

**THE RELATIONSHIP BETWEEN GENDER ROLE CONFLICT,  
PSYCHOLOGICAL DISTRESS, AND ATTITUDES AND INTENTIONS  
TOWARD SEEKING PSYCHOLOGICAL HELP IN  
DIVORCED GAY FATHERS**

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# The Relationship Between Gender Role Conflict, Psychological Distress, and Attitudes and Intentions Toward Seeking Psychological Help in Divorced Gay Fathers

James E. Mudd

## ABSTRACT

The purpose of the study was to explore the statistical relationships among selected variables related to gay divorced fathers in order to develop a better understanding of their gender role conflict and help-seeking behaviors. Participants ( $N=105$ ) self-identified as Caucasian (91%), resided in the United States (90%), holding a bachelor's degree or higher (80%), and annual incomes of less than \$80,000 (52%). The men ranged in age from 29 to 78 ( $M= 54$ ), married from 1 to 38 years ( $M= 18$ ), and divorced from 5 months to just under 37 years ( $M= 10$ ). Participants completed an on-line questionnaire that included (a) *Gender Role Conflict Scale*, (b) *Attitudes Toward Seeking Professional Psychological Help Scale*, (c) *Intentions to Seeking Counseling Inventory*, (d) *Hopkins Symptom Checklist*, (e) two open-ended prompts, and (f) demographic questions. Participants who had received mental health services in the past were asked to report on what prompted them to seek services and the helpfulness of those services.

Analysis of Pearson  $r$  was used to answer each of the research questions related to (a) GRC and psychological distress (positive correlation); (b) GRC and attitudes and intentions towards seeking psychological help (negative correlation); and (c) years married and psychological distress (negative correlation). Significance was not identified between time since divorce and any other variable. Over 80% of the participants had used mental health services with the three main reasons being coming-out, depression, and sexual identity. The most beneficial resources they had available to them and/or they would recommend to others were support groups, counseling/therapy, and general support. Findings are limited by a lack of cultural and ethnic diversity among the sample.

Implications include using group counseling methods and/or a coaching model for service delivery. An informed integrated approach that focuses on systems, role development, and strategic thinking is recommended. Interventions should include depression and suicide assessments, brief solution focused methods, narrative work, social networking, and community resource guides. Future research should seek to determine between group differences with

regard to the impact GRC has on one's ability to adjust to change, establish and maintain relationships, and willingness to seek help.

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## CHAPTER I

### INTRODUCTION

The increasing interest in the psychology of men has led to a more solidified understanding of the help-seeking behaviors and mental health needs they demonstrate. Male gender studies reflect the changing views on masculinity that includes the gender role identity of gay men.

Research related to masculinity and gender role identity has uncovered a link between gender role conflict and help-seeking behaviors. O'Neil (1990) defines gender role conflict (GRC) as, "a psychological state in which gender roles have negative consequences or impact on the individual or others" (p.25). Research conducted by Simonsen, Blazina, and Watkins (2000) has revealed that men who experience higher levels of GRC are less likely to seek psychological help and, therefore, manifest less psychological well-being (Hennen, 2005). In fact, men in general are not only less likely to seek psychological help in times of emotional distress, they are less likely to get regular medical checkups or seek medical attention when physically ill (Lane & Addis, 2005). Penderon and Vogel (2007) proposed that self-stigma and an aversion to discussing emotionally distressing issues (e.g., personal information; negative emotions; hidden feelings; feelings of sadness, depression, or anxiety) are barriers that limit men's willingness to seek professional help. Men who believe they need counseling may experience a strong sense of failure, thus, making the act of seeking help particularly difficult.

Moving beyond the issue that men are not inclined to seek out help when in distress, researchers have revealed that people who divorce experience higher levels of mental health distress than those who are married or never-married and are generally worse off than those who are widowed (Gove, 1972a, 1972b, 1979; Gove, Hughes, & Briggs Style, 1983). Most of the research and literature related to divorce and post-divorce adjustment focuses on the needs and well-being of mothers and children. In contrast, research involving fathers who have divorced has focused primarily on their role as parent. Researchers have often focused on the "absent father" or view the role of fathers as secondary to that of the mother (Armesto, 2002). These views diminish and minimize the personal needs of divorced men and fathers.

Lacking in the world of male gender studies is research related to gay men who are fathers. Because the terms "gay" and "father" are often viewed as contradictory in nature, most of the research associated with gay fathers has addressed the impact the father's sexual

orientation has on the well-being of the child rather than on the personal well-being of the father himself. When considering the well-being of divorced gay fathers from a gender role conflict perspective, Bigner (1996) suggested that these men are socially marginalized because of their allegiances to both the gay and heterosexual cultural worlds and that developmentally they must integrate the standards of both if they hope to achieve personal coherence. However, many gay men do not accomplish this successfully and, therefore, experience levels of stress unlike that of their heterosexual counterparts. Bigner points to what may be the underlying difference between the well-being of divorced gay and heterosexual fathers: In addition to the financial and emotional stressors typically associated with divorce, gay fathers must also reconcile and resolve the conflicting and/or inconsistent social and psychological implications of gay v. straight, married v. divorced, and being a father v. being a gay father.

When seeking to understand the needs of gay divorced fathers as compared to men in general, one must consider the interconnectedness of the three key factors previously discussed. First, men are less likely to engage in help-seeking behaviors during times of stress and distress (to include divorce). Second, gay men experience stress while resolving their gender role with regards to sexual orientation. Third, gay fathers experience stress unlike that of their heterosexual counterparts. In the end, one is compelled to question the relationship between masculine identity (as a measure of gender role conflict), psychological distress, and the help-seeking behaviors of gay fathers who have divorced. Research that contributes to an understanding of gay men who have fathered children in a heterosexual marriage and subsequently divorce may lead to mental health services that address the unique issues related to gender role conflict, psychological distress, and help-seeking behaviors for this unique population as well as for men in general.

### **Statement of Problem**

Despite the increasing interest in the psychology of men, the existing literature related to gay fathers is limited. By being gay, male, and a father, the men who make up this population negotiate a complex world of social expectations and frequently experience feelings of marginalization and discrimination based on their sexual orientation (Bozett, 1981a, 1989; Clay, 1990; Hanson & Bozett, 1985). These feelings can be associated with both the heterosexual community they may no longer identify with and the gay community to which they seek to join (Demo & Allen, 1996; Morales, 1989). Bigner (1996) concluded that the dual status these men experience can only be resolved if they also reconcile the extremes of what it means to be both a

gay male and a father. It is the essence of this conflict that is the heart of this study. While gay fathers experience typical levels of gender role conflict often accompanied by anxiety, depression, and anger (Simonsen et al., 2000), they also experience the additional stress associated with feelings of marginalization and discrimination. However, being male, they may abide by traditional masculine norms and avoid seeking help in times of distress.

### **Purpose of Study**

The purpose of this study was to add to the current understanding of how gender role conflict is related to attitudes toward seeking psychological help among gay fathers who have divorced. The only other study focusing specifically on gender role conflict in the lives of gay fathers (Kosmopoulos, 2008) assessed the degree of gender role conflict among gay men who were primary caregivers to their children and compared those results to scores from studies of heterosexual stay-at-home fathers and a general gay male (non-fathers) sample. Moving beyond Kosmopoulos' (2008) simple between group comparisons, this study sought to identify relationships among specific factors, namely psychological distress and attitudes and intentions toward seeking psychological help. In addition, analysis of data sought to determine if the length of the marriage or time since divorce were related in any way to the three main constructs; gender role conflict, psychological distress, and attitudes and intentions toward seeking psychological help. The underlying assumption that influenced the selection of the variables in this study was the belief that gay men who marry and father are driven to do so by deep seeded masculine ideology that defines their understanding of appropriate gender role behaviors and potentially conflicts with the masculine identity they have developed as gay men.

Because previous studies with gay men and heterosexual men have identified a relationship between increased levels of gender role conflict and both psychological distress and attitudes and intentions toward seeking psychological help, it was predicted that similar outcomes would be identified in this study. However, what remained unknown was the relationship these factors had to other aspects of the participants' personal experience.

### **Research Questions**

1. What is the relationship between gender role conflict (GRC) of gay divorced fathers and their
  - a. experience of psychological distress?
  - b. attitudes and intentions toward seeking psychological help?

2. What is the relationship between time since divorce and
  - a. gender role conflict?
  - b. experience of psychological distress?
  - c. attitudes and intentions toward seeking psychological help?
3. What is the relationship between length of marriage and
  - a. gender role conflict?
  - b. experience of psychological distress?
  - c. attitudes and intentions toward seeking psychological help?

Based on these research questions, the hypotheses related to gender role conflict of gay divorced fathers were as follows:

H<sub>1</sub>: Higher levels of GRC (reported as higher scores on the GRCS) will positively correlate with psychological distress.

H<sub>2</sub>: Higher levels of GRC (reported as higher scores on the GRCS) will negatively correlate with participants' (a) attitudes and intentions toward seeking psychological help, (b) time since divorce, and (c) number of years of marriage.

### **Definition of Terms**

The following definitions were used in this study. These definitions are based on the literature and helped to clarify the terminology in the study.

Gender Role: “Behaviors, expectations, and role sets defined by society as masculine or feminine which are embodied in the behavior of the individual man or woman and culturally regarded as appropriate to males or females” (O'Neil, 1981b, p. 203).

Gender Role Conflict: A “psychological state in which socialized gender roles have negative consequences on the person or others” (O'Neil, Good, & Holmes, 1995, p. 166).

Psychological Distress: “Psychological distress is the deviation from some objective healthy state of being. It implies maladaptive patterns of coping. It is mild psychopathology with symptoms that are common in the community. It is negative feelings of restlessness, depression, anger, anxiety, loneliness, isolation and problematic interpersonal relationships” (Mabitsela, 2003, p. 10).

Well-being: “A person's evaluative reaction to his or her life—either in terms of life satisfaction (cognitive evaluations) or affect (ongoing emotional reaction)” (Hennen, 2005, p. 71).

### **Summary**

In summary, the connection between gender role conflict and help-seeking behaviors (O'Neil, 1981a, 1982; Penderson & Vogel, 2007) demands that any research in the area of men's studies or men's health focuses on what it means to be male. Studying the unique population of divorced gay men who have fathered reveals insight into how the contextual factors of fatherhood, divorce, and homosexuality are related to masculine identity development. It was assumed that gay men, men who have divorced, and men who have fathered all face challenges that have the potential to impact their gender role clarity/ambiguity and its subsequent conflict. Understanding how these factors impact and are related to men's help-seeking behaviors serve to broaden the understanding of what it means to be male in today's society. In turn, improving how mental health professionals interact and provide services for gay fathers who have divorced.

## CHAPTER II

### LITERATURE REVIEW

The literature has well established that, compared to women, men demonstrate lower rates of help-seeking behaviors for both physical and mental health concerns (Addis & Mahalik, 2003; Ang, Lim, Tan, & Yau, 2004; Blazina & Watkins, 1996; Fischer & Turner, 1970; Good, Dell, & Mintz, 1989; Kim & Omizo, 2003). While some studies have demonstrated connections between help-seeking behaviors, men's health, and adherence to masculinity norms (Galdas, Cheater, & Marshall, 2005; Lane & Addis, 2005; James R. Mahalik, Lagan, & Morrison, 2006; James R. Mahalik, Levi-Minzi, & Walker, 2007; O'Brien, Hunt, & Hart, 2005), others have gone on to report the following:

Men who experience greater conflict with traditional masculine ideals report more symptoms of psychological distress (Good, Heppner, DeBord, & Fischer, 2004; Liu, Rochlen, & Mohr, 2005; Sharpe & Heppner, 1991), higher degrees of shame (Thompkins & Rando, 2003), and are less likely to seek help (Good et al., 1989; Good & Wood, 1995) than men who experience less conflict (Sanchez, Greenberg, Liu, & Vilain, 2009, p. 75).

Clearly, there is a paradox at play. Men who are experiencing conflict related to their ability to adhere to traditional masculine ideals are more inclined to experience psychological distress but are less likely to seek out help at a time when they may most need it. Thus, a greater understanding of the factors that work together to generate psychological distress and how they are related to help-seeking behaviors in men will benefit the mental health community as it seeks to meet the needs of men in our society.

An aspect of understanding the needs of men involves broadening the definition of what is means to be masculine or male. Pleck (1999) offers that there is a traditional masculine ideology in the United States that serves to define what men should and should not be. In contrast, Thompson and Pleck (1999) suggest that there is no singular type of masculinity. This inherent contradiction makes it difficult for men to determine what is expected of them as they function within society. Studies corroborate the ambiguous nature of masculine expectations and offer that men from different groups and cultural backgrounds define masculinity differently and abide by different standards and codes of conduct (Connell & Messerschmidt, 2005; G. H. Edwards, 1992; Messner, 1997; Thompson & Pleck, 1995).

As the mental health community seeks to clarify this understanding of men and their psycho-social development, interest in gay men as a sub-set of the male population has grown. Although non-traditional in their affections for other men, gay men are nonetheless influenced by traditional masculine ideology (Szymanski & Carr, 2008). In contrast, studies have revealed that gay men are generally not perceived as masculine (Kite & Deaux, 1987; Madon, 1997) in spite of the fact that some value and adhere to standards of traditional masculinity (Harry, 1983; Hennen, 2005; Kurtz, 1999).

Szymanski and Carr (2008) suggest that many gay men struggle with unique issues as an aspect of being both male and a sexual minority. The marginalization and discrimination experienced by gay men in general (Bozett, 1981a, 1989; Clay, 1990; Hanson & Bozett, 1985) are not only unique but may be a by-product of the traditional masculine ideology that is sanctioned by society at large. Sanchez, Greenberg, Liu, and Vilain (2009) offer the following:

Most of the characteristics that are associated with masculinity and femininity are socially constructed. That is, social groups define what is and is not masculine and feminine. More specifically, scholars have noted that the dominant group typically defines what are appropriate behaviors for a given gender, and that subordination and marginalization of those who violate these norms are used to sustain the constructs. (p. 74)

In the case of the gay fathers who are the focus of this study, feelings of subordination and marginalization are often associated with both the heterosexual and gay communities they inhabit (Demo & Allen, 1996; Morales, 1989). The difficult task for these men is to integrate the standards and expectation of their two halves into a single well adjusted whole. It is with this unique population that the impact and nature of gender role identity development may best be revealed.

I begin a review of the associated literature with a brief introduction to the concept of “life role” (Super, 1980, 1990) because, to me, how men act out their gender is a life role. Hegemonic masculinity is simply the set of rules or social expectations by which they are directed to act. As a result, the dynamic relationship that exists between help-seeking, gender role conflict, and psychological distress becomes commonplace and predictable. What remains a mystery is how this triad is altered or influenced by context and one’s ever-changing understanding of masculinity. Reviewing the literature related to the key variables in this study, therefore, becomes essential. How gay men develop their sexual identities within the confines of hegemonic ideology and how they are or are not like their heterosexual counterparts becomes the

true field of discovery. Finally, because not all gay men marry nor do all married men divorce, a discussion of why gay men marry and impacts of divorce becomes crucial to a better understanding of the contextual factors that are thought to be at play in the lives of the men participating in this study.

### **Life Roles**

A review of the literature related to life roles reveals three main constructs (*role clarity*, *role ambiguity*, *role conflict*), that serve to organize and give structure to research done in this domain. Other concepts such as *role salience* (Super, 1980, 1990), *role strain* (Marks, 1977; Perrone & Civiletto, 2004), and *role identity* (Silverstein, Auerbach, & Levant, 2002) serve to strengthen and enrich the understanding of the three main constructs.

Brott (2005) reviews the research as it relates to life roles and states that references to the topic can be traced as far back as work conducted by Davidson and Anderson in 1937. Hughes and Graham (1995) identified four specific life roles and listed them as: *relationship with self*, *relationship with work*, *relationship with others*, and *relationship with family*. They suggest that life roles are defined in part by societal expectations of appropriate role behaviors, and that “specific behaviors and tasks can be identified as characteristics of each stage of the cycle of each life role (p. 1).” Bauer and Spencer (2003) suggest that a person has to know three things in order to perform his or her role adequately:

- (a) what the expectations or the role set are (e.g., the rights, duties, and responsibilities)
- (b) what activities will fulfill the role responsibilities (means-end knowledge)
- (c) what the consequences of role performance are to self, others, and the organization (p. 4).

Developmentally, life roles progress in four stages (initiation, adaptation, reassessment, reconciliation) and individuals redefine their life roles by modifying self-perceptions and perceived expectations from others for appropriate role behavior (Collier, 1995). Together these insights point to the essential elements of role/life role theory; each role/life role comes with its own set of expectations. When known, these expectations lead to role clarity and when unknown lead to role ambiguity and eventually internal (role) conflict. The conflict takes place when the expectations of different life roles collide or when role expectations require more than the individual has to offer at the time.

Silverstein, Auerbach, and Levant (2002) have suggested that because “roles are culturally defined, they are continually changing and are often internally inconsistent. Attempts to conform to these role norms, therefore, inevitably lead to psychological stress rather than to



psychological well-being” (p. 362). Such a statement leads to the assumption that varying degrees of role clarity, role ambiguity, and role conflict must, therefore, work together to generate a continuum between stress and well-being. Consequently, any discussion regarding psychological well-being must consider the delicate balance that exists between role clarity, ambiguity and conflict, and the need to understand the impact of each.

### **Role Clarity**

Social cognitive theory (Bandura, 1999) suggests that societal rules, norms, and expectations are learned through observation and interactions with significant and appropriate role models. Thus, for the purpose of this study, it is offered that fathers learn to parent by interacting with others who model parenting behaviors (Masciadrelli, Pleck, & Stueve, 2006). Likewise, one can conclude that divorced fathers learn how to be divorced fathers by interacting with and repeating the behaviors of other divorced fathers. Gay men learn how to be gay men by interacting with and repeating the behaviors of other gay men. Bandura (1999) defines this process as *observational learning*. One of the key aspects of this process is that modeled behaviors must be appropriately repeated in applicable future situations. An individual’s role clarity is dependent on the ability to identify appropriate times to repeat observed behaviors and to identify and decipher appropriate feedback. There is commonly a significant degree of trial and error associated with this process. It is logically assumed that many factors contribute to one’s degree of role clarity. First and foremost among these factors may be the exposure to appropriate modeled behavior.

While one may suggest that increases in the divorce rate results in an abundance of role models for newly divorced men, it cannot be assumed that the behaviors displayed by these men meet societal expectations. So too, models for appropriate gay male behavior. While current changes in the perception of homosexuality and homosexual behavior may open the door for increased socially acceptable models of homosexual behavior, there continues to be a dearth when it comes to models (appropriate or not) of gay fathering behavior. Given that models of appropriate behavior are so essential to the observational learning process, one’s psychological well-being as it relates to role clarity may be contingent upon the number and types of models encountered.

Lyons (1971) suggests that the subjective nature of role clarity is based on one’s feelings of having as much or not as much role relevant information as necessary. This subjective nature of role clarity is of particular interest in that it leads to the assumption that, regardless of the

paucity or plethora of models, an individual may feel a lack of clarity (role ambiguity) and thus experience some degree of psychological distress.

### **Role Ambiguity**

In contrast to role clarity, role ambiguity is related to the degree of uncertainty one has with regard to the expectations of any life role which ultimately results in psychological distress. In their review of the research as it relates to role clarity and role ambiguity, Bauer and Spencer (2003) present four dimensions to role ambiguity:

- (a) Goal/Expectation/Responsibility Ambiguity – *What is expected? What should I be doing?*
- (b) Process Ambiguity – *How to get things done. The ways of achieving organizational objectives.*
- (c) Priority Ambiguity – *When things should be done and in what order.*
- (d) Behavior Ambiguity – *How am I expected to act in various situations? What behaviors will lead to the needed or desired outcomes?* (pp. 4&5)

The researchers go on to remind the reader that role ambiguity, like role clarity, is subjective and, therefore, dependant on individual perspective.

As is the case for much of the research related to this field, Bauer and Spencer (2003) approach role ambiguity through the frame of professional development and career counseling. Nonetheless, the essential questions being addressed seem applicable to nearly any life role. Consider the gay fathers who participated in this study, as they approach critical moments in their personal development (i.e., parenthood, disclosure of being gay, and divorce) one can hear any or all of these questions being asked. What is expected of me as a father? How do I go about being true to myself and others about my sexual nature while inflicting the least degree of harm to myself and to my family? Should I disclose my sexuality before or after the divorce? Do I invite a male partner to the home when my children are present? In the same way that increased role clarity promotes psychological well-being, role ambiguity fosters psychological distress.

### **Role Conflict**

Much like role ambiguity, role conflict leads to varying degrees of psychological distress. While often discussed together, Bauer and Spencer (2003) point out that role ambiguity and role conflict have different causes and, therefore, may potentially have different remedies. Unlike role ambiguity, role conflict takes place not because one is uncertain about the requirements and

expectations of a particular role but because those expectations conflict or are incompatible with those of another (Rizzo, House, & Lirtzman, 1970). The conflict arises when a person experiences pressure within one role that is the result of incompatible pressures that arise from another (Kopelman, Greenhaus, & Connolly, 1983). A specific type of role conflict, gender role conflict (GRC) takes place when men experience restriction, devaluation, or violation of themselves or generate those feelings in others as a result of rigid, sexist, or restrictive gender role expectations (O'Neil, Helms, Gable, David, & Wrightsman, 1986). Many men experience gender role conflict as a result of rigid gender role socialization and learned sexism (O'Neil, 1981b).

If members of the mental health community seek to address the psychological distress experienced when there is a lack of clarity necessary to perform a specific role (role ambiguity) or when one is torn between two or more roles with conflicting expectations (role conflict) they must first look to the origins of the role expectations themselves. Likewise, if the goal is to understand and meet the needs of men, then an understanding of masculine identity development and what it means to be male becomes essential.

