ranged in age of 50 years or above (Lim & Jennings, 1996). The average years of marriage were 15, with seventy-three percent of individuals being in their first marriage. Participants completed the Personal Authority in the Family Scale (PAFS) (Bray, Williamson, & Malone, 1984), the Marital Satisfaction Inventory (MSI) (Snyder, Wills, & Keiser, 1981), and a general data form. Each participant was asked to complete the self report questionnaires without consulting with their partners.

Couples were grouped into categories based on their PAFS scores which were used to measure their levels of differentiation. They were placed into healthy like (wives and husbands that scored above the PAFS mean and were within one standard deviation of their partner's PAFS score), healthy unlike (husbands and wives who scored above the mean but their PAFS scores were more than one standard deviation from each other, unhealthy like (husbands and wives that score below the mean but were within one standard deviation of each other's PAFS score), and unhealthy unlike (couples that scored below the mean and were more than one standard deviation apart from one another) (Lim & Jennings, 1996).

Results found that level of differentiation reported did impact couples marital satisfaction. Results of the study supported Bowen's hypothesis that individuals look for partners with similar levels of differentiation. There were more couples who were in the healthy like category than those in the unhealthy unlike group (Lim & Jennings, 1996). Participants that scored above the mean on the PAFS questionnaire, indicating higher levels of differentiation, had lower scores on the Marital Satisfaction Inventory which indicates higher satisfaction in their marital relationships. This indicates that individuals who are more differentiated experienced higher amounts of satisfaction in their marriage.

Participants that scored lower on the PAFS, indicating low differentiation, reported more problems in their romantic relationship and more marital distress (Lim & Jennings, 1996). Most of the participants in the unhealthy like and unhealthy unlike groups scored high on the MSI subscales. These individuals who are less differentiated experience more problems within their marriage, and in turn may be vulnerable to stress and other relational problems. Within this study women were more likely to report lower MSI scores than their male counterparts. Specifically, women in this study scored lower on the MSI in relation to the following PAFS scales: spousal fusion/individuation, nuclear family triangulation, intergenerational fusion/ individuation, and personal authority (Lim & Jennings, 1996).

Opposite results were found by Kosek (1998) who investigated the differences and similarities in couple's reported levels of differentiation. One hundred and nine heterosexual married couples were sampled with a mean age of 44.5 years for women and 46.8 years for men. The average length of marriage was 21.6 years, but ranged from one to 58 years. Couples completed the Differentiation of Self Inventory (DSI) (Skowron & Friedlander, 1992) in order to measure their levels of differentiation.

Using descriptive data from the four DSI subscales from both partners, one-way analyses of variance were conducted. Results indicated that women's subscale means were significantly lower than their male counterparts on all subscales except the Emotional Cutoff subscale. Husband's mean scores were higher on the following subscales: Emotional Reactivity, Fusion with others, and I position (Kosek, 1998). Based on these results there is evidence to suggest that sex differences do occur within married couples, and that individuals do not necessarily seek out partners that have the same level of differentiation. Kosek (1998) suggests that women may develop a sense of identity based on their connections with others more than men do based on their lower mean scores of fusion with others, emotional reactivity, and I-position.

An Australian study looked at fifty-three lesbian couples (Spencer & Brown, 2007). Most of the couples lived together and had been together on average for over 5 years. The mean age of participants was 35, but ranged from 22 to 49 years of age. The study looked at whether lesbians choose partners with similar levels of differentiation. They also investigated whether relationship satisfaction was related to level of differentiation and internalized homophobia. Couples filled out self report measures related to relationship satisfaction, internalized homophobia, and differentiation of self. Analysis related to level of differentiation began by first creating pseudocouples by randomly splitting the 53 couples and pairing them with another member of the sample. A mean was created for the absolute difference for the pseudocouples and compared to the absolute difference for the actual couple. A paired sample *t* test was used to investigate the absolute difference for the pseudocouples and the absolute difference for the actual couple to assess the similarity of the actual couples DSI scores versus the DSI scores for the pseudocouple's scores.

Results showed small differences between the mean scores between actual partners. The mean discrepancies ranged between .507 on the DSI full scale to .927 units for the ER variable. To further investigate the research question of whether lesbians choose romantic partners who

resemble their level of differentiation they completed a similarity index. No significant differences were found between actual couples and pseudocouples, where results demonstrated that actual couples were no more similar than the couples that were randomly paired together on all DSI variables (Spencer & Brown, 2007). Follow-up analyses were conducted to determine if low levels of similarity was due to the length of the relationship. A Spearman's correlation was conducted and showed that low levels of similarity on the DSI scales was not related to relationship longevity. Results did suggest a moderate correlation between length of the relationship and scores on the emotional cutoff scale, suggesting that the longer a couple has been together the more different the partners score on the EC scale.

Results from the Spencer and Bowen (2007) study suggest no difference in levels of differentiation between randomly matched couples and actual lesbian couples. These results are consistent with studies that looked at heterosexual couples (Skowron, 2000) and contradict Bowen's idea of selecting partners with similar levels of differentiation. These results also supported previous findings by Skowron (2000) that relationship length does not relate to the level of similarity between partners. Results found by Spencer & Bowen (2007) also contradict previous suggestions that fusion is a common relationship dynamic in lesbian couples. There was no significant finding that lesbian couples are more alike on the subscale of fusion with others than those couples that were randomly formed. This suggests that fusion may not occur just because two women form a romantic relationship with one another.

Socialization of Women: The Influence of Differentiation of Self

Women are socialized to connect and attach to others in a selfless manner (Elise, 1986). Two women in a romantic relationship with one another may feel more alike to one another due to being female, thus intensifying connection and closeness with one another (Elise, 1986). This sense of connection and identification could override the presence of autonomy in the

relationship. Women are also socialized to place emphasis on relationships, tend to others needs, and put personal needs second. This socialization pattern may play out in lesbian relationships in that both women engage in this same behavioral pattern which leaves both of them neglecting their own needs for autonomy and sense of self (Elise, 1986).

Internalized Homophobia and Level of Differentiation

Krestan and Bepko (1980) noted that society's failure to recognize homosexual relationships, in particular to this study lesbian relationships, may intensify the boundary issues between partners. Since the couple may be cut off from outside connection, experience family pressures, prejudices, lack of social support they cope and find connection in their romantic partners, often times leading to fusion. Lesbians may create rigid boundaries in their romantic relationships as a way to deal with negative reactions from the majority system.

There has been a limited number of studies that have investigated the detriment that internalized homophobia can have on the relationship quality of homosexual relationships, in particular those of lesbian couples. Several studies have found that internalized homophobia was inversely related to lesbian relationship satisfaction (Eldrige & Gilbert, 1990). It is unclear the direction of influence in this behavior pattern. LaSala (2000) suggests that having low levels of differentiation may lead to individuals not to feel confident and comfortable about themselves when they are in the presence of others which may in turn impact the degree of internalize homophobia they report or vis-a-versa. However, research does support the idea that there is a complex relationship between differentiation of self, internalized homophobia, and reported relationship satisfaction in lesbian relationships.

In the 2007 study by Spencer and Brown they investigated how internalized homophobia and level of differentiation of self may influence lesbian relationship satisfaction. In order to make comparison groups partners were split into three groups based on their median

differentiation of self scores and internalized homophobia scores. The following groups were used for comparison: HH (both DSI and IH above the median), LL (both DSI and IH scores below the median), and DIFF (where one score was above and one was below the median). Through pairwise comparisons significant differences were found between the HH and LL couples on their reported relationship satisfaction (Spencer & Brown, 2007). Couples where both individuals reported high DSI scores also indicated higher levels of relationship satisfaction than the couples with low DSI scores. Significant differences were also found between DIFF and HH groups and LL and HH couples paired by their internalized homophobia scores. Couples who reported high levels of internalized homophobia indicated having significantly lower levels of relationship satisfaction than couples who were different in their IH self reports or who had low levels of IH (Spencer & Brown, 2007).

Results suggest that those couples who report higher levels of differentiation are found to have higher levels of relationship satisfaction. This is related to research done with heterosexual couples who found similar finding (Skowron & Friedlander, 1998). This suggests that couples who are more differentiated may have more satisfying relationships. In regards to couples with low levels of IH and more relationship satisfaction it could be interpreted that partners with less negative views about their sexuality may act as a buffer against dissatisfaction in the relationship and offer support to their partner.

Research using other fusion measures or measures related to similar constructs have demonstrated significant evidence for relationships between interpersonal fusion and adult related psychosocial development problems. Measures such as the Personal Authority in the Family System Questionnaire (PAFS; Bray, Williamson, & Malone, 1984) and the Behavioral and Emotional Reactivity Index (Bartle & Sabatelli, 1995) were found to have relationships with fusion and relational patterns .

Differentiation of Self Inventory

The Differentiation of Self Inventory (DSI) is a 43 item self-report questionnaire developed by Skowron & Friedlander (1998) for adults ages 25 and above. It was designed to measure the concept of differentiation of self, particularly to assess one's autonomy, intimacy, and emotional functioning in interpersonal relationships (Skowron & Friedlander, 1998). Subscales of the measure assess dimensions of differentiation; including interpersonal fusion and emotional cutoff and intrapsychic emotional reactivity and difficulty taking an "I" position dimensions. Bowen (1978) identified the patterns of emotional cutoff and fusion as behavioral mechanisms to assist in regulation of distance from others, and to help in managing heightened emotional moments or perceived threat to safety.

