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An Inclusive and Systemic Framework

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## Abstract

Positive psychologists have contributed to our understandings of how positive emotions and flexible cognition enhance resiliency. However, positive psychologists' research has been slow to address the relational resources and interactions that help non-heterosexual families overcome adversity. Addressing overlooked LGBTQ and systemic factors in positive psychology, this article draws on family resilience literature and LGBTQ literature to theorize a systemic positive psychology framework for working with non-heterosexual families. We developed the *LGBTQ Relationally-Based Positive Psychology* framework that integrates positive psychology's strengths-based perspective with the systemic orientation of Walsh's (1996) family resilience framework along with the cultural considerations proposed by LGBTQ family literature. We theorize that the LGBTQ Relationally-Based Positive Psychology framework takes into consideration the sociopolitical adversities impacting non-heterosexual families and sensitizes positive psychologists, including those working in organized care settings, to the systemic interactions of same-sex loving relationships.

*KEYWORDS: positive psychology, family resilience, non-heterosexual, LGBTQ, Walsh, optimism, positive emotions.*

## LGBTQ Relationally-Based Positive Psychology: An Inclusive and Systemic Framework

Whereas the vast majority of researchers have centered on understanding the role emotions play in pathology, dysfunction, and disorder (Ong, Bergeman, Bisconti & Wallace, 2006), positive psychologists have focused on how emotions and protective factors contribute to the flourishing of individuals and societies (Seligman & Csikszentmihalyi, 2000). Rejecting the deficit-based models underlining normative analyses, behavioral problems and mental illness, this relatively new branch of psychology has demonstrated interest in understanding how individuals respond successfully to adversity, trauma and tragedy. Through the exploration of “what works”, “what is right” and “how people manage to improve their lives” (Sheldon & King, 2001, p. 216), positive psychologists contribute to our existing knowledge regarding how positive emotions help us adapt during times of stress. Within the wide range of adaptive human characteristics explored in their studies, the psychological concept of resilience has received significant attention that has translated into an impressive and extensive body of scholarly literature (Luthar, 2006; Masten, 2001). As a result of their strong contribution in the area of psychological resilience, positive psychologists claim that their empirical findings have effectively brought to light the developmental strengths and resourcefulness of their participants (Aspinwall & Staudinger, 2003; Keyes & Haidt, 2003; Peterson & Seligman, 2004; Seligman, Reivich, Jaycox, & Gillham, 2007). Pursuing their claim further, we have found numerous positive psychology studies reporting on the resilience of a variety of populations including: trauma victims (Bonanno, 2008; White, Driver, & Warren, 2008), college students (Mak, Ng, & Wong, 2011), the military (Cornum, Matthews & Seligman, 2011; Reivich, Seligman, & McBride, 2011), Jews and Arabs (Hobfoll, Palmieri, Johnson, Canetti-Nisim, Hall, & Galea, 2009), injury patients at rehabilitation clinics (Quale, & Schanke, 2010), men (Hammer & Good,

2010), and many more. However, some critics have pointed out that this far-reaching literature on resilience has failed to include the voices of *non-heterosexual families* (Meyer, 2003; Torres, 2011). Further, the focus in positive psychology has remained on individuals, not on families. Because non-heterosexual families face unique challenges that heterosexual families do not (e.g., heterosexism and sexual prejudice), it would be inappropriate to assume that positive psychology literature on resilience, which has mainly focused on heterosexual individuals, helps advance our understanding regarding the systemic strengths that enable thriving in LGBTQ families. Addressing overlooked LGBTQ and systemic factors in positive psychology, this article draws on family resilience literature and LGBTQ literature to theorize a systemic positive psychology framework for working with non-heterosexual families. Hoping to help practitioners understand, elicit, and amplify the systemic strengths that enable thriving in LGBTQ families, we developed the *LGBTQ Relationally-Based Positive Psychology framework*. This framework integrates positive psychology's strengths-based perspective with the systemic orientation of Walsh's (1996) family resilience framework along with the cultural considerations proposed by LGBTQ family literature. We theorize that the LGBTQ Relationally-Based Positive Psychology framework takes into consideration the sociopolitical adversities impacting non-heterosexual families and sensitizes psychologists, including those working in organized care settings, to the systemic interactions of same-sex loving relationships. Our framework proposes that understanding the systemic interactions of LGBTQ families as well as the sociocultural and political context in which those interactions take place, can help practitioners improve the quality of health care services delivered and can help offer clients a valuable treatment experience. Practitioners working in organized care settings often need to collaborate with clients who feel unheard and misunderstood by health professionals. According to researchers, working with the

