MALE-PARTNERED BISEXUAL WOMEN'S PERCEPTIONS OF DISCLOSING SEXUAL ORIENTATION TO FAMILY ACROSS THE TRANSITION TO PARENTHOOD: INTENSIFYING HETERONORMATIVITY OR QUEERING FAMILY?

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Drawing from queer and communication privacy management frameworks, this study examines the narratives of 22 bisexual, male-partnered women who were interviewed during the perinatal period and one year postnatally about their disclosures of sexual identity to family of origin. Most women rarely discussed their sexual identity with family; participants who had disclosed described such disclosures as provoking discomfort. Some women stated that their parental status seemed to invalidate the need to talk about their sexual history or identity with family, due its declining salience and increased concerns about judgment. This study reveals how partnership and parenthood statuses contribute to the intensification of heteronormative pressures in relation to family. Therapists should attend to the role of heteronormative values regarding partnering, family-building, and parenting.

Individuals who identify as bisexual are less likely to disclose or discuss their sexual orientation in general, as compared to lesbian/gay- and heterosexual-identified persons (Sabat, Trump, & King, 2014), especially if they are in different-gender relationships (Mohr, Jackson, & Sheets, 2016). Several issues are linked to the decreased likelihood of disclosure among bisexual people, including: (a) lower identity centrality (their sexual orientation may be less central to their identity); (b) the role of partner gender in shaping assumptions about sexual orientation (bisexual people partnered with people of a different gender are generally assumed to be heterosexual); and (c) the reality that disclosure of a bisexual identity is often more complex than disclosure of an LG identity, as it cannot be presumed based on the gender of a partner and so must be stated more explicitly (Mohr et al., 2016; Sabat et al., 2014). In adulthood in particular, individuals may be less likely to discuss their bisexual identities with family of origin, insomuch as such discussions may feel unnecessary or irrelevant—particularly if one's partners are primarily different-gender. Yet,

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some adults may still feel compelled to disclose or discuss their sexual identities or histories with family (e.g., because they value honesty and authenticity in these relationships; LaSala, 2010).

Little work, with the exception of Scherrer, Kazyak, and Schmitz (2015) has explored sexual identity disclosures to family members among bisexual individuals with different-gender partners, and no work has examined disclosures among bisexual people in the context of parenthood. Parenthood—with a different-gender partner—could be experienced by women and their families as negating the necessity of discussions surrounding non-heterosexual relationships and identities, thereby silencing such conversations and erasing women's sexual identities. Thus, the central focus of this study is how bisexual women perceive their decisions to disclose their sexual identity in relation to family. Specifically, of interest is: How do women's male-partnered and pregnancy/parental statuses shape their perceptions of the necessity or relevance of sharing their sexual identities or histories with family? To examine this, we analyzed the narratives of 22 bisexual, male-partnered women during the perinatal period and one year postnatally, with regard to disclosures and discussions with family related to their sexual identity and history. Fourteen women were first time parents, and eight were experiencing a subsequent pregnancy and transition to parenthood at the time of the study (their second, in seven cases, and their fourth, in one case).

This research has implications for our understanding of how sexuality is negotiated within and across familial settings, how certain sexual identities are more or less privileged and visible than others within these settings, and how partnership and parenthood statuses impact the salience and meaning of bisexual women's sexual identities—for themselves and their families. Family professionals should be aware of these complexities in their work with bisexual clients, and be prepared to assist them in dealing with challenges to heteronormativity, managing intergenerational family communication, and engaging in diverse ways of doing (or queering) family.

BISEXUAL WOMEN'S DISLOSURE OF SEXUAL IDENTITY WITH FAMILY

As noted, very little work has been conducted on bisexual people's disclosures and discussions about their sexual history or sexual identity in relation to family (Scherrer et al., 2015). We thus draw first on the general literature on coming out to family as well as on the limited literature that addresses bisexual people's sexual identity disclosures in relation to family.

Research exploring precursors to and reasons for (non)disclosure of sexual identity has found that expectations about possible responses from family may affect disclosure (Acosta, 2010; Gramling, Carr, & McCain, 2000). LGB people are more likely to disclose their sexual identities when they expect that such information will be well received (Mohr et al., 2016). Gramling et al. (2000) explored lesbian women's (non)disclosures to parents and found that some women expected them to be supportive, which facilitated disclosure of their sexual identity; in turn, their parents tended to be accepting of them postdisclosure. Others disclosed despite knowing that their parents would likely not be supportive—but felt compelled to do so and did not care about the outcome. Still others did not disclose, because they did not expect support and cared about maintaining a relationship with their parents. A final group of women found themselves in situations where they were forced to come out to their parents—who subsequently ignored this aspect of their identity.

Disclosure decisions in general, and in relation to family specifically, may be particularly complicated for bisexual individuals (Mohr et al., 2016). Like their lesbian/gay counterparts, they may consider potential benefits (e.g., enhanced closeness, support) and risks (e.g., rejection, alienation) of disclosure, but also navigate risks associated with binegativity and bisexual invisibility. Bisexual people face a unique set of negative stereotypes including ideas of bisexuals as indecisive, closeted, manipulative, selfish, promiscuous, unable to maintain relationships, and prone to sexual risk-taking (Knous, 2006; Ross, Dobinson, & Eady, 2010). In turn, bisexual people sometimes self-present as monosexual to avoid prejudice or stigma: that is, they publicly label themselves (or allow others to label them) as heterosexual (if partnered with someone of a different gender) or as lesbian/gay (if partnered with someone of the same gender) to avoid harassment or censure (Mohr et al., 2016; Schrimshaw, Siegel, Downing, & Parsons, 2013).