### **History of Male Studies and Theories of Masculinity**

Prior to the influence of the feminist and gay movements of the 1960s and 70s “sex role theory” was dominated by an essentialist perspective of gender and sexuality. Sexual identity and gender were thought to be interconnected and relatively fixed. A single concept of “maleness” (independent, physically strong, rational, and protective) served as a rule by which male behavior was evaluated. It was thought that men sought to validate their biological gender by attaining attributes and engaging in behaviors which brought them closer to the masculine ideal (Kosmopoulos, 2008; Mathe, 2010). The underlying mantra being, “I am male and real men act like this.” While sociologists and social psychologists were beginning to understand the social nature of masculine identity development and how the dominant culture provides the context within which men construct their personal definition of masculinity (Kosmopoulos, 2008), a single interpretation of the ideal remained as the measure by which masculine identity development was understood (K. E. Edwards, 2007).

According to Mathe (2010), Terman and Miles (1936) published the first psychological inventory of masculinity and femininity in which they viewed the two constructs as polar opposites. Attributes associated with masculinity included powerful, self-confident, athletic, independent, and mechanically inclined. This image of masculinity became the rule by which

research was conducted for years to come. Mathe also cites Chafetz (1974) and her breakdown of the traditional view of masculinity by way of demonstrating how little the image of masculinity changes over the years as follows:

- (a) Physical – virile, athletic, strong, brave
- (b) Functional – breadwinner, provider for family
- (c) Sexual – sexually aggressive, experienced, heterosexual. Single status acceptable
- (d) Emotional – unemotional, stoic (e.g., “boys don’t cry”)
- (e) Intellectual – logical, rational, objective, practical
- (f) Interpersonal – leader, dominating, disciplinarian, independent, free, individualistic, demanding
- (g) Other Personal Characteristics – success-oriented, ambitious, aggressive, proud, egotistical, moral, trustworthy, decisive, competitive, uninhibited, adventurous

While clearly more developed, Chafetz’s interpretation of masculinity remains rooted in the original image offered by Terman and Miles (1936) nearly forty years earlier.

David and Brannon (1976), in what would quickly become one of the most cited works in the field of masculine studies are the first to add a truly new twist on an old theme; fear of femininity. They suggested four main rules that drive masculine thinking and behavior, namely

- (a) no sissy stuff - men should not be feminine
- (b) be a big wheel - men must be respected and admired
- (c) be a sturdy oak - men should never show fear,
- (d) give ‘em hell - men should seek out risk and adventure.

The idea that men are strong, confident, and independent not because that is what makes them a man, but because that is what makes them not like a woman was truly radical. David and Brannon’s work spawned a paradigm shift in the field of masculine studies. Men were no longer thought to be seeking a specific masculine ideal, but doing all they could to avoid being associated with anything feminine. As a result, being masculine meant subjugating women and disdaining femininity. This fear of femininity eventually gave rise to homophobia and the fear and loathing of other men who fall short of the masculine ideal.

Bringing together their understanding of what it meant to be male, Levant et al. (1992) developed the Male Role Norms Inventory (MRNI) which categorized questions into the following seven sub-scales they believed to underline masculine ideology:

- (a) Avoidance of Femininity
- (b) Homophobia
- (c) Self-Reliance
- (d) Aggression
- (e) Achievement/Status
- (f) Attitudes Toward Sex
- (g) Restrictive Emotionality

Their categories reveal an emerging image of masculinity defined by power and control, and driven by homophobia and fear of femininity. Connell and Messerschmidt (2005) key in on the power and control based nature of this new “maleness” and call it “hegemonic masculinity” (p. 45).

### **Hegemonic Masculinity**

At the heart of hegemonic masculinity lies men’s conscious and unconscious fear of femininity. O’Neil (2008) suggests that it is by aggressively avoiding and even disdaining all things feminine men seek to prove their masculinity. It is here that the polarity of a two-sex model becomes evident; what is not masculine must be feminine. Men who do not meet the hegemonic ideal of masculinity must, by default, be feminine (Connell, 1995). Subsequently, embracing homophobia becomes an integral part of masculine identity. To sexually desire a man is feminine; therefore, gay men cannot be masculine. Ironically, Edwards (2007) writes, “In Western culture, homophobia is often primarily directed at men who defy a traditional definition of masculinity, and not at all limited to gay men” (p. 19). Engaging in homophobic behaviors becomes a way for men (gay or not) to validate their masculinity. This clearly adds an additional layer of complexity to the identity development for young gay men who, in order to prove their masculinity to themselves and others, must loath their sexual attraction to other men. This conflicting dyad may be the source of feminine or “queenie” behavior displayed by some young gay men. Embracing the logic that to be gay they must be feminine, these men may adopt feminine behaviors as a means of validating or justifying their same-sex sexual desires (Isay, 1990). The use of terms such as “butch” and “straight-acting” by gay men to describe themselves suggests just how prevalent and deep seeded homophobia is even within the gay community. Such terms reveal the hierarchy that exists by creating distance between those who are viewed as more or less masculine. “Straight-acting” becomes synonymous with more masculine. Thus, straight-acting gay men are more masculine than effeminate gay men but not

as masculine as a man who is heterosexual. The covert message being, gay men (effeminate or butch) are not truly masculine but can only “act” as such.

In the end, hegemonic masculinity is truly all about power. Edwards (2007) suggests, “Men’s identity constructed in this context contributes to the oppression of women, marginalization of some men, and limits all men” (p. 21). As men construct their masculine identities they learn misogyny and patriarchal masculinity (Kimmel & Messner, 2003). They learn to survive by taking risks and maintaining dominance by being competitive, unemotional, and aggressive. But most of all, they learn that the world is hierarchical, their status is precarious and their masculinity will continually be scrutinized (Kosmopoulos, 2008).

### **The Changing Face of Masculine Identity Theory**

With the onset of the women’s liberation movement in the 1970s and the scholarly use of feminist thought, traditional male sex role theory began to be questioned. Constantinople (1973) challenged longstanding sex role theory by questioning the polarity of the masculine/feminine dyad. She suggested that the two sex roles were neither one-dimensional nor strictly opposite. The all or nothing approach to gender identity (that which is not masculine must be feminine) quickly came into question. In Edwards’ (2007) review of the literature he offers that as feminists “worked to deconstruct the traditional definition of femininity” (p. 14) they forced “a similar examination and expansion of masculinity” (p. 15).

Carrigan, Connell, and Lee (1985) fostered a critical shift in male sex role theory when they proposed a model of multiple masculinities and power relations. They suggest that a single, hegemonic image of masculinity limits the complex nature of male sex role identity development. Their work introduced the idea that multiple masculinities may exist simultaneously and that one or more may maintain dominance at any given moment. Men are not bound to just one way of being masculine, but act out or perform masculinity in different ways at different times. Others suggest that masculinity is more fluid and that “men actively create their masculinity in specific situations rather than exercising a stable set of individual characteristics” (Mathe, 2010, p. 9).

Although hegemonic masculinity remains the dominant construct at the heart of masculinity studies, other theories and current research may offer additional insights. However, it does seem that the ultimate need for acceptance, power and control that hegemonic masculinity offers is the tie that binds all men together. Going back to the ultimate goal in any life role, maintaining clarity and limiting ambiguity and/or conflict, it’s all about feeling in control.

## **Gender Role Identity Development of Gay Men**

Based on the understanding that “identity work in one domain, such as sexuality, facilitates identity development in other[s]” (Konic & Stewart, 2001, p. 836), there has been a call for research that addresses the interaction between gender and sexual orientation (Deaux & Stewart, 2001). However, research in this area is limited.

In an exploratory study with gay fathers who are primary caregivers, Kosmopoulos (2008) concludes that although the men participating in his study “overcome negative aspects of early male gender socialization, they still experience degrees of male gender role conflict” (p. 104). While being comfortable expressing non-traditional masculine behaviors may be a part of the lives of gay fathers, it “does not completely expunge the negative, personal aspects of traditional male socialization” (p. 104). Participants experienced similar levels of conflict as heterosexual stay-at-home dads and gay men who are not fathers.

Simonsen, Blazina, and Watkins (2000) offered three examples of how assessing gender role conflict in gay men would extend the community’s over-all pool of knowledge: “(a) understand the relevance and potential significance of the GRC to the gay experience, (b) understand more about some specific variables that contribute to gay men’s psychological adjustment and interpersonal relationships, and (c) identify salient issues that merit consideration and discussion in counseling” (p. 85). They suggested that research to date had not accurately reflected the experience of gay men based on the statistical probability that most of the men participating in previous GRC research had been heterosexual. Their research was driven by two hypotheses: “(a) that GRC would be positively correlated with anger, anxiety, and depression and (b) that GRC would be negatively correlated with attitude toward seeking professional psychological help” (p. 86). Their findings supported their prediction of a link between gender role conflict and the psychological well-being variables being measured, as well as lead to the conclusion that gender role conflict can also affect gay men’s attitudes and help seeking behaviors.

Wester, Pionke, and Vogel (2005) built on the work of Simonsen et al. (2000) in two ways. First, they validate the findings by using a similar population of gay men to conduct a confirmatory factor analysis on the *Gender Role Conflict Scale* (O'Neil et al., 1986). Second, they enriched the understanding of gay men and gender role conflict by differentiating single gay men from those who reported being currently involved in a romantic relationship and making appropriate comparisons between the two groups. Results from their study validated the findings

of Simonsen et al. (2000) yet failed to confirm the suggestion “that the traditionally socialized male reluctance to express intimacy is compounded within gay men’s same-sex romantic relationships” (p. 195).

In a study focusing on gay and bisexual members of the Asian and Pacific Islander population, Truong (2013) reported that a more significant relationship existed between masculine gender role stress and psychological well-being than between psychological well-being and minority stress. While some men in the study did experience psychological distress related to masculinity-based stress and their minority status, they did not experience greater levels of stress than those who experienced masculine gender role stress alone. This finding suggests that there may be an all encompassing nature to the stress (or distress) men experience related to their masculinity that supersedes other forms of social stress.

### **The Gender Role Strain Paradigm and Gender Role Conflict**

In the same way computer hardware cannot function without the necessary software to drive it, men (and women) are born ready to develop gender identity (Money & Tucker, 1975). Mahalik, Good, and Englar-Carlson (2003) postulated that men develop masculinity scripts (e.g., strong and silent, tough guy, homophobic) through socialization experiences. Ultimately, these scripts underline masculine ideology and norms and are core values and standards that define, restrict, and negatively impact the lives of all males (Bandura, 1999; Levant et al., 1992; James R. Mahalik et al., 2003; O’Neil, 2008; Pleck, Sonenstein, & Ku, 1993; Thompson & Pleck, 1995). Sadly, no man is able to live up to the fullest measure required by these masculine ideals. Kimmel (1996) states, “the male sex role is a recipe for despair...few if any could live up to the image, and hence all men...feel like failures” (p. 281). He suggests that the cost of trying to live up to this unattainable image is that men live “lives of isolation and despair, of repressed emotion and deferred dreams” (p. 281).

Based on his own research and the research of others, Pleck (1981) suggests that men feel pressure to meet the expectations of conflicting and inconsistent male gender norms. Feeling both the pressure to succeed and the fear of failure, men experience what he calls male gender role strain. Eventually Pleck (1995) introduces the Gender Role Strain Paradigm which organizes the negative effects of male gender role socialization into three categories: Male gender role strain discrepancy; trauma; and dysfunction. Discrepancy takes place when men fail to meet ideological expectations and experience low self-esteem and psychological distress. This often takes place during, but is not limited to, inherent moments of trauma within the



masculine socialization process. Culturally imposed rituals, traditions and rites of passage often serve as traumatic moment in the lives of men. Even though the individual may meet the prescribed expectations during such an event, the trauma generated by doing so may have lasting effects. Dysfunction refers to the conflicting nature of some male role expectation and internal conflict that is generated when the fulfillment of one expectation leads to the failure of another.

Congruent with Pleck's (1981, 1995) theory, O'Neil (O'Neil, 1981a, 1981b; O'Neil et al., 1995) proposed that masculine socialization was rooted in the fear of femininity that subsequently produced six forms of "gender role conflict."

- Restrictive emotionality
- Socialized control, power, and competition
- Homophobia
- Restrictive sexual and affectionate behavior
- Obsession with achievement and success
- Health care problems

To date a number of studies have found gender role conflict to be negatively related to psychological well-being (Blazina & Watkins, 1996; Cournoyer & Mahalik, 1995; Good et al., 1995; James R. Mahalik, Cournoyer, DeFranc, Cherry, & Napolitano, 1998; Sharpe & Heppner, 1991) and "men who experience greater conflict with traditional masculine ideals report more symptoms of psychological distress (Good et al., 2004; Liu et al., 2005; Sharpe & Heppner, 1991), higher degrees of shame (Thompkins & Rando, 2003) and are less likely to seek out help (Good et al., 1989; Good & Wood, 1995) than men who experience less conflict." (Sanchez et al., 2009, p. 75).

Subsequently O'Neil, et al. (1986) introduced the Gender Role Conflict Scale (GRCS) which was designed to assess the level of gender role conflict men experience. It has been reported that men typically experience GRC when they try to meet or fail to meet perceived norms of masculinity; violate or deviate from those norms; experience dissonance between their real and ideal self-concepts when their perceptions are rooted in gender stereotypes; personally restrict, devalue, or violate themselves or others because of gender role norms; and experience personal restrictions, devaluations, or violations from others (Englar-Carlson, 2006). Over the years, researchers using the GRCS have found that gender role conflict is related to depression, anxiety, emotional distress, loneliness, anger, conduct problems, substance abuse, and family and

interpersonal problems (Blazina, Pisecco, & O'Neil, 2005; Blazina & Watkins, 2000; Cournoyer & Mahalik, 1995; Good, Robertson, Fitzgerald, Stevens, & Bartels, 1996; Good & Wood, 1995; Hayes & Mahalik, 2000; Sharpe & Heppner, 1991). Work with gay men has revealed that higher levels of gender role conflict are related to anxiety, depression, and anger (Simonsen et al., 2000).

### **Help-Seeking**

Despite significant psychological dysfunction associated with the traditional male gender role, men in the United States are hesitant to seek counseling (Bozett, 1981b). Schaub and Williams (2007) offer that “the very nature of help-seeking tends to run counter to many masculine values such as independence, a need to maintain emotional control, and the drive to maintain status and power in a relationship” (pp. 40-41). Masculine ideology generates a dynamic in the minds of men whereas to believe one is like most other men, one must view counseling as a gender inappropriate activity (Umberson & Williams, 1993). Men with higher levels of gender role conflict report more negative attitudes toward seeking psychological help (Good & Wood, 1995; Kopelman et al., 1983; Messner, 1997).

As a group men seek professional psychological help less often than women (Penderson & Vogel, 2007), and it has been suggested that, when men adhere to traditional masculine ideology, help seeking behaviors are intuitively antithetical (Shepard, 2003). Penderson and Vogel (2007, p. 374) have suggested that “a man who believes that he needs counseling may feel a strong sense of failure, which would make the act of asking for help particularly difficult” (p. 374). It is the internal conflict men feel in this type of situation that is at the heart of gender role conflict, and gender role conflict has been found to contribute to men’s underutilization of counseling services (O'Neil, 1981a, 1982). Therefore, if the mental health community seeks to best meet the needs of men in today’s society, counselors must understand the sources and manifestations of gender role conflict and its connection to masculine gender role socialization.

**Gay men and help-seeking.** In their review of the literature, Mahalik, Good, et al. (2008) suggest that “many gay and bisexual men struggle with unique issues related to being both a man and a sexual minority person” (p. 40). Yet, the research examining the relationship between traditional masculine gender role socialization and mental health has focused mostly on heterosexual men. Although gay men may struggle with unique problems associated with their sexual orientation, the traditional core values of hegemonic masculinity (success, power, and competition; emotional disclosure; affectionate expression; and work-family conflict) have as

much relevance to their experiences as they do to their heterosexual counterparts (Simonsen et al., 2000). Some have gone so far as to suggest that the consequences of traditional gender role socialization (i.e., gender role conflict) in gay men may actually be increased as an aspect of the “competition between socialized male gender role expectations to be heterosexual and one’s sexual orientation” (Wester et al., 2005, p. 196). While research has suggested that gay men may not conform to traditional male gender roles (Green, Bettinger, & Zachs, 1996), the underlying belief is that gay men experience many of the same attitudes toward help-seeking as do heterosexual men.

### **Gay Fathers**

Determining the number of gay men who have been married in the past or who are currently married is a difficult task. Many of these men are either unwilling to disclose the nature of their sexual orientation or choose to remain unidentified in an attempt to protect family members. The actual estimates vary depending upon the research and the time era in which it took place. However, researchers have estimated that between 20-30% of gay or bisexual men have been married at least once (Bozett, 1989; Bozett & Sussman, 1989), and the number of gay men who have fathered to range from 10-25% (Bell & Weinberg, 1978; Bozett & Sussman, 1989; Bryant & Demian, 1994; Miller, 1979b; Schofield, 1965; Weinberg & Williams, 1974).

#### **Why Gay Men Marry and Father**

The reasons gay men give for becoming fathers are as varied as the men themselves (Barret & Robinson, 1990; Bigner & Bozett, 1989; Bigner & Jacobsen, 1989a, 1989b; Bozett, 1987). Bigner (1999) has suggested three broad trends that seem to motivate gay men to marry: (a) cultural and internalized homophobia, (b) willful fatherhood, and (c) a generalized desire to parent.

**Homophobia.** Homophobia, both cultural and internalized, is typically thought to be the major reason gay men enter heterosexual relationships (Bigner, 1996). It has been suggested these men marry hoping to maintain healthy and meaningful relationships with their wives while ignoring or at least managing not to act upon their homosexual desires (Barret & Robinson, 1990; Bigner & Jacobsen, 1989a, 1989b; Miller, 1979a, 1979b). While there may be some truth to this, Miller (1979a) indicated that most of the men participating in his study did not identify themselves as homosexual at the time of becoming a parent. Although many of these men had experienced sex with other men prior to marriage, they did not view it as significant and/or integral to their sexual identity. Men who did recognize the significance of their homosexual

activity prior to marriage had sought out counseling and had married only after their counselors proclaimed them to be “cured” or indicated that marriage and parenting would be the final step in the healing process.

The fact that these men did not identify themselves as gay at the time of marriage is significant in understanding the difficult journey they take toward understanding and accepting their homosexuality. It is also crucial to understanding the fact that these men did not intentionally mislead or lie to their prospective wives.

**Willful fatherhood.** According to Bigner (1999), some men do not (marry and) become fathers as some byproduct of homophobia but do so with willful intent. These men may enter into relationships with women or with lesbian women or couples who are fully aware of their homosexuality and factor it into the nature of the relationship. These relationships range from intimate physical relationships to donor/recipient. In most cases, however, conception takes place via artificial insemination and is often preceded by legal agreements.

**Generalized desire to parent.** Bigner (1999) cited prior research (Bigner & Jacobsen, 1989a) that indicated little difference between gay and heterosexual men in their desire to have children. He goes on to state, “Both cite the desire for nurturing children, for the constancy of children in their lives, to achieve some means of immortality via children, and for the sense of family that children help to provide. However, gay fathers place greater emphasis on the notion that parenthood impacts adult status in the eyes of the community-at-large which may be a disguised form of internalized homophobia” (Bigner, 1999, p. 63).

**Fatherhood and parenting.** The fact that so little research has been conducted with divorced gay fathers clearly limits our understanding as to why some men travel this path (Bigner & Bozett, 1990; Bigner & Jacobsen, 1992; Peterson, Butts, & Deville, 2000). Homophobia and internalized self loathing may explain many of the cases but not all. The increasing number of gay male couples who have gone to extraordinary lengths, not to mention expense, to foster, adopt, or father children adds to Bigner’s hypothesis that some gay men marry and father out of a generalized desire to parent. In their book “Gay Dads” Strah and Margolis (2003) chronicle the lives of 24 men and couples who had willingly chosen to father. In the book individuals, couples, and family members tell the story of how they became a family. Strah and Margolis focused on the lives of gay men and couples who had chosen to parent or father after coming out and entering the gay community. However, some of the men interviewed report

having had previous relationships with women and a self perception that had long included fatherhood.

Under different circumstances, it would not be difficult to believe any one of these men could have married and become a father. Strah and Margolis (2003) themselves stated in their introduction that:

To be sure, there have always been men who married, fathered children with their wives, and only later – or perhaps never – identified themselves as homosexual. In the past, many such men probably remained closeted all their lives. More recently, many have come out of the closet and out of their marriages, while of course remaining devoted fathers to their children. (p. 1)

Clearly, it is not the existence of gay fathers, their desire to parent, or even their devotion to their children that remains a mystery. It is why so many even in today's more open and understanding society choose to do so via a heterosexual coupling and how this impacts their lives if and when they choose to take another path.

### **Gay Identity Development of Married Fathers**

For a time, a gay married man may live in a world where his actions are primarily heterosexual, while his sexual feelings and desires may be homosexual. This conflict between feelings and actions creates a cognitive dissonance that leads to levels of stress not experienced by heterosexuals (Bozett, 1981b). It seems logical that the more homosexual experiences a man has before he gets married, the more expedited his homosexual identity development process will be. By nature of having these experiences his identity as a gay man becomes more deeply rooted, and thus, more difficult to deny. Therefore, regardless of his reasons for getting married, he is more likely to address the conflict between his homosexual feelings and the heterosexual expectations associated with marriage. In turn, it should not be surprising that Bozett's research has revealed that gay men who began to act on their homosexual desires after marriage often have considerable difficulty resolving their homosexual identity conflict. Many of these men experience considerable distress at what initially appears to them as an irresolvable identity conflict. The lack of same-sex sexual experiences creates a scenario in which these men perceive themselves as heterosexual in spite of any homosexual fantasies and/or desires they may otherwise have.