larger family system can help offer clients support and can assist practitioners in the development of a treatment plan that promotes family involvement as clients work through non-critical or critical situations (Jong & Schout, 2011). Unlike traditional approaches used in public mental health that often center on the individual, our framework is driven by the entire family system. In this article, we hope to encourage practitioners to explore the resources and strengths that have enabled LGBTQ families to overcome stressors including heterosexism, sexual prejudice, and institutional discrimination, among others. In a post-DOMA (Defense of Marriage Act, 1996) world in which federal health care benefits have been extended to same-sex married couples, their children, and stepchildren, organized care settings will likely notice an increase in the demand for public mental health services from non-heterosexual families (Civic Impulse, 2014). With that in mind, health professionals interested in increasing customer satisfaction and building an affirming practice for LGBTQ families, should consider incorporating the LGBTQ Relationally-Based Positive Psychology framework into their clinical practice. Our resilience framework promotes an inclusive definition of “family” and encourages practitioners working in public service settings to create a warm therapeutic environment that celebrates same-sex loving relationships. Our framework utilizes a culturally-sensitive approach that may help clients who have had negative experiences with organized care settings and their staff in the past, feel connected, valued, and supported.

### Literature Review

Although lesbians and gay men report relatively high utilization rates for counseling and psychotherapy services (Liddle, 1997), research “addressing the care of LGBT populations in the public sector appears to be non-existent” (Drescher & Hellman, 2005, p. 16). In addition, recent studies demonstrated that both rural and urban providers in the public sector, lack adequate

training and competency on LGBTQ issues (Warren & Smalley, 2014). Researchers argue that there is an absence of coordinated funding opportunities in the public sector to support research and practice on LGBTQ mental health issues (Drescher & Hellman, 2005). According to Semp (2011), the limited research on public mental health services for the LGBTQ population suggests that professionals working in the public sector often ignore their clients' sexuality. In addition, studies suggested clients receiving public mental health services reported feeling uncomfortable disclosing their sexual orientation, even when they believe their sexuality is relevant to their mental health concerns (Semp, 2011). With the former in mind, many psychologists have recognized the need for culturally-sensitive psychological services to help the LGBTQ community. Maylon (1982) asserted the necessity for gay affirmative therapy, an approach which "represented a special range of psychological knowledge which challenges the traditional view that homosexual desire and fixed homosexual orientations are pathological" (Maylon, 1982, p. 69). His approach encouraged the development of literature highlighting *gay affirmative practice* (GAP) within the fields of psychology and social work (Appleby & Anastas, 1998; Crisp, 2006a; Crisp, 2006b; Davies & Neal, 1996, 2000; Hunter & Hickerson, 2003; Hunter, Shannon, Knox, & Martin, 1998; Neal & Davies, 2000; Tozer & McClanahan, 1999; Van Den Berg & Crisp, 2004). Several scholars have discussed guidelines for practicing GAP such as: Abiding by one's professional code of ethics, not assuming the client is heterosexual, becoming attentive and mindful to different "coming out" stories, and practicing awareness of our own heteronormative and gender normative assumptions, amongst others (Appleby & Anastas, 1998, Hunter et al., 1998). Likewise, Davies and Neal (1996, 2000; Neal & Davies, 2000) declared that a gay affirmative approach does not require a distinct set of skills and techniques, it simply requires treating LGBTQ individuals with respect, fairness, compassion, and as having value.