Bisexual people also face bisexual invisibility. Bisexual people with different-gender partners are often presumed by others to be heterosexual, whereas bisexual people partnered with same-gender partners are presumed to be lesbian/gay, even after coming out as bisexual (Dyar,

Feinstein, & London, 2015). Being partnered with someone of another gender in particular may cause bisexual individuals to experience their sexual identity as less central—or to feel that others will perceive their sexual identity as less central (Mohr et al., 2016; Schrimshaw et al., 2013), thus limiting disclosure out of concern that others will judge such disclosures as unnecessary or silly.

In one of the only studies to explicitly focus on bisexual adults' disclosure processes in relation to family, Scherrer et al. (2015) examined the narratives of 45 bisexual individuals regarding their coming out to family. They found that participants often described different disclosure decisions in relation to different family members (e.g., they were out to siblings but not parents). Participants often encountered stereotypes about bisexuality when they did come out as bisexual, and, reflecting the pervasive influence of heteronormativity, many "discussed how their family members held out hope that they would ultimately end up in heterosexual relationships" (p. 689). In a study that included both lesbian and bisexual women, Lannutti (2008) briefly discussed women's experiences with family of origin. She noted that the families of bisexual women seemed to internalize dominant constructions of bisexuality as a less acceptable, often transient identity, hoping that these bisexual women would eventually (re)integrate themselves into the dominant heterosexual community. Thus, heteronormative expectations, particularly about marriage and family, may shape how family members respond to bisexual individuals—particularly if they partner with someone of a different gender, and especially if they become parents.

CONCEPTUAL FRAMEWORK

This study draws from queer theory and communication privacy management (CPM) theory. First, queer theory emphasizes the socially constructed, performative aspects of sexuality (Butler, 1990) and provides a lens through which to interrogate and challenge heteronormativity as an ideology that presumes heterosexuality as normal and pervasive (Chevrette, 2013; Oswald, Blume, & Marks, 2005). Queer theory presumes that "heterosexual privilege is woven into the fabric of social life, pervasively and insidiously ordering everyday existence" (Jackson, 2006, p. 108). The family is a primary site in which heteronormativity is produced and reinforced, with one type of family structure valorized over all others: namely, heterosexual, monogamous, married unions (Chevrette, 2013). Thus, heteronormativity fuses together gender, sexual, and family ideologies, or norms, whereby "doing gender", "doing sexuality", and "doing family" properly are inseparable from one another (Oswald et al., 2005).

Queer theory offers a useful lens to examine the family context of how male-partnered bisexual women negotiate heteronormativity across the transition to parenthood. Bisexual women may be uniquely positioned to benefit from heteronormativity (i.e., in the form of heterosexual privilege) —but are also in a position to challenge heteronormativity and the accompanying assumption of monosexuality, in that their sexual histories and/or identities queer basic notions of sexuality (e.g., as stable and binary). Yet they face significant challenges in doing so. As Scherrer et al. (2015) note, "if bisexual individuals are in a different-sex relationship, family members may misunderstand them to be heterosexual, despite their self-identification as bisexual" (p. 683). Such erasure may be internalized by bisexual people; indeed, MacDowall (2009) observed that bisexual individuals sometimes struggle to represent their bisexuality as a "viable" form of desire in that it is obscured by the hetero/homosexual nature of their relationship structures, and find themselves constrained by the lack of language to articulate bisexual identity within such relationships. Thus, bisexual women who are partnered with men may choose to respond to familial tensions around sexuality (e.g., knowledge that they are likely to be unsupportive of their sexuality due to religious beliefs) by minimizing their sexual histories. Yet by making the choice to downplay their bisexuality in an effort to preserve familial harmony, they (unintentionally) uphold heteronormativity, as opposed to resisting it. Alternatively, women who assert their bisexuality may experience such openness as enhancing their personal autonomy and identity integration (Ryan, Legate, & Weinstein, 2015), yet this choice threatens to cause disruptions or rifts in family relationships.

We also draw upon concepts central to communication privacy management (CPM) theory, which provides tools for contemplating how family members manage disclosure of private information (Petronio, 2010). CPM allows us to examine the dilemma noted above, where bisexual women must navigate between two potentially conflicting desires: to share important aspects of

their identity, and to maintain family harmony. Indeed, by keeping information about their sexual history and/or identity private, they avoid disclosures that may expose feelings of vulnerability or shame. Yet, women may also experience an opposing pull toward sharing that private information (Docan-Morgan, 2010; Petronio & Caughlin, 2006). The benefits and risks of disclosing vary by situation and recipient (e.g., it may not be safe to come out as bisexual to some family members, but may enhance emotional intimacy with others); in turn, individuals often develop "criteria" or "rules" for who one discloses to, when, and how much is disclosed, which may change over time (Petronio & Caughlin, 2006). Related to this tenet of CPM, research on topic avoidance suggests that avoidance of certain topics may be motivated by (a) self-protection (e.g., by avoiding criticism); (b) desire to preserve relationships (i.e., by avoiding conflict); (c) perception of the social inappropriateness of the topic, and (d) expectation of unresponsiveness (Caughlin & Afifi, 2004; Docan-Morgan, 2010; Guerrero & Afifi, 1995). Topic avoidance can also be related to impression management, as individuals aim to maintain positive impressions others have of them (Guerrero & Afifi, 1998) and disassociate themselves from negative ones (Afifi & Guerrero, 2000). Thus, women may not disclose their sexual identity to avoid the association with negative stereotypes about bisexuality, for example, and to preserve positive impressions that family members may hold of them.

