# The Relationship between Emotional Expression, Life Satisfaction, and Psychological Resilience in Gay Men in Turkey

Süleyman Kahraman<sup>1</sup> Istanbul Beykent University, Turkey

> Özlem Şener Bartın University, Turkey

## Eylül Fatma Kaytaz Independent Clinical Psychologist, Istanbul, Turkey

Abstract: This study examined the relationship between psychological resilience, life satisfaction, and emotional expression levels in male gay individuals. This correlational study included 40 gay males who were LGBTI Association members and 40 heterosexual men who shared similar sociodemographic characteristics. Along with the informed consent form, the participants were given a sociodemographic form, the Expression of Emotions Scale, the Life Satisfaction Scale, and the Resilience Scale for Adults. Correlation analysis was performed to reveal the relationship between variables. Independent sample T-tests, Mann-Whitney U, and Kruskal-Wallis analyses were used for group comparisons. Compared with heterosexual men, gay men scored higher on measures of emotional expression and resilience. According to the age of self-awareness and previous psychological therapy status, the ratings of gay males for expressing their feelings differ significantly. In addition, there was a significant difference in resilience scores according to smoking status. Male gay individuals have higher emotional expression skills and psychological resilience levels than heterosexual individuals. Additionally, it was found that emotional expression and life satisfaction were positively correlated in gay people.

*Keywords*: gay men, life satisfaction, emotional expression, psychological resilience.

Lesbian, gay, bisexual, transgender, and intersex (LGBTI) issues have experienced a dramatic rise in public and scientific understanding in just the last two decades. This awareness can be linked to more significant sociocultural changes in perceptions of sexual orientation and gender identity, such as the rise of the gay rights movement in the 1970s. For this reason, there is a need for more scientific research on LGBTI. In the related literature, LGBTI individuals are defined as a risk group in terms of being a minority group in terms of sexual orientation and gender identity, as they become vulnerable to many developmental risk factors (Cicchetti, 2010; Jordan, 2015; Lidderdale, 2009; Meyer, 2003a). In this study, emotional expression skills, life satisfaction, and psychological resilience levels of homosexual individuals, who can be classified as a risk group due to their exposure to individual (perceived stress, depression, suicide, internalized homophobia, etc.), familial (parental rejection, unaccepting parental

<sup>&</sup>lt;sup>1</sup> Corresponding Author: An Assistant Professor of Education at the Department of Psychology at Istanbul Beykent University, Turkey. E-Mail: suleymankahraman@beykent.edu.tr

#### Kahraman, S.

attitudes, etc.), and social (exposure to discrimination, social isolation, labeling, etc.) risk factors based on having different sexual orientation and gender identity (Başar & Öz, 2016; M. King et al., 2008; Meyer, 2003b), were examined. It is important for social harmony and balance to investigate a community with an increasing population in every aspect.

Individuals' romantic, sexual, or emotional desires and behaviors—which can differ between people—inform their sexual identities (Russell et al., 2009). LGBTI, which defines the sexual orientation of individuals was published in 1973 by the American Psychiatric Association (APA), the Diagnostic and Statistical Manual of Mental Disorders IV (DSM-IV), the World Health Organization (WHO), and the International Classification of Diseases in 1992 (ICD) (Köylü, 2016). The term homosexuality, which includes lesbians and gay people and refers to the stimulation of one's sexual, romantic, emotional, and desire for the same sex (Kabacaoğlu, 2015), is no longer taboo in the developing world and is now a subject that social scientists have been studying in-depth for a long time (Tasker at al., 2010).

LGBTI individuals struggle for existence more than heterosexual individuals (Sansal, 2020). The qualities of masculinity and femininity, which are inborn characteristics of the individual, are sometimes not enough to determine how and to which gender his sexual activities will be directed. Assumptions on this matter formed the root of misunderstandings about homosexuality. Even though a person is genetically predisposed to mate with women, this does not mean that they will always do so (Carlson et al., 2010). Homosexuality is often an orientation rather than a choice. The process of realizing and accepting the differences of gay men brings internal and social difficulties. Because they are marginalized by society and are a minority group, LGBTI people have been found to have higher rates of mental health problems than heterosexual people (Meyer, 2003b). Due to these challenges, LGBTI people are more likely to experience risk factors like substance abuse, anxiety, depression, and suicidal ideation (Lidderdale, 2009). Many LGBTI individuals embrace themselves as they are despite all of these challenging circumstances and painful experiences, and they actively defend their civil rights in society by being active members of a variety of organizations (Smith & Gray, 2009). However, in countries where traditional values prevail, LGBTI individuals continue to be subjected to homophobic attitudes and social and psychological pressure because of their sexual orientation (Öztürk, 2011; Şenel, 2014). As a minority group, it is predicted that social pressure and exclusion prevent gay individuals from expressing their emotions and cause a decrease in their life satisfaction and psychological resilience. Studies reveal the importance of emotional expression in mental health (Handlovsky et al., 2018), and it is much more important for gay individuals experiencing psychological and social pressure to express their emotions for their life satisfaction and psychological resilience. The question of what basic resources LGBTI people need to participate in social life, make friends, work successfully, accept and reveal their sexuality, and do all of this while being exposed to such risk factors, becomes vital in this context. At this point, it becomes important to examine the levels of LGBTI individuals' ability to express emotions, life satisfaction, and psychological resilience as internal protective factors. Social pressure and homophobic attitudes closely affect the demographic lives of LGBTI individuals. It is important to examine the relationship between their education and age levels, smoking (Herek, 2002), income levels (Badgett, 1995), whether they have a partner or not, whether they receive psychological support and medication support with their life satisfaction, expression of emotions and psychological resilience in coping with the problems they face within the scope of this research.

