Psychology Research, May 2017, Vol. 7, No. 5, 274-286 doi:10.17265/2159-5542/2017.05.003



Minority Stress in the Face of Changes in LGB Rights in Croatia

Margareta Jelić, Petra Kožljan University of Zagreb, Zagreb, Croatia

In 2013 in Croatia a referendum took place regarding the issue of the Constitutional definition of marriage as a union between a man and a woman. However, less than a year later the Croatian Parliament passed Life Partnership Act making same-sex couples equal in all rights to married couples, except for adoption. In this study we wanted to explore reactions of LGB individuals to the referendum and immediately after the Life Partnership Act was adopted. Aim of this study was to test the minority stress model in the changing context of Croatian society regarding the rights of LGB individuals. We wanted to explore cognitive, emotional and behavioural reactions of LGB persons following the referendum (that banned gay marriages) as well as the possible changes in their attitudes after the Life Partnership Act (that makes same-sex couples equal to married couples in everything except adoption) was adopted. Therefore, we conducted a qualitative study, specifically interviews with eleven LGB individuals (homosexual and bisexual, activist and non-activists) in two time points: immediately after the Referendum and following the Life Partnership Act. We analysed the results in terms of Meyer's minority stress model. Taken in general, our findings confirm the minority stress model and highlight social context as an important determinant of minority stress for LGB individuals. The current state of the LGB rights is viewed as inadequate, but positive changes are expected in the future. The results also confirm the protective role of social support, both individual and collective, for LGBT individual when faced with minority stress. However, in some cases the LGB community fails to fulfil the expectations of its members which can turn it into a source of stress instead of support.

Keywords: LGB, Croatian constitutional referendum, life partnership act, minority

Introduction

The rights of sexual minorities in Croatia have expanded in recent years; however, it was a winding road for LGBT rights in Croatia to occupy the 12th place in a group of 49 observed European countries in 2014. Only a year before a national referendum was held to change the Croatian Constitution so that marriage could be defined only as a union between a man and a woman and it received support. However, the government continued to work on expansion of rights for same-sex couples through a new law (announced in 2012) and less than a year after the referendum, the Croatian Parliament passed the Life Partnership Act to make same-sex couples equal to married couples in all rights, except for adoption. In this study we wanted to explore reactions of LGB individuals in Croatia immediately after the Life Partnership Act had been adopted and after the first gay couple was able to register their life partnership in Croatia. In this qualitative study we shall focus on their reactions to the changes in that one year, as well as attitudes regarding LGB rights and their future in Croatia.

Margareta Jelić, Ph.D., Assistant Professor, University of Zagreb. Petra Kožljan, M.A., University of Zagreb.

In 2013 in Croatia a referendum (initiated by the citizens' initiative *In the Name of the Family*) took place regarding the issue of the Constitutional definition of marriage as a union between a man and a woman (Š. V., & T. K, 2013). The fact that the referendum was held resulted in strong and diverging public reactions. While the LGBT community protested and emphasized that such a referendum directly threatened the rights of LGBT minority, making them second-class citizens by denying them the right to marriage, the supporters of the referendum insisted on claims that the referendum was non-discriminatory and that they only wanted to protect the family. Soon another initiative was formed under the name *Citizens Vote Against* and a highly polarised debate took place in Croatian society with many public figures (politicians, actors, media representatives) taking a stand, and leaving no one indifferent.

Although the turnout was relatively weak (about 40%), the results of the referendum showed that 65.87% voted for such a definition of marriage to be part of the Croatian Constitution. The results yielded many reactions in the local, but also international media, mostly emphasizing the role of the Catholic Church in organizing the referendum and interpreting the results as an indicator of strong conservatism and rightist views in Croatia.

However, immediately after the referendum, a new initiative started to legalize homosexual partnerships through a new legal act. Seven months after the referendum the Croatian Parliament adopted the Life Partnership Act to legalize homosexual partnerships and give them equal rights to married couples in everything except for full adoption. Nevertheless, the Act includes an institution similar to step-child adoption called partner-guardianship. Despite the opposition of the *In the Name of the Family* initiative and their supporters who announced repeal of the Act, in September 2014, the first homosexual partnership in Croatia was registered. In the following six months (by February 2015) about 40 homosexual partnerships were registered.

All these changes that took place in just one year (from the initiative to hold the referendum to the adoption of the LPA) potentially present major stressors for LGB individuals from several perspectives. Firstly, they were brought in the centre of public attention with everyone giving an opinion on whether or not they should be allowed to have certain rights. Additionally, their feeling of being accepted in and by the society might have changed due to the abovementioned events that took place. Furthermore, the fact that many people voted against their having the right to marry might have an impact on LGB individuals' perception of injustice and discrimination against them, as well as on their feelings of safety. On the other hand, the fact that many heterosexual people supported their cause might have led to feelings of being supported, accepted and equal to the majority group. In the same vein, the legalization of homosexual partnerships might have led to strengthening of the LGB community and victorious feeling, but at the same time it might have led to attenuation of LGB activism because the major goal was accomplished.