By drawing from queer theory and CPM theory, we are able to interrogate how awareness of heteronormativity, and the desire and impulse to resist it through queering processes, shapes disclosure of bisexuality. Recognizing that disclosure is a dynamic process, and not a one-time event (Knoble & Linville, 2012), we examine women's narratives regarding (non)disclosure, and their perceptions of familial understandings of their sexuality, at two time points: during the perinatal period (T1), and one year later (T2). Given women's male-partnered status at T1, it is possible that family members will be tempted to construe women's bisexual identities or behaviors as temporary —a "phase" they went through on their way to establishing a heterosexual identity (Diamond, 2008). In turn, such impressions may stifle acknowledgment or discussions about women's bisexuality. The fact that women are transitioning to parenthood may operate as an additional heteronormative constraint that functions to erase women's non-heterosexuality. In contrast to studies that surmise increasingly favorable perspectives on the part of family members regarding individuals' LGBQ identities over time (e.g., D'Augelli, Grossman, & Starks, 2005), we expect that, from the perspective of women's family of origin, the perceived salience or relevance of women's sexual histories may decline, in that they are partnered with men and are now parents.

METHOD

Included in the study are data from 22 bisexual women currently partnered with men, who were interviewed during the perinatal period, and then one year postpartum, in two locations: Toronto, Ontario, Canada and areas in Central/Western Massachusetts USA.

Participants

A description of the sample appears in Table 1. Twenty women were pregnant at the time of the first interview; in two cases, women were interviewed 1–2 weeks postnatally due to scheduling issues. Most women were married, first-time parents, White, and had at least a college degree. About half were employed full-time; the remainder were working part-time, were students, or were not employed. About half of women reported 1–2 sexual partners in the past 5 years, and about half reported three or more partners during that time period. Most reported that their sexual relationships in the past 5 years were mostly with men ($n = 9$) or with men and women about equally ($n = 6$), followed by with men exclusively ($n = 5$) and mostly with women ($n = 2$).

Procedures

The current study was approved by the human subjects committees at Clark University and the University of Toronto [UNblinded]. Women were recruited through consecutive sampling from selected midwifery clinics and OB/GYNs (including hospital-based and stand-alone practices) during presentation for prenatal care, in the city of Toronto, Canada, and in and around cities and towns in Western and Central Massachusetts, USA (Worcester, Northampton, Holyoke,

Table 1
Selected Demographic Characteristics of Participants (N = 22)

Demographic variable	*n* (%)
First time parents	14 (63.6)
Race	
White	18 (81.8)
Of color[a]	4 (18.2)
Education	
High school or less	4 (18.2)
Some college or technical certificate	3 (13.6)
Associate or bachelor's degree	8 (36.4)
Higher degree	7 (31.8)
Employment	
Full-time	13 (59.1)
Other (part-time, student, or not working)	9 (40.9)
Household Income	
<$30,000	7 (31.8)
$30,000–$59,999	5 (22.7)
$60,000–$99,999	2 (9.1)
$100,000+	8 (36.4)
Number of Past Partners (in past 5 years)	
1	4 (18.2)
2	6 (27.3)
3+	12 (54.5)
Gender of Past Partners	
Mostly women	2 (9.1)
Women and men equally	6 (27.3)
Mostly men	9 (40.9)
Exclusively men	5 (22.7)
Relationship Duration of Current Relationship	
<2 years	5 (22.7)
2–10 years	11 (50.0)
>10 years	6 (27.3)
Marital Status	
Married	13 (59.1)
Unmarried	9 (40.9)
	Mean (SD)
Age	31.18 (5.40)

[a]This category includes three Latina participants and one East Indian/South Asian participant.

Greenfield, and Westfield). These sites were located in a variety of different geographic locations, both rural and urban, serving low-, middle-, and high-income women. Women attending a prenatal care visit at 25–32 weeks gestation were asked to complete a brief questionnaire including: (a) sexual orientation, (b) gender of sexual partners in the past 5 years, and (c) current partner status (i.e., partnered or single; gender of current partner). This pre-screen enabled us to obtain a systematic sample of "invisible sexual minority women": women who were currently partnered with a man but reported having had a least one female sexual partner in the past 5 years and/or identifying with a nonheterosexual identification (e.g., bisexual, queer). To be eligible for participation, all women also had to be pregnant, at least 18 years old, and speak English fluently.

Potentially eligible participants were contacted by research staff. Of the eligible participants who were successfully contacted (75% of attempted contacts), 83% (*n* = 29) consented to participate in in-depth prenatal and postnatal interviews. Based upon our interpretation of the qualitative data related to women's sexual self-identifications and relationship histories at the T1 interview, we determined that 20 women identified as bisexual, one as bicurious/bisexual, and one as bi/pansexual. (Notably, some of these women also used the term "queer" to describe themselves in certain contexts—e.g., if they were with lesbian/queer friends.) We included only these 22 women in the study insomuch as the remainder (*n* = 7) did not identify as bisexual, and instead used terms such as primarily heterosexual or heteroflexible.

Perinatal interviews took place in person (*n* = 18), or by telephone (*n* = 4). Interviews were conducted by one of the two principal investigators of the study or trained graduate or postgraduate students. Interviews ranged from 1 to 2 hrs, and were mostly conducted at participants' homes. Approximately one year postnatally, all women were interviewed again, in person or by phone.

Interviews followed a semi-structured interview guide that probed areas such as feelings about the pregnancy/parenting; support/non-support from family, friends, and community; sexual history; sexual identity; disclosure practices in regard to partner, family, friends, LGBT community, and health care workers; and relevance of sexual history and identity to their transition to parenthood. Interviews purposefully queried both sexual/relationship history and sexual identity. Given that the sample consists of bisexual-identified women partnered with men, their sexual history (and relationships) with women is an important expression of their bisexual identities. In turn, talking about their sexual and relationship histories is likely the most concrete way for many of them to discuss their sexual identities (i.e., bisexuality).