On the interpersonal dimension, differentiation is viewed as the comfortably one has with intimacy in close relationships and the ability to regulate one's feelings of anxiety with fusion or emotional cutoff in these close relationships. Differentiation is the ability to experience intimacy and autonomy from others. Having differentiation allows for the flexibility in boundaries with others so that emotional and physical intimacy can be experienced without the fear of merging (Bowen, 1978). When there is a lack of differentiation on the interpersonal dimension individuals tend to fuse or become emotionally cutoff from others. The fused individual finds separation overwhelming, while the emotionally cutoff individual finds intimate connections with others as threatening (Bowen, 1978).

The intrapsychic dimension is one's capacity to regulate their thinking and feeling systems, and have a sense of self that allows one to identify or express their individual thoughts and perspectives (Bowen, 1978). Having greater differentiation allows an individual to handle strong emotional experiences or having the ability to shift to a calmer more logical frame of mind when needed. Differentiated individuals are able to find balance between emotional and rational

levels while maintaining independence within their intimate relationships. Undifferentiated individuals find it hard to remain calm and react emotionally in response to others emotions. These individuals are unable to separate intellect and emotions, they essentially become fused.

The 11-item emotional reactivity subscale evaluates the degree to which an individual responds to environmental stimuli. The I-position subscale includes 11 items that measure the sense of self and the ability to adhere to one's beliefs and values when pressured by outside sources. The emotional cutoff subscale includes 12 items reflecting the feeling of being threatened by intimacy and feeling extremely vulnerable in relationships with others. Lastly the fusions with others subscale includes 9 items examine overinvolvement with others, including overidentification with parents and triangulation (Skowron & Friedlander, 1998).

In 2003 Skowron and Schmitt revised the DSI in order to improve the reliability and construct-related validity of the Fusion with Others (FO) subscale. The other DSI subscales of the 1998 version post significant internal consistencies of $\alpha = .80$ or higher, while the FO scale generally ranged from .57-.74. Skowron & Friedlander (1998) reported internal consistency reliabilities of the original DSI as follows: DSI full scale = .88, ER = .84, IP = .85, EC = .82, and FO = .74. The construct-related validity has been found to have no significant relationships between FO subscale scores and psychological adjustment or relationship satisfaction (Skowron & Friedlander, 1998).

The revised fusion with others subscale returned five of the original nine items and added 26 new items (Skowron & Schmitt, 2003). Only 12 were kept due to low item scale correlations, low internal consistency, and having overlap with the other DSI-R subscales.

Results indicated small intercorrelations amongst the DSI-R subscales indicating small amounts of variance being shared amongst the subscales provides support to the multidimensional nature of the DSI-R. Revisions within the FO subscale provided support for construct-related

validity. Fusion with others measured through the FO subscale on the DSI-R were found to have a relationship to higher amounts of spousal fusion, lack of differentiation with others, and fearing abandonment in relationships (Skowron & Schmitt, 2003). A relationship between the fusion with others subscale and the Personal Authority in the Family System Questionnaire Spousal Fusion/Individuation subscale (PAFS SFI) provides support that these two measures assess the concept of fusion in a similar fashion. This also lends support to relationship between Bowen's concept of fusion and components of adult attachment insecurity. Particularly, those who tend to fuse with others may also experience a higher degree of abandonment. These individuals may also prefer romantic relationships where there is a blurred psychological and emotional boundary with their partner as a way to relieve separation anxiety (Skowron & Friedlander, 2003).

The Differentiation of Self Inventory-Revised scale (Skowron & Schmitt, 2003) was used for the present study. It includes 46 items across the four subscales. The emotional reactivity subscale includes 11 items such as "At times I feel like I am riding an emotional roller coaster", "I'm overly sensitive to criticism", and "If someone is upset with me, I can't seem to let it go easily"; the I-position subscale has 11 items such as "I'm fairly self accepting", "There's no point in getting upset about things I cannot change", and "I usually do what I believe is right regardless of what others say". The emotional cutoff subscale includes 12 items such as "I'm concerned about losing my independence in intimate relationships", "I often feel that my spouse/partner wants too much from me", and "When I am with my spouse/partner, I often feel smothered". The revised fusion with others subscale has 12 items such as "I want to live up to my parents' expectations of me", "I often agree with others just to appease them", and "I feel a need for approval from virtually everyone in my life".

To compute the four subscale scores, all items on the ER and the EC subscales are reversed score, item 35 on the IP subscale is reversed, and all items on the FO are reversed scored except for item 37 (Skowron & Schmitt, 2003). Raw scores are then summed and divided by the

number of items compiled into each subscale (i.e., ER=11, IP=11, EC=12, FO=12). As a result each subscale score will range from 1 to 6, with higher scores reflecting greater levels of differentiation of self, less emotional reactivity, greater ability to take I-position, less emotional cutoff, and less fusion with others. The DSI-R full scale is obtained by reversing scores on the items noted above, then summing across all items and dividing by 46. Scores for the full scale score range from 1 to 6, with higher scores be indicating greater differentiation of self.

Summary of Differentiation

According to research cited above, fusion within lesbian romantic relationships may be an attempt to maintain the subsystem, of being a couple, within a larger system that consistently provides negative feedback and lack of acknowledgement. Fusion within heterosexual relationships is seen differently from the fusion that occurs in lesbian romantic relationships. Fusion within the heterosexual relationship is seen as normal, which the process is needed to help support and maintain the relationship, and may help how the individual functions (Krestan & Bepko, 1980), however it is viewed differently when it occurs in lesbian romantic relationships.

Gay Stressors

Gay men and lesbian women live within a dominant culture where they are often times stigmatized for their sexual orientation. They may experience rejection and barriers to success within such a system. Due to the stigmatization experienced these individuals face stressors specific to their homosexual orientation. Often times with stress come physical and psychiatric problems (Meyer, 2005). Research investigating the unique stressors that gay and lesbian individuals experience is based on a concept called “minority stress”. “Minority stress” is the stress that individuals in minority groups experience as a consequence of negative things such as stigmatization and discrimination by the majority group (Meyer, 2005). The stress that gay,

lesbian, and bisexual individuals experience is unique to everyday stressors because the stressors are related to one's sexual orientation (Lewis et al., 2001). In turn individuals of the minority group may develop maladaptive and adaptive coping mechanisms to the unique environmental stressors they experience, and these could include physical and mental health symptoms.

In 1981 Brooks's defined minority stress as psychosocial stress derived from minority status. Meyer (1995) positioned that there were three dimensions or processes of minority stress. These dimensions include internalized homophobia, perceived stigma and prejudice events. He argues that each of these dimensions impacts on the psychological adjustment of the individual, along with interacting with one another that leads to what he called 'psychologically-injurious effects' (Meyer, 1995). Meyer described internalized homophobia as the directing negative societal attitudes about homosexuality inward at oneself. Meyer further discusses how stigmatization can lead minority groups to develop vigilance as a coping mechanism. The stigma and labeling that the individual experiences places stress on the individual and is often experienced daily in the minority person's life (Allport, 1954; Meyer, 1995). In regards to prejudice events he states that forms of rejection, discrimination, and violence are explicit sources of minority stress for the minority individual.

In a study to empirically analyze stressors for gay men and lesbians Lewis, Derlega, Berndt, Morris and Rose (2001) found that gay men and lesbians reported stressors related to visibility issues (difficulty being "out"), family conflict (difficulties due to one's sexual orientation), discrimination at work (actual and possible job loss, discriminatory practices), violence and harassment, HIV/AIDS concerns, conflict over one's sexual orientation (personal shame/guilt), and misunderstanding (lack of acceptance by the general public).

In this same study men reported more stress associated with HIV/AIDS than women, along with more concerns of violence and harassment, while women reported more family related

stressors (Lewis et al., 2001). Participants who were currently in relationships reported more stressors related to family reactions to their partners, more problems related to societal misunderstanding, less worries about HIV/AIDS, and lower levels of sexual orientation conflict.

Similarly, Woodman (1989) studied sources of gay stress in student leaders of campus gay and lesbian organizations. In investigating 100 student leaders they identified five sexually oriented stressors unique to lesbians and gay men. Some of the stressors listed were common amongst heterosexual campus leaders but had an additional component due to the minority status of being homosexual. The main themes included loss, anticipated loss, personal and group identity issues, and relationship issues (Woodman, 1989).

In 1979 Lindquist and Hirabayashi developed a measure to evaluate stress experienced by homosexuals. They used pre-existing measures for self-esteem, psychological distress, alienation, happiness, stability, guilt, life satisfaction, and acceptance of gay identity to build the measure. This 100-item questionnaire was administered to 142 Canadian gay males. Results indicated that individuals who experienced the largest amount of psychological distress were those individuals who tried to commit to a traditional societal point of view but were rejected by it (Lindquist & Hirabayashi, 1979). Involvement in the gay community and with gay-others tended to mitigate this occurrence and allow for greater adjustment. The most adjusted individuals were those individuals who were involved in the conventional society (non-gay others) and the gay community (gay others). They exhibited low reports of psychological distress, alienation, and higher accounts of self-esteem, stability, and happiness. Participation with non-gay others was found to be equal or of greater significance in impacting personal and social adjustment. Results of this study should be interpreted with caution, however, because measures used in the study were developed for heterosexual individuals and therefore may not account for the unique stress experienced by gay males and lesbian women. Also, this study was conducted in 1979 and conducted in Canada making it dated and may limit its usefulness.

Similar findings were suggested in a 1987 study by Gillow and Davis. They completed a national survey looking at 142 lesbians' perceived stressors and coping behaviors as they related to their sexual orientation and same sex relationships. They noted that lesbians are confronted with unique stressors in their personal lives. Some of these stressors may be due to the incongruence between individual's self-concept and the outward expression of the individual.