Regardless of their reasons for marrying, gay men who choose to father face a distinctly different set of problems than do heterosexual men when it comes to self and social acceptance (Bozett, 1981b). In a society that presents all men with a number of conflicting interpretations of

what it means to be male/masculine/husband/father, these men must also interpret what it means to be gay (Bigner, 1996; Bozett, 1985). Bozett (1981a) suggested that when considering the husband, father, and gay male identities, the father identity may be the least difficult to attain. Fatherhood is culturally accepted and respected, and the father identity is automatic upon the birth or adoption of a child. By the simple act of participating in child-rearing activities, the father defines and begins to fulfill his role. His task then becomes reconciling his identity as a gay man with that of husband and father.

In his article on the evolution of the gay-father identity, Bozett (1981a) stated, “The extent of the gay father's experience in the homosexual world directly determines the degree of difficulty he has in evolving a gay-father identity. The more extensive the experience, the easier the evolution” (p. 553). Humphreys (1975) suggested a “Gay Father Typology” as a means by which to identify the developmental stages gay men go through as they transition from heterosexual to homosexual fathers. The four stages are identified as (a) *trade fathers*, (b) *homosexual fathers*, (c) *gay fathers*, and, finally, (d) *publicly gay fathers*.

The title *trade father* is given to “men who engage in furtive sexual behavior with men, but who are reluctant to accept this behavior as anything more than a genital urge. In spite of his behavior, he thinks of himself as heterosexual and maintains the outward appearance of a conventional working to middle-class suburban father” (Humphreys, 1975, p. 242). Family members are typically unaware of any homosexual behavior or feelings experienced by these men. If extramarital sex does take place with members of the same sex, it is done so in secret and often limited to brief, impersonal encounters. While trade fathers commonly engage in same sex behaviors, they may not perceive a relationship between these behaviors and their own sexual identity. These men usually justify same-sex sexual encounters as meeting specific sexual desires left unfulfilled by sex with their wives. They may see no difference between what they do with other men and what other men do with mistresses.

Men identified as *homosexual fathers* on the other hand also engage in sexual behaviors with other men, but these men recognize the homosexual side of themselves while they seek to maintain a public identity that is heterosexual. These men are just as closeted as *trade fathers* to their families but are more comfortable with homosexual behavior and may internally admit to a homosexual sexual orientation. Their sexual contact with other men, while continuing to be clandestine, may be more ongoing and include repeated contact with regular partners.

*Gay-fathers*, on the other hand, have begun to self-identify and, to a limited extent, publicly identify as gay. One of the factors related to the developmental shift from homosexual father to gay father is often the disclosure of the homosexuality to the spouse. As a result, men who are in the *gay father* stage are generally not living with their wives. Leaving the marriage seems to be a significant event that sets in motion the transition to the final stage in Humphrey's gay father typology; the *publicly gay father*. Increased self-esteem and mental clarity are often associated with this transition.

The *publicly gay father* actively engages in same-sex behavior and is open to others about his sexuality. These openly gay men often express feelings of being "born-again gay." It should be no surprise to the reader that these openly gay men represent the most common of participants in research with gay fathers because they are simply more easily identified and more open to revealing their sexual orientation.

While Humphrey (1975) identified and labeled the stages of gay father identity development, Bozett (1985) outlined five marker events in the developmental lives of gay men who father: "dating women, establishing a heterosexual marriage and assuming the husband role, becoming a father, altering the spousal relationship via separation and divorce, and activation of a gay lifestyle" (Bigner, 1996, p. 374). Only when considered together does one begin to gain a truer understanding of the process gay fathers go through as they reconcile the seemingly contradictory aspects of their identity and societal roles.

When considering their various roles (i.e., husband, father, gay male), the "father" role may be the least difficult for a gay father to master. Fatherhood is culturally accepted and respected, and the father identity is automatic upon the birth or adoption of a child. The task gay fathers face lies in the reconciliation of the homosexuality with that of husband and father. This cognitive dissonance creates stress not experienced by his heterosexual counterparts (Bozett, 1981b). At mid-life when many men/fathers address unresolved personal issues and begin questioning the meaning and direction of their lives, married gay men often come to grips with the true nature of their sexual orientation for the first time (D. Levinson, 1986; O'Neil, 1981b).

**Self-acceptance and disclosure.** One of the significant stages in accepting one's self as gay is the open acknowledgement or "coming-out" process (Bozett, 1981b; Cass, 1979; Helsing & Szklo, 1981; Jordan & Deluty, 1998; Ragins, 2004). Research has revealed that for most gay men (and lesbian women) disclosure to others is an important step in developing a positive self identity (Cass, 1979; Helsing & Szklo, 1981). One of the underlying issues with this process is

the fact that the disclosure process, which seems to be essential to resolving some of the inner turmoil experienced by gay fathers, often leads to disapproval and typically to divorce (Bigner, 1996).

This is often a difficult reality for gay fathers to accept. Just as many of these men are coming to grips with the true nature of their inner turmoil, they are faced with the staggering awareness that the final step in their journey toward self-acceptance leads to reevaluation or loss of their identity as husband and father. Nondisclosure, on the other hand, may ultimately be unhealthy for both the father and the children (Bigner, 1996).

Because many of these men have already begun to sexually distance themselves from their spouses, the identity as husband declines as the gay male identity increases. However, with regard to the identity as father, the increased acceptance as gay has little impact. It is the conflict between these three identities that seems to generate a great deal of the internal conflict experienced by these men during this crucial time of identity development.

**Marginalization.** Gay fathers often come out at a later point in life and attempt to replicate the level of commitment they experienced in their former heterosexual relationship (Bozett, 1982; Miller, 1979b; Strommen, 1989). Bozett (1981b) revealed that these men commonly experience discrimination and rejection because of their age, inexperience within the gay community, and commitments to family. Romantic relationships in the gay community are often negatively impacted by the perception that children interfere. Even gay men and couples who have chosen to father after becoming well established in the gay community report a sense of isolation from other members of the community upon becoming fathers (Strah & Margolis, 2003).

Gay men in general experience a feeling of marginalization and discrimination based on their sexual orientation (Bozett, 1981a, 1989; Clay, 1990; Hanson & Bozett, 1985). With regard to gay fathers, these feelings are associated with both the heterosexual and gay community (Demo & Allen, 1996; Morales, 1989). Positive sanctions in both the heterosexual and gay world are essential for healthy resolution of the gay identity to take place (Bozett, 1981b). The difficult task for gay fathers is to integrate the standards of both worlds.

Gay fathers often feel a need to identify with both the gay and heterosexual worlds in which they participate but may feel unwelcomed in either. Research indicates that the parent-child relationship is actually strengthened by the father's disclosure of his sexual orientation once it takes place (Bigner & Bozett, 1989), and studies have indicated that gay fathers are often



viewed more favorably than heterosexual fathers. Yet gay fatherhood is still perceived as detrimental to a child's well-being (Aguero, Bloch, & Byrne, 1984; Armesto & Weisman, 2001; Whitley, 1990).

Despite research that dispels the belief that parenting by gays and lesbians is detrimental to the lives of children and a generalized understanding that social support networks are essential to a healthy post-divorce adjustment, gay fatherhood is seldom researched and little understood. Being gay makes these men outcasts to the heterosexual community and having children keeps them from fitting into the gay community. Yet, by being gay and being fathers, they remain members of both.

With the mental health community's increasing interest in the psychology of men and the influence of gender identity (Schaub & Williams, 2007), research that adds to the pool of understanding has the potential to improve the services provided by practitioners. To date, research has revealed that men with higher levels of GRC experience an overall greater frequency of psychological symptomology (Schaub & Williams, 2007). According to Simonsen, Blazina, and Watkins (2000), "men who are more highly conflicted with regard to gender role will be less apt to seek psychological help and, in turn, will manifest less psychological well-being" (p.85). Lane and Addis (2005) reveal yet another layer of complexity when they state that, "men are not only less likely to seek help for psychological difficulties, but they are also less likely to seek medical attention when ill and are less likely to get regular checkups" (p. 155). Combined, these insights suggest that in general men tend to avoid help-seeking when it comes to both their physical and mental well-being.

It is well known that divorce and the subsequent post-divorce adjustment process generates a great deal of stress in the lives of people faced with such prospects. However, the level of stress one faces may vary depending upon who initiates the process. It is thought that the spouse initiating the divorce experiences greater stress prior to separation, while the spouse being "left" has greater feelings of distress at the time of the actual separation (Vaughan, 1981). Given that women are more likely to initiate divorce (Goldsmith, 1980), it is reasonable to conclude that men are those typically being left. Therefore, it follows that women experience their greatest degree of stress prior to separation, with men experiencing it after the separation has occurred. This perception falls in line with research conducted by Bloom and Caldwell (1981) which revealed that the most emotionally difficult time for women takes place before the divorce, while men suffer most immediately after. Therefore, adjusting to the single life after

divorce may be more difficult for men than it is for women (Gove, 1972b; Zeiss, Zeiss, & Johnson, 1980).

Research has revealed that divorced people experience worse mental health than those who are married or never-married and are generally worse off than those who are widowed (Gove, 1972a, 1972b, 1979; Gove et al., 1983). Because most of the research and literature related to divorce and post-divorce adjustment focuses on the needs and well-being of mothers and children, little is known about the lives of divorced men. Of course it is widely accepted that men generally remain financially stable after divorce, and many go on to remarry and sometimes begin new families. However, the emotional process men go through before, during, and after remains somewhat unknown. Even more a mystery is the post-divorce process and well-being of gay men who have married, fathered, and then divorced. While some researchers have sought to lift the veil on the lives of these men, their post-divorce adjustment and well-being seems to be of little interest to the mental health community as evidenced by the dearth of literature and research on this specific population (i.e., gay men who have divorced).

### **Research on Divorce**

The review of the literature begins with what is known about women and divorce, men and divorce, post-divorce well-being, and post-divorce gay men. What is evident from this review is the need for research to explore the post-divorce experience of gay men.

### **Men and Divorce**

It may be true that men are typically better off financially after divorce than women (Weitzman, 1985), but they often receive less social support when learning to cope with the conditions and demands of their new life (McKenry & Price, 1990). Prior to divorce, men are as dependent upon their wives for support as their wives are upon them. The difference, however, between men and women with regard to their level of dependency upon one another lies in the fact that the male's dependency is often conventionally concealed (Jordan, 1989). The socialization of men to hide their thoughts and feelings is so profound that to fail to do so may lead men to feelings of vulnerability, weakness, or a sense of being unmanly (Scher, 1981). Therefore, it is logical to assume that many men fail to reveal to their wives the true significance they play in their lives. This lack of vulnerability may be a factor that contributes to the feelings of resentment women often feel prior to divorce.

Given that marriage has more to offer men by way of physical and emotional support than it does women (Gove, 1972a, 1972b; Zeiss et al., 1980), it is not surprising to discover that

men seek reconciliation more often than women (Burns, 1980; Goldsmith, 1980; Jordan, 1989). Because men are typically less able to cope with the emotional consequences of divorce as compared to women (McKenry & Price, 1990) and take longer to adjust to the idea of divorce (Price-Bonham, Wright, & Pittman, 1983), reconciliation may be a more viable option when weighed against the prospect of divorce.

When a woman initiates a divorce and leaves her husband, the husband often experiences a state of shock at what is commonly perceived as an unexpected request to terminate the relationship (Jordan, 1989). However, when it is the man who initiates the divorce, he often does so feeling one of two emotions: (a) anger because his wife does not live up to his expectations or (b) guilt because deep down he believes he is abandoning his wife (Morgan, 1981).

Studies have revealed that divorced men exhibit higher rates of mental illness (Gove, 1972a) and mortality (Gove, 1973) than do married men. Others show that divorced men are more likely to engage in unhealthy behaviors such as drinking and driving (Umberson, 1987), and formerly married men with absent children have poorer mental health than any other category of married men (Hughes, 1989). Still others report that while men often experience increases in per capita income after divorce (Smock, 1993), they are also more than twice as likely to not be working full time when compared to men who are married (Forste & Heaton, 2004).

Umberson and Williams (1993) suggested that divorced fathers invest substantial energy in avoiding and repressing emotions, and doing so may be more compatible with the traditional male role of controlling and smothering their feelings. Men in their study reported coping with their feelings by avoiding thinking and/or talking about them, working harder, exercising more, “staying busy,” moving away from ex-wives and children, starting over with a new wife/family, drinking and taking drugs, and, finally, acts of violence.

Hetherington, Cox, and Cox (1976) conducted a longitudinal study that may be the earliest to investigate the effects of divorce specifically on fathers. While the intent of their writing was to reveal insight into the world of divorced fathers, they were clear to state that the study focused on “the impact of divorce on family functioning and the development of children” (p. 418). This statement does not impact the significance of the findings, but serves to highlight that research on divorce typically focuses on its impact on either the family system or the development of the child. Studies that address the father typically do so as an aspect of understanding his ability to effectively parent and/or the impact the divorce has upon the

parent/child relationship. In their study the authors identified three primary areas in which fathers experience problems after divorce: practical problems of daily living; interpersonal problems in the area of social life, intimate relationships, and relating to the children and former spouses; and problems related to self-concept and identity.

Practical problems of daily living revolved around issues regarding household maintenance and economic and/or occupational difficulties. The divorced fathers participating in the study “were more likely to get pick-up meals at irregular times and less likely to eat at home than were married men. They slept less and had more erratic sleep patterns, and had more difficulty shopping, cooking, laundry, and cleaning” (Hetherington et al., 1976, p. 421). The study also revealed that divorced fathers, as compared to married fathers, were more likely to increase their workload in order to increase their income. This is presumed to be a response to the greater economic stress experienced as a result of attempting to maintain two households. Interpersonal problems, social life, and intimate relationships seemed to be a particular issue for most of the adults (male and female) participating in the study. Nearly all complained that socialization in our culture is organized around couples. This was of particular concern for the women in the study given that they were typically awarded primary custody of children after divorcing and were, therefore, hampered further in their ability to participate in recreational activities.

White and Bloom (1981) found social behavior to be the most common source of difficulty for men after divorce. Social isolation and/or rapid re-attachment were common post-divorce behaviors. It seems re-attachment is a common means of coping. Jordan (1989) reported that men not living alone one to two years after separation were significantly more likely to report positive levels of adjustment.

Ironically, divorced fathers seem to have fewer problems interpersonally and often experience a surge in social activities over the first year. This surge is, however, short lived and declines to about that of the ex-wife by the second year. Men in the Hetherington, Cox, and Cox (1976) study often reported a peak in sexual activity during the first year after divorce. While many were pleased with the opportunity to experience sexual intimacy with a variety of partners, by the end of the first year, most reported a lack of satisfaction with their sexual encounters and expressed a desire for more meaningfully emotional intimacy.

Self-concept and identity issues seem to be of particular difficulty because there are no well-established models and/or set of norms for non-custodial fathering (Seltzer, 1991). Fathers

who are already marginalized by the divorce process often feel less and less involved in the day to day lives of their children. With deficient role models and limited social support, divorced fathers are left to navigate these new waters on their own. Umberson (1987) found that fathers not living with their children were more likely to engage in risky health and health-compromising behaviors related to substance use and abuse. While other studies show that divorced fathers not living with their children have poorer mental health scores related to anxiety, worry and happiness than divorced men without children or married men with/without children (Hughes, 1989). The difficulty these men often face maintaining contact with children may lead divorced fathers to experience substantial feelings of guilt and inadequacy and lead to the conclusion that they have failed as fathers (Riessman, 1990). A divorced father's perception that he is losing control of his family seems to be one of the underlying sources of strain (Umberson & Williams, 1993).

### **Post-Divorce Well-Being**

The literature on marital status and well-being consistently indicates that the level of psychological well-being of the divorced and widowed tends to be low. This is true with regard to mental illness (Bachrach, 1985; Gove, 1972a, 1972b, 1979), physical illness (Somers, 1979; Verbrugge, 1985), and mortality, particularly those types of mortality strongly related to one's psychological state (Gove, 1973; Helsing & Szklo, 1981). Falek and Britton (1974) have suggested that age, sex, prior psychological stability, education, socioeconomic status, number of crises occurring simultaneously, past experience in dealing with stress, and the availability of a support system at the time of the crisis are among the most important factors necessary for re-establishing psychological well-being after a crisis.

These findings are made only more alarming when taken into consideration with findings from research related to the stress related to parenting. Hughes (1989) suggested that "children may be a burden...when one lives with them without a spouse...[and] a source of anxiety and guilt for the parents who do not live with them" (p. 467). So, regardless of who has custody, the presence of children during the post-divorce adjustment process adds to its difficulty.

Traditionally, children and mothers have been the focus of research on well-being following divorce (Dudley, 1991). Little attention has been paid by the mental health community on the factors that cause distress to fathers in a post-divorce situation. Stone (2001) is the only study that has attempted to propose a model of father post-divorce well-being. In this exploratory study, Stone used the stress related to role transition (married father to single father)

to operationalize his model. He hypothesized that the father post-divorce well-being was impacted by the psychological distress brought on by the role ambiguity and the resultant lack of role clarity that occurred when men transition from married father to single, non-custodial parent. He cited research (McKenry, Price, Fine, & Serovich, 1992) that brings to light the ambiguous nature of the non-custodial parent role and the lack of normative societal guidelines essential for developing role clarity. His model suggests that many factors working together serve to create post-divorce psychological well-being. Predictor variables (i.e., role clarity, age, time since divorce, education, custody agreement, income, new intimate relationship, the encouragement of others) were thought to impact the mediating variable of (parent) role satisfaction and, thus, influence post-divorce well-being. In the end, Stone reported that income, education, and time since divorce do not seem to have a significant effect on men's post-divorce well-being.

While it is clear that one study does not close the case on men's post-divorce adjustment and/or well-being, Stone's research reinforces the need for research in this area. Additional research adds not only to the understanding of the needs divorced men have, but helps to establish the necessary understanding essential to developing the social guidelines required to lessen role ambiguity. Without such guidelines, role clarity is difficult to come by. With this in mind, it is not surprising that some researchers have suggested that establishing a new life after divorce may be more difficult than the divorce itself (Harry, 1983).

### **Post-Divorce and Gay Men**

Research focusing on the post-divorce experiences of gay men is sparse at best. Changes in some state's adoption laws, regulations regarding foster care, and advances in in-vitro and in-vivo fertilization have allowed more gay and lesbian individuals and couples to become parents and, thus, have spawned an increase in research related to gay and lesbian parenting (Bigner & Jacobsen, 1992; Harris & Turner, 1985; Miller, 1979a; Patterson, 2002; Scallen, 1982). However, this research, although interesting and important, does not address the specific lives and needs of post-divorce gay fathers.

### **Summary**

Masculine ideology and gender role expectations impact gay men in much the same way they do other men. Gay men's need to meet societal expectations is no less than that of men who identify as heterosexual. What is different, however, is the defining impulse of their sexual orientation and its contrary nature to much of what is thought to define traditional masculinity.

Many gay men feel the pressure to play the masculine role of husband and father while at the same time dealing with same-sex sexual attraction. Any conflict they feel between what they believe to be acceptable masculine behavior and their perceived ability to manifest that behavior results in internalized gender role conflict. Unfortunately, as males, they are less likely than women to seek out the help and support of a mental health professional to negotiate the difficulties this internal conflict may cause.

In the case of gay men who seek to meet culturally imposed gender role expectations by entering into an opposite sex relationship that leads to marriage and fatherhood, they face difficulty when it comes to maintaining their traditional masculine role and negotiating the desires of their sexual orientation. If they choose to come out publicly about their same-sex sexual desires they often face divorce and possible separation from their children. Once they begin to take steps toward entering the gay community they often discover, having fathered, that they remain rooted in the heterosexual community with regard to its traditional gender role expectations. As a result, many of these men feel they are not fully members of either the gay or heterosexual communities and thus experience psychological distress due to a lack of social support and feelings of marginalization.

## **CHAPTER III**

### **METHODS**

The purpose of this study was to add to the current understanding of how gender role conflict is related to attitudes and intentions toward seeking psychological help among divorced gay fathers. The results help to inform mental health professionals about the unique experiences of gay fathers who have divorced and potentially lead to improving how mental health professionals interact with and provide services for gay fathers who have divorced.

#### **Research Questions**

1. What is the relationship between gender role conflict (GRC) of gay divorced fathers and their
  - a. experience of psychological distress?
  - b. attitudes and intentions toward seeking psychological help?
2. What is the relationship between time since divorce and
  - a. gender role conflict?
  - b. experience of psychological distress?
  - c. attitudes and intentions toward seeking psychological help?
3. What is the relationship between length of marriage and
  - a. gender role conflict?
  - b. experience of psychological distress?
  - c. attitudes and intentions toward seeking psychological help?

Based on the research questions, the hypotheses related to gender role conflict of gay divorced fathers were as follows:

H<sub>1</sub>: Higher levels of GRC (reported as higher scores on the GRCS) will positively correlate with psychological distress.

H<sub>2</sub>: Higher levels of GRC (reported as higher scores on the GRCS) will negatively correlate with participants' (a) attitudes and intentions toward seeking psychological help, (b) time since divorce, and (c) number of years of marriage.

#### **Research Design**

The design of this study was based primarily on the work of Simonsen, Blazina, and Watkins (2000). Using a survey approach that included three of the four instruments employed by this study, they recruited 117 men from local gay community organizations as participants.



Following their lead and attempting to maintain consistency with the design of other studies focusing on men's attitudes toward seeking professional psychological help (Berger, Levant, McMillan, Kelleher, & Sellers, 2005; Blazina & Watkins, 1996; Good et al., 1989; Lane & Addis, 2005), this study also employed a survey-based approach.