The T1 (perinatal) interview emphasized women's pregnancy and health care experiences, whereas the T2 (1 year postnatal) interview focused especially on parenthood experiences. Women's responses to the following questions were analyzed for the current study:

T1 (perinatal): (a) Tell me about your current relationship. (b) Who do you talk to about your sexual history/sexual identity? How involved are those individuals in your life now? (c) Have you avoided telling certain people? (d) Tell me about your family of origin (parents and siblings). Do you talk to them about your sexual history/identity? (e) If yes, what has their response/reaction been toward your sexual history/identity? If no, was it a conscious decision not to tell them? How do you think they would respond if they knew? Do you worry about them finding out?

T2 (1 year postnatal): (a) Thinking back over the last year, how did you think about or understand your sexual identity during your pregnancy? (b) Do you understand your sexual identity differently now that you have been a parent/mother for almost a year? (c) Over the past year, how have your family and/or friends responded to your becoming a parent? (d) Do you think your sexual history has had any impact on their response? Do you talk about your sexual history more/less with your family/friends now that you are a parent? Does it feel more/less comfortable? Do you feel their response to your becoming a parent has changed at all? What about their feelings toward your sexual history? (e) (If certain family members/friends are unaware) Has your preference for them to know or not know about your sexual history changed at all during this time?

Data Analysis

Participants' responses were transcribed and examined using thematic analysis (Bogdan & Biklen, 2007; Braun & Clarke, 2006). Thematic analysis is a rigorous and deliberate, but also theoretically flexible, approach to analyzing qualitative data (Braun & Clarke, 2006). Our thematic analysis focused on participants' disclosure of sexual identity in relation to family and was informed by the relevant literatures, and queer and CPM perspectives.

To develop themes, the first author engaged in line-by-line analysis to generate initial theoretical categories that stayed fairly close to the data (Patton, 2002). For example, she generated the codes "has not disclosed to family" and "has disclosed to family" to describe women's general stance on disclosure. These codes were refined and elaborated upon as she moved through the coding process. For example, disclosed to family was replaced by codes denoting which members the participant had disclosed to, the nature of the conversation (including family members' response), and whether discussions were ongoing. She developed subcodes to denote reasons for and conditions of (non)disclosure (e.g., knowledge of parental homo/biphobia as a reason for

nondisclosure). These codes, which can be understood as being more conceptual in nature, became the basis for the "themes" developed in the analysis (Braun & Clarke, 2006; Patton, 2002).

Other members of the research team independently coded approximately half of the transcripts (Miles, Huberman, & Saldana, 2013) in order to serve as an outside perspective on the emerging categories and definitions, thus increasing the trustworthiness of the emerging scheme and enhancing transferability. Early on, intercoder agreement ranged from 80% to 85% (number of agreements/number of agreements + disagreements). Coding disagreements were discussed at weekly meetings and these discussions led to refinement of the scheme, which was reassessed at multiple points in terms of its fit with the data. For example, the scheme was revised to achieve greater conceptual clarity across the four patterns of sexual identity disclosure, and also to accommodate a new subcode within the final theme of "Changes in heteronormative pressures by family", where we discuss women whose family members were reportedly pressuring them to marry—as well as, within this group, women who resisted such pressures. Intercoder agreement using the final scheme was 94%, indicating good reliability. The final scheme, which we used to organize our results, was established once the research team had verified agreement among all the independently coded data.

<div align="center">FINDINGS</div>

First, we describe women's perspectives and experiences regarding disclosure, discussion, and communication about their sexual identities with family. We particularly focus on parents, since these individuals were the focus of women's narratives. Second, we present changes in the way that women approached the topic of their sexual identity with family postnatally.

Perinatal Period (T1): Sexual Identity/History Disclosures and Familial Responses
At the time of their pregnancy, a minority of women had not disclosed details about their sexual identity or history to their families, often out of concern for how their parents would respond. The women who had disclosed narrated four different familial responses and ongoing patterns of communication regarding this information.

Nondisclosure: "I don't think this is something I'd ever tell my mum". First, six of the 22 women asserted that they had never discussed their sexual identity or history with their parents—although two of them shared that their siblings were aware of their sexual histories. They framed nondisclosure as a rational, necessary response to their parents' homo/biphobia, which was sometimes rooted in cultural or religious ideologies that explicitly stigmatized nonheterosexualities and rendered them "taboo." In turn, they expected that their parents would be "shocked" or "saddened" to find out that they identified as bisexual and/or had had relationships with women—especially since they had kept their sexual histories and identities "quiet for so long." Ali, age 34, grew up in a religious household where "homosexuality is not even on the table, it's just like, *NO* . . . the stigma around it . . . is very much there," and, consequently, "I don't think [it's] something I'd ever tell my [parents]." Ali thus went out of her way to avoid discovery of her bisexuality and prior relationships with women; for example, she avoided sharing content related to gay marriage on Facebook out of fear that family members might report this to her mother, potentially prompting discussion of her sexuality. Consistent with CPM theory, and research on topic avoidance (Caughlin & Afifi, 2004), these women felt that disclosure represented a threat to their relationship with their parents, and thus avoided it to maintain the family "status quo." To disclose would be unnecessarily "confrontational" and "overwhelming" for them, and could complicate (sometimes strained) relationships with family members who "just wouldn't get it."

In two of these six cases, women described distant relationships from parents, thus rendering their sexual identities "off the table" as a potential discussion topic (i.e., it was deemed inappropriate given weak or strained relationships; Guerrero & Afifi, 1995). Likewise, two of these six women noted the current low salience of their sexual identities in explaining nondisclosure, whereby their sexuality had "gone on the backburner" (Shayna) in that they were married to or in long-term relationships with male partners. This finding echoes MacDowall's (2009) observation that a bisexual identity may be deemed "unviable" in the present moment because women are in a different-gender

relationship, thus "invalidating" their sexual history and contributing to bisexual invisibility—but extends these ideas by bringing them into the context of parenthood.