Altogether, the premises of GAP demonstrate a commitment to counteracting the effects of homophobia and heterosexism by calling practitioners to surpass a neutral position by “celebrating and advocating the validity of lesbian, gay, and bisexual persons and their relationships” (Tozer & McClanahan, 1999, p.736). Although psychologists have contributed research on the positive aspects of LGBTQ identity within the past decade (Horne, Puckett, Apter, & Levitt, 2014), there is an undeniable dearth in literature highlighting a strengths-based framework for working with LGBTQ families seeking psychological services.

Some researchers have recognized the urgency for practitioners to sustain a strengths-based perspective when working with the LGBTQ population (Appleby & Anastas, 1998; Butler, 2004; Crisp, 2006a; Van, Wells, & Boes, 2000). For example, Crisp (2006a) and Butler (2004) suggest practitioners help sexual minorities draw upon their assets and strengths to assist them in overcoming their presenting concerns. Nevertheless, this literature is limited to the field of social work, in turn, restricting the generalizability of its implications to psychological services delivered in organized care settings. Thus, it remains that few resources are available to assist psychologists providing managed care, in their application of strengths-based approaches to help non-heterosexual families succeed. Strengths-based approaches are especially important, given that LGBTQ clients are often portrayed in the literature as wounded individuals whose victimization has produced deficits in their mental and physical health, academic achievement and identity development (Espelage & Swearer, 2008; Russell & Richards, 2003). Torres (2011) argued this deficit view has evolved because resiliency research is dominated by heterosexist ways of knowing that neglect “the lives, voices, and developmental successes of same-sex attracted individuals” (Torres, 2011, p.12). Scholars argue that although earlier research in counseling psychology has explored the intersection of strengths and culture, positive



psychology researchers have been slow in their contributions of LGBTQ research (Lopez et al., 2002). Although positive psychologists have strong convictions to help at-risk populations overcome life's obstacles, our review found few research studies conducted by positive psychologists looking into the protective factors that help non-heterosexual families remain hopeful, optimistic and confident in the midst of difficult challenges. The question "*What makes life worth living for non-heterosexual families?*" is rarely addressed by positive psychologists.

Clearly, positive psychologists are devoted to building a social science that promotes *families* that allow children and communities to flourish (Positive Psychology Center, 2007). Considering the invisibility of sexual minority topics in their research, what is still far from clear is whether positive psychology's definition of "family" is inclusive of non-heterosexual families. This review points to a gap in resiliency research that rarely addresses how non-heterosexual families engage in creative behaviors and cognitive flexibility to facilitate their life pursuits. Practitioners working in organized care settings should be cautious not to overlook the culture-specific stressors faced by LGBTQ families as this may compromise the therapeutic process and therapeutic outcome. We encourage practitioners providing public mental health services to ask their LGBTQ clients the following question, "*What has helped your family succeed in the midst of difficult challenges?*" We believe that the answer to this question may help LGBTQ families arrive at systemic solutions to their problems. Practitioners interested in exploring the underlying resiliencies and resources that have helped their LGBTQ clients and their families succeed in the face of hardship, may find our framework to be a helpful resource.

#### Positive Psychology Research on Resilience

Resilience is an adaptive and dynamic quality found among all humans that enables them to cope and thrive despite adversity (Garmezy & Rutter, 1983; Luthar & Wong, 2003; Masten,

2001). In the field of positive psychology, two camps have emerged that view human strengths differently. One camp proposes that strengths are universal and culture-free (Peterson & Seligman, 2004; Seligman & Csikszentmihalyi, 2000) and the other proposes that strengths are manifested differently depending on the socio-cultural context (Constantine & Sue, 2006; Snyder & Lopez, 2007). The Oxford Handbook of Positive Psychology (2011) contains a number of research studies conducted by the first and second camps. No culture-embedded models (the second camp) presented in this handbook addressed the resilient qualities presented by LGBTQ families. In contrast, a chapter titled *Positive Psychology and LGBTQ populations* (Horne, Puckett, Apter, & Levitt, 2014) in the book *Perspectives on the Intersection of Multiculturalism and Positive Psychology* by Pedrotti and Edwards (2014), offers a review of positive psychology research on the strengths of LGBTQ individuals, relationships and families. Their review suggested that LGBTQ people have “considerable strengths in terms of self-definition, self-determination, perspective-taking, community building, and creating family networks and communities (p. 199).” Our framework integrates some of the most prominent research conducted by positive psychologists on the theory of learned optimism, the broaden-and-build theory, and literature on the positive identity in LGBTQ individuals, and captures how practitioners in the public sector can help LGBT families utilize their systemic strengths, assets, and resources to boost their resilience. The following section reviews the theory of learned optimism, the broaden-and-build theory, and literature on LGBTQ positive identity.