The minority stress model (Meyer, 2003) proposes that LGB individuals possess poorer mental health when compared to heterosexuals and that the main cause of such discrepancy lies in higher levels of stress experienced by sexual minorities. The model emphasizes interactions among several factors: the individual's minority status, the strength of identification with the minority group, available social support and coping mechanisms, general stress and stress caused by an individual's awareness of societal level incidents of prejudice, discrimination or violence due to one's minority status. In other words, a stressor induced by a hostile and homophobic culture can result in significant stress which affects physical and mental health outcomes (Dohrenwend et al., 1992; Marshall et al., 2008). According to Meyer (2003), minority stressors are

unique (not experienced by non-stigmatised populations), chronic (related to social structures that are almost unchangeable) and socially based (social processes, institutions, structures). Thus, although stress is not unique to LGB individuals, minority stress comes from disadvantages, the social stigma and prejudices that LGB people encounter and it requires special adaptive responses.

Indeed, the findings from several studies confirmed that minority sexual orientation is a risk indicator for psychiatric morbidity. However, levels of an increased risk vary within this subpopulation by both gender and patterns of sexual orientation expression (Cochran & Mays, 2000). Specifically, the results indicated higher prevalence of depression, panic attacks, and psychological distress among gay and bisexual men than among heterosexual men. In the same vein, lesbian and bisexual women showed greater prevalence of generalized anxiety disorder than heterosexual women (Cochran, Mays, & Sullivan, 2003). Furthermore, gay, lesbian, bisexual, and self-conscious students consistently reported higher levels of mental health issues and a more frequent impact on academics because of these issues than heterosexual students. Additionally, bisexuals frequently reported higher levels than students identifying themselves as gay, lesbian and self-conscious (Oswald & Wyatt, 2011). Shilo and Savaya (2011) emphasized a particular vulnerability of bisexuals who showed lower level of well-being than gays and lesbians, as well as higher levels of mental distress. The latter relationship was fully mediated by family support and acceptance, internalised homophobia and the LGB social contact. Finally, many studies demonstrated the relationships between poor mental health outcomes and perceived and experienced discrimination (Nemoto, Operario, Keatley, Han, & Soma, 2004; Diaz, Ayala, Bein, Jenne, & Marin, 2001; Mays & Cochran, 2001).

The minority stress model seems to represent an adequate theoretical frame to investigate the impact of such dramatic events and changes regarding sexual minorities' rights in Croatia. Especially relevant for our study is the notion that distal (societal level) stressors can cause stress simply by being aware of their existence or possibility. The experience of prejudice, discrimination and violence related to the minority status contains a symbolic message that one is devalued or rejected by a larger social group. The confirmation for this comes from an American study that compared LGB respondents living in the States which passed antigay marriage amendments in 2006 to those living in the States without such amendments and showed that the former had higher psychological distress than the latter (Rostosky, Riggle, Horne, & Miller, 2009). Thus, Link and Phelan (2001) argue that bans on gay marriage, together with the social environments that give rise to them, are examples of institutional discrimination. Although most research has examined associations between individual discrimination experiences and health outcomes (Krieger, 2003; Williams, Neighbors, & Jackson, 2003), the interest in the impact of institutional discrimination experiences on health outcomes has increased lately (Gee, 2002; Peterson & Krivo, 1999; Collins & Williams, 1999; O'Campo, Gielen, Fade, Xue, Kass, & Wang, 1995). It becomes more and more recognised that multiple forms of institutional discrimination exist, such as deprivation of rights for the LGB minority or heated public discourse that causes them stress, but only a few studies examined the consequences of institutional discrimination for the mental health of LGB individuals. One such study looked into psychiatric disorders among LGB individuals living in the States that banned gay marriage (Hatzenbuehler, McLaughlin, Keyes, & Hasin, 2010). Their findings suggested a significant increase of several psychiatric disorders (mood disorder, generalized anxiety disorder, any alcohol use disorder and psychiatric comorbidity) after the bans on marriage rights for same-sex couples. Interestingly, such increase of psychiatric disorders was found neither among LGB respondents living in the states without such constitutional amendments nor among heterosexuals living in the states with constitutional amendments.