Participants ranged in age from 16 to 63 years ($M = 31$). A majority of the participants were White (84%), had at least some college (96%), and currently had full time employment (71%). Participants were asked to complete questionnaires related to demographic information, perceived stressors, coping behaviors, and social support systems. Findings suggested that 27% of participants reported job-related stressors which normally involved some type of harassment or discrimination issue. Twenty-five percent of the lesbian sample reported stressors related to primary relationship issues (i.e. not being in a current relationship, partner issues, and relationship visibility) (Gillow & Davis, 1987). Sixteen of the lesbian participants (11%) indicated stress related to coming out to their family (i.e. pressure to get married to opposite sex individual, lack of acceptance and acknowledgement). Other areas that appeared to cause some stress for participants were related to financial concerns, children and child care issues, and twenty-four percent of participants reported miscellaneous concerns related to identity formation and coping (Gillow & Davis, 1987).

Participants reported that some coping behaviors increased over time including using relaxation techniques, seeing humor in situations, and crying. Coping behaviors that showed the greatest decrease over time included using recreational drugs, going to a bar, and using alcohol to cope. This research demonstrated a relationship between positive coping behaviors and social support as well. A social support network was found to be a critical component in coping and adaptation. For this current population a social support system was important in identity

formation as a lesbian and was helpful in developing and using more social support oriented coping behaviors (Gillow & Davis, 1987).

Side Effects of Gay Stressors

Gay related stress can lead to psychological distress and higher accounts of mental health disorders (Meyer, 1995). A meta-analysis conducted by Meyer (2003) investigated the prevalence of mental health issues in gay men, lesbians, and bisexual individuals. He found that GLB individuals reported higher levels of mental disorders when compared to heterosexuals. Meyer (2003) suggested that minority stress, minority status, minority identity, distal minority stressors (i.e. prejudice) and proximal stressors (i.e. internalized homophobia, concealment) could be predictors for this disparity between homosexuals and heterosexuals.

Lewis, Derlega, Griffin, and Krowinski (2003) also reported that gay-related stressors are associated with psychological distress, suggesting that gay stressors and internalized homophobia impact depression in GLB individuals since being more “out” was associated with less distress (Lewis et al., 2001). Lewis et al., (2001) found that with the lesbian population specifically, stressors related to others’ misunderstanding and family issues impacted one’s openness about their sexuality.

Lewis et al., (2001) found that gay men and lesbians who reported higher levels of stress also reported more dysphoria, with the gay stressors accounting for 26-27 percent of the variance in dysphoria in lesbian and gay men. Sexual orientation conflict ($r=.38$) and HIV/AIDS concerns ($r=.36$) had the largest association with dysphoria. Results also demonstrated that lesbians and gays experience lower levels of dysphoria; less visibility stress among friends, family and public; along with less conflict about one’s sexual orientation when they participated in gay and lesbian groups. This in turn lends support that social support and relationships may act as a buffer for stress and higher levels of life satisfaction. These results support the research by Lackner et al.,

(1993) who found that participants who reported lower levels of connection to others in turn reported higher levels of global distress and depression.

Of the participants in the Lewis et al. (2001) study, those who were in relationships cited more stress related to family reaction to partners, concerns about societal misunderstanding, less stress regarding HIV/AIDS, and less sexual orientation conflict. Individuals in same-sex romantic relationships reported lower amounts of dysphoria, however these individuals had higher accounts of stress related to families' reactions to partners which is something that heterosexual individuals may not have to worry about.

Lewis et al. (2003) completed a study looking at the effects of gay stress and life stress on depression symptomology. The sample consisted of 204 individuals (110 males, 91 females, and 3 unidentified individuals). The majority of the participants were Caucasian (79%), with African Americans making 10% of the sample, Hispanic Americans consisting of 4% of the sample, and 2% were identified as Asian Americans. Seventy-three of the participants identified themselves as "exclusively homosexual", while 17.2% described themselves as "predominantly homosexual", and 6.4% identified as "bisexual". Participants ranged in age from 18-66, with the mean age being 35.8 years of age ($SD=2.56$). Over half of the participants reported being in a romantic relationship along with being active in the GLBT community at the time of completing the study. Participants completed self-report questionnaires related to gay-related stressors, life events, internalized homophobia, stigma consciousness, openness, depression, and demographic information.

No differences were found between gay males and lesbians in openness about sexual orientation, stigma consciousness, internalized homophobia, depression, gay-related stressors, or life stress. It should also be noted that there were no differences between men and women related to ethnic identity, educational level, or age (Lewis et al., 2003). Results indicated that gay-related

stress and life stress (i.e. life events) both contributed significantly to reported depression symptoms. The more severe gay-related stress and life stress that was reported in turn was related to increased depression symptoms. Life stress and gay-related stressors contributed to depression independently of one another. Both types of stress have been found to contribute to depression in previous research (Lewis et al., 2001; Meyer, 1995), but it was unsure whether they contributed independently. This study shows that gay males and lesbians experienced both life stress and gay stressors and in turn may lead to depression symptoms (Lewis et al., 2003). Gays and lesbians who reported more gay related stress also reported more depression.

Lewis et al., (2003) found that higher stigma consciousness was associated with depression, which means individuals who expect others to judge them experience more symptoms. Additionally openness about one's sexual orientation and experienced internalized homophobia were not related to depression levels. This is inconsistent with previous research findings by Meyer (1995) perhaps because most of the participants in the Lewis et al., (2003) study identified as being out and open about their sexual orientation.

Despite the studies current findings, Lewis et al., (2001) suggested that those individuals who are not as open about their sexual orientation may have additional difficulties dealing with gay stressors because they have fewer outlets and support. Lewis et al. (2001) suggested that participating in gay and/or lesbian groups minimizes reports of dysphoria; visibility stress with friends, family, and society; and less concern about one's sexual orientation. In turn participating in the gay community may act as a buffer against some experienced gay stressors.

Gay stressors may also be related to fluctuations in physical well-being. In 2000 Williamson conducted a critical review of research looking at internalized homophobia, theory and research, and the impact on lesbian and gay health. In his literature review he found research articles that suggest internalized homophobia plays a vital role in the development of illness, the

progression of illness, higher levels of distress in lesbians with breast cancer and in the decision processes required to prevent illness. Research also indicates that gay men who have kept their sexual orientation hidden had increased occurrences of cancer and other infectious diseases (i.e. bronchitis, pneumonia, and sinusitis) when compared to gay men who were out (Cole, Kemeny, Taylor, & Visscher, 1996). Williamson (2000) discusses the influence that internalized homophobia may play in HIV, specifically the relationship between internalized homophobia and riskier sexual acts and decision making. He also highlights research that discusses that internalized homophobia may be the antecedent for various psychological problems including substance abuse, eating disorders, self-harming behaviors, and suicide.

Gay Stressors, Being “Out”, and Internalized Homophobia

Deciding how open one wants to be about their sexual orientation can be a hard process to navigate for two reasons. If an individual decides to hide his or her sexual orientation of being gay or lesbian, and therefore pass as heterosexual, this can lead to negative psychological concerns because the individual has to live with multiple identities. However, if the individual chooses to disclose his/her sexual orientation and be out he or she may in turn experience negative consequences related to discrimination, rejection, and possibly physical violence.

To further evaluate the process of disclosing one's sexual orientation Herek (2003) did an extensive study evaluating the negative and positive consequence of being more open about one's sexual orientation. Herek found that “coming out” can help affirm one's identity and help integrate the self. Being openness and honesty in relationships was shown to improve gay, lesbian, or bisexual interpersonal relationships. While openness may reduce stress and physical symptoms, hiding one's sexual orientation may lead to feeling of inauthenticity, relationship strain, and psychological distress (Herek, 2003). Supporting these findings are those that suggested the more open gay males and lesbians are about their sexual orientation the less stress

they experience based on visibility concerns and sexual orientation conflict (Lewis et al., 2001). However, those individuals who are more out about their identification as a homosexual in turn experience higher accounts of stress related to society misunderstanding (i.e. lack of acceptance, and lack of rights), and stress with family issues (Lewis et al., 2001).

Day and Schoenrade (1997) also reported that disclosure about one's sexual orientation can have positive implications in the work place. Gay and lesbians who were more open about their sexual orientation were more satisfied with their job, were more committed to their organizations, and had fewer reports of work/home conflict (Day and Schoenrade, 1997). Griffith and Hebl (2002) further expanded this research by finding that higher accounts of job satisfaction were associated with one being more open. They also found that lower job anxiety was related to increased disclosures about sexual orientation.

Some of the most pivotal research exploring internalized homophobia was by Meyer (1995) and DiPlacido (1998). Meyer explored minority stress as experienced by gay men, while DiPlacido explored it within the lesbian population. Both applied the concept of minority stress when exploring internalized homophobia as it related to health related concerns. Meyer stated "minority stress arises not only from negative events from the totality of the minority person's experience in dominant society. At the centre of these experiences is the incongruence between the minority person's culture, needs, and experience, and societal structures" (Meyer, 1995, p.35).

Meyer (1995) completed a large-scale study involving 741 gay men in the New York area. Participants ranged in age from 21-76 with a mean age of 38 years. Eighty-nine percent of participants were White and most reported being strongly connected to the gay community. Eighty-five percent reported being completely or mostly "out of the closet", with 59% reporting that they were involved in at least one gay organization, and close to half of the sample (45%) were in a same-sex romantic relationships.

Meyer (1995) explored the effects of minority stressors on five measures of psychological distress including demoralization, guilt, suicide ideation and behavior, AIDS related traumatic stress response, and sex problems. He stated that these distress domains have a general or specific relationship to the three minority stress dimensions of internalized homophobia.