### ***Seligman’s Model***

Seligman’s culture-free perspective on resilience suggests that there are 24 personal strengths and universal attributes that can be found across cultures (Peterson & Seligman, 2004; Snyder & Lopez, 2007). His empirical work on resilience (2006) has led to a focus on teaching

applied strategies designed to help all people from all cultures challenge adversity. He and his colleagues maintain that psychology can “transcend particular cultures and politics and approach universality” (Seligman & Csikszentmihalyi, 2000, p. 5). Seligman’s (2006) theory of learned optimism proposed that people could learn how to become optimistic if they are taught how to challenge negative self-talk. Seligman and others theorize that resilience is a protective factor that can be learned from experts in the field of positive psychology, including those providing public mental health services. They contend that individuals who master these techniques are more apt to rise above debilitating pessimism and depression. Focusing on the factors identified by Masten and Reed (2002) (e.g., optimism, problem solving, self-efficacy, self-regulation, emotional awareness, flexibility, empathy, and strong relationships), Reivich and Seligman (2011) promote the use of the Penn Resiliency Program (PRP) (Reivich, Seligman, & McBride, 2011). PRP trains individuals to effectively challenge their unhelpful thoughts using cognitive-behavioral principles. Contrary to Seligman’s (2004) understanding that strengths are universal, members of the second camp argue that cultural norms construct what is considered to be “strength,” “weakness,” “the good life,” and the “good person” (Pedrotti, Edwards & Lopez, 2009, p. 49). They propose that overlooking culturally specific strengths is problematic. Even more problematic is overlooking the inner strengths of historically “overpathologized populations” (Lopez & Snyder, 2011, p. 172).

Our framework proposes that Seligman’s research appears to be culture bound in its efforts to teach individuals, including non-heterosexual family members, strategies that have not been significantly studied or proposed to be effective with a large LGBTQ sample. Seligman’s emphasis on “teaching” and his position on strengths-promotion suggest that positive psychologists can, through innovative strategies, inform clients about stress reduction.

Nevertheless, stigma, discrimination and violence against LGBTQ families create additional stresses beyond what are typically experienced by heterosexual families (Herek, 2009, 2010). The cognitive-behavioral principles found in Seligman's resilience model are proposed as potentially helpful to all individuals and across all cultures. Yet it remains to be demonstrated that they be useful when working with families in general and non-heterosexual family *systems* in particular.

### ***The Broaden-and-Build Theory***

Barbara Fredrickson (2000), a positive psychologist, introduced the broaden-and-build theory of resilience. Fredrickson (2001) claimed that when people are exposed to negative experiences (e.g. failure) they tend to narrow their focus onto the problem. When this narrowing of focus occurs, they are unable to access their full cognitive potential. Conversely, when people are exposed to positive emotions (e.g. joy, curiosity, hope and contentment), it strengthens their cognitive associations, broadens their attention and empowers them to implement creative and positive solutions to their problems. Her theory proposes that resilient individuals, more than the general population, possess creative and flexible problem solving skills that help them practice the benefits of positive emotions to their advantage. She suggests that discovering *positive meaning* within adversity is one way that resilient individuals demonstrate their strength. Given that this theory finds a relationship between discovering *positive meaning* within adversity and being resilient, we pose the questions—Are LGBTQ individuals resilient because they somehow find positive meaning in the context of traumatic experiences such as hate crimes, bias crimes and bullying? Or, are LGBTQ individuals able to bounce back because they are forced to adjust to their existing environment in order to survive? Or, are both valid propositions? Fredrickson's findings highlight the importance of building positive emotional experiences into people's