The minority stress model also describes stress that accrues through expectations of rejection, hiding, concealing the minority identity, internalized homophobia (i.e. LGB person's acquisition of social stigma) and ameliorative coping processes. On the one hand, an LGB person who comes out and is highly identified with the LGB community can therefore be exposed to higher stress due to rejection or discrimination by others or by the society. On the other hand, involvement in the LGB community offers an increasing social support, which may help them cope with stress. For example, Jones and colleagues (1984) argue that involvement in the LGB community offers two coping mechanisms for LGB individuals. Firstly, it offers LGB individuals social environments in which they are not stigmatised by others. Secondly, it provides support for negative evaluation of the stigmatised minority group. Finally, according to the social evaluation theory (Pettigrew, 1967) the sense of community cohesiveness offers LGB individuals the possibility to evaluate themselves in comparison with other in-group members (i.e. other members of the LGB community who are like them) rather than with members of the majority group (i.e. heterosexuals), which makes the result of such comparisons less stressful and injurious to the psychological well-being.

The aim of this study was to test the minority stress model in the changing context of Croatian society regarding the rights of LGB individuals. We wanted to explore cognitive, emotional and behavioural reactions of LGB persons following the referendum (that banned gay marriages) and after the adoption of the Life Partnership Act. Therefore, we conducted interviews with ten LGB persons immediately following the Life Partnership Act. We analysed the results in terms of Meyer's minority stress model.

Specifically, we focused on the following goals: firstly, we wanted to investigate the perception of changes in Croatian society regarding the LGB minority in the year after the referendum. We expected the subjects to perceive positive changes in a sense of greater visibility and more civil rights for LGB individuals, but also that the prevailing attitude of the heterosexual majority toward the LGB minority hasn't changed. Secondly, we aimed to investigate reactions to the Life Partnership Act and its content. We expected the participants to express positive reactions to the Life Partnership Act, but also to emphasize that equal rights with heterosexual majority have not been accomplished yet. Third, we wanted to determine whether in the last year the subjects were exposed either to distal stressors and experiences or certain proximal stressors (according to Meyer's model). We expected that at least some participants experienced discrimination, prejudice or even violence due to their sexual orientation in the last year. Additionally, we expected that concealment of their sexual orientation might be the most prominent proximal stressor. Fourth, our goal was to determine which coping mechanisms and sources of support the subjects use as a buffer from the effects of the minority stress. We expected all the participants to report on social support of their close others, as well as the role of the LGB community in coping with the minority stress. Fifth, we wanted to explore potential changes in experience, perception and behaviour of the subjects in the last year and determine if these changes indicate impaired mental health. We expected the feelings of insecurity (not being safe) and the heightened levels of stress would be at the same level as at the first time point, but that life satisfaction might remain intact and relatively high. Compared with the time after the referendum, we expected the participants after the Life Partnership Act to be less proactive and that they would consider leaving Croatia to a lesser extent.

Method

The participants were approached using the snow-ball method and chosen according to several criteria—age, sexual orientation and their involvement (active or passive) in the LGBT community. The

targeted age group was young adults because such a group was most affected by the issue of gay marriage. Considering sexual orientation, the chosen participants were lesbian, gay, or bisexual. Finally, four respondents were LGBT activists and other six were non-activists. We considered this kind of division relevant because activists were more directly involved in the events and they were more dedicated to fight for LGBT rights than non-activists, therefore we expected somewhat different reactions. The socio-demographic structure of our sample is presented in Table 1.

The data were gathered in December 2013 (first wave) and during October and November 2014 (second wave) using semi-structured interviews that were audio recorded with the permission of the participant, and all of them signed a written consent before the beginning. All of the interviews took place in the interviewer's home which assured the same conditions and privacy for the participants. The average duration of the interviews was approximately 50 minutes. When the interviews were conducted, transcripts of audio records were made. In this paper we focused mainly on the results from the second wave (as participants were asked about changes that took place in the previous year and probed for explanations when their answers differed from the ones they gave in the first wave of the study). Data was coded based on concepts of the Meyer's model.

Table 1

Demographic Structure of the Subjects in This Study

Sex	Male	Female
Number	5	5
Age		
20-25	3	1
26-31	1	
32-37	1	4
The size of the place in which the participant spent most of his life		
Village	0	2
Town	3	2
City	2	1
Sexual orientation		
Homosexual	3	4
Bisexual	2	1
Activist		
Yes	2	2
No	3	3
Education level		
Secondary school	2	1
Bachelor degree	2	0
Master degree	1	4
Financial status		
Average	4	3
Below average	1	2
Relationship status		
In a relationship	4	3
Single	1	2
The person is "out"		
Yes	5	5
No	0	0

Results

We shall analyse and present the results in terms of Meyer's minority stress model.

Contextual Factors—Circumstances in the Environment

Firstly, we focused on the changes of the circumstances in Croatian society regarding the LGB minority in the year after the referendum and on the perception of the typical attitude of the heterosexual majority. Most of the participants noticed some changes in Croatian society that go parallel in two opposite directions—strengthening of both the conservative and the liberal current in Croatia.