Rea and Parker (1997) have stated that surveys have become a widely used and acknowledged research tool around the world and that they derive considerable credibility from their widespread use in academic institutions. The ease and convenience of the survey approach makes it an ideal means by which to gather information from representative samples that are readily generalizable to larger populations. Their ability to generate standardized data and replicability further add to their over-all value as an effective approach to research (Rea & Parker, 1997). For the purposes of this study, a web-based survey approach was selected due primarily to its ease of use and over-all cost effectiveness. Research has revealed that online surveys are as valid a data collection method as paper and pencil questionnaires and allow researchers to obtain larger samples with greater geographic diversity (Pequegnat et al., 2007). Although other researchers (Shannon & Bradshaw, 2002) have suggested that sample size can be impacted by potential participants' access to the internet and level of comfort with the computer, the relative scarceness of the population in this study made an on-line approach highly desirable due to its potential to increase sample size and geographic reach.

### **Participants**

The population from which participants for this study were drawn consisted of self-identified gay men who had previously married and fathered, are currently unmarried and divorced, and living openly as gay men. No other specific requirements were placed on the men who participated. Given that time since divorce and length of marriage were variables in the research design, no limitations were placed on either. Current same sex relationship status did not limit participation. Length of marriage, time since divorce, and current relationship status were all recorded along with other demographic data necessary for data analysis.

A non-random sampling technique was used that relied on a word of mouth/snowball effect for data collection. Data collection took place over a six month time period between August 2012 and February 2013. Other studies with similar design and focus have reported findings based on participation less than 150 (N=148, Blazina & Watkins, 1996; N=105, Lane & Addis, 2005; N=117, Simonsen et al., 2000). It was determined that approximately 100

participants would be required to maximize the power of the non-parametric statistical analyses mandated by the non-randomness of the sample.

### **Instruments**

All instruments in the study were used with the permission of the original authors when required (Appendix A). Items from four separate instruments, prompts for demographic data, and two (optional) open-ended questions comprised the questionnaire in the study. Participants were provided with informed consent material prior to beginning the questionnaire.

Demographic data included age, current relationship status, level of education, number of children, and number of years since divorce. Open-ended questions gathered information and data related to participants' experience with the mental health community and services they either sought out or wished were available to them and/or they thought others would benefit from. The two questions being asked were: (a) If at any time during or after your marriage you sought the services of a mental health professional what was the reason you believed you needed those services and what was or was not helpful about that experience? (b) What advice, help, services, etc. do you wish you had available to you before, during, or after your marriage that you think you or others could have/would benefit from? The four measures used are outlined in the order they appeared in the questionnaire. Table 3.1 provides a summary of the metrics associated with each of the measures being used.

Table 3.1

#### *Psychometric Properties of Instruments*

<b>Instrument</b>	<b>Number of Items</b>	<b>Total Score</b>	<b>Internal Consistency (Cronbach's <math>\alpha</math>)</b>	<b>Range of Subscale Reliability</b>
<i>Gender Role Conflict Scale</i>	37	222	.75 to .85	.71 to .91
<i>Attitudes Toward Seeking Professional Psychological Help Scale: Short Form</i>	10	40	.82 to .84	N/A
<i>Intentions to Seek Counseling Inventory</i>	17	68	.71 to .90	.71 to .90
<i>Hopkins Symptom Checklist</i>	58	232	.73 to .88	.84 to .87

***Gender Role Conflict Scale.*** The *Gender Role Conflict Scale* (GRCS; O'Neil et al., 1986) assesses *male gender role conflict*, defined as a "psychological state in which socialized gender roles have negative consequences on the person and others" (O'Neil et al., 1995, p. 167). The GRCS consists of 37 statements that target the extent to which respondents agree with statements related to how men interact with the world around them (Appendix B). Using a Likert scale, participants are asked to rate the degree to which they agree with each statement on a scale of 1 (*disagree*) to 6 (*agree*). The GRCS comprises four subscales: Success, Power and Competition (SPC); Restrictive Emotionality (RE); Restrictive Affectionate Behavior Between Men (RABBM); and Conflict Between Work and Family Relations (CBWFR). These subscales were established through factor analysis with orthogonal and oblique rotations and are thought to represent four of the main conflict areas facing men (O'Neil et al., 1986). Responses are summed with higher scores indicating a greater degree of gender-role conflict and fear of femininity.

The internal consistency of the measure is reported to range from .75 to .85 with test-retest reliability at .72 to .86 (O'Neil et al., 1986). Other studies have reported similar reliabilities ranging from .82 to .89 (Schaub & Williams, 2007). See Table 3.2 for a more detailed reporting on the findings related to measures of internal consistency and reliability. The GRCS has demonstrated discriminant validity with the *Personal Attributes Questionnaire* (Sharpe & Heppner, 1991; Sharpe, Heppner, & Dixon, 1995) and convergent validity with the *Brannon Masculinity Scale* (Good et al., 1995).

***Attitudes Toward Seeking Professional Psychological Help Scale.*** The *Attitudes Toward Seeking Professional Psychological Help Scale: Short Form* (ATSPPH-S; Fischer & Farina, 1995; Fischer & Turner, 1970) was originally developed in 1970 as a 29 item scale but was revised in 1995 to its current 10 item format (Appendix C). The revised 10 item and the original 29 item scales correlate at .87 suggesting they access a similar construct (Fischer & Farina, 1995). The short form has also been reported to correlate (.37) with previous use of professional help for a problem (Vogel & Wester, 2003). Items are rated on a four-point Likert scale ranging from 1 (*disagree*) to 4 (*agree*). Lower total scores (those ranging from 10 to 20 points) indicate more negative attitudes while higher scores (those ranging from 20 to 40) indicate more positive attitudes about seeking professional psychological help. "I would

Table 3.2

*Internal Consistency, Reliabilities of GRCS Across Various Diverse Samples*

<b>STUDY AND SAMPLE</b>	<b>SPC</b>	<b>RE</b>	<b>RABBM</b>	<b>CBWFR</b>	<b>Total Score</b>
O'Neil et al (1986)					
American College Students N=527	0.85	0.82	0.83	0.75	N/A
Good et al. (1995)					
American College Student N=1043					
Sample 1	0.83	0.81	0.86	0.75	0.88
Sample 2	0.84	0.84	0.83	0.74	0.90
Sample 3	0.86	0.84	0.88	0.78	0.89
Rogers, Abbey-Hines, & Rando (1997)					
College Men N=198	0.87	0.88	0.86	0.79	N/A
Borthick, Knox, Taylor, & Dietrich (1997)					
Women College Students N=427	0.84	0.86	0.83	0.81	N/A
Pylluk & Casas (1998)					
Ethnic Men (N=153)	0.71	0.84	0.85	0.79	0.87
Non Ethnic Men (N=128)	0.87	0.88	0.87	0.84	0.91
Laurent (1997)					
African American Adult Men N=193	0.88	0.83	0.90	0.76	N/A
Simonsen (1998)					
Gay Men N=117	0.88	0.85	0.75	0.81	N/A
Chamberlin (1993)					
Adult Airline Pilots N=188	0.84	0.91	0.86	0.80	0.89
JO (2000)					
Korean Students N=303	0.85	0.77	0.71	0.67	N/A
Kang (2001)					
Korean Students N=303	0.78	0.76	0.72	0.67	N/A
Gulder (1999)					
German Adult Men N=115	0.81	0.87	0.87	0.87	N/A
Gough (1999)					
Australian Students N=189	0.85	0.71	0.81	0.81	N/A
Kim (1990)					
Asian American Men N=125	0.87	0.85	0.84	0.78	N/A
Theodore (1997)					
Australian Men N=350					
18-24yrs	0.84	0.84	0.88	0.78	N/A
36-45yrs	0.85	0.89	0.91	0.90	N/A
55+yrs	0.86	0.88	0.85	0.80	N/A
Torres, Rivera (1995)					
Low Class Puerto Rican Men N=84	0.71	0.67	0.80	0.76	N/A
Charter, Graff, & Arnold (1986)					
Canadian Men N=555	0.81	0.90	0.84	0.75	0.89
Hayashi (1999)					
Japanese Men N=270	0.70	0.60	0.59	0.73	0.73
Tsai (2000)					
Taiwanese Men N=737	0.85	0.82	0.83	0.72	0.86

(Adapted from O'Neil, 2011)

want to get psychological help if I were worried or upset for a long period of time" and "A person should work out his or her own problems: getting psychological counseling would be a last resort" are representative of the types of questions being asked.

Internal consistency and reliabilities have been found to be adequate (Vogel, Wester, Wei, & Boysen, 2004). Internal consistency of the short form has been demonstrated to range from .82 to .84 (Constantine, 2002; Fischer & Farina, 1995; Komiya, Good, & Sherrod, 2000; Vogel, Wade, & Haake, 2006). Fischer and Farina (1995) have reported a 4-week test-retest reliability of .80 and a correlation of .87 with the 29 question long form. Research conducted by Elhai, Schweinle, and Anderson (2008) corroborate previous findings regarding the reliability of the ATSPPHS-S and report on evidence of both its construct and criterion validity.

***Intentions to Seek Counseling Inventory.*** The *Intentions to Seek Counseling Inventory* (ISCI; Cash, Begley, McCown, & Weise, 1975) consists of 17-items that ask participants to indicate how likely they would be to seek counseling if they were experiencing specific problems (e.g., depression, relationship difficulties, drug problems). Participants record their responses using a four-point Likert scale ranging from 1 (*very unlikely*) to 4 (*very likely*) that they would seek counseling for the problem indicated in the question (Appendix D). Relationship difficulties, depression, personal concerns, and anxiety are examples of some of the problems referenced by the questions. Total scores ranging from 17 to 42 indicate the participant is less likely to seek services while scores ranging from 43 to 68 indicate the participant is more likely to seek services. The ISCI is comprised of three subscales: Psychological and Interpersonal Problems (10 items), Academic Concerns (4 items), and Drug/Alcohol Concerns (2 items). Scores from the subscales can be used individually or combined to assess one's intention to seek counseling.

Internal consistency estimates for the three subscales are reported as .90 for Interpersonal Problems, .71 for Academic Problems, and .86 for Drug/Alcohol Problems (Cepeda-Benito & Short, 1998). Vogel and Wei (2005) have reported the internal consistency as .89 for the total score, .88 for interpersonal, .70 academic, and .87 for drug/alcohol. The validity of the ISCI has been established by a number of studies. It has been found to detect variation in college students' intentions to seek therapy based on counselor attractiveness (Cash et al., 1975), and mirror respondents' attitudes towards seeking help (Kelly & Achter, 1995) as well as relate to the significance of the presenting problem (Lopez, Melendez, Sauer, Berger, & Wyssmann, 1998).

**Hopkins Symptom Checklist.** The *Hopkins Symptom Checklist* (HSCL-58; Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974) is a 58-item-symptom self-report inventory (Appendix E). The measure characterizes psychological distress in terms of five primary symptom dimensions: somatization (SOM), obsessive-compulsive (OBS), interpersonal sensitivity (INT), depression (DEP), and anxiety (ANX). The inventory requires participants to respond to a list of symptoms by indicating to what extent each applies to them using a 1 to 4 Likert scale (1 = *not at all*, 2 = *a bit*, 3 = *quite a lot*, 4 = *very much*). Numerical responses can be totaled by scale or into an overall score. Higher scores reflect increased severity and frequency of symptoms. The literature supports construct validity of the HSCL-58 (Kohn, Lafreniere, & Gurevich, 1991; Page & Bennesch, 1993). Internal consistency for each dimension has been reported to range from .84 to .87 with test-retest reliability ranging from .64 to .87 over a one-week interval between testing situations (Derogatis et al., 1974).

**Open-ended questions.** Two open-ended questions were asked at the end of the survey in an effort to gather information and data related to participants' experience with the mental health community and services they either sought out or wished were available to them and/or they think others could benefit from. The two questions being asked were: (1) If at any time during or after your marriage you sought the services of a mental health professional what was the reason you believed you needed those services and what was or was not helpful about that experience? (2) What advice, help, services, etc. do you wish you had available to you before, during, or after your marriage that you think you or others could have/would benefit from? The intent was that question one would reveal why some men break away from traditional masculine behavior and seek out professional psychological help. Question two was offered as an opportunity to the men participating in the study to use their own experience to provide greater insight into the needs of this relatively unknown population.

**Demographic questionnaire.** Standard demographic data such as age, ethnicity, and education level were collected as the last portion of the survey (Appendix F). Answers to the questions, "How many years were you married?" and "On what date did your divorce become finalized?" are specifically related to the research questions and were used as a part of the primary data analysis. Information related to questions like "How many children did you father while married?" and "What is your highest level of education?" were intended primarily for post-hoc data analysis.

### **Data Collection Procedures**

Data collection took place in the form of an internet web-based survey using the on-line survey program available at <http://www.surveymonkey.com>. A web-based survey approach was selected for this study due to its ease of use and over-all cost effectiveness. Online surveys have been found to be as valid a data collection method as paper and pencil questionnaires and allow researchers to obtain larger samples with greater geographic diversity (Pequegnat et al., 2007).

### **Sampling Plan**

Participants for this study were recruited using a “snowball effect” method of communication. Upon IRB approval (Appendix G) to conduct this study, postings were generated intended to advertise and solicit participation via Facebook, an internet-based social networking site (Appendix H). LGBT support groups designed specifically for members of the LGBT community who have children were identified and contacted either through their Facebook page or directly through advertised email addresses (Appendix I and J). Support groups who host on-line web pages were asked to post information about the nature of the study and provide links to the on-line survey. Requests were made to those groups who host public gatherings for their members to offer information to their members at these gatherings in the form of hand outs or through personal contact with the primary researcher. Whenever possible, personal contacts, forwarded e-mail correspondences, and private referrals were used to publicize the study. In all cases potential participants were provided with the primary researcher’s name and contact information along with a brief summary of the nature of the research and a world wide web address that, when accessed, provided viewers with an opportunity to learn more about the research being conducted, an opportunity to indicate informed consent (Appendix K), and eventually the full questionnaire.

Postings, e-mails, and personal contacts were continued on a regular basis until the minimum number of participants (100) was obtained. The web-based survey remained available to the public for six (6) months.

### **Instructions to Participants**

When making personal contact, posting on-line, or sending e-mail correspondence or announcements, participants were invited to participate in the research study and were provided with a link to the on-line survey. Regardless of the nature of the initial contact with potential participants, all feasible efforts were made to introduce myself as the primary researcher and

provide a brief overview of the purpose and design of the study, eligibility requirements for participation, information regarding links to the survey material, and how to request results or a final summary of the study. In addition, whenever possible, potential participants were provided with my e-mail address so that they were able to ask questions or make comments prior to accessing the survey materials.

### **Informed Consent for Participants**

Upon accessing the on-line survey, participants were provided with information relating to informed consent and the responsibilities of both the researcher and participants. Included in the informed consent was the purpose and nature of the study, potential risks and/or benefits to participation, means by which anonymity and confidentiality would be maintained, and the voluntary nature of participation. Participants were also provided with the IRB approval number and notification that data and conclusions derived from the study may be used in publications and presentations. Contact information and university affiliation were also provided so participants would again be given an opportunity to ask questions and/or make comments before actual participation. By continuing on and completing the survey participants indicated their consent to participate.

### **Data Analysis**

Access to the on-line questionnaire required both a user name and password. Once accessed, data could be downloaded directly in the form of an Excel spreadsheet and converted for analysis via IBM SPSS Statistics 20 software. All data collected was downloaded and stored on a password protected portable hard drive. While data was not being downloaded or analyzed the portable hard drive was stored in a locked fireproof safe.

Data collected from the standardized measures (*Gender Role Conflict Scale, Attitudes Toward Seeking Professional Psychological Help Scale, Intentions to Seek Counseling Inventory, Hopkins Symptom Checklist*) produced interval-level data via Likert-like scales. Interval-level data was analyzed, described, and reported as means and standard deviations. Correlational analysis was conducted on interval-level data by way of Pearson  $r$ . The demographic portion of the survey yielded both nominal (e.g., gender, ethnicity, relationship status) and interval-level data (e.g., age, length of marriage, years since divorce). Data from the demographic portion of the survey was analyzed, described, and reported as frequencies, means, and standard deviations. The open-ended responses at the end of the survey yielded qualitative



data that was analyzed by way of coding, sorting, and identifying emerging themes (Heppner, Kivlighan, & Wampold, 1999).

### **Summary**

This purpose of this study was to identify statistical relationships between gender role conflict, psychological distress, and attitudes and intentions toward seeking psychological help among gay men who have married, fathered, and subsequently divorced. Data used to test the research questions was gathered via an on-line questionnaire. The questionnaire was comprised of six components: (a) *Gender Role Conflict Scale*, (b) *Attitudes Toward Seeking Professional Psychological Help Scale*, (c) *Intentions to Seeking Counseling Inventory*, (d) *Hopkins Symptom Checklist*, (e) a demographic questionnaire, and (f) two open-ended prompts. The target population for this study was self-identified gay men who had once married, fathered and subsequently divorced. Data regarding age, length of marriage, and time since divorce were gathered for analysis but not used as limiting factors for participation. Data analysis focused on determining the statistical strength of relationships among the five primary factors being analyzed (gender role conflict, attitudes toward seeking professional psychological help, psychological distress, length of marriage, and time since divorce).

## CHAPTER IV

### RESULTS

The results of the data analyses represent responses provided by self-identified gay divorced fathers responding to an on-line questionnaire ( $N = 105$ ). Participation was solicited through word of mouth, personal email invitations, and user groups identified on the on-line social networking site Facebook. Numerous internet searches on topics related to gay fathers, gay and lesbian parenting and support groups for gay and lesbian parents resulted in an array of organizations offering services to potential participants. The on-line magazine *Gay Parent* provided a state by state listing of organizations offering support to families in the LGBT community and was a primary source for points of contact within the United States. Whenever contact information was made available for the groups and organizations identified, an email was sent to the point of contact inviting members to participate in the study.

In total, 145 individuals initiated participation in the study, with 114 qualifying for full participation. As a part of the informed consent portion of the study potential participants were required to respond “yes” or “no” to the following four statements: *I identify my sexual orientation as gay or homosexual; I was at one time married to a woman (women) and fathered biological children with my wife (wives); I am currently divorced from the mother(s) of my children; I am currently not married to a woman and live my life as a gay/homosexual male.* Upon submitting their responses, participants answering “no” to any statement were exited from the survey and thanked for their time and interest in the study. Participants who answered “yes” to each of the four statements continued on to the informed consent and, upon agreeing to participate, to the full questionnaire. Of the 114 men who answered “yes” to each of the four statements, 105 completed all portions of the questionnaire and were included in the pool for data analysis.

#### Participants

The men participating in this study ranged in age from 29 to 78 ( $M = 54$ ;  $SD = 10$ ) and reported being married from 1 to 38 years ( $M = 18$ ;  $SD = 8$ ). Four (4) men reported having married twice and fathering children with both wives. Participants reported time since divorce to from 5 months to just under 37 years ( $M = 10$ ;  $SD = 8$ ). Total children sired by the men in this study was 237 (males = 129; females = 108) with the number of births per father ranging from 1

to 6 ( $M = 2$ ;  $SD = 1$ ). Table 4.1 provides a summary of the demographic data related to the participants' marriage and fathering.

Table 4.1

*Summary of Marriage and Fathering Data (N=105)*

<b>Demographic</b>	<b>Range</b>	<b><i>M</i></b>	<b><i>SD</i></b>
Participant's Age	29 to 78	54	10
Years Married	1 to 38	18	8
# of Children	1 to 6	2	1
Current Age of Children	1 to 51	24	10
Age of Children at Time of Divorce	1 to 35	14	8
Years Divorced	< 1 to 37	10	8

The majority of participants identified as Caucasian (91%) and primarily resided in the United States (90%). Most were educated at the bachelor's degree level or higher (80%). A majority reported annual incomes of less than \$80,000 per year (52%). When questioned about their religious affiliations, the two most common responses were agnostic (13%) and other (25%). Table 4.2 summarizes demographic data related to the participants' religious affiliation, income, education, racial identity, and national affiliation.

Table 4.2

*Summary of Demographic Data*

<b>Religious Affiliation</b>	<b>Frequency</b>	<b>%</b>	<b>Annual Income</b>	<b>Frequency</b>	<b>%</b>
Agnostic	14	13.0	<\$20,000	4	3.8
Anglican/Episcopalian	9	8.6	\$20,000 - \$39,999	20	19.0
Atheist	8	7.4	\$40,000 - \$59,999	12	11.4
Baptist	1	< 1.0	\$60,000 - \$79,999	16	15.2
Buddhist	1	< 1.0	\$80,000 - \$99,999	13	12.4
Catholic	10	9.5	\$100,000 - \$119,999	10	9.5
Christian Science	1	< 1.0	\$120,000 - \$139,999	8	7.6
Congregationalist	2	1.9	\$140,000 - \$159,999	5	4.8
Islam/Muslim	1	< 1.0	>\$160,000	9	8.6
Jewish	7	6.7	No Response	8	7.6
Latter-day Saints	5	4.8			
Lutheran	3	2.9	<b>Education</b>	<b>Frequency</b>	<b>%</b>
Methodist	6	5.7	High School or equivalent	6	5.7
Pentecostal	1	< 1.0	Trade School	5	4.8
Presbyterian	3	2.9	Associates Degree	10	9.5
Unitarian/Universalist	5	4.8	Bachelor's Degree	40	38.1
Other	26	24.8	Master's Degree	35	33.3
No Response	2	1.9	Doctorate	9	8.6
<b>Racial Identity</b>	<b>Frequency</b>	<b>%</b>	<b>National Affiliation</b>	<b>Frequency</b>	<b>%</b>
African-American	2	1.9	Australia	1	< 1.0
Caucasian	96	91.4	Canada	10	9.5
Latino/Hispanic	4	3.8	United States	94	89.5
Pacific Islander	1	0.9			
Other	2	1.9			

**Analysis of Quantitative Data**

The purpose of this study was to add to the current understanding of how gender role conflict is related to psychological distress and attitudes toward seeking professional psychological help among gay divorced fathers. This study moves beyond the only other study focusing specifically on gender role conflict in the lives of gay fathers (Kosmopoulos, 2008) by

assessing the relationship GRC has to other factors relevant in the lives of the participants; specifically, the length of their marriage and the amount of time passed since their divorce. A summary of the range of scores, means, and standard deviations for the sample and the strength and nature of the relationships among the variables is reported in Table 4.3.