everyday lives; however, her theory is unable to account for how LGBTQ families manage to move forward while simultaneously experiencing negative emotions within the discriminatory context in which they are situated. John Chambers Christopher (2011) argues that positive psychology models such as Fredrickson's require a move beyond objectivism and relativism and a move toward a framework that understands that reality is socially constructed across and within cultures. A move towards a culturally embedded positive psychology framework that addresses how families with multiple salient identities (e.g.- racial minority non-heterosexual families, non-heterosexual bi-national families, lesbian-headed families) manage to experience positive emotions while coping with threatening environments. We propose that the use of a culturally embedded positive psychology is imperative in the public sector, as practitioners work to understand how non-heterosexual families, including LGBTQ families of color, mobilize their protective systems while navigating their multiple identities across cultures.

### ***Research on the Positive Identity of LGBTQ Individuals***

While Fredrickson (2000) has addressed positive meaning as a sign of resilience in the broaden-and-build theory, some researchers are further narrowing the existing gap in positive psychology literature on LGBTQ mental health by investigating the lives and identities of non-heterosexuals. In 2008, a positive psychology online survey found that over 500 gay and lesbian participants considered the following to be positive aspects of having a non-heterosexual lifestyle: belonging to a community, creating families of choice, forging strong connections with others, serving as positive role models, developing empathy and compassion, living authentically and honestly, gaining personal insight and sense of self, involvement in social justice and activism, freedom from gender-specific roles, exploring sexuality and relationships, and enjoying egalitarian relationships (lesbian participants only) (Riggle, Whitman, Olson, Rostosky &

Strong, 2008). Other studies in which LGBTQ mental health and positive psychology converged included topics like the development of a positive self-identity and self-worth among “rural lesbian youth” (Cohn & Hastings, 2010), the positive aspects of a bisexual self-identification (Rostosky, Riggle, Pascale-Hague, & McCants, 2010), and the resiliency factors reported by LGB individuals in response to anti-LGB political campaigns and legislation (Russell & Richards, 2003). Butler (2004) posits that sexual minorities possess exceptional resiliency and specific strengths that help them overcome these obstacles. She asserts that LGBTQ individuals develop coping skills through the process of accepting their sexual identity and through the coming out process. Additionally, sexual minorities gradually experience less stigma, greater flexibility, and are able to better manage social perception because of the difficulties they so often face (Butler, 2004). Although these studies did take into consideration contextual factors specific to gays, lesbians and bisexuals, they primarily focused on individuals’ perceptions of their growth-fostering connections rather than on the systemic interactions that protected their families from crisis or breakdown. Whereas the former research centered on understanding individuals’ perceptions of their growth-fostering connections, our family driven framework, focuses on the systemic interactions that help LGBTQ families thrive.

Chambers and Hickinbottom (2008) suggest that the current paucity of literature that takes into account systemic factors has resulted from positive psychologists’ focus on the Western concept of “self.” Hence, positive psychologists subscribe to an individualistic framework and “insulate themselves from reflecting critically on their work” (p.563) as it relates to systemic, cultural, and other diversity factors. We find that Walsh’s (1996) family resilience framework may offer a way to integrate these factors. Her resiliency framework focuses on healthy *family* functioning and offers a relevant and systemic alternative to research focused

solely on the stressors that non-heterosexual *individuals* endure.

By and large, resilience as a mechanism to thrive in the face of adversity has undeniable prominence in positive psychology literature. Given the problems sexual minorities contend with on a day to day basis, strengths-based approaches that emphasize resilience have the potential to be beneficial to LGBTQ individuals' well-being. Although there is great acceptance for LGBTQ individuals and relationships in some sectors of society, considerable amounts of inequality, discrimination, heterosexism, and homophobia continue to impact non-heterosexual families receiving services in organized care settings. To better serve LGBTQ families seeking psychological services in the public sector, an approach that looks at resilience within a systemic family context is imperative. One distinct attempt at highlighting the importance of resilience from a systemic perspective is found in Walsh's (1996) relationally-based family resilience framework. In the following section, we will describe Walsh's framework in detail.