Results of the study showed that internalized homophobia, stigma and prejudice events contributed independently and as a group to the predicted psychological distress in gay men. Internalized homophobia contributes to all five measures of psychological distress while controlling for potential confounding variables. Results also indicated a significant relationship between stigma and experience of prejudice events to all measures of distress except sex problems. However internalized homophobia showed to the most powerful relationship with all measures of psychological distress evidenced by significantly stronger positive correlations. Meyer believed these results are generalizable to other minority groups, specifically lesbian women. However, it should be noted that lesbian women may experience minority stress as it relates to both sexual orientation and gender.

DiPlacido (1998) research involved minority stressors experienced by lesbian women and the role that internalized homophobia played in psychological functioning. A sample of 17 lesbian and bisexual women completed questionnaires looking at various stressors and health outcomes. The average age of participants was 32 with most being White (88%) and 12% ethnic or racial minorities.

Results indicated that 41% of the participants reported being “at least halfway or more in the closet”, while 71% reported that they held back from public displays of affection towards their partners. Forty one percent of participants reported that in the last month they had not discussed any gay-related topics in public settings for fear of someone knowing their sexual

orientation (DiPlacido, 1998). Results showed that there was a significant relationship between internalized homophobia and salient aspects of psychological functioning such as depression symptoms, problems with family relationships, and health related problems (DiPlacido, 1998). The percentage of time that one concealed their sexual orientation was positively related to negative affect ($r = .49, p < .05$). Depression was also found to significantly correlate with the level of disclosure about one's sexual orientation ($r = .54, p < .05$). Thus it appears that when lesbian women felt they had to hide their sexual orientation they reported more depression symptoms.

Many of the lesbian participants reported experiencing negative gay related stressors. Out of the sample, 18% of participants reported periods of time in the last year where they were disconnected from their family due to their sexual orientation; 18% had experienced verbal harassment; 77% endured someone telling an antigay joke in their presence; and 35% reported living, working, or socializing with an individual that they knew was homophobic. Despite these reports there were no significant relationships between gay related stressors and psychological or physical health outcomes (DiPlacido, 1998).

When exploring health related behaviors DiPlacido (1998) found a relationship between alcohol consumption and stress experienced due to sexual lifestyle. Specifically a positive relationship was found between reported internalized homophobia ($r = .54, p < .05$), number of instance of concealing one's sexual orientation ($r = .43, p < .06$), and general self-concealment ($r = .50, p < .05$). Amount of alcohol consumption was found to be negatively related to reported outness ($r = -.54, p < .05$).

DiPlacido (1998) further discussed how lesbians may experience multiple levels of minority stress since they are both women and homosexual, and those lesbians who are from a different minority ethnic group may experience additional stressors. Having multiple layers of

minority stress may lead the individual to experience greater effects of internalized oppression (DiPlacido, 1998). The decision, either to disclose or conceal one's sexual orientation, often leads to unique stressors, both internal and external gay related stressors. It appears that external stressors (e.g. discrimination and violence) are experienced by individuals who are more out about their sexual orientation. On the other hand concealing one's sexual orientation may lead to internal stressors such as internalized homophobia, self-concealment, and emotional inhibition (DiPlacido, 1998).

To summarize, same-sex couples often experience discrimination and stigmatization at both a relationship level, as well as an individual level. Chronic gay-related stressors also occur at both the relationship level and the individual level (Meyer, 2003). Discrimination, victimization, and internalized homophobia impact perceived stressors and mental well-being (DiPlacido, 1998; Meyer, 1995) but they can also impact the relationship quality for the same-sex couples. Most of the research on gay-related stress has been done on the individual level and the impact that it has on the individual.

Gay Stressors and the Impact on Relationship Satisfaction

Otis, Rostosky, Riggle, and Hamrin (2006) researched minority stress and its impact on perceived relationship quality for same-sex couples. They hypothesized that internalized homophobia and one's experience with minority stress would impact the level of relationship stress and perceived relationship quality. Participants over the age of 18 and who had been in their current romantic relationship for at least six months were asked to complete a web-based survey. Both partners were asked to participate in this study.

Two hundred and ninety-nine individuals (131 couples) from 28 states participated. Participants in the study included women and men. Participants identified themselves as lesbian, gay, or bisexual. Out of the female participants majority identified as lesbian (88.6% of partner A

and 85.7% of partner B). Other female participants identified as gay (4.3% and 2.9%) and bisexual (7.1% of partner A and 11.4% of partner B) (Otis et al., 2006). Majority of the female participants were White (79.7%) with a mean age of 38.7 years ($SD = 10.13$). Approximately one fifth of the female sample identified as African American or biracial. The average length of the relationship for the female participants was 7.49 years ($SD = 6.83$). Male partners were majority White (87.8%) with a mean age of 37.3 years of age ($SD = 8.96$). The average length of the relationship for male participants was 6.29 years ($SD = 5.25$). Most of the male participants identified as gay (95.7% of partner A and 95.6% of partner B) and only two individuals indicated they were bisexual (2.1%) (Otis et al., 2006). Demographic information was collected along with self report questionnaires on internalized homophobia, perceived discrimination based on sexual orientation, perceived stress experienced, and relationship quality.

Otis et al., (2006) specifically looked at the relationship between two sources of minority stress, perceived discrimination and internalized homophobia, and the impact of these two sources of stress on the perceived relationship quality. Results indicated a significant relationship between perceived stress and perceptions of relationship quality. Specifically, the individual's perception of stress was related to the individuals' own experience of internalized homophobia, along with the perceived discrimination by his/her partner. Results also showed that relationship quality was negatively related to either partner's report of internalized homophobia. These results suggest that each individual partner's experiences and feelings in turn make a contribution to the individual perceptions. The influence of the partner's experiences on the individuals' perceptions are lost when the studies look at individual impact versus couple impact.

Results further put forward that internalized homophobia impacts both the individual and the partner. Internalized homophobia as a source of stress amongst lesbian and gay male couples may lead to the individuals and couples isolating themselves from outside sources of support and thus in turn may impact the quality of the romantic relationship. When both partners experience a

high degree of internalized homophobia, they may adopt the negative majority view of their relationship into their perceived expectations about the quality of their own relationship. Without support or positive affirmation to the couple may engage in a self-filling prophecy and ultimately the end of the relationship (Otis et al., 2006).

Contrary to previous findings, perceived discrimination was not found to be a predictor of stress or perceived relationship quality. This finding may be related to the fact that in general gay and lesbian individuals experience minority stress as a continuous and long standing aspect of their social environment and only severe acts of discrimination influence stress levels and in turn the relationship quality (Meyer, 1995; Otis et al., 2006).

Mohr and Daly (2008) looked at 51 individuals (62.2% female, 37.8% male) ranging in age from 18-46 years of age ($M = 22.65$, $SD = 5.11$). Thirteen percent of the sample identified as bisexual, 82% identified as gay or lesbian, and the remaining 5% identified as 'other'. Participants completed measures pertaining to minority stress, relationship commitment, and relationship satisfaction.

The study by Mohr & Daly (2008) specifically looked at three variables related to relationship commitment in same-sex couples: relationship constraints, relationship satisfaction, and relationship attractions which were identified as determinants central to relationship stability. Kurdek (2000) described relationship attractions as the forces that draw individuals to a relationship (i.e. match to ideal standard), and the forces that can pull an individual from a relationship (i.e. alternatives to the current relationship). Relationship constraints are what keep a person from leaving the relationship (i.e. investment in the relationship). Lastly, relationship satisfaction is the individual's subjective evaluation of the relationship, on a continuum from positive to negative.

Concealing one's sexual orientation and romantic relationship may increase stress levels which may decrease the rewarding features of the romantic relationship overtime (Foster & Campbell, 2005). Some LGB individuals may decide to manage public identity to avoid prejudice and discrimination. Mohr and Daly (2008) found that concealment over time may lead to fatigue and distress in the romantic relationships and deprive individuals of social support, particularly support for stressors related to stigma.

Couples who are less "out" may receive less social support in their relationships which may decrease the couple's ability to cope with the stress and strains of their romantic relationship (Mohr & Daly, 2008). Mohr and Daly (2008) investigated the relationship between internalized homophobia and sexual orientation. Concealment leads to changes in same sex relationship quality. Previous research suggested that individuals who report high internalized homophobia have a higher likelihood of dissatisfaction in romantic relationships and more mental health concerns (Mohr & Daly, 2008). A lack of social support may cause negative consequences for the romantic relationship and how the couple functions, in turn decreasing relationship satisfaction and removing emotional barriers to dissolution.

Results suggested that internalized homophobia was associated with experiences of decreased relationship satisfaction and attractions however it was not related to changes in relationship constraints (Mohr & Daly, 2008). None of the noted results were affected when gender, race, or sexual orientation were controlled for. These results suggest that internalized homophobia may lead to relationship commitment decreasing because the extent to which the relationship and the partner are enjoyed or viewed positively has decreased due to the internalized homophobia. In the present study hiding one's sexual orientation was not related to changes in of the three relationship determinants. This supports other studies that have suggested that hiding one's sexual orientation by its self does not have a significant effect on relationship quality (Beals & Peplau, 2001). In turn, concealment of one's sexual orientation may depend on contextual

factors such others reactions to the couple's concealment and the amount of social support the couple has.

Hill (1999) looked at eight non-clinical couples who were in a relationship for a year or longer. Age of participants ranged from 21-40 years of age. Seven of the couples had never been in therapy. Four of the couples had children, while the other four did not. The eight couples participated in a semi-structured interview together looking at their participation in joint and individual activities; coming out, employment; friends; family; the lesbian and gay community; and children (Hill, 1999). These topics, except for topic of children, were derived from the study completed by Krestan and Bepko (1980).