After the referendum a positive change happened because the LGBT community got stronger and more ready to react. But the conservative current also doesn't rest—you can see this in their new initiative on forbidding abortion. (a female, lesbian, 25)

Even though the participants recognize that the LGBT community experienced a great step forward with the Life Partnership Act, they perceive their social status as more or less unchanged in Croatia. In other words, regardless of the changes in the legal system, the attitude of the heterosexual majority toward the LGBT minority has remained the same.

I don't have an impression that the majority opinion has changed. (a male, gay, 23)

I don't think that enough time has passed for some drastic changes in attitudes of the majority. (a female, bisexual, 36)

Regarding the content of the Life Partnership Act all the participants express positive reactions to the Life Partnership Act and hope that it might eventually lead to better social status of the LGBT people in Croatia. They see it as a great new opportunity, as a way of taking the LGBT people away from society margins, and as a step forward towards human rights and equality in Croatia.

It is a way of taking community that has been on the edge of the society towards the centre of it. (a female, lesbian, 36)

I think that the law is one step forward to change rights in Croatia. (a male, bisexual, 32)

However, for most of them it is disappointing that the rights are not equal to those of married heterosexual couples and that inequalities still exist. Some of them even see the LPA in a negative light—as hypocrisy, as a way of pretending that the rights of LGB couples are equal to those of married heterosexual couples, when in fact important differences still exist.

For me this is another prejudice because this is not marriage, we cannot call it marriage, we cannot adopt a child, and straight couples cannot get into life partnership. Considering all of that, we are still not equal. (a male, gay, 23)

Only three participants (all women) find this law personally relevant for different reasons—because it gives them a choice in life, it makes their life easier regarding administration, and for one of them it is emotionally relevant as that person regards it as a revenge (to the opposing heterosexual community) for the referendum. Contrary to expectations, most participants do not find this law personally relevant, at least not at the moment. They explain this by the fact that they don't plan to get married so the possibility of life partnership does not change anything in their life. However, each of them emphasized that they are happy because of their friends and other people that already have, or do want to get into life partnership and for whom this Act has made their greatest wish possible.

No. It isn't important to me personally. I'm generally not interested in marriage, I don't consider it important. But, it's positive and good that it exists because there are people for whom it is important, I am not the only one in this society. (a female, bisexual, 36)

For me it is personally relevant. Now I have a possibility to deal with many complicated legal things in one simple step. It makes my life simpler. (a female, lesbian, 36)

Regarding the content of the new law, all the participants are generally very satisfied with the law and its content, but they all also express great dissatisfaction with the fact that adoption is excluded from their rights when compared to the rights of married couples. They insist on a legal possibility of adoption for the same-sex couples in order to regard the LGBT rights in Croatia as equal to the human rights of heterosexuals. Without it, they feel that the law is sending a wrong message that LGBT people are not in fact equally worthy to be parents as heterosexual people.

I think that everything regarding relationships between partners and their social rights such as some financial or retirement rights is ok and it is the same as for married couples. But the whole adoption thing is something which hasn't been done at all and I think that should be done. (a male, bisexual, 26)

Another issue is a fear that the new law might not be implemented in practice. In other words, regardless of what the law says, equality will not be accomplished until the society implements that law or until the LGBT population has the same social status in Croatian society as the heterosexual majority.

This law ensures you legally, but it doesn't ensure integration into society, implementation of the law. It is like some other laws, for example, the antidiscrimination law; they exist but aren't put into effect in the real life. (a female, lesbian, 36)

When asked to compare the rights of the LGBT minority to the rights of other minorities in Croatia, most of the participants start by stating that the LGBT minority is in the worst position because other minorities have legally the same rights as the majority. However, looking at the minority status in the society more deeply, they recognize that the status of the sexual minorities has increased and that there are some other minorities, like the Roma populations or asylees, who have worse social status than the LGBT minority.

If we compare ourselves with the majority, we are still in an unfavourable position considering that we don't have all rights like the majority. Therefore, a person that is a member of some other minority like national or religious can still adopt a child. (a male, bisexual, 26)

Our rights are not perfect but it is better now. Asylees are now starting to be a "popular" minority because they have almost no rights. The Roma people also don't have a good social status. It wouldn't be fair to say that the LGBT community is in the worst position. (a male, gay, 23)

When a larger context is considered, all the participants agree that generally LGBT rights in Croatia are not bad at this moment. In comparison to other European countries, the LGBT minority in Croatia seems to be in a better position than in the eastern countries, but in a worse position than in some western countries. In sum, circumstances in Croatia after the referendum and the Life Partnership Act are not all favourable but are moving in a good direction.

I don't know much about it, but I know that we are better than in the east, and worse than in the west. This is something I know in general. (a female, bisexual, 36)

I think that LGBT rights are better here than in Serbia or some other eastern countries, but worse than in the USA or France. (a male, gay, 23)

Exposure to Distal and Proximal Stressors in the Last Year

Following Meyer's minority stress model, we asked the participants whether they had been exposed to prejudice events (such as discrimination or violence) due to their sexual orientation in the previous year.