#### Resilience Focused on Systems: A Much Needed Source in Positive Psychology

Walsh's (1996) relationally-based family resilience framework maintains that stressful events impact the *entire* family and create a ripple effect on everyone's relationships. Family resilience theory goes beyond current positive psychologists' research by focusing its attention on the *family*. Walsh's theory proposes that family members already have the necessary tools to reduce their distress and to strengthen their relationships with others. Moreover, this framework openly challenges the myth that the *Standard North American Family* (white intact nuclear family headed by father) is healthier than any other family constellation (Smith, 1993), and openly welcomes diverse family arrangements. Walsh (2003) argues that we need to move beyond the "myth of the self-reliant nuclear family household by expanding attention to the multiple relationships and powerful connections" that exist in today's world (p. 47). Recently

Walsh (2011) conceptualized the notion of “family” as a social construction with multiple meanings, relational patterns and unique caring bonds. In short, her framework focuses on: 1) family strengths under stress, 2) multiple realities for diverse families 3) the socio-cultural context in which people are situated 4) the belief that families have the resources to recover and grow from adversity and 5) the understanding that what helps boost resilience are the family processes that nurture caring, safe, and committed relationships.

Regardless of family configuration (e.g.-heterosexual, non-heterosexual, single-parent headed family, multigenerational etc.), family resilience can be defined as a collectivistic phenomenon that grows and develops with each challenge allowing families to balance stress and demands (Patterson, 2002). Research suggests that in spite of stress and demands, LGBT parents often demonstrate low rates of parenting stress and high parenting efficacy (Horne et al., 2014). According to family resiliency theorists, that is because family relationships are strengthened when participants view environmental adversity as a kind of collaborative challenge that can be met by the family system (Walsh, 1998). Researchers have found support for this theory of family resilience in studies that indicate that when families employ various capabilities and protective factors, they are best suited to meet life’s demands and successfully manage risks and stressors (Power et al., 2010; Walsh, 1998). On the other hand, if environmental stressors overwhelm the family’s capabilities and resources, crises or breakdowns may occur. In other words, family systems whose resources and capabilities become depleted are at risk of being overwhelmed by breakdown and hardship. In this light, family resilience theorists advise that families build collaborative support systems that enhance family resources to successfully meet life’s inevitable challenges. Above all, because family systems are uniquely different, each family system can overcome adversity by using its own set of tools and strategies.



In the following section we propose a framework that brings together a) positive psychology literature on the theory of learned optimism, the broaden-and-build theory, as well as literature on the positive identity in LGBTQ individuals, b) Walsh's family resilience framework, c) and non-heterosexual family resilience literature. This *LGBTQ Relationally-Based Positive Psychology* framework takes into consideration the sociopolitical adversities impacting non-heterosexual families and sensitizes psychologists, including those working in organized care settings, to the interactions of same-sex loving relationships. We propose that our framework captures the complexity of the psychological health needs of LGBTQ families seeking services in organized care settings.

### LGBTQ Relationally-Based Positive Psychology

We theorize an *LGBTQ Relationally-Based Positive Psychology* framework that facilitates the support, motivation and empowerment of non-heterosexual families. Our framework seeks to explore the question- How do non-heterosexual families manage to protect their relationships and their children from hardship while simultaneously battling stress and adversity? We want to shed light on a population that has remained almost invisible in the positive psychology literature. *LGBTQ Relationally-Based Positive Psychology* posits that LGBTQ families have multiple identities including ethnic, cultural, religious, political and professional identities. By challenging the heterosexist cultural standards that continue to exist in psychological research and practice today, we propose a systemic positive psychology framework for understanding resilience in LGBTQ families. Specifically, we address the areas of learned optimism, emphasizing systemic interactions, and building on positive emotions as positive psychology research suggests these factors are particularly essential to enable thriving and boosting resilience. Additionally, we discuss the opportunities provided by shifting to a

strengths-based perspective in exploring the resources that build resilience and help non-heterosexual families remain hopeful, optimistic and confident in the midst of difficult challenges.

