Autonomy Support, Relatedness, and Internalized Homophobia in the Coming Out of Lesbian, Gay, and Bisexual Individual

Abstract

The present study aimed to examine the effect of autonomy support and relatedness in the relationship between internalized homophobia and coming out. There were 120 LGB individuals who participated in the study and rated experiences of autonomy support, relatedness, internalized homophobia, and coming out. To examine the significance of the model, moderation analysis was conducted to test the effect of autonomy support and relatedness in the association between internalized homophobia and coming out. Results of the study suggest that autonomy support ($\beta=.279, p<.05$) and relatedness ($\beta=.278, p<.05$) were predictors of coming out but interaction effect of moderation model revealed that only autonomy support moderate the relationship between internalized homophobia and coming out ($\beta=.179, p<.05$). In addition, the regression model explained a significant variance of $\Delta R^2=.17$, $F(6,120)=4.025$, $p<.001$. Major finding of the study revealed that autonomy support reported to affect the magnitude or direction of relationship between internalized homophobia and coming out. Therefore, coming out is likely to happen in an environment perceived to be autonomy supported. It seems plausible, then, that autonomy support can be particularly helpful for those with internalized homophobia to feel safe and accepted for their sexual identity, potentially leading them to disclose more. This finding is consistent with the Self-Determination Theory that in an environment marked by autonomy supportive, LGB individuals are more likely to be open about their sexual orientation. Additionally, feeling of being supported and being accepted regardless of sexual orientation creates an environment for authentic self-expression. In conclusion, the findings imply that autonomy support is nutrimental to LGB individuals, which could then result to coming out. Also, this association appears to be valid regardless of feeling of internalized homophobia.

Keywords: Autonomy Support, Relatedness, Internalized Homophobia, Coming Out, Moderation Analysis, Self-Determination Theory, LGB

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Introduction
The act of disclosing LGB identity to others or coming out represents a major psychological decision among young lesbian, gay and bisexual individuals. This appears to be the biggest challenge in the lives of LGB individuals and believed to change their lives. It seems important to understand factors that impact coming out. Thus, it is worth to know how these factors interact with coming out, and perhaps clinicians and mental health workers can be better able to help LGB individuals go through with it. The current study investigates autonomy support and relatedness as moderator variables in the relationship between internalized homophobia and coming out.

The term “coming out” is used to refer to several aspects of lesbian, gay, and bisexual persons’ experiences: self-awareness, of same-sex attractions; the telling of one or few people about these attractions; widespread disclosure of same-sex attractions; and identification with the lesbian, gay and bisexual community (American Psychological Association, 2008). The process of coming out could be lengthy and a long way encounter with feelings of fear, rejection, humiliation, prejudice and discrimination. There are people who choose to keep their identity hidden or perhaps concealed for quite some time until such right moment of being comfortable of disclosing their sexual orientation and or fully expressing and coming out in very public ways.

Coming out appears to be a psychologically important step for lesbian, gay and bisexual people. It is not surprising that disclosure of sexual orientation and sharing with this into family, friends and community increase the availability of supports, which is crucial to mental health, psychological well-being and normal healthy development. However, it does not also neglect the fact that some empirical researches such as of Iwasaka & Ristock (2007) and Mohr & Fassinger (2006) suggest that for those lesbians, gays and bisexuals who conceal their sexual orientation reported to have mental health concerns and psychological problems than other lesbians, gays, and bisexuals people who are more open. On the contrary, many LGB people hesitate to come out because of the risks of experiencing prejudice and discrimination. And even if they come out, there are selective about whom they disclose their sexual orientation or preference to prevent the anticipated risks of being harassed.

Moreover, conducting research on risk-factors that negatively impact the coming out process, such as internalized homophobia will generate knowledge that will potentially shed some light on this issue and help counselors and allied professionals in dealing with unique stress experiences by lesbian, gay, and bisexual individuals in the coming out and develop intervention to this special population. Finally, the current study will optimistically open an avenue of knowledge on provision of quality and effective support to cope with stress for this identified population in terms of academic and work adjustment, interpersonal relationships and psychological well-being.