It is notable that two of these six women shared that their same-sex experiences and relationships had occurred or continued to occur primarily in the context of open relationships (i.e., consensual nonmonogamy), and so it felt difficult to disclose about one without disclosing about the other. Participants were aware of the particularly powerful stigmas surrounding nonmonogamy (Moors, Matsick, Ziegler, Rubin, & Conley, 2013) and thus avoided this topic in relation to family (Caughlin & Afifi, 2004). Speaking about both bisexuality and consensual nonmonogamy, and her family's heteronormative assumptions and values, Dina, age 30, stated:

> This kind of thing has a certain amount of stigma to it. "Oh, she dates girls, so that's fun. Oh, she's married and has young kids so that's irresponsible. Oh, she . . . you know, steps outside of her marriage." A lot of people have a lot of ignorance . . . about nontraditional relationships . . . My family doesn't see [being gay or bisexual] as an orientation, they see it as a lifestyle choice . . . There's just a lot of ignorance in my family in general.

This quote illustrates that Dina was aware of the multiple ways in which her sexual identity and relational configuration violated heteronormativity (Chevrette, 2013), and thus chose not to share details of life that could call into question her normative enactment of sexuality or family.

Avoidance: "They know I'm bi, but they don't like me saying I'm bi". Six of the 22 women revealed a second type of disclosure pattern in which they had shared their sexual history or sexual identity with parents in the past, and described them as somewhat critical and/or "not entirely comfortable" with it, but at the same time, not explicitly rejecting. Ella, age 28, noted that her mother's response to her disclosure of sexual relationships with women was such that she "couldn't believe it. She's like, 'What? Now you're going to do that? That's just weird, but that's you, that's your life' and she understood." These women generally described a lack of ongoing acknowledgment of their sexual history or sexual identity—which was, in some sense, an "open secret" that no one talked about (Acosta, 2010), whereby it was tacitly accepted but also not discussed. Four of these six women specifically noted that their parents had communicated, initially or on an ongoing basis, that their relationships with women were a "phase," thus invalidating their bisexual identities and reinscribing bisexual invisibility (Diamond, 2008; Scherrer et al., 2015)—but also, through such dismissal, justifying their refusal to talk about it. Brandy, age 34, noted that when she came out to her parents, her mother "was kind of like, 'Oh, this is a phase. It doesn't mean . . . ' She was uncomfortable with it . . . and avoided talking about it."

Furthermore, three of these six women noted how, when they had attempted to discuss their sexuality with their parents, their parents had expressed criticism of or voiced "distaste" for their invocation of specific sexuality labels (i.e., bisexual, pansexual), possibly reflecting the hypersexualization of nonheterosexualities (Knous, 2006). Whereas it is entirely acceptable to espouse a heterosexual identity, outwardly or openly expressing any other sexual identity is viewed as unnecessary or inappropriate, reflecting the naturalization and normalization of heterosexuality (Jackson, 2006). Given the "distastefulness" of the topic, avoidance was the "general rule" when it came to discussing women's sexual identities or histories. Fran, age 32, said that she had repeatedly "tried" to talk to her mother about her sexuality, especially when she was primarily dating women, but her mother would not acknowledge it: "It seemed like it was deeply disturbing to her to even consider that her daughter could be gay or bisexual . . . or that you could be attracted to more than one gender." Maura, age 25, stated,

> [My parents] are not fond of me saying that I am bisexual or pansexual, so I've kind of left it at, I've had girlfriends, but generally I don't talk to my parents about my sexuality . . . I got into a gnarly argument with my mom about it, and we stopped talking for a few months.

Four of these six women described how their parents reified and upheld heteronormativity through their expression of both (a) a preference that women partner with men as opposed to women, and (b) relief when women entered (and became pregnant within) their current different-gender relationship, extending Scherrer et al.'s (2015) finding that the family members of bisexual people sometimes implicitly or explicitly expressed a preference for their involvement in different-gender

relationships. Ellen, age 29, noted that her family knew about her sexual history involving both women and men, and, although they were not explicitly "unsupportive, they were not jazzed about it either"; in turn, "I think they're very happy that I married a man, so that there's just one less complication in my life." Maura described how her parents became "warmer" towards her when she partnered with a man, and their reaction was "close to relief", thereby illustrating how support and acceptance may be somewhat conditional on women's enactment of "proper" sexuality, gender, and family relationships (Oswald et al., 2005):

> There was a period of time when they didn't really want to associate with me too much—not necessarily to the point of disowning me but nowhere near the amount of affection I'm receiving from them now. I guess they're a little bit more willing to push [their attitudes about nonheterosexuality] aside, especially since I'm with a male partner and my relationship is a little more traditional . . . [But] my parents do not support LGBT anything. They don't support the gay community at all.

Tolerance: "They're ok but it's not their absolute favorite topic". In a third type of disclosure pattern, eight of the 22 women described having shared their sexual identity or history with their parents, who ultimately came to a place of tolerance—albeit a preference for not openly discussing it. That is, compared to the prior group, their parents were somewhat more open to their daughters' disclosure and did not simply silence or avoid discussing their daughters' bisexual experience. These women often described having introduced their parents to girlfriends, which may have helped them to "process the information . . . as not just a stage" (Cleo) after initially struggling with women's sexuality. As Vivian, age 32, noted, her mother initially conceived of homosexuality as a "mental illness that soon they would find a cure for" but came to accept her queer identification and same-sex relationships. Cleo, age 28, said she came from a "religious home" but also that her parents "tried to be supportive as much as they could. They're not going to, like, shun me for it."