Using grounded theory to analyze transcriptions from the interviews, three core categories were found. Two of the three categories related to participants' interactions with systems outside of their relationship, while the third category related to the factors of the romantic relationship. Categories included reactions, pressures from the wider community, and communication.

The prevalent theme of the interviews was reactions to coming out. This was divided into two categories: reactions to coming out by family members and reactions of friends. In most cases family struggled to accept the participants' sexuality; in particular mothers failed to acknowledge the disclosure of being lesbian. All participants except for one found their siblings and fathers to be supportive, and reported that most families were eventually accepting. Rejection and open conflict was found in six cases. That is, the participant's sexual orientation was rejected, as was the participant herself. Participants who experienced this rejection often rejected the family (Hill, 1999). All couples reported at least one negative experience coming out to a heterosexual friend, but reported that friends were fine with the disclosure. Women in the study

did report a decrease in social relationship after coming out but explained this was due to being in a relationship and personal choice, rather than rejection by friends (Hill, 1999).

Pressures from the wider community were also reported. The “wider community” represents social systems outside of the inner systems of the couple, children, extended family and friends (Hill, 1999). This category was subdivided into neighborhood, the gay community, school, and work. No reports of negative reactions from the gay community were reported, however participants did report feeling a lack of support at times. Most women were out in their work and college settings and experienced minimal problems (Hill, 1999). However, there were reports of feeling isolated at work but this did not create any adverse problems or pressures at home or within the romantic relationship. Couples who had children were discrete about disclosing their sexual orientation to individuals at their children’s schools. This was done as a way to protect their children from being teased or discriminated against (Hill, 1999). The last category of the study was communication within the romantic relationship. Being able to talk and communicate with one’s partner was of great importance. Having good communication was seen as a tool in minimizing conflict (Hill, 1999).

This relates to fusion in that they distance one’s self from the family and would cope by turning to the romantic relationship, but also friendships. In order to minimize rejection, participants were cautious with which friends they “came out” to. Findings from this study suggest that fusion is not a characteristic of lesbian relationships in general, but may occur in couples in therapy. Fusion and conflict may be present in a relationship when there is isolation from one’s family. This in turn creates a dependence on the relationship and creates pressures on the other partner (Hill, 1999). Lesbians appear to avoid serious problems by communicating. Hill (1999) stated that close communication within lesbian relationships and lack of differences with one another may be confused as fusion in past research studies. Having children within the relationship did not seem to impact the occurrence of fusion in the relationship (Hill, 1999).

In the 2000 article by Bepko and Johnson issues surrounding external contextual issues that may impact gay and lesbian couples in couple's therapy were addressed. They reinforced several of the key areas that this literature review has addressed and that are seen as key areas for a therapist to be aware of. The four external factors that they found to impact gay and lesbian couple's functioning were homophobia and heterosexism, gender norms, issues around coming out to others, and social support from one's family of origin or family of choice.

Bepko and Johnson (2000) explain that the homophobia and the heterosexual majority view can place strain on gay and lesbian romantic relationships. Thus prejudice may prevent some gay and lesbian individuals from even forming romantic relationships with people whom they are attracted to. The threat these individuals may feel may lead to limited public displays of affection. Threats often arise with the more visible one is about their sexual orientation, which opens the avenues of harassment and threat to physical or sexual harm. Job security and civil rights issues are additional concerns.

When exploring the impact of gender norms on gay and lesbian relationships Bepko and Johnson (2000) focused on stereotypic attitudes towards these individuals. The most common stereotype is that lesbian women must be like men and that gay men must be like women. This stereotype leads to the assumption that in gay and lesbian relationships there must be one person who plays a female role while the other plays an opposite role. This is a common mistake of straight therapists, assuming there must be heterosexual-like role enactments in satisfying homosexual relationships (Bepko & Johnson, 2000).

The third external influence on gay and lesbian relationships is disclosure to self and others about one's sexual orientation. Bepko and Johnson (2000) explain that integrating one's identity of being lesbian or gay is an important issue in the couples' relationship, specifically if the partners are at different levels of outness and self-acceptance. Coming out enables an

individual to fully enter into a committed romantic relationship with a member of the same sex. Bepko and Johnson (2000) also note that coming out about one's sexual orientation changes the self as it relates to family of origin, relationships with friends, and other societal institutions (i.e. work, religious, legal, and medical institutions). Coming out to one's family is very important because hiding one's sexual orientation from family can cause problems in the romantic relationship and in the individual (Bepko & Johnson, 2000).

Lastly, the authors discuss how gay and lesbian individuals often feel a pull between their romantic relationship and their loyalty to family. How "out" one is to family may impact the romantic relationship and the level of involvement that the partner plays in their family rituals. This balancing act can lead to distancing and defensiveness of oneself from family relationships. Partners may either distance themselves from their romantic relationship out of loyalty to their family of origin, or separate from their families in order to engage in their romantic relationship. Bepko and Johnson (2000) stress the importance of the coming out process in couple's therapy. They also note that gay and lesbian individuals may find belonging and support from their "chosen family", meaning individuals may include non-biological individuals as family members. It is important to acknowledge this in the couple's therapy as well.

Gay Stressors and Social Support

Social support has been related to individual's physical and mental well-being (Blumstein & Schwartz, 1983). Friends and family appear to be sources of support for individuals and their romantic relationships. Support from family can take many forms including but not limited to financial support, being there for support during emergencies, and taking care of one another during a time of illness. Friends provide support in other ways including providing emotional support, providing love, advice, and support during life transitions, social contact, and provide a sense of belonging (Kurdek & Schmitt, 1987).

There is conflicting data on the topic of higher accounts of depression in lesbian women. Research has shown there is a relationship between depression and levels of social support. Ayala and Coleman (2000) completed a study looking at how social support from friends, social support from family, sexual orientation disclosure, and involvement in a relationship may impact and contribute to the development of depression amongst lesbian women. One hundred and seventeen self identified lesbians completed survey packages that included four self-report measures designed to evaluate level of depression, social support from friends, social support from family, sexual orientation disclosure, and relationship involvement. Demographic information was also collected.

Participants in this study mostly identified as Caucasian (91%). Most of the participants ranged in age from 20 to 49 years of age (93%). The largest age group of participants was between 30-39 years of age. Thirty percent of participants were parents and 69% were in relationships at the time of the study. Thirty five percent of the sample were open to “some” or “very few people”, while almost two thirds (64%) of the sample were open to “most people” or “everyone” about their sexual orientation (Ayala & Coleman, 2000).

Findings of this study suggested that approximately 30% of the sample might be experiencing clinically significant depression. Participants reported high reports of social support from friends and moderate levels of support from family. Results showed that the report of support from friends was significantly higher than reports of support from family (Ayala & Coleman, 2000). Majority of participants were in a current romantic relationship and had a moderate to high level of disclosure. Results also showed that the four measures being evaluated were significantly related to depression. Lower levels of depression were related to higher reports of support from friends, support from family, disclosure about sexual orientation, and being involved in a relationship (Ayala & Coleman, 2000).

Research has shown that lesbian women may be at a greater risk for depression than their heterosexual counterparts (Ayala & Coleman, 2000; Rothblum, 1990). Kurdek and Schmitt (1987) report that lesbians receive less social support from their families when compared to heterosexual women because of heterosexism and the stigma related to their sexual orientation. On the other hand, gay and lesbian individual's perception of lower levels of social support from family than friends did "not appear to jeopardize psychological adjustment" (Kurdek & Schmitt, 1987, p. 66). Rothblum (1990) reports that lesbians who are closeted, have a lack of involvement in a relationship, recent termination of a relationship, lack of employment and living in a rural area may be at risk for depression. In both lesbian and heterosexual women populations, involvement in a relationship, being employed, and living in a city can be protective factors against depression. With partners being a primary support system for individuals in relationships, the separation or termination of a relationship may put lesbian women at risk for depression (Rothblum, 1990).

Kurdek and Schmitt (1987) researched perceived emotional support from friends and family in homosexual, married, and heterosexual cohabiting relationships. They found it important to explore the differences in types of relationships because homosexual couples may receive little support from their families due to the stigma related to their sexual orientation (Blumstein & Schwartz, 1983). They also stressed the importance of exploring homosexual and heterosexual perceptions of emotional support from friends and family and how support impacted their sex-role self-concept and psychopathology. Additionally, the researchers examined the difference between partners' perceptions of emotional support from friends and family.

Participants included 44 married, 35 heterosexual cohabiting, 50 male homosexual, and 56 female homosexual couples (Kurdek & Schmitt, 1987). All participants lived together, reported no children living with them, and described their relationships as monogamous. All

participants completed identical sets of self-report questionnaire on demographic information, sex-role self-concept, emotional support, and psychopathology (Kurdek & Schmitt, 1987).

Both individuals and couples in homosexual relationships reported less perceived familial support than in married heterosexual relationships. Similar to other findings, being in a homosexual relationship may in turn jeopardize family support (Blumstein & Schwartz, 1983; Kurdek & Schmitt, 1987). Both individual and couples scores indicated that for homosexuals, friends rather than family are important providers of emotional support. Regarding sex-role self-concept, individuals who scored as androgynous individuals perceived higher amounts of emotional support from friends and family members than individuals who were undifferentiated in their sex-role concept.