Internalized Homophobia
One of the common stressors often experienced by LGBT individuals is homophobia, which is closely associated with higher levels of stress (Weber-Gilmore, Rose & Rubinstein, 2011). For LGB individuals, keeping their identity private keeps them protected from oppression and consequences of heterosexist dominance. However, exposure of homophobic messages may come also to develop internalized homophobia or sexual prejudice toward the self for some LGB individuals. Acceptance of society’s anti-gay attitudes about LGB sexual orientations is known as internalized homophobia (Weber-Gilmore, Rose & Rubinstein, 2011). This represents a major barrier in coming out and it consistently predicts concealment (Balsam & Mohr, 2007). Relationship between internalized homophobia and coming out makes sense given that internalized homophobia is characterized by feelings of shame about one’s LGB identity, and people’s natural response to feeling shame is to hide (Kaufman & Raphael, 1996).

Autonomy Support
In context marked by autonomy support, self-disclosure becomes more likely, as the environment represents a safer forum for self-expression. For LGB individuals who try to avoid expression of hostility and rejection, disclosure of sexual orientation as non-heterosexual can be threatening for them. In the literature of coming out, the parents are the least accepting about the sexual orientation of their children; the majority of the mother and father respond with at least negativity to their children’s same-sex attractions (Savin-Williams & Ream, 2003). A similar study conducted by Legate, Ryan, and Weinstein (2011) on coming out and perception of autonomy among LGB individuals, revealed that being “out” concerning their sexual orientation in social contexts were more likely to be associated with more autonomy supportive and to be less “out” on contexts experienced as less supportive. It is notable that the perception of autonomy support plays a pivotal role in the coming out process and lessened the threats of rejection and being stigmatized.
Relatedness
The need for relatedness has conceptual roots in the theory of object relation (Winnicott, 1992) and attachment perspective (Bowlby, 1969) and reflects the need for connection or belongingness with others. Moreover, it is concerned in establishing a sense of mutual respect and reliance with others (Baumeister & Leary, 1995). For LGB identified individuals, establishing relatedness fosters the opportunity to develop autonomy and competence, and offers protective element of feeling of sameness with other people who are different from the societal norm.

Self Determination Theory Framework For The Coming Out
The present study is anchored on the theory of Self-Determination which is a macro theory of human motivation, emotion, and development that takes interest in factors that either facilitate or forestall the assimilative and growth-oriented processes in people (Ryan & Deci, 2000). It brings together, within the social context, the emotional, motivational and cognitive aspects that impact the three basic psychological needs namely autonomy, relatedness and competence (Ryan & Deci, 2000). As such, when these needs are met and maintained, it enhances the self, whereas those that frustrate or block need satisfaction foster ill health, conflict and stress (Ryan & Deci, 2000). In addition, this theory has been used as an approach in establishing healthy identities (La Guardia, 2009) and provides added level of perspective into LGB individuals’ awareness of self and perceived choice.

The current study treats autonomy support as one of the basic psychological needs of Self-determination theory which is one of the variables in the study. Specifically, it pertains to the support coming from both mother and father of LGB individuals. It is conceptualized to strengthen and help the disclosure of sexual orientation or coming out when parents support their children regardless of sexual orientation that leads to expression of authentic self and normal pattern of development among lesbian, gay and bisexual individuals.

On the other hand, relatedness was another variable used in the study. It is one of the basic psychological needs determined in the Self-Determination theory that pertains to the feeling of being belonged and connected to other people regardless of sexual orientation. This gives a feeling of being protected and valued by others that promotes and fosters greater disclosure of sexual orientation outside of family environment.

To date, a number of studies have explored the unique challenges associated with the coming out process for LGB individuals. Homophobia and internalized homophobia perhaps have shown to impact the coming out process for LGB individuals (Weber-Gilmore, Rose & Rubenstien, 2011). As they begin to disclose their sexual orientation to others, or come out, they often experience a series of stages that include, but are not limited to an initial awareness of being different, grieving, feelings of inner conflict, and an established sexual minority identity with long term relationships (Weber-Gilmore, Rose, & Rubenstien, 2011).