Although these family members were described as tolerant of participants' sexual histories and identities, six of these eight women nevertheless described their families as "relieved" or "glad" when women ultimately partnered with men, in part because they seemed to believe that life would be "easier" for women and/or because they were more familiar and comfortable with "male-female relationships." Vivian described her mother as "really making an effort" to be supportive of her relationships with women, and noted that she had even accompanied Vivian and a past girlfriend on vacation; and yet, "probably it was just a relief [for me] to be in a relationship that she could understand better." Tammy, age 27, stated, "I think there's some degree of like, 'Oh this is easier to relate to . . . like, we can talk about her husband more easily [than a wife].'" As Leila, age 26, recalled, her mother had told her to "explore" her desire for women—yet ultimately said, "'Honey, don't tell anybody you're gay. Because you still like guys still . . . ?' And it's like, yes. And [she's like], 'Well, ok.'" These women thus highlighted ways in which their family upheld heteronormativity through implicit suggestions that relationships with men were preferable to, and more valid than, relationships with women.

Although most women did not "try to push" the topic of their sexual identities and histories with family—who, again, generally preferred "not to talk about the subject," four of these eight women actively resisted the silencing of their sexuality. They asserted their sexual identities despite their privileged status as male-partnered (and pregnant), thus "queering" their family's ideas about sexuality, and in turn, heteronormativity (Chevrette, 2013; Oswald et al., 2005), even if doing so threatened familial harmony—although, notably there were limits in what they felt comfortable sharing with family. Vivian described how she regularly brought up her involvement in queer activism (e.g., "I still wouldn't hesitate—[I'll be like], 'I was going to a, you know, queer rights protest'"), which may have served to remind her family of her nonheterosexuality (which she did not want to be "totally invisible") as well as to challenge heteronormativity more broadly. Likewise, Roxanne, age 38, stated:

> I will challenge them if I have any reason to . . . I had a conversation a little while back with [family member], who had made some off-the-cuff comment about not understanding lesbian sex . . . and several times in that conversation I kind of had to say, just to specify, no, I'm also attracted to women. If he hadn't been family, I think that I would have

been a little bit more direct about the way I was saying it. I'm definitely more open about being bisexual than I am about having an open relationship . . . I try to avoid talking to family about [it] because I feel like it is just too much of a risk there.

Acceptance: "They know and they're comfortable with it". Finally, two women described their families as overtly accepting of their sexual identities and histories, which women had disclosed to them. In turn, women described their sexual identities as a conversation topic that was by no means "off limits": "they accept this as just part of who I am." Notably, both of these women mentioned that their parents had lesbian/gay friends, perhaps facilitating an easier acceptance of their coming out as bisexual, and a more comfortable stance regarding ongoing discussion of women's sexualities.

Postnatal Period (T2): Changes in Frequency and Nature of Discussions with Family

No changes. One year after becoming a parent, over half the women ($n = 12$) described no change in the nature or frequency of discussion with family about their sexual identity or history. Related to their perceptions perinatally, these "nonchangers" were from three of the four types described above: (a) five of the six women who described nondisclosure; (b) five of the eight women who described tolerance; and (c) the two women who described acceptance. Zoe, age 32, whose family did not know about her sexual history with women, stated, "I don't think it has any effect on me as a person . . . it's not something I discuss with my family."

Less likely to discuss because of change in sexual identity salience. Five women—four of the six women who described avoidance and one of the six women who described nondisclosure— shared that an increasing sense of distance from, and reduced salience of, their own same-sex sexual history had rendered the topic even less relevant and thus they were even less likely to discuss it with family than in the past. In this way, becoming a parent had stimulated shifts in their own identity (including the meaning and salience of their sexual identity), prompting an even lesser likelihood of discussing it with family. As Ellen explained: "It's part of my past . . . I'm probably less likely to bring it up in conversations." Ellen further reflected:

Before I became a mom I was always kind of like—I had partners both female and male. And now that I'm a mom I've kind of just stayed—I've stayed with the same person that I've had in my life. So—just being with that one central person—I think [I am more focused on] being a family and settling down.

Kay, age 30, who surmised that she was "even less likely" to discuss her sexuality with her parents at the current time, shared:

I think maybe the main thing that's changed is, I don't have a lot of time to really think about [my bisexuality]. It used to be something that . . . I would think about more because I had more time to think about a lot of different topics, or things about that lifestyle, but now most of what I think about is trying to fix the problems in my current relationship, or my child, or whatever the case may be at home.

Less likely to discuss because of concerns about judgment or threat to relationship. Five women —two of the six women who described avoidance, and three of the eight women who described tolerance—expressed increased concern about judgment and criticism in regard to their sexuality from family members. Becoming a parent had heightened their awareness of the potential for negative changes in their relationship with family, were they to (re)engage the topic of bisexuality with their families. In turn, they were less likely to discuss their sexual identity or history in an effort to avoid tension or judgment, and to preserve the current level of support they enjoyed in these relationships (Caughlin & Afifi, 2004). Indeed, four of these five women noted that they saw more of their families than they had prior to parenthood, and they therefore relied on them for practical and emotional forms of support. In some cases, women were specifically concerned about potentially activating their parents' perceptions of bisexuals as unstable and incapable of providing a stable home for children, leading to reluctance to (re)engage the topic of their sexual history or sexual identity with family. Roxanne, who was in an open relationship with her husband, and who

had previously voiced a strong commitment to openness about her sexual identity within her family, who were described as tolerant of her bisexuality, stated:

> I feel a little bit of concern about how there might be judgment about, "Well you can't do that, you've got a kid! It's fine to run around and be crazy when you're a kid yourself but now that you've got one you really have to settle down." I think that may be more my anxiety than reality. [*Interviewer: Is that related to being open about having an open relationship, or attraction to women, or both parts?*] I think both parts.

Maura, who had described her family as avoidant of her discussing her sexuality but who had offered increasing support in recent years (seemingly contingent on her male-partnered status), reiterated that her parents considered her bisexuality "a phase, and as far as they're concerned it is something I've grown out of," which is "rough . . . to know that my parents are so against the idea of [bisexuality or pansexuality]." Maura's relationship with her parents and siblings was "a lot better . . . over the last year they've come to visit a lot more often" and, in turn, she was "even less likely" to bring up her sexuality in conversation, having reached the "conclusion that my identity is on a need to know basis at this point. I may be bisexual or pansexual, but I do have a male partner and I've chosen that male partner for the rest of my life." For Maura, becoming a parent, while not changing her identity or attractions on a personal level, had led her feel that this aspect of her identity was less important to share or process with family.