Additionally, we also asked them about proximal minority stress processes such as concealment of their sexual identity and/or coming out, as well as reactions of their environment and possible rejections.

None of the participants have experienced any kind of violence in the last year. They attribute it to the characteristics of the people that surround them daily (their open-minded and tolerant friends, family and work colleagues) and to the places that they go to (e.g. gay clubs). In other words, they actually do expect violence and actively avoid places and people that could lead to it.

I minimize situations in which these things could happen. I don't go to homophobic places or talk to that kind of people. (a male, gay, 23)

I live in a bubble. People that surround me are all open-minded. I only read about that terrible stuff in newspapers or I see it on TV. (a female, lesbian, 36)

However, it seems that they only considered physical violence. Although eight out of ten participants said that they had not been victims of either discrimination or prejudice in the previous year, half of them later in the interview mentioned situations when they were discriminated. However, for some situations they cannot be sure whether discrimination happened due to their sexual orientation, but they still felt hurt.

I have it in my family. My parents know about me, but we never mention it and I know that if I ever have a partner I couldn't bring her to my home. That's why I'm not in the same position as my sisters. Except that, at work I can feel this silent disapproval. (a female, lesbian, 25)

I was in a lot of situations in which I felt discriminated and I had to argue my attitude towards some LGBT questions and there were a lot of situations where people would say some bad things about sexual minorities and I would feel awful. (a female, lesbian, 36)

My boyfriend and I kissed in a taxi and the taxi driver told us to stop. Maybe he would have done the same if I was with a girl, but I think that he probably wouldn't. (a male, gay, 23)

When it comes to proximal stressors, almost all of the participants "came out" to new people in the last year. Expectedly, it is much easier to self-disclose to another member of the LGBT community or to a tolerant and open-minded friend and reactions are mostly positive and accepting. The people they opened up to were accepting, some had questions but they weren't depreciatory. On the other hand, experiences of self-disclosing to a family member or at work seem to be more stressful.

When I indirectly 'came out' at work, I experienced some negative reactions only through some of my comments and actions. I mean, no one said anything rude or impolite to me directly, everyone was just silent. I think it is some kind of "new conservatism" where people are polite and won't say anything directly to you, because they know that it is not ok to insult someone, but they will talk about it in that manner when they are out for a drink. When they see me, they will only be silent or be scornful. (a female, lesbian, 25)

I came out to my dad. That didn't go well. I was disappointed. It was hard to listen to his comments. (a male, bisexual, 26)

Therefore it is not surprising that some people conceal their sexual identity in formal situations. When asked about it directly, our participants were unison about never lying about or concealing their sexual identity. It is possible that sexual identity is central and very important to all the participants in this study and they might consider hiding it wrong and cowardly or as a sign of internalized homophobia (as suggested by Meyer). During the interview, however, some situations emerged in which they did conceal their identity in order to avoid conflict. Most of the participants would hide their sexual identity if there was a threat to their life or financial stability, in any situation in which their existence would be jeopardized. Also, some of them wouldn't

reveal their sexual identity at work because they find it unnecessary to reveal private information.

Maybe when I started to work at this place... I didn't hide it, but I just didn't talk about it. If someone asked me, I would answer. (a male, gay, 23)

I have two friends that I love a lot and their families are extremely conservative. And if I am with them I pretend that I am straight. And if they asked me if I'm gay I wouldn't admit it. (a female, lesbian, 33)

I don't talk about that kind of stuff when I get a negative vibe from people, and when I suppose that it could be an awkward situation. (a male, gay, 23)

If I were in a situation in which my physical integrity would be at risk, I would hide it. (a male, bisexual, 26)

Only two of the participants couldn't think of any situation in which they would conceal their identity.

No, I never hide it. If someone has a problem with it, I don't care, they can go away. (a female, lesbian, 36)

Coping and Social Support (Community and Individual)

We explored in what ways, if any, is minority stress (stress due to their sexual orientation) different from everyday stress they experience. All the participants consider the former more personal, more stressful and continuous for them all. Some of them also notice that the kind of stress they experience because of their sexual identity is more intense and makes them feel depressed, helpless, attacked and less worthy as a human being.

It hits you in a different way, it makes you feel less worthy. It is not fair. It is like some kind of depression. (a male, gay, 23)

It is a different kind of stress because it is personal. It considers my being, it is continuous and it is always with me, no matter what happens in other aspects of my life. (a female, lesbian, 36)

In line with the theoretical assumption of Meyer's model, we turned our focus to coping mechanisms that might serve as a buffer for mental health outcomes.