Lastly, the use of Self-Determination theory in the current study would address the importance of basic psychological needs that autonomy support and relatedness can be particularly helpful for those with internalized homophobia to feel safe and accepted for their sexual identity that will potentially lead them to disclose more.

Statement Of The Problem
The overarching question in the study is to know if moderator variables, autonomy support and relatedness affect the relationship between internalized homophobia and coming out. Thus, the study attempted to answer the following questions:
1. To what extent does autonomy support moderate the relationship between internalized homophobia and coming out?
2. To what extent does relatedness moderate the relationship between internalized homophobia and coming out?
Method

Participants And Procedure
The selection of the participants was made through referrals made among people who know others who identified themselves as lesbian, gay, and bisexual individuals. Respondents are self-identified lesbian, gay and bisexual or have at least disclosed information regarding their sexual orientation to selected few people or at least to one person in the entire process of identity development.

There are one hundred twenty (N=120) Filipino LGB individuals who participated in the study. All of the participants have identified to be as gay, bisexual or lesbian. The sampled individuals aged 18 to 29 years old (M=20.68; SD=3.01). They were composed of 38.3% gay, 35% bisexual, and 26.7% lesbian individuals. Among the 120 participants 66.7% identified to be Roman Catholic, 32.55% for other variation of Christianity and only .8% identified Islam.

The current study followed the required sample size suggested by Green (1991) with a minimum of $N>104+m$ (where $m$ is the number of predictors) for tests of statistical significance of individual predictors and for tests of interactions in Multiple Regression (Van Voorhis & Morgan, 2007).

Measures

Outness Inventory (OI). Outness Inventory by Mohr and Fassinger (2000) was used to assesses the extent to which individuals are “open” to various individuals (e.g., mother, peers). Participants were asked to rate the extent to which they have disclosed their sexual orientation to a person using a 7-point Likert scale ranging from 1 (definitely does not know about your sexual orientation status) to 7 (definitely knows about your sexual orientation status, and it is openly talked about). The psychometric properties of the test shows that it is reliable with the Cronbach alpha of .75 to .79 in all subscales in the study of (Mohr & Fassinger 2000).

Perception of Parents Scales: The Adult Scale (POPS). To assess parental autonomy, the Perceptions of Parents Scale (POPS) was used in this study to measure parental autonomy by Grolnick, Deci & Ryan (1997). Perceived autonomy support is defined as parental acceptance and support for authentic self-expression (Ryan & Deci, 2000). It also refers to engagement in volitional, self-determined actions – activities that fulfill autonomy needs are endorsed by one’s true self; they are not controlling or imposed (Deci & Ryan, 1985). Initial validation of the measure showed that overall scale had 0.93 Cronbach alpha. Validity results were derived using construct-related validity on tests such as self-esteem inventory by Rosenberg (1965) and locus of control by Levenson (1974).

Nungesser Homosexual Attitudes Inventory (NHAI). The scale included 34 items developed by Nungesser in 1983 to measure internalized homophobia among gays, lesbians and bisexuals sample. In this study, internalized homophobia was measured using this scale. The subscale measuring attitudes towards homosexual features in oneself is composed of 10 items. The subscale measuring attitudes towards homosexuality in other ways was comprised of 12 items, and the subscale measuring comfort with disclosure consisted of 12 items in total of 34 items (Nungesser, 1983). The reliability analysis of this measure estimates range from .84 to .95 such as in the study of Dew and Chaney (2005), Nungesser (1983), and from the .87 to .91 for the Shidlo – revised version of the scale respectively such as of Skinta, 2007 and Chung and Szymanski (2006). The NHAI has strong construct validity (Shidlo, 1994) and is widely utilized in both gay and lesbian literature (e.g., Allen & Oleson, 1999).