Changes in Heteronormative Pressures by Family: First Comes Baby, Then Comes Marriage

One striking theme that emerged at T2 was the tendency for some women to describe their parents' increased pressures to marry their male partners. Specifically, upon becoming a parent, some women (*n* = 5)—three of whom described their families as tolerant, one of whom who described them as accepting, and one of whom described them as avoidant—indicated that their parents expected them to get married. Women's pregnancy and eventual transition to parenthood had seemed to activate or intensify their own parents' heteronormative ideologies (Jackson, 2006), and their desire to see their daughters' heterosexual, monogamous, married futures be fully realized—even among some of the most "supportive" families in the sample. This intensification of heteronormativity reveals the merging of gender, sexual, and family ideologies, whereby the proper "doing" of gender, sexuality, and family are inextricably linked (Oswald et al., 2005). Tammy shared that her parents "kept trying to tell us that we needed to get married and stuff." For Lexy, age 25, her parents preferred "a little bit more of a traditional situation."

And yet, in the case of two of these five women, the decision not to marry was framed as a politicized and conscious choice, reflecting a critical perspective of marriage in society. In this way, they demonstrated a continued commitment to challenging heteronormativity, even amidst their male-partnered and parenthood statuses and pressure from family. Jenny, 42, stated: "I remember my mom did say . . . 'Are you gonna marry him now?' And I said, 'Nope, still not gonna marry him!'"

DISCUSSION

This study extends scholarship about male-partnered bisexual women at a point in time when their current sexual identities and past sexual and romantic relationships are most likely to be rendered invisible by the constellation of heteronormative forces that are amplified by the transition to parenthood (Oswald et al., 2005). We found that women described a range of family responses to their sexual identity disclosure—amongst those whose families knew about their sexual identities. Indeed, some women had never disclosed their sexual identities to family, typically because they anticipated a negative response (Gramling et al., 2000). Thus, even when unspoken, it is clear that women's male-partnered status operated in powerful ways, reducing or even removing the possibility of disclosure. Among those who had disclosed, only two women described overt acceptance by family, whereby their identities were acknowledged, embraced, and openly discussed. In contrast, the majority of women described their families as uncomfortable with and avoidant of discussing women's sexual identities, or as merely tolerant but not encouraging of open communication about these identities; in turn, most women avoided the topic to maintain existing family

communication patterns. Thus, desire not to "rock the boat" and maintain family support, how-ever, conditional, was a key motivator for women to minimize or silence any discussion of their sexual identities (Caughlin & Afifi, 2004).

Women who did disclose their sexual identities in some measure—and, specifically, those who described either avoidance or tolerance of these identities—portrayed their family members as endorsing stereotypes about bisexuality, most notably that it is a transient, less valid, and less acceptable sexual identity (Lannutti, 2008; Scherrer et al., 2015). They described their family mem-bers as implicitly or explicitly upholding heteronormative ideals, including those of marriage, monosexuality, and monogamy (Jackson, 2006)—which in some cases seemed to intensify when women became parents. Consistent with Scherrer et al.'s (2015) argument that family members' "heteronormative expectations may be particularly resilient for bisexual people because family members may hold on to hope that their bisexual family member will eventually enter into a differ-ent-sex relationship" (p. 683), we found that most women said their parents were "relieved" that they had partnered, and were parenting, with men. Such sentiments communicated to women that, in their family's eyes, their current relational context was superior and preferable to other (e.g., female-female) types of relationships—thus indicating that women's prior or theoretical female partnerships were not or would not be as embraced.

From T1 to T2, more than half of the women described few changes in the frequency or nature of discussions about their sexual identity with family. Some, though, noted a decreased salience of their sexual identity as prompting an even lesser likelihood of discussing their sexual identity. Others described increased concerns about judgment or alienation from family, thereby facilitating a greater reluctance to raise the topic amongst family. These women are navigating the recent tran-sition to motherhood—and, in turn, the heteronormative and gendered expectations and require-ments that accompany this key life transition. Such expectations collectively regulate and enforce heterosexuality, and deter open disclosures of minority sexualities or relational configurations to family. Significantly, some women tended to show greater caution about discussing their sexual identity with family—perhaps in part because, as parents of infants, they were more dependent on family for practical and emotional support (Goldberg, 2012). To "do family" or to "do sexuality" too queerly is to expose oneself to risk (e.g., rejection, disapproval; Oswald et al., 2005). The risks of "doing family" and "doing sexuality" too queerly may be amplified for women who are male-partnered and parents—both of which are contexts that will decrease the likelihood that they are seen as anything but heterosexual, and thus requiring at least moderate effort on women's part to consistently challenge heteronormativity and ward off bisexual erasure (e.g., in the form of open-ness about one's same-sex attractions).

In deciding whether, and how, to disclose, male-partnered bisexual women contend with and navigate heteronormative pressures, the desire to avoid conflict, and the reality of their invisible sexual identity in a variety of ways. Whereas some submit to the pressures imposed by family dynamics, others find ways to resist and confront these influences in overt or subtle ways (e.g., explicitly citing one's sexuality to challenge sexual identity erasure; describing queer political acti-vism). Such behaviors, while not the norm, are powerful examples of women's potential to decon-struct the conflated elements of heterosexuality, gender normativity, and monogamy within family of origin relationships, and to create space for multiple forms of family.