Additionally individuals with higher degrees of emotional support from friends evidenced fewer psychopathology symptoms whether across married couples, cohabitating heterosexual couples, and male or female homosexual couples (Kurdek & Schmitt 1987). Kurdek & Schmitt suggest caution when interpreting this later finding because overall their sample consisted of well adjusted individuals who were satisfied with their relationships. Lastly, when looking at differences in couples' perceptions of emotional support the only type of couple that showed differences in emotional support perceptions were married heterosexual couples. Wives reported a higher degree of emotional support from friends and family than husbands. This finding may be related to gender-related role differences (Kurdek & Schmitt, 1987).

Kurdek & Schmitt (1987) reported that perceived social support from family, sexual orientation disclosure, and relationship involvement accounted for 36% of the variability in depression levels. This finding is significant because all four variables could potentially influence the rate at which depression occurs in lesbians women. This finding also helps support the notion

that lesbian women encounter unique factors that impact them differently from heterosexual women.

The conflicting result between Kurdek & Schmitt (1987) and Ayala and Coleman (2000) could be related to the fact that Ayala and Coleman were specifically evaluating the occurrence of depression, while Kurdek & Schmitt (1987) were evaluating overall psychological well being.

Gay Stressors and Reported Distress

Research has supported that gay and lesbian individuals experience stressors unique to their workplace, family, and their relationships with partners and friends. Finding interventions to help minimize and cope with such stressors is critical. Expressive writing has been shown to help minimize psychological and physical symptoms in varied populations. Lewis, Derlega, Clarke, Kuang, Jacobs, and McElligott (2005) applied expressive writing interventions to help lesbians cope with gay related stressors they may be experiencing. Using the expressive writing model developed by Pennebaker (Pennebaker and Beall, 1986) to focus on lesbian-related stress. They specifically investigated whether expressive writing techniques improved the well-being of lesbian participants. They explored both psychological well-being (i.e. measures of perceived stress and mood) and physical well-being (i.e. upper respiratory symptoms) (Lewis et al., 2005).

Participants included 76 lesbians who were randomly assigned to an expressive writing or control group condition. Participants had to be at least 18 years or older and were awarded \$100.00 for completing the study. Mean age of participants was 37.14 years ($SD = 12.08$) of age, with participants ranging from 18 to 75. Seventy percent of the participants reported being in a relationship and 66% were part of at least one lesbian organization. The sample consisted primarily of European American (79%) and African American (17%) participants. The mean number of years in which participants reported being “out” was 12.32 ($SD = 10.89$) (Lewis et al., 2005). Participants were administered self-report measures evaluating current mood states,

perceived stressors, level of outness, demographic information, assessment of upper respiratory symptoms, and a postwriting questionnaire. Participants were then randomly assigned to either an expressive writing condition or the control condition after the completion of the initial self-report measures.

Participants in the expressive writing condition were asked to “write about traumatic experiences and/or recurring problems related to their sexual orientation” (Lewis et al., 2005, p. 153). Participants in the control condition were “given general instructions to write about different topics related to their daily activities” (Lewis et al., 2005, p. 153).

Lewis et al., (2005) predicted that level of outness would moderate the effects of the expressive writing. They found that there was an interaction between outness and a scale on the mood measure and perceived stress. In the control group, outness was not found to be related with change from pretesting and follow-up. However, individuals in the expressive writing group showed results that suggested outness was related to change that occurred during pretesting and the study follow-up. Specifically, those individual who were less open reported lower accounts of confusion and perceived stress over time; however lesbians who were more open about their sexual orientation reported more distress at follow-up (Lewis et al., 2005). There was no relationship between outness, writing condition, and changes in upper respiratory symptoms.

In the Lewis et al. (2005) study it appears that expressive writing did not appear to be helpful to lesbians who were more open about their sexual orientation. They in fact reported higher accounts of confusion and distress at the follow-up but this may be due to these lesbians experiencing different kinds of stressors from those lesbians who are not out. They may experience violence, discrimination, and rejection and in several contexts including work, family, and friends and with greater severity. Lewis et al. (2005) found that these results offered a promising approach to assist lesbians in dealing with gay related stressors. It appears that

expressive writing helped reduce perceived stress and confusion for lesbians who were in fact less open about their sexual orientation.

APPENDIX B:

TABLES

Table 1

Sample Demographics

Characteristic	N	Percentage
Age Category		
25-30 years	62	24.1
31-35 years	45	17.5
36-40 years	26	10.1
41-45 years	31	12.1
46-50 years	33	12.8
51-55 years	28	10.9
56-60 years	13	5.1
61-65 years	11	4.3
66-70 years	2	.8
Over 70 years	2	.8
Race		
White	225	87.5
African American/Black	14	5.4
Asian/ Asian American	3	1.2
Native American/ American Indian/Alaska Native	9	3.5
Hispanic/Latina(o)	10	3.9
Native Hawaiian/ Other Pacific Islander	2	.8
Other	4	1.6
Highest Level of Education		
High School Diploma	4	1.6
GED	1	.4
Some College	24	9.3
Vocational Degree	5	1.9
Associated Degree	11	4.3
Bachelors Degree	63	24.5
Masters Degree	100	38.9
Doctoral Degree	34	13.2
Professional Degree	11	4.3
Income		
Less than \$10,000	6	2.3
\$10,000-\$19,000	19	7.4
\$20,000-\$39,999	38	14.8
\$40,000-\$59,999	44	17.4
\$60,000-\$79,999	43	16.7
\$80,000-\$99,999	26	10.1
\$100,000-\$149,999	50	19.5
\$150,000 or more	27	10.5

Table 2

Summary of Intercorrelations between DSI-R and SOSS Measures and Subscales

Variables	1	2	3	4	5	6	7	8	9	10	11	12
1. DSI-R	4.19 (.663)	.804**	.674**	.859**	.724**	-.288**	-.393**	-.359**	-.357**	-.377**	-.107	-.418**
2. FO Sub	3.96 (.865)	.321**	.675**	.412**	.126	-.269**	-.282**	-.235**	-.239**	-.239**	-.023	-.303**
3. EC Sub	4.80 (.795)	.439**	.330**	.330**	-.225**	-.308**	-.318**	-.213**	.307**	.307**	-.121	-.379**
4. ER Sub	3.39 (.892)	.491**	-.285**	-.373**	-.291**	-.237**	-.291**	-.256**	.098	.098	-.326**	-.266**
5. IP Sub	4.27 (.808)	.210**	.550**	.493**	.507**	.432**	.347**	.347**	.347**	.347**	.347**	.347**
6. SOSS	1.89 (1.15)	.567**	.567**	.567**	.567**	.567**	.567**	.567**	.567**	.567**	.567**	.567**
7. SOSSFR	1.84 (1.20)	.277**	.230**	.038	.428**	.428**	.428**	.428**	.428**	.428**	.428**	.428**
8. SOSSFRP	1.96 (1.01)	.490**	.197**	.411**	.411**	.411**	.411**	.411**	.411**	.411**	.411**	.411**
9. SOSSVFF	1.57 (.953)	.394**	.446**	.446**	.446**	.446**	.446**	.446**	.446**	.446**	.446**	.446**
10. SOSSVWP	1.34 (1.40)	.272**	.272**	.272**	.272**	.272**	.272**	.272**	.272**	.272**	.272**	.272**
11. SOSSGD	1.28 (1.14)	.128	.128	.128	.128	.128	.128	.128	.128	.128	.128	.128
12. SOSSOC												

Note: Means (and standard deviations) for continuous variables are presented along the diagonal, with bivariate correlations entered as off-diagonal elements. DSI-R= DSI total score, FO sub= Fusion with other subscale, EC Sub= Emotional Cutoff subscale, ER Sub= Emotional Reaction subscale, IP Sub= "I" Position subscale, SOSS= total gay stressors, SOSSFR= Family Reaction subscale, SOSSFRP= Family Reaction to Partner subscale, SOSSVFF= Visibility with Family and Friends subscale, SOSSVWP= Visibility with Work and Public subscale, SOSSGD= General Discrimination subscale, and SOSSOC= Sexual Orientation Conflict subscale.

* $p \leq .05$, ** $p \leq .01$.

Table 3

Summary of Correlations between Demographic variables and the DSI-R and SOSS Subscales

Variables	DSI-R	FO	EC	ER	IP	SOSS FR	SOSS FRP	SOSS VFF	SOSS VWP	SOSS GD	SOSS SOC
1. Years "Out"	.367**	.349**	.297**	.258**	.218**	-.335**	-.285**	-.131	-.169*	.040	-.271**
2. Years Coh	.245**	.263**	.188*	.209*	.120	-.239**	-.059	-.094	-.008	-.011	-.114
3. Years Rel	.185**	.164*	.186*	.130	.105	-.194**	-.010	-.084	.002	-.041	-.103

Note: DSI-R= Differentiation of self total score, FO sub= Fusion with other subscale, EC Sub= Emotional Cutoff subscale, ER Sub= Emotional Reaction subscale, IP Sub= "I" Position subscale, SOSSFR= Family Reaction subscale, SOSSFRP= Family Reaction to Partner subscale, SOSSVFF= Visibility with Family and Friends subscale, SOSSVWP= Visibility with Work and Public subscale, SOSSGD= General Discrimination subscale, and SOSSSOC= Sexual Orientation Conflict subscale. Years "Out"= number of years "out", Years Coh= length of time cohabitating in years, Years Rel= length of current relationship in years.

* $p \leq .05$, ** $p \leq .01$.