The Need for Relatedness Scale (NRS – 10). To measure relatedness in the current study, The Need for Relatedness Scale (NRS-10) was used to assess participant’s feeling of relatedness at work or in different setting. Relatedness refers to feeling to having sense of belongingness, meaning, and feeling genuinely connected to others (Deci and Ryan, 1985). The instrument contains 10 items and 2 dimensions namely acceptance and intimacy. Each item assessed on a 7 point Likert scale, for example, “In my relationships with my colleagues, I feel supported”. This test has shown to be reliable with the Cronbach alpha of .91 in its original psychometric properties.

Results And Discussion

Problem 1: To what extent does autonomy support moderate the relationship between internalized homophobia and coming out?

Autonomy support was examined as moderator of the relationship between internalized homophobia and coming out. Autonomy support and internalized homophobia were entered in the first step of the regression analysis. In the second step of regression analysis, the interaction term between autonomy and internalized homophobia was entered, and it explained a significant variance in coming out $\Delta R^2=.17$, $F(6,120)=4.025$, $p<.001$. 

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### Table 1. Summary of Regression Analysis for Problem 1

| Step   | Variable                        | Beta | SEβeta | β  |
|--------|---------------------------------|------|--------|----|
| Step 1 | Internalized Homophobia         | .004 | .092   | .004|
| Step 2 | Internalized Homophobia         | .021 | .087   | .021|
|        | Autonomy Support                | .270 | .086   | .270|
|        | Internalized Homophobia x Autonomy Support | -.001 | .087 | -.010|
| Step 3 | Autonomy Support                | .273 | .086   | .273|
|        | Internalized Homophobia x Autonomy Support | .179 | .092 | .190|

Note. $R^2 = .00$ for Step 1; $R^2 = .14$ for Step 2; $R^2 = .17$ for Step 3.

Moreover, interaction term between internalized homophobia and autonomy support was shown to be significant, thus confirming the first hypothesis for model 1. Therefore the interaction is significant and that moderation is supported. Graph below shows the predicted values of autonomy support for the interaction of internalized homophobia and coming out, calculated at values one standard deviation above and below the mean.

As shown, regression analysis explained 17% of the total variance for the model. The main effect between Internalized homophobia and coming out was not significant ($\beta=.004, p<.05$) but autonomy support was significant ($\beta=.279, p<.05$).

It is noteworthy that internalized homophobia did not predict coming out as it was initially established in the study of Weber-Gilmore, Rose and Rubenstien (2011). However, autonomy support was shown to be a significant predictor of coming out. Results of the study supported the assumption that autonomy support predicts the disclosure of LGB identity.

Problem 2: To what extent does relatedness moderate the relationship between internalized homophobia and coming out?

Relatedness was examined as moderator variable between the relationship of internalized homophobia and coming out. Relatedness and internalized homophobia were entered in the first step of the regression analysis. In the second step of regression analysis, interaction term between relatedness and internalized homophobia was entered, and it explained a significant variance in coming out $\Delta R^2=.17, F(6,120)=4.025, p<.001$.

The regression model explained 17% of the total variance for the second problem or model. In the second problem or model of the study, the main effect of relatedness was significant predictor of coming out among lesbian, gay and lesbian individuals. However, interaction term between internalized homophobia and relatedness was not significant ($\beta=.016, p<.05$). Hence, the second hypothesis of the study was not confirmed based on the results but it is noteworthy that main effect of relatedness predicted coming out.
intervention. On the contrary, the respondents of the current study do not have LGB community group nor have they received any intervention from this formal group offering services for LGB community. Hence, gap on this literature has been addressed in the study.

Findings suggest that autonomy moderates the relationship between internalized homophobia and coming. By this, it is important to know that coming out is a process of discovering oneself in the midst of confusion and dissonance. It is sensible to know that while an LGB individual felt the autonomy support to disclose information about sexual orientation a sense of difference built that gives the impression that any form of homoerotic feelings and ideas associated with it are wrong. Thus, this study shows that support for autonomy helps LGB individuals have more self-acceptance. Experiences of autonomy support is particularly relevant to the issue of those LGB individuals with internalized homophobia to feel safe and accepted for their sexual identity, potentially leading them to disclose more.