Implications for Clinicians

The majority of women in this study experienced their families' support as conditional—that is, as riding on their willingness to silence their own sexual identities and histories. These women, as well as their families, are exposed to (and with the transition to parenthood, possibly more vul-nerable to) heteronormative ideals, which denigrate alternative sexualities and relational configu-rations and valorize heterosexual marriage—which is not necessarily the ideal or optimal arrangement for all people. Individual, couples, and family therapists should be aware of the potential for heteronormative discourse and values to creep into guidance surrounding partnering, family-building, and parenting. Therapists should educate themselves about not only sexual iden-tity diversity, but specifically the unique experiences of bisexual individuals partnered with differ-ent-gender partners, which are rarely discussed in research or clinical training (Hartwell, Serovich, Grafsky, & Kerr, 2012). Doing so will help therapists to guide and support women like some of

those in the current study, who are actively working to negotiate enactment of, and potential disclosures about, their sexual orientation and relational orientation (Brandon, 2011). By acknowledging and affirming women's sexual histories and orientations, therapists provide a potentially significant space for women to encounter validation of their authentic sexual identities.

It is important not to equate disclosure or discussion of sexual identity with optimal mental health or development (McGarrity & Huebner, 2014). Women in this study often vocalized very rational and realistic reasons for not disclosing or discussing their sexual identities or histories with family members. At the same time, as evidenced by some women's desire to be more out than they were, disclosure of one's sexual identity and history may be beneficial, as in cases where it enables individuals to integrate the multiple dimensions of their lives and enjoy reciprocal, unconditional support from family (McGarrity & Huebner, 2014). Clinicians should be mindful of the varied reasons for disclosure and nondisclosure, and to carefully consider how privacy is "managed" amidst very real concerns about support, relationship health, and stigma (Afifi & Guerrero, 2000).

Our work aligns with that of feminist scholars who have drawn attention to the powerful (and harmful) impact of hegemonic heteronormativity on women, particularly in regards to reproductive capacities (Jackson, 2006). Our participants were constrained in their decisions about disclosure in very real ways; namely, they were reliant upon family members (who were affected by heteronormative value systems) during their transition to parenthood—a period during which women are simultaneously valorized and unsupported by the state (i.e., through lack of sufficient maternity benefits). Structural intervention to address the interlocking forces of monosexism, heterosexism, and sexism in women's lives are ultimately what is required to address the issues raised by our participants.

Finally, efforts to train couple and family therapists to develop competence in LGB issues (McGeorge & Stone Carlson, 2011) should explicitly incorporate awareness that bisexual identities may be "hidden" (i.e., inferred, often incorrectly) by the gender of individuals' partners (Dyar et al., 2015). Likewise, clinicians should be aware that bisexual women and men in different-gender partnerships navigate complex considerations related to disclosure and communication of their sexual identity and history—in general and with family of origin specifically—considerations that may take on additional meaning during the transition to parenthood and beyond.

Future Research Directions

This study raises many important questions for scholars and marriage and family therapists interested in interrogating linkages among sexuality, gender, and family life. Future scholarship should aim to explore, in depth, what risks and "payoffs" male-partnered bisexual women perceive in relation to sexual identity disclosures to immediate and extended family members and friends. Also of interest is how sexual identity salience, and disclosure patterns, continue to shift across the life course (i.e., beyond the first postpartum year). Also, research on female-partnered bisexual men becoming parents, and men's experiences of disclosure in relation to family, could add important insights to the role of gender—and associated discourses surrounding masculinity and sexuality—in bisexual (in)visibility and sexuality-related communications with family. Likewise, female-partnered bisexual women may also subvert or avoid discussing their sexual identities with families—and their reasons for non-disclosure could provide important context for those observed in the current study. Future work should also explore the experiences of bisexual people of color, who may face additional considerations and pressures in relation to disclosure to family at the intersections of race, sexual identity, and familial status.

Limitations and Conclusions

There several limitations of this study. First, the interviews did not specifically probe for reactions of different family members (e.g., mothers versus fathers). In turn, women tended to talk about their "parents"—and sometimes their mothers—but less often their fathers. Thus, our data do not provide nuanced insights into the gendered nature of women's communications regarding sexual identity and history with their parents. Second, it was not all women's first transition to parenthood; one-third of them had already had at least one child, which may help to explain why many women reported few changes across the transition with respect to sexual identity-related

discussions with family. Finally, this study was limited to exploring experiences with family; women's disclosure patterns in relation to friends and male partners are also worthy of attention.

The current study builds on the limited research on bisexual individuals' disclosure practices in relation to family (Lannutti, 2008; Scherrer et al., 2015) but goes beyond it to explore these practices in the context of navigating the transition to parenthood—a time of potential intensification of heteronormativity. Our findings reveal a diverse range of perspectives among bisexual women partnered with men, thus rendering visible the experiences of an often invisible group—in research, clinical settings, and society at large. Understanding the familial context of male-partnered bisexual women's disclosure practices (i.e., the fact that family members believe they have already achieved heteronormative privilege, so their identities are no longer relevant) helps to shed light on the importance to women of being able to integrate past sexual history with current sexual identity even as they pursue what family and society may consider "normative".

A central focus of this study is the notion that relationships with men, and parenthood, create contexts within which bisexual women question the relevance of needing to disclose bisexuality. The underlying heteronormative assumption in families is that different-sex marriage and parenthood are synonymous with heterosexuality. When nonheterosexually identified people become parents, there is an opportunity to be open about one's disjuncture from living congruently with the heteronormative imperative. Yet parenthood also provides salient reasons for not disclosing, because when one claims a non-heteronormative identity, one may be challenged about the "relevance" of this identity (and disclosures about it)—to their own lives, and to those of their children and male partner. Because of the societal insistence on conforming to heteronormativity, bisexual women balance their own sense of authenticity with the cultural mandate to conform to heteronormative ideals—conformity that is sometimes "policed" by family members.

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