Table 4

Summary of Standard Multiple Regression Analysis for Variables Predicting Fusion with Others

Variable	B	Std. Error	β	t	Sig.	Partial	Part
SOSSFR	-.122	.067	-.170	-1.82	.070	-.137	-.127
SOSSFRP	-.071	.054	-.104	-1.32	.189	-.100	-.091
SOSSVFF	.026	.075	.032	.351	.726	.027	.024
SOSSVWP	-.168	.079	-.197	-2.14	.034	-.160	-.148
SOSSGD	.091	.046	.157	1.98	.050	.149	.137
SOSSSOC	-.110	.060	-.153	-1.83	.069	-.138	-.127

Note: Overall Multiple Regression, $R^2 = .167$, $F(6, 173) = 5.793$, $p < .000$. SOSSFR= Family Reaction subscale, SOSSFRP= Family Reaction to Partner subscale, SOSSVFF= Visibility with Family and Friends subscale, SOSSVWP= Visibility with Work and Public subscale, SOSSGD= General Discrimination subscale, and SOSSSOC= Sexual Orientation Conflict subscale

Table 5

Summary of Standard Multiple Regression Analysis for Variables Predicting Total Differentiation of Self

Variable	B	Std. Error	β	t	Sig.	Partial	Part
SOSSFR	-.116	.049	-.202	-2.350	.002	-.178	-.152
SOSSFRP	-.066	.040	-.123	-1.675	.096	-.128	-.108
SOSSVFF	-.017	.055	-.027	-.310	.757	-.024	-.020
SOSSVWP	-.160	.058	-.234	-2.761	.006	-.208	-.179
SOSSGD	.050	.034	.107	1.455	.147	.112	.094
SOSSSOC	-.120	.045	-.205	-2.659	.009	-.201	-.172

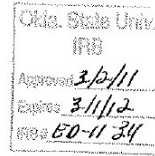
Note: Overall Multiple Regression, $R^2 = .297$, $F(6, 168) = 11.849$, $p < .000$. SOSSFR= Family Reaction subscale, SOSSFRP= Family Reaction to Partner subscale, SOSSVFF= Visibility with Family and Friends subscale, SOSSVWP= Visibility with Work and Public subscale, SOSSGD= General Discrimination subscale, and SOSSSOC= Sexual Orientation Conflict subscale

Table 6

Frequency and Means of Items Endorsed on Sexual Orientation Stressors Scale (SOSS; Lewis et al., 2001)

Item #	N	M	SD	Item #	N	M	SD
1	200	1.54	1.43	36	191	.34	1.01
2	192	.85	1.37	37	194	1.26	1.35
3	194	.09	.39	38	191	.06	.36
4	192	.79	1.31	39	191	.26	.73
5	192	.47	.97	40	191	.28	.78
6	202	1.13	1.31	41	205	2.69	1.31
7	193	.56	1.20	42	191	.19	.58
8	196	1.13	1.26	43	197	1.51	1.31
9	192	.55	1.08	44	193	.88	1.51
10	191	.09	.44	45	192	.98	1.40
11	205	2.25	1.31	46	193	1.35	1.63
12	197	1.13	1.35	47	192	1.02	1.54
13	206	2.16	1.44	48	191	1.00	1.57
14	195	.97	1.19	49	204	1.53	1.36
15	195	1.10	1.31	50	197	.83	1.25
16	191	.16	.53	51	204	1.20	1.29
17	192	.51	.92	52	207	.96	1.26
18	193	.47	.90	53	193	1.05	1.41
19	191	.02	.28	54	193	1.54	1.69
20	197	1.02	1.24	55	197	1.32	1.45
21	193	.75	1.13	56	194	1.65	1.66
22	196	1.20	1.34	57	192	.53	1.29
23	195	1.32	1.45	58	195	1.34	1.53
24	192	.95	1.32	59	192	.94	1.34
25	198	1.10	1.37	60	208	.62	.92
26	197	.73	1.13	61	205	1.80	1.36
27	196	1.19	1.52	62	196	1.70	1.52
28	194	1.11	1.48	63	193	1.08	1.47
29	199	2.3	1.55	64	193	.86	1.30
30	192	.92	1.25	65	195	.93	1.31
31	191	.26	.66	66	208	1.55	1.26
32	191	1.08	1.59	67	204	1.28	1.32
33	192	.79	1.35	68	203	.50	.92
34	192	.67	1.29	69	206	1.05	1.23
35	198	1.16	1.47	70	200	1.82	1.41

APPENDIX C:
RESEARCH STUDY MATERIALS
INFORMED CONSENT



PARTICIPATION INFORMATION SHEET- ON-LINE SURVEY

Project Title: Fusion in Lesbian Relationships: The Relationship Between Differentiation of Self and Gay Stressors

Investigator(s): Meladee Garst, M.S., Oklahoma State University and Barbara Carlozzi, Ph.D., Oklahoma State University

Purpose: This is a web-based study to evaluate the relationship between personal characteristics and gay stressors experienced by lesbian women. You are being asked to participate in the research study because you are a female who identifies as lesbian and is currently in a same-sex relationship. If you chose to participate, you will be asked to answer questions about your experiences with gay stressors, and characteristics about your interactions in relationships. The results of this research will expand our knowledge of the gay stressors experienced by lesbians and how these stressors relate to intrapsychic with others.

Procedures: Proceeding with the web-based survey will imply your consent to participate in this research study. If you decide to participate you will be asked to provide some demographic information such as your age, race, ethnicity, employment, education, and information regarding your romantic relationships. You will then be asked to complete two self-report instruments. The first self-report questionnaire will ask you questions regarding personal characteristics and how you interact in relationships with others. The second questionnaire will ask about your experiences with different stressors. The survey should take approximately 30 minutes to complete.

Risks of Participation: There are no foreseeable risks with this project, including stress, psychological, social, physical, or legal risks which are greater than those encountered in daily life. It is possible that some of the questions on the survey may strike you as strange or unusual, along with asking questions about personal issues which may trigger an unfavorable emotional response. However, we believe that any discomfort that may be experienced will be minimal and that there are no costs in your decision to participate in this survey. If you begin to experience discomfort or stress you may discontinue your participation at any time.

Benefits of Participation: While it is unlikely that you will derive personal benefits from your participation, your completion of the survey will be helpful in gaining a better understanding of the relationship between the interpersonal interactions and intrapsychic characteristics and gay stressors experienced by lesbian women. If you decide to participate, you will be helping to increase awareness and research support in this area, and in turn assist in the field of psychology.

Confidentiality: All information collected in this research study is anonymous and will remain confidential and will not be released, except as group data. Research records will be stored in Willard Hall office 416 securely on a locked computer and only the primary researchers will have access to the records. Your participation in the survey is completely voluntary. Questionnaires and record forms will have identification numbers, rather than names, on them. Participant's responses from the online research study, which will be taken through Survey Monkey, will then be transferred to an Excel spreadsheet where each participant will be given an

identification number. As a consequence, your anonymity will be maintained and we hope that you will free to complete the survey in an open and conscientious manner. Because the survey is focused on the adult lesbian population, you must be **at least 25 years of age to participate and be in a same-sex relationship of at least a one-year duration**. Again, the records of this research study will have no names attached either during data collection or after. The data will be stored securely on a computer for a maximum five years and only the principal investigator and her advisor will have access to your survey responses. It is possible that the consent process and data collection will be observed by research oversight staff responsible for safeguarding the rights and wellbeing of people who participate in research.

Participant Rights: Your decision to participate or not participate in this research study is completely voluntary and you may decide to withdraw your consent to participate at any time. There will be no penalty for withdrawing or not participating in this study.

This research study is part of a requirement for the primary researcher's completion of her Ph.D. as a doctoral student at Oklahoma State University. Your participation in this research study is greatly appreciated. If you have any questions concerning this study, please feel free to contact the primary researcher, Meladec Garst, M.S., at meladec.garst@okstate.edu or her advisor, Barbara Carlozzi, Ph.D., at barb.carlozzi@okstate.edu.

If you have questions about your rights as a research volunteer, you may contact Dr. Shelia Kennison, IRB Chair, 219 Cordell North, Stillwater, OK 74078, (405) 744-3377 or irb@okstate.edu.

Consent Documentation: Your completion of the research study will be taken as an indication of your consent to participate in the research. The research study itself consists of three parts. Each of the three parts has its own instructions. Please carefully read the separate instruction to each of the three parts before responding to them.



RECRUITMENT SCRIPT

Recruitment Script

(provided in-person, via email or Facebook)

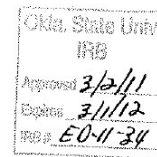
Hello, everyone! My name is Meladee Garst a 3rd year doctoral student in the Counseling Psychology PhD program at Oklahoma State University. I am currently conducting a research project for my dissertation exploring personality characteristics and stressors experienced by lesbians in romantic relationships.

If you are a female over the age of 25 and currently involved in a committed same-sex romantic relationship for at least one year, I would like to encourage you to participate in this study by completing an online survey at web address to study inserted here which should take approximately 30 minutes to complete. The records of this study will have no names attached either during data collection or after, as each participant will be given an identification number. The data will be stored securely on a computer for no more than five years and the principle researcher and her advisor will have access to your survey responses. It is possible that the consent process and data collection will be observed by research oversight staff responsible for safeguarding the rights and wellbeing of people who participate in research.

Upon completion of the survey feel free to forward this survey on to other interested participants that meet the appropriate criteria. Thank you for your participation and willingness to participate in this study.

Please feel free to ask any questions you may have. If you have any questions concerning this study, please feel free to contact the primary researcher, Meladee Garst, M.S., at meladee.garst@okstate.edu or her advisor, Barbara Carlozzi, Ph.D., at barb.carlozzi@okstate.edu.

Thank you for your time and help!



DEMOGRAPHIC SHEET

Directions: Please answer each question by checking or filling in the blank that best describes you.