Finally, results of the study are consistent in the frame of Self-determination theory that follows the organismic dialectical approach. That is, people are active organisms, with evolved tendencies toward growing, mastering ambient challenges, and integrating new experiences into a coherent sense of self. In the case of LGB individuals, perception of autonomy support and relatedness are natural tendencies toward disclosing and expression of their true self regardless of sexual orientation.

**Recommendation**

There are several recommendations of this study that should be addressed in the future research. First, one of the study’s limitations is that participants may have been more "out" than the general population of lesbian, gay, and bisexual population because “closeted” lesbian, gay, and bisexual individuals are more difficult to identify and may be reluctant to participate, a common problem that research using lesbian, gay, and bisexual participants generally faces. Thus, it is important to consider to represent those who are closeted by recruiting them from multiple sources.

Furthermore, responses of the participants in the measures specifically in the outness level may be true only to those participants who came out freely and publicly. It is possible that result would have found larger effect between less disclosure and those who are comfortable of their sexual orientation. To test this account, future research should focus on recruiting LGB individuals who tend to conceal more or to those

### Table 2. Summary of Regression Analysis for Problem 2

| Step | Variable                  | Beta  | SEβ | B    |
|------|--------------------------|-------|-----|------|
| 1    | Internalized Homophobia  | .004  | .092| .004 |
| 2    | Internalized Homophobia  | .021  | .087| .021 |
|      | Relatedness              | .278  | .087| .278 |
| 3    | Internalized Homophobia  | -.001 | .085| -.010|
|      | Relatedness              | .290  | .087| .290 |
|      | Internalized Homophobia  | .020  | .070| .016 |
|      | x Relatedness            |       |     |      |

Note. R² = .00 for Step 1; R² = .14 for Step 2; R² = .17 for Step 3.
*p<.05. **p<.001.

**Conclusion**

Results of the study show that the relationship between internalized homophobia and coming was found to be not significant. On the other hand, association between internalized homophobia and coming out has shown to be significant. Whereas, the relationship between internalized homophobia and coming out also suggests be significant. Moreover, the effect of autonomy support as a moderator enhances the relationship of internalized homophobia and coming out, thus the interaction has shown to be significant and the moderation is supported. Lastly, the effect of relatedness as moderator variable reveals to be non-significant in the relationship between internalized homophobia and coming out, thus the interaction was not significant and the moderation is not supported.

Nonetheless, the current research addressed some important gaps in the literature. The significant relationships of both autonomy support and relatedness provide further knowledge on the importance of basic psychological needs in the process of coming out among LGB individuals. Previous studies conducted using the SDT as the framework sampled their respondents from organizations serving the LGB community such as of Legate, Ryan, and Weinstein (2011). Thus, most of the respondents in the previous researches in the literature have had received support from identified support groups and have been provided with
who have disclosed their sexual orientation to limited people.

The present study is designed to test the relationships of the variables following the correlational framework. In general rule, the design is only concern with the relationships of the predictor, criterion, and moderator variables and does not go beyond those test of interactions. In consonance, future commendation for the forthcoming research is the use of more sophisticated design such as structural equation modeling that will address the issue on the causal relationship of internalized homophobia and coming out.

Although the current study suggests that autonomy support and relatedness are predictors of coming out despite of experience of internalized homophobia, the study was not meant to assess the full spectrum of factors that may affect disclosure of sexual orientation or how such factors may interact with one another. To understand coming out, it is important to consider many other factors such as differing trust levels among confidants, perceive acceptance in eastern culture, and other stressors.

The current findings of the study may have implication in the intervention used in clinical setting or by other allied mental workers working with LGB population. Recommendation on modeling intervention with the findings of the study could enhance their multicultural competency with LGB clients in terms of providing specific intervention focused on specialized group such as LGB individual. Counselor working with LGB clients who struggle with internalized homophobia should focus on helping them develop more positive self-regard and extend beyond helping LGB people establish greater ties with the larger community and develop healthy social support networks and intimate relationships.

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