Table 4.3

*Summary of Range, Means, Standard Deviations, and Relationships for Sample (N=105)*

	Total	Sample			1	2	3	4	5	6
	Range	Range	M	SD						
1. GRCS	37 to 222	41 to 186	111	25	1.000	-.319**	-.205*	.298**	-.140	-.142
2. ATSPPH-S	10 to 40	11 to 40	31	6		1.000	.608**	-.004	.140	-.051
3. ISCI	17 to 68	21 to 65	42	8			1.000	.160	.093	.080
4. HSCL-58	58 to 232	58 to 200	88	24				1.000	-.283**	.081
5. Years Married									1.000	-.283**
6. Years Divorced										1.000

\* Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

### Gender Role Conflict

Overall scores on the *Gender Role Conflict Scale* (GRCS; O'Neil et al., 1986) are determined by summing the value respondents place on each of the 37 statements included in the instrument. Higher scores indicate a greater degree of gender-role conflict and fear of femininity. Total scores can range from low of 37 to high of 222. Scores calculated for the participants in this study ranged from 41 to 186 with a mean of 111 ( $SD = 25$ ). See Figure 4.1 for reported distribution of participants' GRCS scores.

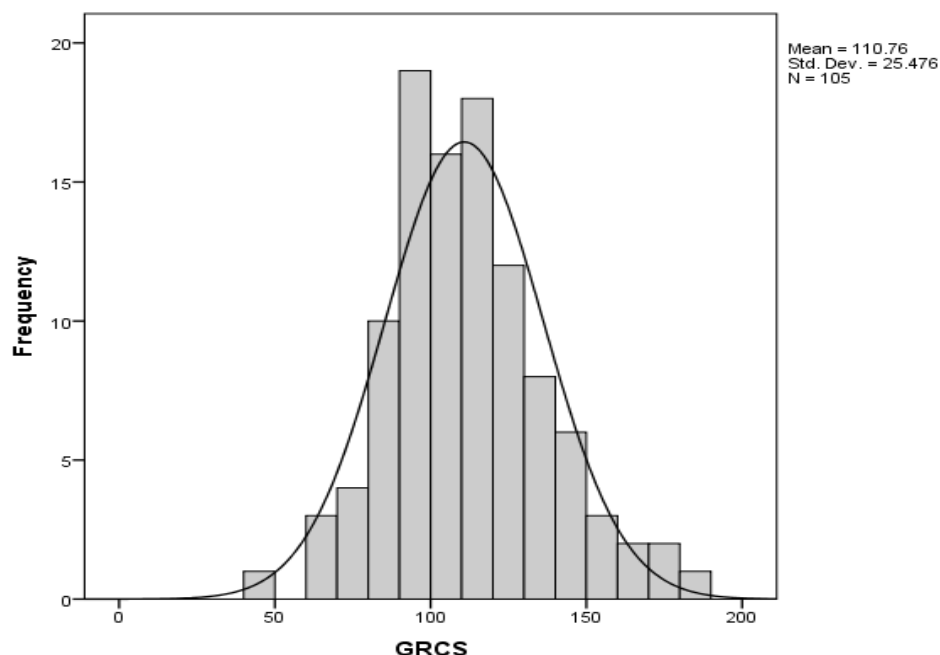


Figure 4.1. The distribution and frequency of participants' GRCS scores.

### Attitudes and Intentions Toward Seeking Psychological Help

Scores from the *Attitudes Toward Seeking Professional Psychological Help Scale: Short Form* (ATSPPH-S; Fischer & Farina, 1995; Fischer & Turner, 1970) and the *Intentions to Seek Counseling Inventory* (ISCI; Cash et al., 1975) were both used to assess participants' attitudes toward seeking professional psychological help. Lower total scores (10 to 25) on the ATSPPH-S indicate more negative attitudes while higher scores (26 to 40) indicate more positive attitudes about seeking professional psychological help. Total ATSPPH-S scores for participants in this study ranged from 11 to 40 with a mean of 31 ( $SD = 6$ ) (Figure 4.2). In turn, lower scores (17 to 42) on the ISCI indicate the participant is less likely to seek services while higher scores (43 to 68) indicate the participant is more likely to seek services. Total ISCI scores for participants in this study ranged from 21 to 65 with a mean of 42 ( $SD = 8$ ) (Figure 4.3). Analysis of the data generated in this study support a statistically significant positive relationship between scores on the ATSPPH-S and those on the ISCI,  $r(103) = .608, p < .05$ .

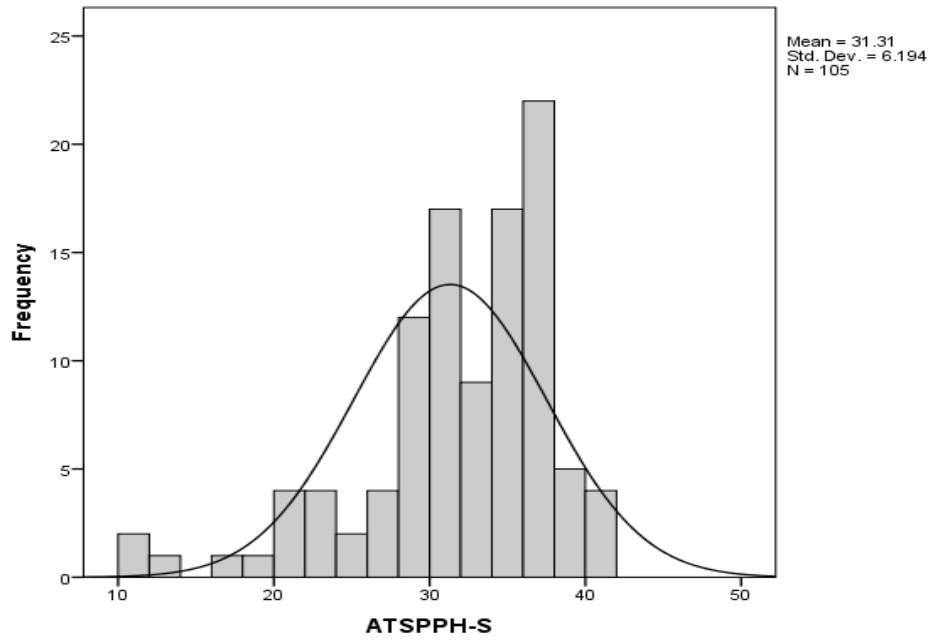


Figure 4.2. The distribution and frequency of participants' ATSPPH-S scores.

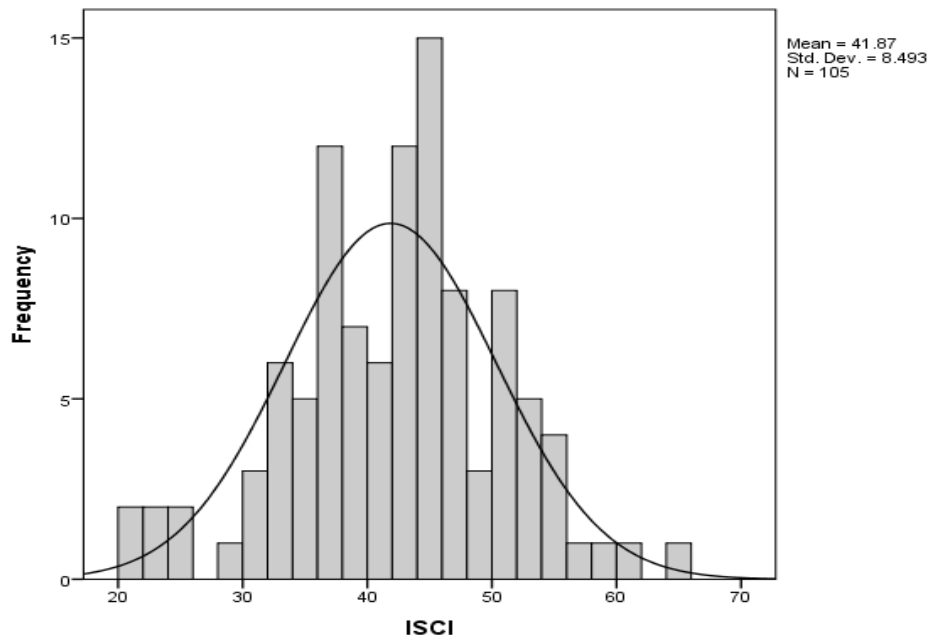


Figure 4.3. The distribution and frequency of participants' ISCS scores.

## Psychological Distress

Psychological distress was evaluated through the use of the *Hopkins Symptom Checklist* (HSCL-58; Derogatis et al., 1974). Numerical responses were totaled into an overall score (range 58 to 232) where higher scores reflect increased severity and frequency of symptoms. Scores from participants in this study ranged from 58 to 200 with a mean of 88 ( $SD = 24$ ).

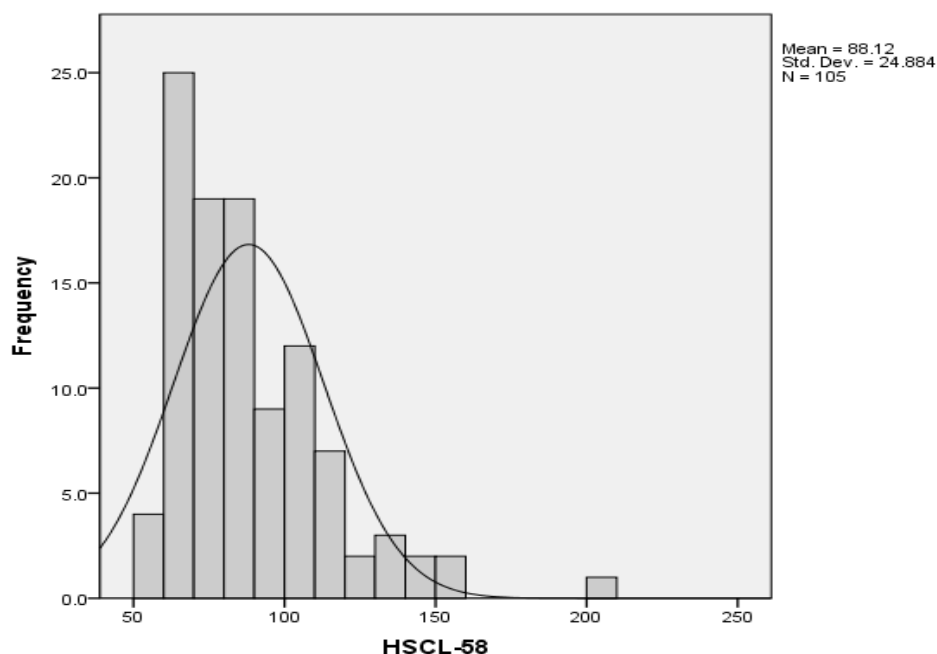


Figure 4.4. The distribution and frequency of participants' HSCL-58 scores.

## Research Question #1

*What is the relationship between gender role conflict of gay divorced fathers and their (a) experience of psychological distress and (b) attitudes and intentions toward seeking psychological help?*

Significant relationships were found between the level of GRC a gay divorced father experiences and both his psychological distress and attitudes toward seeking professional psychological help. It was hypothesized ( $H_1$ ) that higher levels of GRC (reported as higher scores on the GRCS) would positively correlate with psychological distress (reported as higher scores on the HSCL-58). As predicted, higher levels of GRC positively correlated with psychological distress,  $r(103) = .298, p < .01$ ; see Table 4.4. While GRC is not the only cause of psychological distress, when a man feels conflicted between his perception of true masculinity and his own ability to match that ideal, psychological distress is a typical byproduct (Pleck,



1995). Therefore, it was expected that men with higher levels of GRC would also experience higher levels of psychological distress.

Analysis revealed strong correlations between scores on the GRCS and both the ATSPPH-S,  $r(103) = -.319, p < .01$ , and the ISCI,  $r(103) = -.205, p < .05$ , which together were used to assess the participants' attitudes toward seeking professional psychological help. The first part of H<sub>2</sub> (*GRC negatively correlates to attitudes toward help-seeking*) was supported by these findings (Table 4.4). One of the underlying hypotheses driving this study (H<sub>2</sub>) proposed that higher levels of GRC (reported as higher scores on the GRCS) would negatively correlate with participants' attitudes toward help-seeking. Therefore, it was predicted that participants with higher scores on the GRCS would have lower scores on both the ATSPPH-S and the ISCI. Because help-seeking runs counter to the masculine values of independence, emotional control, and the drive to maintain status and power (Williams, 2007), it was predicted that men with higher levels of GRC would not express an interest in mental health services and have negative attitudes toward seeking professional psychological help.

It is this issue that is truly at the heart of this study. If men experiencing high levels of GRC are also those with the greatest psychological distress, the ideal would be that they would also have positive attitudes and greater intentions toward seeking professional psychological help. At issue for members of the mental health community is the correlation that exists between higher levels of GRC and men's negative attitudes and intentions toward seeking psychological help.

### **Research Question #2**

*What is the relationship between time since divorce and (a) gender role conflict, (b) experience of psychological distress, and (c) attitudes and intentions toward seeking psychological help?*

It was hypothesized (H<sub>2</sub>) that higher levels of GRC would negatively correlate with the number of years participants had been divorced. While a negative relationship was identified between GRC and time since divorce, the correlation was not found to be statistically significant,  $r(103) = -.142, p = .150$ . Therefore, the hypothesized relationship was not supported.

Analysis of the data revealed no significant relationship between the length of time the participants' had been divorced and their psychological distress,  $r(103) = .081, p = .409$ . Likewise, no relationship was identified between the time since divorce and either measure used

to assess the participants' attitudes toward seeking professional psychological help, ATSPPH-S,  $r(103) = -.051, p = .605$ ; ISCI,  $r(103) = .080, p = .420$ .

### **Research Question #3**

*What is the relationship between length of marriage and (a) gender role conflict, (b) experience of psychological distress, and (c) attitudes and intentions toward seeking psychological help?*

It was hypothesized (H<sub>2</sub>) that the higher levels of GRC would negatively correlate with the number of years the participants had been married. Although a negative relationship was identified, statistical significance was not reached,  $r(103) = -.140, p = .155$ . Therefore, the hypothesized relationship was not supported.

In contrast, a statistically significant relationship was identified between the length of the participants' marriage and their current psychological distress,  $r(103) = -.283, p < .01$ . The longer participants reported they had been married to their ex-wives, the lower their current psychological distress.

No significant relationships were identified between the length of the marriage and either of the measures related to the participants' attitudes toward or intention to seek professional psychological help, ATSPPH-S,  $r(103) = .140, p = .154$ ; ISCI,  $r(103) = .093, p = .347$ .

### **Interpretation of Responses to Open-Ended Questions**

Two open-ended questions were asked as a part of the on-line survey, namely

*If at any time during or after your marriage you sought the services of a mental health professional what was the reason you believed you needed those services and what was or was not helpful about that experience?*

*What advice, help, services, etc. do you wish you had available to you before, during, or after your marriage that you think you or others could have/would benefit from?*

The responses to question one were reviewed to identify the participants who had sought mental health services during or subsequent to their divorce. These responses were then sorted to identify (a) reason for seeking services and (b) if those services were/not helpful. The reasons participants sought professional help were coded as themes (e.g., coming-out, depression, sexual identity). To determine the helpfulness of these services, responses were coded as "yes" or "no." For question two, responses were reviewed to identify common themes grouped as beneficial advice, help, or services. In coding responses to both questions, responses not easily grouped according to their use of a common term were reviewed to determine if the content could be used

to place them within one of the identified themes. Responses with content that would not place them under one of the existing themes were categorized by the term that best defined their content and considered an additional theme. This process was continued until all responses had been associated with a theme.

Regarding question number one, 87 participants (83%) reported seeking mental health services at the time of divorce or later in life. In total, 51 men reported on the helpfulness of the mental health services they received. Of those providing a response, 39 (76%) reported that they found the services to be helpful. Although 87 men provided some form of response to the question, only 81 men (93%) identified the reason why they sought services. Some offered multiple reasons for seeking mental health services or indicated that they had sought out services on different occasions for different reasons. When multiple presenting problems were identified within a single response, each was categorized as if it were a discrete response. Dominant themes related to seeking professional mental health services were coming to terms with the coming-out process (26%), depression (26%), and sexual identity issues (22%). Table 4.4 reports themes identified among the reasons participants believed they needed services from a mental health professional.

Question number two proved more difficult with regard to grouping according to themes. The question invited participants to offer three different types of information: (a) advice for others, (b) resources they wish had been available to them, and (c) resources others could use. While most of the responses allowed for the identification of common themes, the advice for others responses did not. Advice for others responses were limited (4 of 86 total responses) and each different in their focus. To ease interpretation, the advice responses were omitted from the responses being interpreted and grouped. Dominant themes related to resources included support groups (23%), counseling or therapy (21%) and general support (16%). Table 4.5 reports the common themes identified by the participants.

Table 4.4

*Themes from Open-Ended Question #1  
(N=81)*

<b>Common Themes</b>	<b>Count</b>	<b>%</b>
Coming Out	29	26%
Depression	29	26%
Sexual Identity	24	22%
Couples Issues	12	11%
Divorce	9	8%
Suicide	4	4%
Addiction / Drug Use	2	2%
Parenting Issues	1	>1%
PTSD	1	>1%
<b>Total</b>	<b>111</b>	

Table 4.5

*Themes from Open-Ended Question #2  
(N=86)*

<b>Common Themes</b>	<b>Count</b>	<b>%</b>
Support Group	19	23%
Counseling/Therapy	17	21%
General Support	13	16%
Knowing Other Gay Fathers	8	10%
Self-Awareness	8	10%
Help for Wife	6	7%
Legal Counsel	5	6%
Honest Advice	3	4%
Knowledgeable Therapist	3	4%
<b>Total</b>	<b>82</b>	

### **Post Hoc Analysis**

Post hoc analysis began with the feedback participants provided in response to the first open-ended question, which inquired about why participants believed they needed mental health services and if those services were helpful. With the primary question driving this research focusing on the nature of the relationship between GRC and the participants' attitude toward seeking professional psychological help, correlational analysis was conducted to determine the strength of the relationships between the participants' use of mental health services, their thoughts about how helpful those services were, their scores on the GRCS, and their scores on the ATSPPH-S and ITCS. A summary of the results is reported in Table 4.6.

By way of gaining a more comprehensive understanding of the factors that influence the lives of the men who participated in this study, additional analyses centered on demographic data. These analyses were conducted to identify relationships between and among demographic data and the participants' GRC, attitudes toward seeking professional psychological help, and their level of psychological distress.

Table 4.6

*Use and Value of Mental Health Services (N=87)*

		Received Mental Health Services	Services Were Helpful
GRCS	Pearson Correlation	-.103	.186
	Sig. (2-tailed)	.296	.057
ATSPPH-S	Pearson Correlation	.409**	.250*
	Sig. (2-tailed)	.000	.010
ITSC	Pearson Correlation	.212*	.163
	Sig. (2-tailed)	.030	.096
Received Mental Health Services	Pearson Correlation	1.000	.340**
	Sig. (2-tailed)		.000

\* Correlation is significant at the 0.05 level (2-tailed)

\*\* Correlation is significant at the 0.01 level (2-tailed)

### The Helpfulness of Mental Health Services

No statistically significant relationship was identified between the participants' GRCS scores and either their use of mental health services or how helpful they found those services to be. However, it is interesting to note that, while men with higher levels of GRC were less likely to seek out mental health services,  $r(85) = -.103$ ,  $p = .296$ , those who did seek services reported the services to be helpful at a level that approached statistical significance,  $r(85) = .186$ ,  $p = .057$ . There was a significant relationship between the participants' use of mental health services and the value they placed on their experience; men receiving services reported those services as being helpful,  $r(85) = .340$ ,  $p < .01$ .

It comes as no surprise that men with more positive attitudes and intentions toward seeking professional psychological help were significantly more likely to report having sought mental health services at or subsequent to their divorce. Statistically significant relationships were identified between the participants' use of mental health services and both the ATSPPH-S,  $r(85) = .409$ ,  $p < .01$ , and the ITSC,  $r(85) = .212$ ,  $p < .05$ .

Likewise, there was a connection between the value participants placed on their experience of mental health services and their attitudes toward help seeking. Men who reported having a positive experience with mental health services were significantly more likely to have positive attitudes toward seeking professional psychological help,  $r(85) = .250$ ,  $p < .01$ .

However, the same relationship was not identified between the participants' positive experience of mental health services and their intention to seek counseling,  $r(85) = .163, p = .096$ .

### The Significance of Age

While some demographic data (i.e., religious affiliation, ethnicity) did not reveal significant correlations with any of the other variables, many did. Age was found to have significant relationships with more variables than any other demographic data collected. Significant correlations were identified between the age of the participants and a number of the other factors assessed in this study (Table 4.7). Of particular relevance to this study were the statistically significant relationships between older participants and lower scores on the GRCS,  $r(103) = -.293, p < .01$  and more positive attitudes toward seeking professional psychological help, ATSPPH-S,  $r(103) = .193, p < .05$ . Older participants were also found to be significantly more likely to have been both married,  $r(103) = .469, p < .01$  and divorced,  $r(103) = .494, p < .01$  for longer periods of time, as well as more positive current relationship with their ex-wife,  $r(103) = .266, p < .01$ .