Social support seems to play a crucial role in coping with minority stress. All the interviewees emphasized the importance of social support during and after the referendum. Their most important sources of social support were close friends, romantic partners, and family members. They all agree that it would be harder for them to cope with all the changes in the last year in Croatia without the support they had.

It was important to me. It wouldn't have been good if it hadn't been for the support, it would have been three times harder for me. (a female, bisexual, 36)

Support is important, it is important for me that it exists and that I know that I can talk to someone. If I didn't get it I would be very disappointed. (a male, bisexual, 32)

Although not all the participants are LGBT activists, they all feel included in the LGBT community. Therefore, they all receive both individual social supports from people close to them, but also from the fact that they are part of a larger community who stand behind them. Interestingly, the role of the LGBT community as a source of support remains unclear for two reasons. Firstly, it seems to be difficult to separate individual support from LGBT friends from the support from the LGBT community as a whole. Secondly, it depends on expectations of each individual, as well as on how much they feel they have invested in it. For majority of the interviewees the LGBT community is an important source of social support when dealing with minority stress. However, for some the LGBT community was a source of frustration because they were disappointed with the work of LGBT activists.

Communication with LGBT friends helped me the most. I think that there were some things that only LGBT persons could completely understand. (a female, lesbian, 25)

I didn't get any particular support from it. Some LGBT organizations asked me to do them favours, so I gave something to them, and got nothing in return. I was very disappointed with their activities, so they were only a source of frustration to me. (a male, bisexual, 26)

We were also interested in potential changes in the perceived level of inclusion in the community among our participants, as well as their proactivity. Four of them estimate that their inclusion level in the LGBT community nowadays is the same as it was during the referendum; four of them consider it lower now than at the time of the referendum because there is no need for that level of activity any more, and two consider it higher at this point because they have remained active and interested in further perusing equal rights for sexual minorities.

It is the same. Activities change, but it is at the same level. (a male, bisexual, 32)

Then it was much more prevalent and everyone was talking about gays and lesbians. Now it is not like that anymore so I don't have that need for intervention. (a male, gay, 23)

I did activate more. Now I more often go to some protests and community activities, I now talk in situations in which before I wouldn't dare. (a female, lesbian, 36)

Mental Health Outcomes

Finally, we explored potential changes in the participants' experience, perception and behaviour in the last year in order to determine if these changes indicate impaired (or improved) mental health. Comparing their level of stress and life satisfaction now to that from a year ago (at the time of the referendum), the participants gave diverse answers. The only thing they agreed upon is that their level of life satisfaction was mostly influenced by specific events in their lives and not by their sexual orientation per se. At the moment, the participants are relatively satisfied with their lives. On a scale from one to ten, their estimations varied from 6 to 9.7, indicating fairly high satisfaction with life.

For me satisfaction fluctuated during the past year but because of the reasons that don't have anything to do with my sexual orientation. (a female, lesbian, 36)

On the other hand, when asked about their feeling of safety, six out of ten participants still have pronounced feelings of insecurity due to their sexual orientation. Unlike them, others perceive safety in Croatia nowadays to be at least on the same level as before the referendum or perhaps even higher. They attribute heightened feelings of safety to the new law, and to the fact that Croatian public is not so interested in LGBT issues anymore.

No, for me it is the same. I think that this law hasn't changed anything in their heads. There will always be fools. I don't feel safe. (a male, gay, 23)

I feel safer now. I saw that there are a lot of people that support us. I feel that I'm now more courageous. Now even the law is here so it gives me some feeling of security. (a female, lesbian, 33)

The majority of the participants in this study find the idea of emigration appealing. One participant decided to leave Croatia after the referendum and doesn't want to come back, not even on holiday. Others are thinking about it, but don't have any concrete plans yet. It is noteworthy that they do not want to leave Croatia because of LGBT rights or status, but mostly because of financial insecurity and general economic situation in Croatia.

I think it is a right decision. I am not coming back. Not even on holiday. (a male, bisexual, 26)

I am thinking about it, but not because of the referendum, but because of existential reasons. If I don't find a job soon, I won't have any other choice but leave. (a female, lesbian, 25)

Discussion and Conclusion

Two recent events regarding LGBT rights in Croatia—the referendum limiting the definition of marriage to a union between a man and a woman and the Life Partnership Act that made same-sex couples almost equal in all rights to married couples—resulted in strong and diverging public debates. Many accusations of discrimination could be heard from both sides, and many people felt the urge to take sides. In this study we were interested in effects these two events had on LGBT individuals, whose rights were in question. We explored reactions of ten LGB individuals in Croatia immediately after the Life Partnership Act had been adopted. In this study we focused on potential changes in their experiences and reactions in the year after the referendum, as well as attitudes regarding LGB rights and their future in Croatia.