- 1) How old are you? ☐ 25-30 ☐ 31-35 ☐ 36-40 ☐ 41-45 ☐ 46-50 ☐ 51-55

 ☐ 56-60 ☐ 60-65 ☐ 65-70 ☐ over 70

- 2) Race (Check all that apply):

☐ African American/Black ☐ Hispanic/Latino(a) ☐ Asian/Asian American
☐ White ☐ American Indian/Native American/ Alaska Native
☐ Native Hawaiian/ Other Pacifica Islande ☐ Other (Describe): _____

- 3) Ethnicity:

☐ Hispanic or Latino ☐ Not Hispanic or Latino

- 4) Are you:

☐ Employed ☐ Unemployed ☐ Student ☐ Homemaker
☐ Disabled/unable to work ☐ Laid Off ☐ Part-time ☐ Retired

- 5) Please indicate your highest level of education:

☐ High School Diploma ☐ GED ☐ Some College ☐ Vocational Degree

☐ Associates Degree ☐ Bachelors Degree ☐ Masters Degree ☐ Doctoral Degree

☐ Professional Degree

- 6) What is your total household income?

☐ Less than \$10,000 ☐ \$10,000 to \$19,999 ☐ \$20,000 to \$39,999

____\$40,000 to \$59,999 ____\$60,000 to \$79,999 ____\$80,000 to \$99,999

____\$100,000 to \$149,999 ____\$150,000 or more

7) What, if any, is your religious preference?

____ Protestant ____ Fundamentalist Protestant ____ Catholic ____ Jewish ____ Christian

____ Muslim ____ Buddhist ____ Hindu ____ Agnostic ____ Atheist

____ No Preference ____ No Reply

8) Which of the following best describes the population size of the area you live in?

____ below 15,000 ____ 15,000-30,000 ____ 30,000-50,000 ____ 50,000-100,000

____ 100,000-150,000 ____ 150,000-200,000 ____ 200,000-250,000 ____ 250,000-300,000

____ 300,000-400,000 ____ 400,000-500,000 ____ 500,000-1,000,000

____ 1,000,000-1,500,000 ____ 1,500,000-2,000,000 ____ 2,000,000-2,500,000

____ 2,500,000-3,000,000 ____ 3,000,000-3,500,000 ____ 3,500,000-4,000,000

____ 4,000,000-4,500,000 ____ 4,500,000-5,000,000

9) How long have you been out about your identification as a lesbian? If you are not out about your sexual orientation please mark "Not Out".

____ (please indicate number of years) ____ "Not Out"

10) Please indicate the length of time you have been in your current relationship?

____ (please write the length of time)

11) Please indicate your partner's age?

____ Number of Years

12) How many same-sex romantic relationships have you been in?

____ 1 ____ 2 ____ 3-5 ____ 6-8 ____ 8 or more

13) Please indicate how many of your previous romantic same-sex relationships have lasted according to the following length of time categories.

____ 1 to 3 years ____ 3 to 5 years ____ 5 to 7 years ____ 7 or more years

14) Are you and your partner currently cohabitating?

____ Yes ____ No (If you indicated Yes please indicate for how long) ____

15) Do you or your partner have any children?

____ Yes ____ No (If you indicated Yes, please list how many) ____

16) How many children currently live in your household?

____ (please indicate number of children)

____ (number of other individuals that live in the household i.e. friends, other relatives, etc)

17) Are you currently active in the GLBT community (i.e. participating in local PRIDE events, activism in your community regarding GLBT issues, GLBT social scene, etc)?

____ Yes ____ No

18) Please indicate your level of current acceptance in the following areas on a scale of 1 (**not at all supported**) to 7 (**very supported**).

____ Current Work Environment ____ Residential Community ____ Family ____ Friends

____ GLBT Community

APPENDIX D:
INSTITUTIONAL REVIEW BOARD APPROVAL

Oklahoma State University Institutional Review Board

Date: Wednesday, March 02, 2011
IRB Application No ED1134
Proposal Title: Fusion in Lesbian Relationships: The Relationship Between Differentiation of Self and Gay Stressors

Reviewed and
Processed as: Exempt

Status Recommended by Reviewer(s): Approved Protocol Expires: 3/1/2012

Principal
Investigator(s):

Meladee Garst	Barbara Carlozzi
122 W. Husband Ct.	416 Willard
Stillwater, OK 74074	Stillwater, OK 74078

The IRB application referenced above has been approved. It is the judgment of the reviewers that the rights and welfare of individuals who may be asked to participate in this study will be respected, and that the research will be conducted in a manner consistent with the IRB requirements as outlined in section 45 CFR 46.

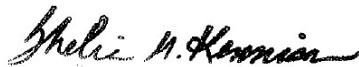
☒ The final versions of any printed recruitment, consent and assent documents bearing the IRB approval stamp are attached to this letter. These are the versions that must be used during the study.

As Principal Investigator, it is your responsibility to do the following:

1. Conduct this study exactly as it has been approved. Any modifications to the research protocol must be submitted with the appropriate signatures for IRB approval.
2. Submit a request for continuation if the study extends beyond the approval period of one calendar year. This continuation must receive IRB review and approval before the research can continue.
3. Report any adverse events to the IRB Chair promptly. Adverse events are those which are unanticipated and impact the subjects during the course of this research; and
4. Notify the IRB office in writing when your research project is complete.

Please note that approved protocols are subject to monitoring by the IRB and that the IRB office has the authority to inspect research records associated with this protocol at any time. If you have questions about the IRB procedures or need any assistance from the Board, please contact Beth McTernan in 219 Cordell North (phone: 405-744-5700, beth.mcternan@okstate.edu).

Sincerely,



Shelia Kennison, Chair
Institutional Review Board

VITA

Meladee LaNay Garst

Candidate for the Degree of

Doctor of Philosophy

Thesis: FUSION IN LESBIAN RELATIONSHIPS: THE RELATIONSHIP BETWEEN
DIFFERENTIATION OF SELF AND GAY STRESSORS

Major Field: Educational Psychology

Biographical:

Education:

- Completed the requirements for the Doctor of Philosophy in Educational Psychology at Oklahoma State University, Stillwater, Oklahoma in July, 2012.
- Completed the requirements for the Master of Science in Educational Psychology at Oklahoma State University, Stillwater, Oklahoma in July, 2008.
- Completed the requirements for the Bachelor of Arts in Psychology at Wichita State University, Wichita, Kansas in May, 2007.

Experience:

- Pre-doctoral Psychology Intern, Nebraska Internship Consortium in Professional Psychology at the University of Nebraska Lincoln Counseling and Psychological Services (APA-Accredited Psychology Internship Program), Lincoln, Nebraska, August 2011 to July 2012.
- Assistant to the Director, Oklahoma State University Counseling Psychology Program, June 2009 to May 2011.
- Practicum Counselor, Associated Therapeutic Services, Enid, Oklahoma, June 2009 to December 2010.
- Practicum Counselor, Oklahoma State University Student Counseling Center, Stillwater, Oklahoma, August 2008 to May 2009.
- Practicum student, Oklahoma State University Counseling Psychology Clinic, Stillwater, Oklahoma, August 2007 to May 2008.

Professional Memberships:

- Divisions 44 and 17: American Psychological Association; American Psychological Association of Graduate Students; Southwestern Psychological Association; APA Division 17 Section of LGBTIC

Name: Meladee LaNay Garst

Date of Degree: July 2012

Institution: Oklahoma State University

Location: Stillwater, Oklahoma

Title of Study: FUSION IN LESBIAN RELATIONSHIPS: THE RELATIONSHIP
BETWEEN DIFFERENTIATION OF SELF AND GAY STRESSORS

Pages in Study: 110

Candidate for the Degree of Doctor of Philosophy

Major Field: Educational Psychology

Scope and Method of Study: The purpose of this study was to investigate relationship between differentiation of self and gay stressors in a lesbian population. The sample of lesbian women, over the age of 25, and currently in a same-sex relationship of at least one year's duration completed a demographic form, the Differentiation of Self Inventory-Revised (DSI-R), and the Sexual Orientation Stressors Scale (SOSS). Data were analyzed using multiple regression and correlational techniques.

Findings and Conclusions: A significant relationship was found between differentiation of self and reported gay stressors. Lesbians reporting higher levels of differentiation reported fewer gay stressors. Three out of the four DSI-R subscales were significantly and negatively correlated with gay stressors. The subscales for taking the "I" position, emotional cutoff, and emotional reaction all had small to medium effect sizes. The fusion with others subscale was not significantly correlated with gay stressors. Correlational analyses indicated a significant positive relationship between years being "out" and differentiation of self and the four DSI-R subscales. Significant negative correlations were found between years being "out" and the following gay stressors subscales: visibility with work and public, sexual orientation conflict, family reaction to sexual orientation, and family reaction to partner. There was a non-significant relationship between years being "out" and total gay stressors. Multiple regression analyses results indicated that the predictor set of family reaction to sexual orientation, family reaction to partner, visibility to family and friends, visibility to work and public, general discrimination, and sexual orientation conflict were significantly related to both the fusion with others subscale and differentiation of self. This predictor set accounted for approximately 17% of the variance in fusion with others, while accounting for approximately 30% of the variance in differentiation of self. When predictors were examined individually specific types of gay stressors were related to differentiation of self and fusion with others subscale, specifically general discrimination was found to have a significant positive regression weight with the fusion with others subscale; the predictor of visibility with work and public subscale had a significant negative regression weight; the family reaction to sexual orientation subscale, the visibility with work and public subscale, and the sexual orientation conflict subscales all had significant negative regression weights with differentiation of self.

ADVISER'S APPROVAL: Dr. Barbara Carlozzi