An independent-samples t-test was conducted to compare the age of participants who had received mental health services to those who had not. There was a significant difference in the age of the men who had received services ( $M = 55.07, SD = 9.6$ ) compared to those who had not ( $M = 49.42, SD = 10.3$ );  $t(103) = -2.27, p = .025$ . These results suggest that age is a factor in man's participation in mental health services. Figure 4.5 summarizes the frequency and distribution of participants' ages.

Table 4.7

*The Significance of Age (N=105)*

				Years Married	Years Divorced	Current Relationship With Ex- Wife
		GRCS	ATSPPH-S			
Age	Pearson Correlation	-.293**	.193*	.469**	.494**	.266**
	Sig. (2-tailed)	.002	.049	.000	.000	.006

\* Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

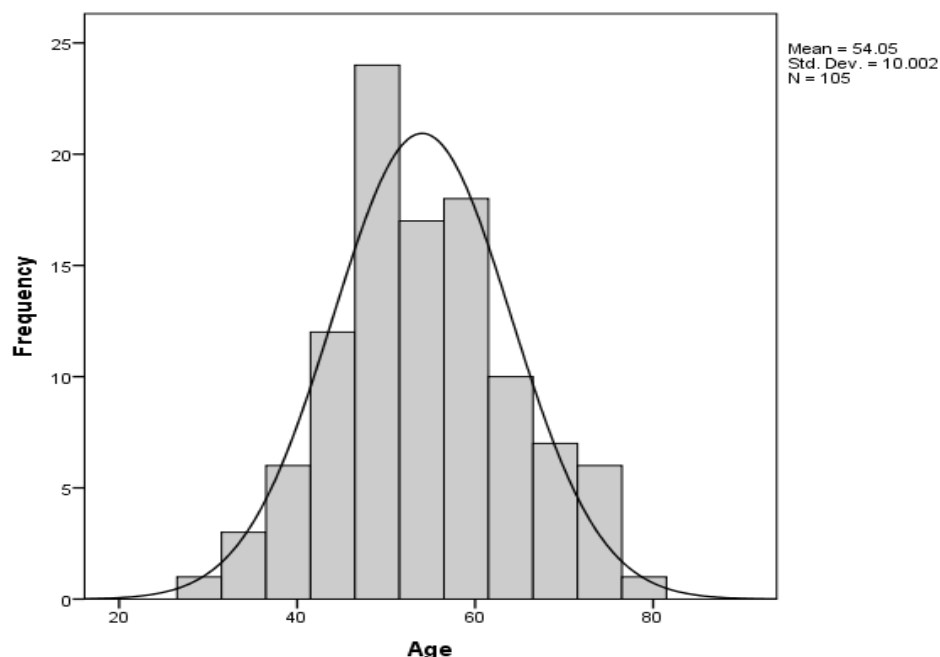


Figure 4.5. The distribution and frequency of participants' age.

### Personal Relationships

When considering the participants through the lens of their personal relationships, a number of significant correlations were revealed. Table 4.8 provides a summary of the results pertaining to the relationship participants have with their ex-wives, both currently and at the time of divorce, as well as other associated factors.

Participants' high GRCS scores correlate significantly with currently having poor relationships with their ex-wives,  $r(103) = -.195, p < .05$ . In contrast, participants with current positive relationships with their ex-wives demonstrated a statistically significant correlation with positive attitudes toward seeking professional psychological help as measured by the ATSPPH-S,  $r(103) = .269, p < .01$ , and the ISCI,  $r(103) = .219, p < .01$ . A significant relationship was also identified between those reporting current positive relationships with their ex-wife and those reporting to have had a positive relationship at the time of divorce,  $r(103) = .466, p < .01$ .

A significant relationship was identified between the length of the participants' marriage and the quality of the relationship at the time of divorce, with those who were married longer having more positive relationships with their ex-wife at the time of divorce,  $r(103) = .195, p < .05$ . An independent-samples t-test was conducted to compare the length of the participant's marriage in relationship to their use of mental health services. There was a significant difference in the number of years the participants had been married between those who had received mental

health services ( $M = 18.52$ ,  $SD = 7.874$ ) and those who had not ( $M = 14.42$ ,  $SD = 7.784$ );  $t(103) = -2.059$ ,  $p = .042$ . These results suggest that the length of the participant's marriage is a factor in his use of mental health services.

Table 4.8

*Relationship with Ex-Wife (N=105)*

		1	2	3	4	5	6
1. GRCS	Pearson Correlation	1.000	-.195*	-.144	-.319**	-.205*	-.140
	Sig. (2-tailed)		.046	.143	.001	.036	.155
2. Current Relationship With Ex-wife	Pearson Correlation			.466**	.269**	.219*	.060
	Sig. (2-tailed)			.000	.006	.025	.541
3. Relationship With Ex-wife at Divorce	Pearson Correlation				.041	.031	.195*
	Sig. (2-tailed)				.677	.750	.046
4. ATSPPH-S	Pearson Correlation					.608**	.140
	Sig. (2-tailed)					.000	.154
5. ISCI	Pearson Correlation						.093
	Sig. (2-tailed)						.347
6. Years Married	Pearson Correlation						1.000
	Sig. (2-tailed)						

\* Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

A look at the participants' current romantic relationships also revealed a number of statistically significant correlations. Of the participants currently in a same-sex relationship, the vast majority (74%) defined that relationship as partnered or married to a same-sex spouse. Participants' reporting to be currently in a relationship also significantly correlated to living with a partner or same-sex marital spouse,  $r(103) = .720$ ,  $p < .01$ . Nearly all of the participants who indicated that they were partnered or married also reported to be living with their partner/spouse,  $r(103) = .929$ ,  $p < .01$ .

A significant relationship was identified between the number of years the participants were divorced and their status of currently being partnered or married to a same-sex marital spouse. Those being divorced for longer periods of time were more likely to be partnered or in a



same-sex marital relationship,  $r(103) = .203, p < .05$ . Likewise, those who had been divorced for longer periods of time were also significantly correlated with currently living with a partner or same-sex marital spouse,  $r(103) = .256, p < .01$ .

Table 4.9

*Current Personal Relationships (N=105)*

		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
1. Years Divorced	Pearson Correlation	1.000	.118	.203*	.256*
	Sig. (2-tailed)		.229	.038	.009
2. In a Current Relationship	Pearson Correlation			.925**	.720**
	Sig. (2-tailed)			.000	.000
3. Currently Partnered or Married	Pearson Correlation				.929**
	Sig. (2-tailed)				.000
4. Living With Partner or Spouse	Pearson Correlation				1.000
	Sig. (2-tailed)				

\* Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

An independent-samples t-test was conducted to compare the participant's level of spirituality as it relates to their current relationship status. There was a significant difference in the scores for those currently in a relationship ( $M = 2.59, SD = 1.387$ ) compared to those who were not ( $M = 3.23, SD = 1.18$ );  $t(100) = 2.407, p = .018$ . These results suggest that current relationship status is a factor in the participant's reported level of spirituality. Unrelated to the participants' current relationships, the number of years participants had been divorced correlated significantly with their level of spirituality; those who had been divorced longer scaling themselves toward being "Very devout,"  $r(103) = .925, p < .01$ .

### Summary

The men participating in this study ( $N = 105$ ) ranged in age from 29 to 78 years ( $M = 54, SD = 10$ ) and reported being married on average 18 years (range of 1 to 38 years). Four (4) men reported being married twice and having fathered children with both wives. The majority of participants identified as Caucasian (91%) and resided in the United States (90%). Participants

reported being divorced anywhere from 5 months to nearly 37 years with the average time since divorce just over 10 years.

Analysis of the data revealed that statistically significant negative relationships existed between the participants' GRC and their attitude and intentions toward seeking psychological help in contrast to a positive relationship with their level of psychological distress. Higher GRC correlated with negative attitudes toward seeking professional psychological help and increased levels of psychological distress. However, no significant relationship was identified between participants' attitude toward seeking professional psychological help and their level of psychological distress. The participants' length of marriage only correlated statistically significantly with the measure of psychological distress, with those reporting longer marriages demonstrating lower levels of psychological distress. Table 4.10 provides a summary of the results related to the research questions and hypotheses.

Table 4.10

*Summary of Research Questions and Hypotheses Results*

	GRC	Psychological Distress	Toward Seeking Psychological Help	
			Attitudes	Intentions
Q1: GRC	--	+.298	-.319	-.205
Q2: time since divorce	Not Sig.	Not Sig.	Not Sig.	Not Sig.
Q3: length of marriage	Not Sig.	-.283	Not Sig.	Not Sig.

H1: Higher levels of GRC will positively correlate with psychological distress – ACCEPT

H2: Higher levels of GRC will negatively correlate with

- (a) Seeking help – ACCEPT
- (b) Time since divorce – REJECT
- (c) Number of years married – REJECT

Participants' responses to the two open-ended questions were analyzed to identify major themes related to why the participants had sought mental health services, if the services were helpful, and those services/resources they found or thought others would find beneficial. Over 80% of the men participating in this study had sought mental health services at or subsequent to divorce, with 76% reporting their experience to be helpful. The three major themes participants indicated for why they sought professional mental health services were problems associated with

the coming-out process (26%), depression (26%), and their sexual identity (22%). Participants' top three themes regarding beneficial resources were support groups (23%), counseling or therapy (21%), and general support (16%).

Post hoc data analysis focused primarily on two specific areas of particular interest, namely (a) the feedback participants provided to the first open-ended question and (b) the strength of the relationships between and among demographic data when analyzed in conjunction with the participants' GRC, attitudes toward seeking professional psychological help, and their level of psychological distress. Men with more positive attitudes and intentions toward seeking psychological help were significantly more likely to have received mental health services at or subsequent to their divorce. Men who received mental health services during or subsequent to their divorce reported those services to be helpful with a frequency that was statistically significant. Completing the circle on the value of mental health services was the finding that men who reported having a positive experience with mental health services in the past were also significantly more likely to have current positive attitudes toward seeking professional psychological help.

Analysis of the demographic data brought to light the significance of age and the role personal relationships play in the lives of the participants. Age was found to have statistically significant relationships with more variables than any other piece of demographic data collected. Of particular relevance to this study were results which indicated that participants who were older had lower scores on the GRCS and had more positive attitudes toward seeking professional psychological help. Age was determined to be a factor in the participant's use of mental health services. Older participants were also found to be significantly more likely to have been married for longer periods of time and to report having a positive relationship with their ex-wives at the time of their divorce.

Analysis revealed that participants with high GRCS scores correlated significantly with currently having a poor relationship with their ex-wives, while participants with current positive relationships with their ex-wives demonstrated a statistically significant correlation with positive attitudes toward seeking professional psychological help. Participants reporting to have current positive relationships with their ex-wives were also significantly more likely to have had a similarly positive relationship at the time of divorce. Participants who had been married longer were found to have more positive relationships with their ex-wives at the time of divorce and to have been more likely to have received mental health services at or subsequent to divorce.

A look at the participants' current romantic relationships revealed that 74% of those currently in a same-sex relationship defined that relationship as partnered or married to a same-sex spouse and were significantly likely to be living with that partner/spouse. Participants who had been divorced for longer periods of time were significantly more likely to be in a partnered or married relationship and living with their partner/spouse.

Current relationship status was found to be a factor in the participants' reported level of religious commitment or level of spirituality. Those who were partnered, married, and/or currently in a relationship were more likely to scale themselves toward "Not a believer" than they were toward "Very devout." Unrelated to the participants' current relationships, participants who had been divorced for longer periods of time were significantly more likely to scale their religious commitment or level of spirituality toward being "Very devout."

## CHAPTER V

### DISCUSSION

The purpose of this study was to add to the current understanding of how gender role conflict is related to attitudes and intentions toward seeking professional psychological help among gay men who have married, fathered, and subsequently divorced. Currently, only one other study has specifically focused on gender role conflict in the lives of gay fathers (Kosmopoulos, 2008) but does not address their help-seeking behaviors. This study sought to move beyond the between group comparisons used by Kosmopoulos by analyzing the strength of the relationships between variables within a single group, namely divorced gay fathers. By looking at levels of GRC as they relate to psychological distress and attitudes toward seeking professional psychological help, the goal was to gain a better understanding of the specific needs and nature of this highly ignored population. Guided by previous studies with both gay and heterosexual men, which have identified a relationship between increased levels of GRC and both psychological distress and attitudes toward seeking professional psychological help, this study predicted similar outcomes when analyzing the data related to these variables. What remained unknown was the relationship these variables would have to others drawn from the personal lives and experiences of the participants. Of particular interest was the strength and nature of the relationships between the duration of the participants' marriage, the time since divorce, and the primary variables of gender role conflict, psychological distress, and attitudes and intentions toward seeking professional psychological help.

#### **Review of the Findings**

Findings from this research identified statistically significant relationships between (a) GRC and psychological distress; (b) GRC and attitudes and intentions towards seeking psychological help; and (c) years married and psychological distress. Significance was not identified between time since divorce and any of the other primary variables being considered. Support was found for the hypotheses that (a) higher levels of GRC were positively correlated to higher levels of psychological distress and (b) higher levels of GRC were negatively correlated to attitudes and intentions toward seeking psychological help (see Figure 5.1).

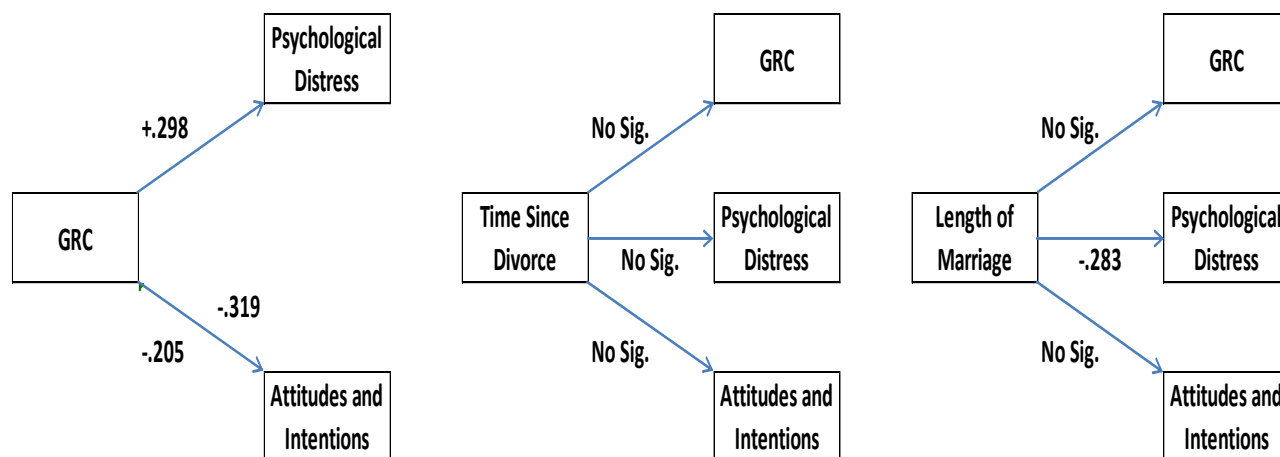


Figure 5.1. A visual overview of the study's research questions and findings.

Eighty-six participants (82%) reported seeking out mental health services at the time of divorce or later on in life. Of those who provided feedback regarding the value of the mental health services they received, over 76% indicated that the services were helpful. Eighty one men (77%) provided responses to questions about mental health services. Some men offered multiple reasons for seeking mental health services or indicated that they had sought out services on different occasions for different reasons. The dominant issues participants identified as reasons for seeking professional mental health services were the coming-out process (26%), depression (26%), and their sexual identity (22%). Participants indicated that support groups (23%), counseling or therapy (21%), and general support (16%) were beneficial mental health services.

Moving beyond the primary variables addressed by the research questions, statistically significant relationships were found related to the participants' age and to their relationship with their ex-wife. Older participants had lower gender role conflict, more positive attitudes toward seeking professional help, and were more likely to use mental health services. Older participants also were married for longer periods of time and had positive relationships with their ex-wives at the time of their divorce. Participants who had higher gender role conflict had a negative relationship with an ex-wife both currently and at the time of the divorce. Participants with positive relationships with an ex-wife had positive attitudes towards seeking psychological help.

Participants' current same-sex relationships also revealed statistically significant correlations with other variables. Of the participants currently in a same-sex relationship, a

significant number (74%) defined that relationship as partnered or married to a same-sex spouse. Participants' reporting to be currently in a relationship also correlated significantly to living with a partner or same-sex marital spouse. Nearly all of the participants who indicated that they were partnered or married also reported to be living with their partner/spouse.

Significance was identified between the number of years the participants were divorced and their status of currently being partnered or married to a same-sex marital spouse. Those being divorced for longer periods of time were more likely to be partnered or same-sex marital relationship. Likewise, those who had been divorced for longer periods of time were also significantly more likely to currently be living with a partner or same-sex marital spouse.

A negative correlation was identified between participants' religious commitment/level of spirituality and being partnered or married to a same-sex spouse. The number of years participants had been divorced also correlated significantly (positively) with their level of spirituality.

### **Integration**

This study adds to the ever expanding pool of research in men's studies that point to the influence of GRC and its relationship to men's help-seeking behaviors. By gaining a better understanding that all men (heterosexual or not) experience GRC in much the same way, we begin to focus in on the schema that motives masculine gender role behavior. It is only by doing so that we can hope to develop approaches and interventions that truly meet their needs.

### **Gender Role Conflict**

The findings of this study clearly indicate that gay divorced fathers experience GRC in much the same way as other men (gay or not). The strength of the relationships between the participants' GRC and both their psychological distress and attitudes and intentions toward seeking psychological help provide the evidence. These findings are commensurate with those of previous studies although the participants in this study demonstrate lower levels of GRC and more positive attitudes and intentions toward seeking help than most. In contrast, participants in this study demonstrated higher levels of psychological distress when compared to a similar study using the same version of the HSCL (HSCL-58). Table 5.1 provides a summary of the means and standard deviations from a representative sample of previous studies compared to this study.

Table 5.1

*Comparison of Means and Standard Deviations from Previous Studies*

<b>GRC</b>			<b>ATSPPH-S</b>		
	<b>Mean</b>	<b>SD</b>		<b>Mean</b>	<b>SD</b>
<i>Mudd (2013)</i>	<b>111</b>	<b>25</b>	<i>Mudd (2013)</i>	<b>31</b>	<b>6</b>
Hobza & Rochlen (2009)	134	24	Pheko et al. (2013)	31	4
Penderson & Vogel (2007)	130	26	McKelley & Rochlen (2010)	16	4
Mansfield et al. (2005)	120	28	Vogel, Wade, & Hackler (2007)	26	5
Good et al. (2004)	139	26	Penderson & Vogel (2007)	22	5
Rochlen, Blazina, & Raghunathan (2002)	134	26	Berger et al. (2005)	19	7
Blazina & Marks (2001)	117	23	Vogel & Wester (2003)	26	5

<b>ITSC</b>			<b>HSCL-58</b>		
	<b>Mean</b>	<b>SD</b>		<b>Mean</b>	<b>SD</b>
<i>Mudd (2013)</i>	<b>42</b>	<b>8</b>	<i>Mudd (2013)</i>	<b>88</b>	<b>24</b>
Pheko et al. (2013)	48	10	Vogel & Wester (2003)	37	9
Penderson & Vogel (2007)	19	5			
Vogel, Wade, & Hackler (2007)	21	6			
Vogel & Wester (2003)	35	8			

Although it has been suggested that gay men struggle with unique issues related to being both male and a sexual minority (Mahalik et al., 2008), it seems clear that Simonsen et al. (2000) were correct in the assertion that the core values of hegemonic masculinity are as relevant to them as they are to their heterosexual counterparts. While gay men may not conform to traditional male gender roles (Green et al., 1996), the findings from this study clearly indicate that they express many of the same negative attitudes and intentions toward seeking psychological help as do heterosexual men. However, for the participants in this study, although there was a negative correlation between gender role conflict and attitudes and intentions toward seeking psychological help, the overwhelming majority of these men did report seeking mental health services at some point during or subsequent to divorce.

### **Help-Seeking**

One need only to look at the themes identified among the responses to the second open-ended question to appreciate the need for support and validation the men in this study so deeply desired at the time of coming-out and divorce. Statements such as “knowing men like me,” “talking to other fathers who went through it,” and “I wish there was men’s divorce counseling” speak to the connection participants were missing and needed. Statement after statement



recommends or acknowledges groups, organizations, and individuals who provided support during this difficult time in their lives. This reaching out for others who have had similar experiences fits with current understanding that roles are learned from others (Bandura, 1999) and are culturally defined (Silverstein, Auerbach, & Levant, 2002).

Between coming-out and marital divorce, the men in this study potentially experience upheaval in all four life roles (relationship with self, relationship with work, relationship with others, and relationship with family) identified by Hughes and Graham (1995). Compounded by the marginalization they may experience from both the gay and heterosexual communities (Demo & Allen, 1996; Morales, 1989), it is not surprising that so many resorted to the otherwise un-masculine act of help-seeking.

**Help-seeking and traditional masculine ideology.** Research (Kosmopoulos, 2008) has indicated that while gay fathers “overcome negative aspects of early male gender socialization, they still experience degrees of male gender role conflict” (p. 104) and continue to suffer the negative aspects of traditional male socialization. The truth of this is no more evident than in the findings related to the participants’ attitudes and intentions toward seeking psychological help.