Results of this qualitative study confirm assumptions based on Meyer's minority stress model. The participants in this study have not been victims of physical violence due to their sexual orientation in the last year. However, this finding should be taken cautiously as all participants in this study actively avoid homophobic places and people. Additionally, it seems that other forms of violence and discrimination against sexual minorities (insults, vilifications etc.) regularly take place in Croatian society. The fact that even LGBT individuals, some of who are activists, tend to neglect personal experiences of being discriminated against unless being directly asked about them, suggests that "softer" forms of discrimination might represent usual behaviour, maybe even a social norm. Thus, future studies of this topic should pose very precise questions to determine the proportion of discrimination and homophobic violence in Croatia.

When it comes to proximal stressors, all the participants regularly come out to new people and the process of coming out remains a source of stress for LGBT individuals throughout their lives. Expectedly, it is much easier to self-disclose to another member of the LGBT community or to a tolerant and open-minded friend as reactions are mostly positive and accepting. On the other hand, experiences with self-disclosing to a family member or at work seem to be more stressful. Therefore, it is not surprising that some people conceal their sexual identity in formal situations. When asked about it directly, our participants were unison about never concealing their sexual identity. During the interview, however, some situations emerged in which they did conceal their identity in order to avoid conflict. It is possible that sexual identity is central and very important to all the participants in this study and they might consider hiding it to be wrong and cowardly or as a sign of internalized homophobia (as suggested by Meyer). Therefore, they are reluctant to consider such behaviour as typical of them, regard it as treason, or have rationalizations about why they sometimes do that. But when faced with a fear for their existence (their job or even their life) they would conceal it, and some of them think it is wise to conceal it at work since it is a private matter, it does not concern work colleagues and it can only cause problems. Taking into account that the participants in this study are all out and part of the LGBT community, they already minimize the possibility of negative reactions to their sexual orientation by carefully choosing their friends and places they go to. This leads to the conclusion that those who are not "out" yet and who do not have strong social support network might be much more prone to concealing their sexual identity. Feeling of safety and acceptance is still an important issue for LGBT individuals in Croatia.

An important part of Meyer's model is the coping mechanism that mediates the effects of distal and proximal stressors to mental health outcomes. All the participants differentiate minority stress from regular everyday stress. Minority stress seems to be more personal, more stressful, and also more continuous. Unlike everyday stress, minority stress can make them feel depressed, helpless, attacked and less worthy as a human being.

The perception of the LGBT community directly influences the participants' motivation to take active part in it. Thus some of them feel just as included in the community now as they were during the referendum. Others indicate that their inclusion level is lower now than at the time of the referendum as some important goals are already accomplished or because they got disappointed. Others still consider their inclusion level in the community higher now than before as they have become more and more active and interested in further pursuing equal rights for sexual minorities. It seems from these findings that the LGBT community presents a strong potential asset for their members but it is not always successful in fulfilling expectations of their members. It might be wise for local LGBT associations to communicate their goals more transparently, as well as to explore regularly goals and expectations of their members in order to avoid disappointment and dissatisfaction.

Mental health outcomes were explored via life satisfaction, feelings of safety, perceived levels of stress and plans for future. From our findings, it seems that the recent events regarding the rights of the LGBT minority in Croatia have not left long-term consequences on their life satisfaction. The participants in this study are relatively satisfied but emphasize that their satisfaction does not stem from the recent changes in their legal rights. On the other hand, feelings of insecurity due to their sexual identity remain strong. In line with our expectations, the most interviewees do not feel safe. Some do, however, perceive safety of LGBT people in Croatia nowadays to be at least on the same level as before the referendum or perhaps even higher. Even though this sounds optimistic, they also indicate that the main reason for such optimism is the fact that LGBT individuals are not in focus anymore (as they were in time of the referendum). Contrary to our expectations, all the participants in this study find the idea of emigration appealing, and one has even left Croatia. It seems however, that the main reason for leaving the country is neither the referendum nor the Life Partnership Act, but financial insecurity and a general economic situation in Croatia.

The main limitation of the present study is the small number of participants that does not allow any generalization. Another limitation arises from the method used to collect data. We used face-to-face interviews, a method that enabled us to explore reactions to recent relevant events in Croatia to more depth, and to ask for additional explanations. However, this method does not allow anonymity and can lead to social desirability and includes only those LGBT individuals who are already "out".

In general, our findings confirm Meyer's minority stress model and highlight a social context as an important determinant of minority stress for LGB individuals. Our results emphasize the protective role of social support, both individual and collective, for an LGBT individual when faced with minority stress. Thus despite the relatively low social status of LGB's in Croatian society, the participants demonstrated good mental health, as well as relative resilience to minority stress. This is partly due to the fact that they perceive positive changes in their circumstances and partly to the strong social support from people close to them, but also from the LGB community. However, in some cases the community fails to fulfil the expectations of its members, which can turn it into a source of stress instead of support. Future research should look into the role of the LGB community more closely and explore potential differences in expectations of activists in comparison to non-activists.