### ***Learned Optimism to Boost Resilience in LGBTQ Families***

Psychologists working from our framework must move beyond traditional ideas that the definition of family is linked to a predictable life path that involves the ability to procreate. It is unhelpful to hold heterosexual parenthood as the standard (Kitzinger & Wilkinson, 2004). Instead, psychologists should try to understand how each unique LGBTQ couple organizes, perceives and constructs their own definition of family (Kranz & Daniluk, 2006). Although researchers propose that care, commitment, devotion, love and the ability to provide for and nurture a child determines parent competency, some critics of same-sex headed-households continue to believe that sexual orientation is crucial in parenting (Negy & McKinney, 2006). Not surprisingly, LGBTQ couples are often confronted with insecurities about their own legitimacy as parents. Resilient non-heterosexual families who dare to challenge sexual prejudice and heterosexism must learn how to effectively dispute negative self-talk that mitigates thriving. Seligman's (2006) theory of *learned optimism* proposes that people can learn how to become optimistic if they dispute negative self-talk when faced with discrimination. Alternative self-talk should promote the idea that healthy relationships and effective parenting are not determined by sexual orientation, but are rather associated with homes where family members receive love, stability, safety, care and respect. Examples of alternative self-talk that challenge misinformed and oppressive social attitudes include: "Sexual stigma and prejudice are the problem, not our family" or "Bullying children for having LGBTQ parents is the problem, not our family." Practitioners must challenge LGBTQ parents' fears and anxieties by exploring what it is about

each family member's character strengths and about their relational strengths as a couple that are evidence of their competency and readiness for parenting and partnership.

***Emphasizing Systemic Interactions as the Key to Overcoming Adversity***

Researchers indicate that building supportive relationships in different contexts and with members of the straight and LGBTQ communities (e.g., neighborhoods and schools) helps non-heterosexual families adapt to significant crises in a society that privileges heterosexual couples. Thus, we propose that practitioners should explore the following relational interactions: a) healthy interactions within non-heterosexual couples, b) between parents and their children, c) between LGBTQ families and their support networks (extended families or families of choice), d) and between LGBTQ families and the larger community. These interactions are highlighted with the understanding that when families overcome adversity in a multi-systemic fashion, opportunities are created where families can define what it means for them to be a family strengthened by resilience and other resources. Open communication about present or expected crisis situations facilitates authentic family relationships in an environment of mutual support. Promoting a family's resilient qualities should revolve around the following questions: "How do the members in your family draw strength from one another considering the barriers and obstacles encountered along the way?" and "What are the mechanisms that non-heterosexual headed households employ to provide emotional support to their children during times of stress?" Practitioners should consider talking to clients about the large number of "community resources, public programs, community institutions, as well as societal norms and values" that can help build resiliency (Connolly, 2006, p. 149). For example, one researcher has indicated that lesbian mothers who are active in the gay community, who enroll their children in schools with LGBTQ curricula and increase their children's contact with children who have similar

family stories, help protect their children against sexual prejudice and help strengthen their resilience (Bos, Gartrell, Peyser, & van, 2008). Thus, practitioners should emphasize the importance of understanding social networks and intimate alliances as valuable resources that offer resilient families support in times of stress.

### ***Helping LGBT Families Build on Positive Emotions***

Fredrickson's (2001) broaden-and-build positive psychology theory does not account for how LGBTQ families manage to move forward while simultaneously experiencing negative emotions within the discriminatory context in which they are situated. Although many LGBTQ families constantly experience negative emotions as a result of oppression, their families continue to display resilience by using their coping arsenals and adapting to new challenges. According to Walsh (1998), resilient families are able to weather troubled times because resilience is about being able to struggle well. She contends that regular interactions with environmental stressors could, in fact, create productive and protective qualities for the family system and each of its members. According to researchers Kranz and Daniluk (2006), same-sex parents enter into parenthood only when they feel that their relationships are financially and emotionally secure and when both partners feel fully committed to parenting because they are aware of the oppressive context. In other words, resilient LGBTQ families who prepare for possible stressors to come by establishing concrete goals designed to help endure troubled times, may feel empowered to continue building on their previous successes. With the former in mind, our framework subscribes to Fredrickson's proposition that positive emotions help generate new ideas and solutions that enlarge our thought-action repertoire. However, we suggest that although non-heterosexual families are frequently exposed to negative experiences created by forces outside of their control, instead of narrowing their focus on problems, family members find