The results of this study reveal that, while older men have more positive attitudes toward the idea of counseling and therapy, they do not have similar intentions toward seeking those services. Masculine role theory (e.g., Carrigan, Connell, & Lee, 1985; David & Brannon, 1976; O’Neil, 2008; Terman & Miles, 1936) would suggest that positive help-seeking experiences during the divorce and coming-out stage facilitated positive attitudes toward professional psychological help while deeply rooted masculine ideology continues to limit their intention toward seeking help. Another possible interpretation could be that having successfully negotiated the breakup of their marital relationship and the coming-out process, participants in this study possess a level of empowerment that gives them the confidence that they can handle anything that comes their way. Therefore, they no longer anticipate a need for help and thus have no intention of seeking mental health services.

Both explanations fit with Mathe’s (2010) belief that masculinity is fluid and can be actively created in specific situations and Levant’s et al. (1992) belief that a need for self-reliance underlines traditional masculine ideology. Past research has suggested that, as one’s roles change, psychological distress is an inevitable byproduct (Silverstein et al., 2002) and, in order to adapt, one must reassess and modify self-perceptions (Collier, 1995). It is, therefore, not surprising that the older men in this study, having had more life experiences, adapt traditional

ideology to match their current understanding of Self and, in turn, experience lower levels of GRC than men who are younger.

### **Coming-Out**

With no contrasting divorced heterosexual fathers against whom to compare results, it is difficult to determine if it was the event of the divorce or the coming-out process that brought these men to ask for help. However, the reasons participants offered why they felt they needed mental health services suggest an answer. With 48% of the responses provided relating to sexual identity issues and the coming-out process, in contrast to just 21% related to couples issues and divorce, it suggests that issues relating to sexual identity and the coming-out process are such that they encourage men to move beyond the pressures of traditional masculine ideology and seek out help. The responses to the second open-ended question bolster this conclusion. Statements such as, “coming out support,” “planning for the effects of coming out,” and “wish I had accepted my sexuality before marrying a woman” all bring to light the significance of the coming-out process. Clearly, redefining one’s sexual identity and coming-out as homosexual has such an impact that even deeply rooted gender role behaviors can be overcome.

Previous research (Bozett, 1981b; Cass, 1979; Helsing & Szklo, 1981; Jordan & Deluty, 1998; Ragins, 2004) has indicated that the coming-out process is a significant step in gay identity development and is an important step in developing a positive self-identity. The difficulty lies in the fact that, while the disclosure process may help to resolve inner turmoil, it often leads to disapproval and divorce (Bigner, 1996). These men often experience discrimination and rejection because of their age, inexperience within the gay community, and their commitments to family at a time when validation and public sanctioning is vital to their well-being (Bozett, 1981b). Considering that it has also been suggested that in general men have a more difficult time adjusting to the single life after divorce than do women (Gove, 1972b; Zeiss et al., 1980), it is no wonder that depression was identified as frequently as coming-out as one of the reasons why the men in this study sought mental health services.

### **Divorce and Same-Sex Relationships**

Although significance in the relationship between GRCS scores and the length of the participants’ marriage was not reached, a negative relationship was suggested. While it would be pure conjecture to suggest that higher levels of GRC lead to poor marital relationships, there is perhaps no coincidence that high levels of GRC correlate significantly with higher levels of psychological distress, which correlate significantly with shorter marriages. Between men’s

need to oppress women (Edwards, 2007) and their urge to aggressively avoid and disdain all things feminine (O'Neil, 2008), it is perhaps no wonder Kimmel (1996) has claimed that “the male sex role is a recipe for despair...few if any could live up to...[resulting in] lives of isolation and despair” (p. 281). Combined with the stress associated with the conflict between feelings and actions gay men feel prior to accepting their sexual orientation (Bozett, 1981b), divorce is perhaps inevitable for these men.

Because men are typically less able to cope with the emotional consequences of divorce as compared to women (McKenry & Price, 1990), it is not surprising that the research has indicated they often cope by starting over in new relationships (Umberson and Williams, 1993). In the case of divorced gay fathers, research has indicated that they attempt to replicate the level of commitment they experienced in their former heterosexual relationship (Bozett, 1982; Miller, 1979b; Strommen, 1989). This pattern is supported by the results of this study with participants divorced for longer periods of time statistically more likely to be in a relationship with nearly three quarters of those defining that relationship as partnered or married to a same-sex spouse.

### **Limitations**

The lack of diversity within the sample with regards to racial identity and national affiliation serve to limit the generalizability of the findings. The vast majority of participants in the study fell into a single demographic; white (91%) college educated (80%) residents of the United States (91%). Generalizations of the findings to include those who are non-white, less educated, or live outside of the United States are spurious at best.

While an online survey was employed for data collection due to its convenience and cost effectiveness, the limited diversity presented in this study may serve to support Shannon and Bradshaw's (2002) warning that participation can be impacted by access to the internet and potential participants' comfort with the computer. The online format was beneficial when soliciting participation from organizations having regional or national membership but may have limited participation to individuals who use the internet as a means of networking and support. This, however, does not explain the nearly 100% participation by men located within the United States and Canada. One possible explanation could be the targeted functionality of both Facebook and the Google web browser software. Although they both offer international service, they employ programming that targets information and advertising relative to the user's geographic location. There is the potential that searches conducted to identify groups or organizations serving members of the GLBT community, and thus potential study participants,

may have been impacted by this regionally focused programming. A true understanding of the impact this form of targeted programming has on web-based research would require additional extensive study.

Moving beyond limitations encountered do to the programming of the search engines used to locate individuals and organizations, the simple fact that networking and support organizations were targeted as a source for potential participants may have produced an anticipated bias among the sample. By nature of being associated with these organizations the participants may have had an affinity toward participation in groups and need for social support. This bias may explain away the three primary themes identified among the responses to open-ended question number two which queried beneficial services; support groups, counseling/therapy, and general support.

The lack of a contrasting group of divorced heterosexual fathers limits the interpretation of the results and the generalized application of their meaning. Perhaps the best example of this can be seen in the data analysis related to the coming-out process, the event of divorce, and the participants' use of mental health services. Had data from a contrasting group of divorced heterosexual fathers been included in the analysis it may have been more evident which event, coming-out or divorce, correlated more closely with the participants' use of mental health services.

### **Implications**

It is good news for members of the mental health community that the majority of participants in this study who sought services report that those services were of help. Taken as a report card on the services that are being provided to those in need, these results are positive. However, divorced gay fathers and men in general continue to suffer the impact traditional masculine ideology has on their lives and demonstrate negative attitudes and intentions toward seeking psychological help. It poses a difficult challenge for members of the mental health community when those who are in greatest need are also those least likely to seek services. It is essential that mental health professionals adapt to accommodate the specific needs of gay men, and men in general, if they desire to serve them more effectively. The findings from this study provide insight into key areas that must be considered when reaching out to meet the needs of this community.

### **Professional Training and Education**

It is vital that those seeking to enter the ranks of the professional mental health community are sufficiently trained to meet the needs of the individuals they will eventually serve. The responses provided by the men in this study offer perhaps the most revealing glimpse at their specific needs and provide direction for the training necessary for those entering the field.

Responses to the first open-ended question clearly provide insight into the types of difficulties these men face. While issues related to coming-out, depression, and sexual identity represent the majority of the reasons the men in this study sought mental health services, it cannot be overlooked that couples issues, divorce, suicide, substance use/abuse, parenting, and PTSD were also provided as responses. Together these issues suggest a vast and varied field of exposure mental health professionals should receive as a part of their education. Although expansive on its own, this list does not encompass all that should be included in the education and training of future therapists and counselors.

Responses to the second open-ended question reveal even greater insight into the needs and types of support these men find most valuable. Connecting back to the issues that brought them to seek help, the themes of “self-awareness” and “help for wife” from question two can be categorized with “sexual identity” and “couples issues” identified for question one. The fact that themes are repeated in alternate forms suggests that these men may seek primarily to have their own needs met but continue to care about the needs of their soon to be ex-spouses. This is an important consideration for counselors and therapists working with this population. The fact that these men are coming-out as gay and/or are divorcing their spouses does not necessarily mean they no longer care for or love the mother of their children. Sensitivity to this issue should be an integral part of the training mental health providers receive.

Question two responses also reveal a need for training in group counseling methods. With nearly one-quarter of the responses referencing support groups and another ten percent suggesting the value of knowing other gay fathers, it seems apparent that group work is a valuable approach for providing services to members of this population. In addition to training for group counseling, the educational experience of mental health providers should include exposure to the types of community resources available for these men. From “gay fathers’ groups” to professional “legal advice,” these men express needs that are beyond the services a typical mental health provider has to offer. Prospective clients will benefit from a knowledgeable service provider who knows where to direct them when their needs reach beyond what can be offered through counseling and therapy. In fact, “knowledgeable therapist” was a

specific reference given by several participants in response to being asked what services they would recommend or found most beneficial. The need for knowledgeable well trained professionals is made no more clearly evident than in the response provided by one participant:

*All the therapist seemed interested in was what I did or was willing to do sexually, and I got no help dealing with self-image, loneliness, trying to relate to others. The therapist was highly recommended for helping a lot of gay men, claimed to be straight, but never seemed to want to address my issues. I don't plan ever again [to] seek therapeutic help with any persistent loneliness issues nor any other emotional, life or other issues again, nor would I recommend other gay men seek such help. It was a disaster for me.*

The ethical code of conduct of the American Counseling Association (ACA) clearly compels services providers to maintain their level of competency through continuing education. Their education experiences should foster a respect of the dignity of their clients and ultimately promote client welfare. An appreciation and understanding of for the value of support networks in the lives of their clients, sensitivity to diversity, and a lens of multiculturalism are all encouraged in the code (ACA, 2005).

### **Services**

Members of the mental health community wishing to provide services to divorced gay fathers and, perhaps, men in general are advised to consider specific findings from this study. Outreach and marketing directed at divorced gay fathers should be as vast and varied as the needs they present. Considering the overwhelming majority of men in this study took advantage of mental health services during or subsequent to their divorce, it can be presumed that they are open to receiving help and support at that stage in life.

**Group work.** Services being offered to men in the process of coming-out and transitioning into the gay community should focus on meeting the men's immediate needs. The marginalization they often experience from members of both the heterosexual and gay community (Demo & Allen, 1996; Morales, 1989) adds to the stress they already feel associated with the end of their marital relationship and potential separation from their children. Positive sanctioning is essential if they are to negotiate a healthy resolution to their newly embraced gay identity (Bozett, 1981b). Meeting their immediate need for information and connection is perhaps the most effective way to be helpful. The results suggest support groups and networking

opportunities are favored and potentially represent the fastest and most efficient means by which these men gain necessary information while building a network of support.

Responses to the open-ended question regarding beneficial services such as, “[I] would have appreciated a group setting to speak with other men going through or been through the same situation” and “I wish I would have found other gay dads for support during the time of my separation” reveal the need for networking and support groups for this unique group of men. Participants offered the names of several organizations through which they found the support and networking they needed:

Utah Gay Fathers (<http://utahgayfathers.com/> )

Straight Spouse Network (<http://www.straightspouse.org/home.php>)

Gay Fathers of Seattle (<http://www.gfas.org/>)

Gay Christian Network (<http://www.gaychristian.net/>)

Gay Fathers of Toronto (<http://www.gayfathers-toronto.com/>)

Gay Fathers of Long Island (<http://www.gayfathersofli.com/>)

Gay Fathers of Greater Boston (<http://www.gayfathersboston.org/>)

Perhaps the participants themselves offer the most effective argument for providing these services through statements such as; “I was in a gay dads support group which enabled me to see what other dads were experiencing” and “It was so refreshing to talk to other men who had gone through or were going through the same experiences that I was. They really helped me a lot with the difficult decisions that I had to make. I am very appreciative for that.”

**Coaching.** When reaching out to older gay fathers who have progressed beyond the divorce and coming-out stage, the findings indicate that traditional masculine ideology again becomes a factor. The fact that older participants in this study had more positive attitudes toward psychological help, yet fail to demonstrate similar intentions toward seeking those services, may impact the services professionals choose to provide.

While men’s low rate of help-seeking has been well documented over the years (Addis & Mahalik, 2003; Ang et al., 2004; Blazina & Watkins, 1996; Fischer & Turner, 1970; Good et al., 1989; Kim & Omizo, 2003), men’s use of executive and personal coaching is reported to be on the rise (McKelley & Rochlen, 2010). The cause for this difference is not entirely understood, but some have suggested that coaching is a more directive style and collegial approach (H. Levinson, 1996) favored by men, and partners well with masculine ideology. With this in mind, it is suggested that services via a coaching model may best suit the needs of older gay fathers.

Because the findings of this study support the notion that gay men are influenced by masculine ideology in much the same way as heterosexual men, there is no reason to believe they would not also favor coaching over a more traditional approach to providing services.

### **Theory and Intervention**

Role theory is clearly an appropriate lens through which mental health professionals should approach their interactions with divorced gay fathers. An appreciation for the influence culture has on the construction of gender role identity (Silverstein, Auerbach, & Levant, 2002) can serve to facilitate mutual understanding, intervention, and problem solving. Informed by the research in this field, professionals may choose to intervene using a narrative approach in helping their clients reinterpret their experiences and come to a more healthy understanding of what is expected of them throughout their developmental process. Because role conflict arises when a person experiences pressure within one role that is the result of incompatible pressures from another (Kopelman et al., 1983), helping a client rewrite his understanding of the two conflicting roles may serve to reduce the stress associated with this internal conflict. Work in this area may also help to relieve some of the stress these men feel due to the marginalization and discrimination they often feel from both the gay and heterosexual communities (Demo & Allen, 1996; Morales, 1989). Narrative work that focuses on power and one's ability to maintain the dominance that has been suggested to be at the heart of the masculine role (Carrigan et al., 1985) opens the door to interventions that embrace the solution focused brief therapy model (SFBT). SFBT as a competency-based model respects the power and control men are socialized to desire by focusing on solutions and preexisting positive behaviors. Clients are validated when their behaviors result in favorable outcomes while attention is focused away from failing or negative behaviors. The collaborative approach SFBT employs by which professionals and clients co-construct a vision of the preferred future also resembles the collegiality men favor about coaching (Trepper et al., 2013).

Ecological (Bronfenbrenner, 1979) and family (Bowen, 1978) systems theory both promote a broad contextual interpretation of client's issues that seems especially appropriate when working with men who are both divorced fathers and sexual minorities. Understanding the client's needs through the lens of either theory may help to inform the professional as to the true scope of the issues these men face. The participants in this study provided insight that supports the value of these theoretical approaches. Some of the primary themes identified among the responses to the two open-ended questions participants were asked (e.g., coming-out, couples



issues, parenting issues, support groups, knowing other gay fathers, legal counsel) provide a glimpse into the roles, systems, and interactions present in these men's lives. For example, professionals who understand the interconnectedness of the family system may be better able to assist clients to clarify and meet what they believe to be the expectations the father role places on them. Discussion could focus on how coming-out and divorce may either alter those expectations or impact the client's ability to fulfill them. Understanding ecological systems may serve to guide both the professional and the client to address the vastness of the coming-out process. Consideration of the various levels of ecological systems (i.e., micro, meso, exo, macro, chrono) may help the client develop a plan for disclosure and manage the impact of coming-out publically. Regardless of the theoretical framework, interventions that are strategic in nature are suggested due to their more directive nature (Haley, 1973), which fits with research indicating that men prefer these types of interactions (H. Levinson, 1996).

The significant number of men in this study who reported being partnered or married to a same-sex spouse falls in line with research that has indicated they may seek to replicate the level of commitment they experienced in their former heterosexual relationship (Bozett, 1982; Miller, 1979b; Strommen, 1989). As these men enter the gay community and pursue personal relationships, mental health professionals working with them would be advised to address the same-sex dyad and the conflict that may arise when both parties are socialized to seek power and control.

The guilt and shame men often feel when they have initiated the divorce (Morgan, 1981) should also be an area of particular focus. The depression and thoughts of suicide reported by the men in this study may have been facilitated by or associated with the loss of the marital dyad and the disempowering effects of the guilt they experienced due to their perceived role in the divorce and breakup of the family. In fact, because so many men in this study reported depression as the reason why they sought professional help, it is essential that initial interactions with members of this population should begin with an assessment for depression and suicidal ideation. The initial assessment should be followed up with a basic needs assessment and a list of resources and networking opportunities to validate the client in a way that is vital to his well-being (Bozett, 1981b) and promote the perception that asking for help was not a mistake.

### **Future Research**

Building on the results of this study, future research is suggested that draws from a more ethnically and culturally diverse population. While similar studies conducted in other regions of

the world or with other ethnic groups will serve to broaden understanding, they do not in themselves bridge the gap of race and culture to get at the heart of what it means to be male. A universal understanding of what it means to be male will require between group comparisons of men from various cultures and/or ethnic groups.

For those who seek to meet the specific needs of divorced gay fathers, it is suggested that future research focus primarily on the needs these men have just prior to and after divorce. The results of this research have pointed to the need for available services at this most critical time in these men's lives.

Findings from the post hoc data analysis point to a number of areas for potential future study. Of particular interest would be the impact the aging process has on one's understanding of gender role expectations and, therefore, gender role conflict. Because the results of this study suggest that it is actually the aging process that impacts one's level of GRC rather than changes in cultural expectations of masculinity, a better understanding of what motivates internal change over time could potentially equip members of the mental health community with insights that could help them enact change more readily and with greater effect.

Future research related to the impact GRC has on the one's ability to establish and maintain a quality relationship is also suggested. The correlation identified between higher scores on the GRCS and the likelihood of a participant having a poor relationship with his ex-wife indicates that there is a relationship between the two that is worthy of future study. Perhaps if the details of this relationship could be discovered interventions could be developed that would allow couples to better cope, resulting in an improved quality of the relationship and potentially reducing the risk of divorce.

Although unrelated to the nature of this study, the results related to the participants' religious commitment or level of spirituality is truly worthy of future study. This research could be approached from a number of different angles. One could investigate the connection between spirituality and personal relationships by inquiring about the role spirituality plays within the relationship or if deep spirituality has the ability to replace interpersonal relationships. Research could also focus on the sexual orientation of the participants and the role religion/spirituality plays in their lives. The correlation between the number of years participants in this study were divorced and their reported level of spirituality perhaps suggests a connection between age, personal relationship, and religion/spirituality that was not thoroughly assessed by the instruments in this study.

### Summary

Findings from this study revealed that divorced gay fathers experience GRC in much the same way as do heterosexual men. Participants with high levels of GRC demonstrated lower levels of psychological well-being and negative attitudes and intentions toward seeking psychological help. The length of time participants had been divorced does not appear to significantly impact GRC, psychological well-being, or attitudes and intentions toward seeking psychological help. The number of years the participants had been married, however, correlated negatively with their level of psychological distress.

Findings from the study are limited by a lack of cultural and ethnic diversity among the sample and recruitment methods that may have limited access to a broader sample. The lack of a contrasting group against whom to compare the results limits their interpretation and generalizability.

Implications from the study for members of the mental health community include a recommendation for an informed integrated approach to delivery of services focusing primarily on role theory, ecological and family systems theory, and both structural and strategic thinking. Interventions should include depression and suicide assessments, brief solution focused methods, narrative work, social networking, and community resource guides. Responses from participants suggest the value of group counseling methods and/or a coaching model when addressing the needs of gay divorced fathers.

It is recommended that future research seek to determine between group differences with regard to the impact GRC has on one's ability to adjust to change, establish and maintain relationships, and the willingness to seek help. The role religion and spirituality play in the lives a gay men and their ability to develop and maintain personal relationships is also an area the findings from this study suggest warrant future study.

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## Appendix A

### Permission to use the Gender Role Conflict Scale

9/29/2011 10:16 AM

Dear Jim:

Thanks for your email about using the GRCS with your research on gay divorced fathers. This study has not been completed before, so it could be unique and timely. I have attached the GRCS to this email. If you use it, please send back the release form. You may also want to go to the GRC Research web page where the previous 230 GRC studies are summarized in 24 informational file. The address is: <http://web.uconn.edu/joneil>.

Also the recently published paper may be useful to you (See below). The best to you with your research.

Jim O'Neil, Ph.D.  
Professor of Educational Psychology & Family Studies  
University of Connecticut

O'Neil, J.M. (2008). Summarizing twenty-five years of research on men's gender role conflict using the Gender Role Conflict Scale: New research paradigms and clinical implications. *The Counseling Psychologist*, 36, 358-445.

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DOI: 10.1177/0011000008317057  
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## ***Summarizing 25 Years of Research on Men's Gender Role Conflict Using the Gender Role Conflict Scale***

### **New Research Paradigms and Clinical Implications**

**James M. O'Neil**

University of Connecticut, [James.O'Neil@uconn.edu](mailto:James.O'Neil@uconn.edu)

*This article reviews 232 empirical studies that used the Gender Role Conflict Scale (GRCS) over the past 25 years (1982-2007). The article introduces the gender role conflict (GRC) construct using past definitions and theoretical models. The research findings for diverse men are summarized and studies related to men's intrapersonal, interpersonal, and therapeutic lives are analyzed. The empirical support, criticism, and challenges to the gender role conflict research program are reviewed. A contextual research paradigm with seven domains is presented and 18 research questions and two research models are discussed to foster more moderation and mediation studies on men's GRC. A new diagnostic schema to assess men's GRC in therapy and during psychoeducational interventions is discussed. The research review concludes that GRC is significantly related to men's psychological and interpersonal problems and therefore an important construct for psychologists and other helping professionals.*

The publication can be ordered at: <http://tcp.sagepub.com/>.