References

Cochran, S. D., & Mays, V. M. (2000). Relation between psychiatric syndromes and behaviorally defined sexual orientation in a sample of the US population. *American Journal of Epidemiology*, 151(5), 516-523.

- Cochran, S. D., Mays, V. M., & Sullivan, J. G. (2003). Prevalence of mental disorders, psychological distress, and mental health services use among lesbian, gay, and bisexual adults in the United States. *Journal of Consulting and Clinical Psychology*, 71(1), 53-61.
- Collins, C. A., & Williams, D. R. (1999). Segregation and mortality: The deadly effects of racism? Social Forum, 14(3), 495-523.
- Diaz, R. M., Ayala, G., Bein, E., Jenne, J., & Marin, B. V. (2001). The impact of homophobia, poverty, and racism on the mental health of Latino gay men. *American Journal of Public Health*, *91*, 927-932.
- Dohrenwend, B. P., Levav, I., Shrout, P. E., Schwartz, S., Naveh, G., Link, B. G., ... Stueve, A. (1992). Socioeconomic status and psychiatric disorders: The causation-selection issue. *Science*, 255(5047), 946-952.
- Gee, G. C. (2002). A multi-level analysis of the relationship between institutional and individual racial discrimination and health status. *American Journal of Public Health*, 92(4), 615-623.
- Hatzenbuehler, M. L., McLaughlin, K. A., Keyes, K. M., & Hasin, D. S. (2010). The impact of institutional discrimination on psychiatric disorders in lesbian, gay, and bisexual populations: A prospective study. *American Journal of Public Health*, 100(3), 452-459.
- ILGA's Rainbow Map Shows the State of Human Rights for LGBT people across Europe. 2013. Retrieved from http://www.ilga-europe.org/home/publications/reports_and_other_materials/rainbow_europe
- Jones, E., Farina, A., Hastorf, A., Markus, H., Miller, D. T., & Scott, R. (1984). *Social Stigma: The Psychology of Marked Realtionships*. New York, NY: Freeman and Company.
- Krieger, N. (2003). Discrimination and health. In I. Kawachi, and L. F. Berkman, *Neighborhoods and Health* (pp. 36-75). New York, NY: Oxford University Press.
- Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. Annual Review of Sociology, 27, 363-385.
- Marshall, M. P., Friedman, M. S., Stall, R., Kling, K. M., Miles, J., Gold, M. A., & Morse, J. Q. (2008). Sexual orientation and adolescent substance use: A metaanalysis and methodological review. *Addiction*, 103, 546-556.
- Mays, V. M., & Cochran, S. D. (2001). Mental health correlates of perceived discrimination among lesbian, gay, and bisexual adults in the United States. *American Journal of Public Health*, *91*, 1869-1876.
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, *129*(5), 674-697.
- Nemoto, T., Operario, D., Keatley, J., Han, L., & Soma, T. (2004). HIV risk behaviors among male-to-female transgender persons of color in San Francisco. *American Journal of Public Health*, *94*(7), 1193-1199.
- O'Campo, P., Gielen, A., Fade, R. R., Xue, X., Kass, N., & Wang, M. C. (1995). Violence by male partners against women during the childbearing year: A contextual analysis. *American Journal of Public Health*, 85(8), 1092-1097.
- Oswald, S. B., & Wyatt T. J. (2011). Sexual orientation and differences in mental health, stress, and academic performance in a national sample of U.S. college students. *Journal of Homosexuality*, 58(9), 1255-80.
- Peterson, R. D., & Krivo, L. J. (1999). Racial segregation, the concentration of disadvantage, and black and white homicide victimization. *Social Forum*, 14(3), 465-493.
- Pettigrew, T. F. 1967. Social evaluation theory: convergences and applications. In D. Levine (ed.), *Nebraska Symposium on Motivation*. University of Nebraska Press.
- Rostosky, S. S., Riggle, E. D. B., Horne, S. G., & Miller, A. D. (2009). Marriage amendments and psychological distress in lesbian, gay, and bisexual (LGB) adults. *Journal of Counselling Psychology*, 56(1), 56-66.
- Shilo, G., & Savaya, R. (2011). Effects of family and friend support on LGB youths' mental health and sexual orientation milestones. *Family Relations*, 60(3), 318-330.
- Š., V., & K., T. (2013). Saborodlučio: Ipakidemona referendum o definicijibraka. Retrieved from http://dnevnik.hr/vijesti/hrvatska/u-saboru-danas-glasovanje-o-referendumu-o-braku---310315.html
- Williams, D. R., Neighbors, H. W., & Jackson, J. S. (2003). Racial/ethnic discrimination and health: Findings from community studies. *American Journal of Public Health*, 93(2), 200-208.