purpose in the positive meaning of their family interactions. We propose the idea that non-heterosexual families may simultaneously experience negative emotions related to the sociopolitical forces oppressing them and positive emotions related to their systemic interactions. As Connolly (2006) best put it, non-heterosexual families create a “united front” and engage in processes of mutuality that help them survive external stressors together (p.151). While it is important for practitioners to validate the struggles and stressors that non-heterosexual families are constantly battling, it is imperative that they explore the purpose and objective behind fighting the battle. We speculate that many non-heterosexual families choose to battle sexual prejudice and discrimination because they find positive meaning and purpose in their every day interactions with family members.

### ***A Shift from Deficit-Based to Strengths-Based***

This framework embraces a strengths-based perspective that emphasizes exploring the resources that non-heterosexual families possess as opposed to what has been absent in their lives. For instance, helping family members shift their focus from anti-gay comments often found in the media, to focus on the loving statements friends and family members share with them about their family, may help empower families to develop positive emotion, strength and resiliency. To further their understandings of resilience within LGBTQ families, practitioners must tap into how same-sex couples manage to mobilize resources in response to risks or threats to selves or families. Encouraging the telling of parents’ “coming out” stories or narratives of triumph may help underline the strengths and resources available to family members. For example, Short (2007) found that lesbian mothers used several strategies and shared efforts to deal with homophobia themselves, including having a deep understanding of heterosexism, studying the literature on family studies, participating in the LGBTQ community, and carefully

selecting the schools their children attended. Because our framework acknowledges that realities are socially constructed, practitioners are encouraged to explore the unique resources that each family uses to remain resilient. Exploring how children manage to thrive, in spite of their experience of homophobic stigmatization in the form of sexual prejudice against their parents, is also important. Researchers have found that in response to oppression, gay and lesbian families develop flexibility in gender roles, an appreciation for diversity, a strong sense of self, empathy about what it is like to be in the minority group, and develop egalitarian relationships that lead to increased satisfaction in family life (Martin, 1993). With these factors in mind, asking questions that explore how couples are able to engage in creative, nurturing healthy family relationships, helps LGBTQ families become aware of the coping skills and unique strategies already being employed that help them live with pride.

### Conclusion

There is a dearth of research addressing the care of LGBTQ populations in organized care settings. Hoping to find a culturally-sensitive and strengths-based framework that would assist practitioners in their practice with LGBTQ families, we turned to vast resiliency literature including the theories recently proposed by positive psychologists. We reviewed resilience research on non-heterosexual families, and found it inchoate. Although positive psychologists have contributed to our understandings of how positive emotions and flexible cognition enhance resiliency, their research has failed to help practitioners understand how non-heterosexual families manage to remain resilient in a society ruled by heterosexist principles. In other words, positive psychologists' research has not addressed the relational resources and interactions that help non-heterosexual families overcome adversity. We propose that positive psychology currently does not have a comprehensive resilience framework that addresses the unique

experiences of LGBTQ families and the complexity of their psychological needs. Because such a framework has yet to be developed, we theorized the LGBTQ Relationally-Based Positive Psychology framework. This framework is mindful of the heteronormative context that often structures organized care settings and encourages practitioners in the public sector to have conversations with their LGBTQ clients that revolve around the strengths, resources, and capabilities of their family support system and their same-sex loving relationships.

We would encourage positive psychology researchers to direct their research efforts toward non-heterosexual family members. In particular, we think a focus on a systemic understanding of these families' resilience will be particularly helpful. Our LGBTQ Relationally-Based Positive Psychology Framework may be a starting point for this research. We think our framework may be uniquely suitable for non-heterosexual families because it considers how family members collaborate together to overcome the socio-cultural and political factors that impact their family system. Our framework will be particularly helpful in the public health sector now that the Supreme Court's repeal of DOMA has extended federal health care benefits to same-sex married couples, their children, and stepchildren. With an increase in the demand for public mental health services from non-heterosexual families, our framework may serve as a helpful resource to access.

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