## **Appendix B**

### ***Gender Role Conflict Scale***

The *Gender Role Conflict Scale* (GRCS; O'Neil et al., 1986) is property of the author and cannot be reproduced in its entirety. The GRCS consists of 37 statements that target the extent to which respondents agree with statements related to how men interact with the world around them. “*I sometimes define my personal value by my career success*” and “*Telling my partner my feelings about him/her during sex is difficult for me*” are repetitive of the kinds of statements included in the instrument.

## Appendix C

### *Attitudes Toward Seeking Professional Psychological Help Scale*

**To what extent do you agree or disagree with the statements below:**

	Disagree	Partly Disagree	Partly Agree	Agree
1. If I believed I was having a mental breakdown, my first inclination would be to get professional attention.	1	2	3	4
2. The idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts.	1	2	3	4
3. If I were experiencing a serious emotional crisis at this point in my life. I would be confident that I could find relief in psychotherapy.	1	2	3	4
4. There is something admirable in the attitude of a person who is willing to cope with his or her conflicts and fears <i>without</i> resorting to professional help.	1	2	3	4
5. I would want to get psychological help if I were worried or upset for a long period of time.	1	2	3	4
6. I might want to have psychological counseling in the future.	1	2	3	4
7. A person with an emotional problem is not likely to solve it alone; he or she <i>is</i> likely to solve it with professional help.	1	2	3	4
8. Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me.	1	2	3	4
9. A person should work out his or her own problems; getting psychological counseling would be a last resort	1	2	3	4
10. Personal and emotional troubles, like many things, tend to work out by themselves.	1	2	3	4

**Adapted from:** Fang, K., Pieterse, A., Friedlander, M., & Cao, J. (2011). Assessing the psychometric properties of the Attitudes Toward Seeking Professional Psychological Help Scale-Short Form in Mainland Chins. *International Journal of the Advancement of Counseling*, 33(4), 309-321.

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## Appendix D

### *Intentions to Seek Counseling Inventory*

Below is a list of issues people commonly bring to counseling. How likely would you be to seek counseling if you were experiencing these problems? Please circle the corresponding answer.

		Very Unlikely	Unlikely	Likely	Very Likely
1.	Weight control	1	2	3	4
2.	Excessive alcohol use	1	2	3	4
3.	Relationship differences	1	2	3	4
4.	Concerns about sexuality	1	2	3	4
5.	Depression	1	2	3	4
6.	Conflict with parents	1	2	3	4
7.	Speech anxiety	1	2	3	4
8.	Difficulties dating	1	2	3	4
9.	Choosing a major	1	2	3	4
10.	Difficulty in sleeping	1	2	3	4
11.	Drug problems	1	2	3	4
12.	Inferiority feelings	1	2	3	4
13.	Test anxiety	1	2	3	4
14.	Difficulty with friends	1	2	3	4
15.	Academic work procrastination	1	2	3	4
16.	Self-understanding	1	2	3	4
17.	Loneliness	1	2	3	4

**Adapted from:** Rougier, C. (2011). *Cultural Values Religiosity and Spirituality as Predictors of Professional Psychological Help-Seeking Behavior of Black Adults in the United States*. (Doctoral dissertation), Columbia University, New York, NY. Retrieved from: <http://academiccommons.columbia.edu/catalog/ac:140099>

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## Appendix E

### *Hopkins Symptom Checklist*

**INSTRUCTIONS:** Below is a list of problems and complaints that people sometimes have. Please read each one carefully. After you have done so, please put an **X** in one of the four boxes to the right that best describes **how much that problem has bothered you during the last week (7 days), including today**. Mark only one box for each problem and do not skip any items. Make your mark carefully. If you change your mind, erase your first mark completely. Read the example below before beginning.

EXAMPLE: 1. Backaches.

1	2	3	4
Not At All	A Little Bit	Quite A Bit	Extremely
	<b>X</b>		

If the symptom is "backaches" and backaches have bothered you *not at all*, put a mark in the box under **1, Not At All**.

If backaches have bothered you *a little bit*, put a mark in the box under **2, A Little Bit** (see example above).

If backaches have been bothering you *quite a bit*, put a mark in the box under **3, Quite A Bit**.

If backaches have been bothering you *extremely*, put a mark in the box under **4, Extremely**.

<b>HOW MUCH ARE YOU BOTHERED BY:</b>	<b>1</b> Not At All	<b>2</b> A Little Bit	<b>3</b> Quite A Bit	<b>4</b> Extremely
1. Headaches				
2. Nervousness or shakiness inside				
3. Being unable to get rid of bad thoughts or ideas				
4. Faintness or dizziness				
5. Loss of sexual interest or pleasure				
6. Feeling critical of others				
7. Bad dreams				
8. Difficulty in speaking when you are excited				
9. Trouble remembering things				
10. Worried about sloppiness or carelessness				
11. Feeling easily annoyed or irritated				
12. Pains in the heart or chest				
13. Itching				
14. Feeling low in energy or slowed down				
15. Thoughts of ending your life				
16. Sweating				
17. Trembling				

<b>HOW MUCH ARE YOU BOTHERED BY:</b>	<b>1</b> Not At All	<b>2</b> A Little Bit	<b>3</b> Quite A Bit	<b>4</b> Extremely
18. Feeling confused				
19. Poor appetite				
20. Crying easily				
21. Feeling shy or uneasy with the opposite sex				
22. A feeling of being trapped or caught				
23. Suddenly scared for no reason				
24. Temper outbursts you could not control				
25. Constipation				
26. Blaming yourself for things				
27. Pains in the lower part of your back				
28. Feeling blocked in getting things done				
29. Feeling lonely				
30. Feeling blue				
31. Worrying too much about things				
32. Feeling no interest in things				
33. Feeling fearful				
34. Your feelings being hurt				
35. Having to ask others what you should do				
36. Feeling others do not understand you and are unsympathetic				
37. Feeling that people are unfriendly or dislike you				
38. Having to do things very slowly to insure correctness				
39. Heart pounding or racing				
40. Nausea or upset stomach				
41. Feeling inferior to others				
42. Soreness of muscles				
43. Loose bowel movements				
44. Trouble falling asleep				
45. Having to check and double check what you do				
46. Difficulty making decisions				



<b>HOW MUCH ARE YOU BOTHERED BY:</b>	<b>1</b> Not At All	<b>2</b> A Little Bit	<b>3</b> Quite A Bit	<b>4</b> Extremely
47. Wanting to be alone				
48. Trouble getting your breath				
49. Hot or cold spells				
50. Having to avoid certain things, places or activities because they frighten you				
51. Your mind going blank				
52. Numbness or tingling in part of your body				
53. A lump in your throat				
54. Feeling hopeless about the future				
55. Trouble concentrating				
56. Feeling weak in part of your body				
57. Feeling tense or keyed up				
58. Heavy feelings in arms or legs				

**Adapted from:** Derogatis, L. R., Lipman, R. S., Rickels, K., Uhlenhuth, E. H., & Covi, L. (1974). The Hopkins Symptom Checklist (HSCL): A self-report symptom inventory. *Behavioral Science, 19*(1), 1-15. doi: 10.1002/bs.3830190102

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## Appendix F

### Demographic Questionnaire

1. *What are your current city, state, and country of residence?*
2. *What is your current age?*
3. *What is your current relationship status?*
  - Single
  - Partnered but not living together
  - Partnered and living together
  - Other (please specify)
4. *What is your racial/ethnic background?*
  - African-American
  - Caucasian
  - Latino/Hispanic
  - Native American
  - Asian
  - Other (please specify)
5. *What is your highest level of education?*
  - High School or equivalent
  - Trade School
  - Bachelor's Degree
  - Master's Degree
  - Doctorate
6. *Did you marry and have children with more than one woman?*
  - Yes / No
7. *How many years were you married?*
8. *How many biological children did you father while married to a woman?*
9. *What are the genders and current ages of all of your biological children?*
10. *How old were your children at the time you divorced their mother?*
11. *On what date did your divorce become final? (Approximate if necessary)*
12. *What type of custody did you have of your children after the divorce? (Choose all that apply)*

Sole Physical and Legal Custody	Joint Physical but no Legal
Joint Physical and Legal Custody	No Physical Custody but Joint Legal
Sole Physical but Joint Legal Custody	Custody
Joint Physical but Sole Legal Custody	No Physical or Legal Custody
	Other (please specify)

12. *Using the scale below, how would you rate your relationship with the mother(s) of your children?*

	Worse than it has ever been- Little to no interaction		Better than it has ever been- We interact on a regular basis
	1	2	3
			4
			5

Currently?  
At the time of your divorce

13. *What is your current job title/position?*

14. *Annual income?* (approximate range)

<\$30,000  
\$30,000-49,999  
\$50,000-69,999  
\$70,000-89,999  
\$90,000-100,000  
>\$100,000

15. *How would you define your religious affiliation?*

Catholic	Buddhist
Anglican/Episcopalian	Unitarian/Universalist
Jewish	Atheist
Methodist	Seventh-Day Adventists
Presbyterian	Scientologist
Baptist	Hindu
Lutheran	Jehovah's Witness
Quaker	Islam/Muslim
Congregationalist	Pentecostal
Eastern Orthodox	Baha'i
Christian Science	Agnostic
Latter-day Saints	Other (please specify)

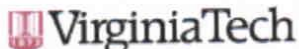
16. *Using the scale below, how do you define your religious commitment or level of spirituality?*

Not a believer			Very devout
1	2	3	4
			5

17. *How many years were you married?*

## Appendix G

### IRB Approval



Office of Research Compliance  
 Institutional Review Board  
 2000 Kraft Drive, Suite 2000 (0497)  
 Blacksburg, VA 24060  
 540/231-4606 Fax 540/231-0959  
 email [irb@vt.edu](mailto:irb@vt.edu)  
 website <http://www.irb.vt.edu>

#### MEMORANDUM

**DATE:** June 14, 2012  
**TO:** Pamela E Brott, James Edmund Mudd  
**FROM:** Virginia Tech Institutional Review Board (FWA00000572, expires May 31, 2014)  
**PROTOCOL TITLE:** THE RELATIONSHIP BETWEEN GENDER ROLE CONFLICT, PSYCHOLOGICAL DISTRESS, AND ATTITUDES TOWARD HELP-SEEKING IN DIVORCED GAY FATHERS  
**IRB NUMBER:** 12-355

Effective June 14, 2012, the Virginia Tech Institution Review Board (IRB) Chair, David M Moore, approved the New Application request for the above-mentioned research protocol.

This approval provides permission to begin the human subject activities outlined in the IRB-approved protocol and supporting documents.

Plans to deviate from the approved protocol and/or supporting documents must be submitted to the IRB as an amendment request and approved by the IRB prior to the implementation of any changes, regardless of how minor, except where necessary to eliminate apparent immediate hazards to the subjects. Report within 5 business days to the IRB any injuries or other unanticipated or adverse events involving risks or harms to human research subjects or others.

All investigators (listed above) are required to comply with the researcher requirements outlined at:

<http://www.irb.vt.edu/pages/responsibilities.htm>

(Please review responsibilities before the commencement of your research.)

#### PROTOCOL INFORMATION:

Approved As: **Exempt, under 45 CFR 46.110 category(ies) 2**  
 Protocol Approval Date: **June 14, 2012**  
 Protocol Expiration Date: **N/A**  
 Continuing Review Due Date\*: **N/A**

\*Date a Continuing Review application is due to the IRB office if human subject activities covered under this protocol, including data analysis, are to continue beyond the Protocol Expiration Date.

#### FEDERALLY FUNDED RESEARCH REQUIREMENTS:

Per federal regulations, 45 CFR 46.103(f), the IRB is required to compare all federally funded grant proposals/work statements to the IRB protocol(s) which cover the human research activities included in the proposal / work statement before funds are released. Note that this requirement does not apply to Exempt and Interim IRB protocols, or grants for which VT is not the primary awardee.

The table on the following page indicates whether grant proposals are related to this IRB protocol, and which of the listed proposals, if any, have been compared to this IRB protocol, if required.

*Invent the Future*

## Appendix H

### Sample of E-mail used on Facebook



**Jim Mudd**

Hello,

My name is Jim Mudd and I am a PhD candidate at Virginia Tech working toward a degree in Counselor Education and Supervision. As a part of my dissertation project I am looking for DIVORCED GAY FATHERS who are willing to participate in an anonymous on-line survey. Do you think anyone in your community would be interested in helping me out?

Here is a link where potential participants can learn more about the project and complete the survey:

<https://www.surveymonkey.com/s/DivorcedGayFathersProject>

I appreciate any help you have to offer. Feel free to share this information with anyone you think would be interested and let me know if you have questions. You are welcome to contact me at [jmudd@vt.edu](mailto:jmudd@vt.edu) if you would like additional information.

**Divorced Gay Fathers Project Survey**

[www.surveymonkey.com](http://www.surveymonkey.com)

## Appendix I

### A Dissertation Study Invitation

**Topic:** *The Relationship Between Gender Role Conflict, Psychological Distress, and Attitudes Toward Help-Seeking in Divorced Gay Fathers.*

**Who Can I Participate?** Divorced gay men who, while married, fathered at least one child with their wife.

**How Do You Participate?** Access the on-line survey at the following link:

<https://www.surveymonkey.com/s/DivorcedGayFathersProject>  
(informed consent is provided upon access)

**How Long Will It Take?** 15 – 20 minutes

**Who Is Conducting The Study?** James Mudd (jmudd@vt.edu)

**Who Sponsors the Study?** The Virginia Tech IRB (log number is 12-355) & Dr. Pamela Brott (PBrott@vt.edu), dissertation Chair

**How Am I Helping If I Participate?** You help to identify relationships that may (or may not) exist between gender role conflict, psychological distress and the willingness divorced gay fathers have toward seeking professional psychological help. This helps in providing understanding and support to other gay fathers who are having a difficult time.

**Can I Invite Others?** Please share this invitation with others you know who meet the criteria to participate or know men who do.

**What If I Have More Questions Or Comments?** Contact James Mudd at (jmudd@vt.edu).

# THANK YOU!

## Appendix J

### E-mail Invitation for On-Line Survey

**Subject:**

Request for dissertation assistance: *The relationship between gender role conflict, psychological distress, and attitudes toward help-seeking in divorced gay fathers.*

**Announcement:**

Dear \_\_\_\_\_,

My name is James Mudd and I am a doctoral candidate in the Counselor Education and Supervision program at Virginia Polytechnic Institute and State University (Virginia Tech). The purpose for this e-mail is to request your assistance by inviting you to participate in my dissertation study entitled: *The relationship between gender role conflict, psychological distress, and attitudes toward help-seeking in divorced gay fathers.* Your participation, which is both voluntary and anonymous, involves responding to an on-line survey that will take approximately 20 to 25 minutes to complete.

**IRB Approval:**

This study has been reviewed and approved by The Virginia Polytechnic Institute and State University Institutional Review Board (IRB). The corresponding IRB log number is 12-355. Dr. Pamela Brott (PBrott@vt.edu) will be supervising the study.

**Qualifications to Participate:**

Participation in this study is limited to divorced gay men who, while married, fathered at least one child with their wife. Other factors such as current relationship status, number of children fathered, and length of time married are considered relevant and therefore included in the demographic information that will be collected as part of the on-line survey.

**Purpose of Study:**

Gender role conflict is defined simply as the stress one feels that is related to how he/she performs culturally mandated and socially appropriate gender-based behavior. This study seeks to identify relationships that may (or may not) exist between levels of gender role conflict, psychological distress and the willingness divorced gay fathers have toward seeking professional psychological help.

**Accessing the Surveys:**

Please click on the following link to access the online survey:

<https://www.surveymonkey.com/s/DivorcedGayFathersProject>

If the link is not functioning properly, please copy and paste it into browser window.

**Comprehensive Informed Consent:**

Upon linking to the survey you will be provided with additional information and a more in-depth informed consent. Please take time to read this as it explains the structure of the study including

your rights and responsibilities. *Please note that your completion of the surveys will indicate your consent to participate.*

**Availability of Results:**

After completing the survey you may request a summary of the results by making a request in an email sent to [jmudd@vt.edu](mailto:jmudd@vt.edu). The results will be made available upon completion of the study.

**Questions, Contact, and Links**

If you would like additional information or have questions regarding this study I encourage you to contact me at [jmudd@vt.edu](mailto:jmudd@vt.edu). If you prefer, a paper copy of the survey is available upon request.

Once again, the link to the online survey can be accessed by clicking on the following link:

<https://www.surveymonkey.com/s/DivorcedGayFathersProject>

I thank you in advance for your willingness to participate. Both your time and personal insight are greatly appreciated!

Sincerely,

James Mudd, M.S.  
Doctoral Candidate –Virginia Tech  
[jmudd@vt.edu](mailto:jmudd@vt.edu)



## Appendix K

### Informed Consent

Title of Project: **The relationship between gender role conflict, psychological distress, and attitudes toward help-seeking in divorced gay fathers**

Investigators: James E Mudd, M.S.: jmudd@vt.edu

Pamelia E Brott, Ph.D. (dissertation chair): pbrott@vt.edu

#### Invitation to Participate

You are invited to participate in a research study examining the relationship between gender role conflict, psychological distress, and attitudes toward help-seeking in the lives of divorced gay fathers. This research is being conducted by James Mudd, a doctoral candidate in the School of Counselor Education at Virginia Polytechnic Institute and State University (Virginia Tech), as part of his final dissertation research. The following information is being provided to help you make an informed decision as to whether or not you choose to participate. If you have questions, please do not hesitate to contact either the researcher or his dissertation committee chair.

#### Purpose of this Project

The purpose of this study is to determine if relationships exist between gender role conflict, psychological well-being, and attitudes toward seeking professional psychological help in the lives of gay divorced fathers. For the purpose of this study gender role conflict is defined as the level to which socialized gender roles have a negative consequence to one's self or others. In specific how traditional masculine ideology shapes the way one behaves. In addition, the researcher seeks to determine if factors such as the length of the marriage, the amount of time since divorce, current relationship status, the number of children, and/or current age impact/influence the relationship between the three main factors being studied.

#### Procedures

The procedures for this study involve answering questions related to your attitudes toward and willingness to seek professional psychological help, your current level of psychological distress, and your level of gender role conflict. You will also be asked to complete a demographic questionnaire that does not include requests for information that could be used to personally identify you. Finally, you will be asked to complete two short answer questions. Completion of the questionnaire will take approximately 15 to 20 minutes.

#### Risks

It is predicted that there are no risks to you as a participant in this study. However, anytime an individual is asked to think about his/her own feelings and behaviors unexpected emotions may arise.

### Benefits of this Project

Sharing your personal thoughts and/or experiences may lead to the following benefits: To (a) provide a clearer understanding of how traditional masculine ideology impacts behaviors and the psychological well-being of gay men; (b) provide insight into what motivates gay men to seek out (or not seek out) professional psychological help; (c) provide insight into what factors work together to influence the behavior and well-being of gay men; (d) provide insight on the unique lives of gay fathers; (e) assist members of the mental health community to better understand and support gay men with similar life experiences.

### Extent of Anonymity and Confidentiality

Information obtained during the study will be kept strictly confidential. The study has been designed to limit the possibility of personally identifying participants. Your name will not be required anywhere within the questionnaire. Your anonymity is maintained even from the researcher by associating your answers with a numerical sequence rather than your name or data that may be used to identify you personally. The numerical sequence is used so that the researcher has the ability to identify you individually within the data collected.

Data collected from completed questionnaires will remain with the primary investigator. Data will first be electronically encrypted then stored in a password protected file. Data collected from this study will be retained no more than 5 years. All data, digital or paper will be deleted, shredded or otherwise destroyed within 1 year of the completion of the study or before the end of the 5 year time period whichever comes first.

### Professional Publications and Presentations

The information generated by this study may be published in professional journals or presented at professional meetings. Your anonymity will be maintained at all times.

### Compensation

It is expected that your participation in this study is strictly voluntary. You will not be compensated for the time you spend answering questions on the questionnaire or reading the supporting documents.

### Freedom to Withdraw

You are free to refuse to answer any questions that you do not wish to answer. If you wish to withdraw from the study before you have completed the questionnaire you may do so by simply exiting out of the program before you submit your information. If once you have submitted your answers to the questionnaire you wish to withdraw from the study you may do so by contacting the researcher and providing the date and approximate time you submitted your data. You are free to withdraw from the study at any time without penalty.

### Approval of Research

The Institutional Review Board involving Human Subjects (IRB) at Virginia Polytechnic Institute and State University and the primary investigator's four dissertation committee members have approved this research project. The corresponding IRB log number is 12-355.

Subject's Responsibilities

I voluntarily agree to participate in this study and understand that I have the following responsibilities: To (a) remain anonymous by not providing my name on any part of the subject questionnaire; (b) complete the questionnaire answering honestly any and all questions I feel comfortable answering; (c) contact the researcher if I have questions or concerns related to the study and/or my participation; and (d) withdraw from the study at any time with without penalty.

I understand that I may contact the researcher and request a summary of the results to be delivered once the study has been completed.

Subject's Permission

**I have read the Consent Form and conditions of this project. I have had all of my questions answered. I hereby acknowledge the above and give my voluntary consent.**

**I understand that my completion of this online questionnaire indicates that I voluntarily decided to participate as a subject in this research project.**

Agree

Disagree

If you should have any questions, comments, and or concerns, please do not hesitate to contact:

James E Mudd: [jmudd@vt.edu](mailto:jmudd@vt.edu)  
Dr. Pamela E Brott: [pbrott@vt.edu](mailto:pbrott@vt.edu)

If you have any questions about the protection of human research participants regarding this study, please contact Dr. David Moore, Chair Virginia Tech Institutional Review Board for the Protection of Human Subjects, telephone: (540) 231-4991; email; [moored@vt.edu](mailto:moored@vt.edu); address: Office of Research Compliance, 2000 Kraft Drive, Suite 200 (0497), Blacksburg, VA 24060.