Studies conducted in the last two decades have shown that expressing emotions positively contributes to mental and physical health and psychological well-being (Kuzucu, 2011; Şener & Köseoğlu 2020). It has been stated that indecision in expressing emotions is related to negative emotions, obsessive tendencies, depression, paranoid thoughts, and anxiety, while suppressing emotions causes people to think about the subject, they are affected by

increasing the risk of experiencing negative emotions and depression symptoms for a long time (Nolen-Hoeksama et al.,1993). As a result, it is seen that knowing and externalizing emotional diversity to create emotional awareness has an important effect on mental and physical health. According to Meyer (2003a), homosexual individuals who experience stress due to stigmatization and discrimination are more likely to develop mental diseases. Homosexual people encounter a clash of homophobic attitudes throughout their psychological development, and as a result of this, they acquire mental issues as a result of their anxiety and all of their repressed feelings (Düzyürek 1994; Lewis, 1995). In this respect, it is important to examine the ability to express emotions, life satisfaction, and psychological resilience levels of homosexual individuals, especially in Turkey as a developing country.

#### **Review of Literature**

When the studies done so far are examined, there are many studies on LGBTI in the world, but the studies conducted in Turkey are limited. There are rich research resources on sexual prejudice (Gramick, 1983; Harris, 2009; Herek, 1988; B. R. King, 2001; Schellenberg et al., 1999; Stone, 1976; Wilkinson, 2004), as well as many studies on the vital problems of homosexuality (Kim & Fredriksen, 2014; Westefeld et al., 2001). In Turkey, homosexuality is handled in different disciplines, but in the field of psychology, it is observed that psychological problems experienced by gay men are discussed more (Sakallı & Uğurlu, 2006).

In the developing world, the idea of homosexuality is no longer frowned upon, and social scientists have been studying it in-depth for many years (Tasker et al., 2010). However, empirical studies on homosexuality in Turkey are scarce due to the socio-cultural geography of the country (Kaptan, 2013). However, it is clear that studies carried out in Turkey primarily seek to identify harmful attitudes held by members of the public (Alkan, 2014; Baydar, 2015; Muedini, 2021; Oyman, 2010; Şah, 2009; Sanberk et al., 2016; Şenel, 2014).

It has been noted that research conducted both abroad and in Turkey with the involvement of LGBTI people tends to concentrate on social rights, advocacy, policy development, and activism (Erdoğan & Köten, 2014; Vaughan & Rodriguez, 2014). It is understood that, until recently, there has not been much research interest to reveal the fundamental mechanisms that provide positive functionality in these individuals, even though there are numerous studies abroad in the field of psychology examining the psychopathological reactions of LGBTI individuals as a result of discrimination, labeling, and identity crisis (Lytle et al., 2014). This situation is also developing similarly in Turkey. A small number of researchers (Alkan, 2014; Başar & Öz, 2016; Çelik et al., 2017) have looked at LGBTI people's traits, including life satisfaction and psychological resilience.

A person's psychological resilience is a strong indicator of their life satisfaction (Limonero et al., 2012). Psychological resilience, which typically denotes a process of achievement or adaptability (Hunter, 2001), can be stated to be one of the factors influencing the life satisfaction of minority groups based on sexual identity both globally and in Turkey. Psychological resilience is a predictor of stress-affected people's life satisfaction, according to general population studies (Çelik et al., 2017). A study conducted in Turkey found that social competence and self-perception, which are sub-components of social resilience, have an effect on the life satisfaction of individuals with LGBTI (Çelik et al., 2017). Also, it is seen that homosexuals do not reveal themselves and have difficulty expressing their feelings due to the expectation of rejection (Meyer, 2003b). The importance of self-acceptance and sharing one's experiences with others for psychological health has been clearly known since Breuer and Freud's (1895) studies on hysteria.

Not only have there been significant changes in public perceptions of LGBTI individuals and concerns over the past 20 years (Gallup, 2015), but research from a wide range of disciplines has also emerged, contributing to the current body of knowledge on LGBTI youth mental health. It is believed that studies on the mental health of LGBTI people in emerging nations like Turkey will substantially impact both the community's mental health and the societal acceptance of LGBTI people (Moagi et al., 2021). Therefore, the main question of this research is to investigate comparatively the ability to express emotions, life satisfaction, and psychological resilience processes of homosexual and heterosexual individuals who encounter distressing events as a result of stress related to their sexual orientation and gender identity and who run the risk of becoming socially isolated as a result of these events.

#### Method

## Sample

Of the participants, 40 (or 50%) are gay men, and the remaining 40 (or 50%) are heterosexual men. Gay men who agreed to take part in the study were chosen among volunteers who are LGBTI association members. After reaching the gay sample, 40 men who identified themselves as heterosexual and shared similar sociodemographic characteristics with gay participants were recruited for the heterosexual sample. These participants were chosen randomly, given information about the study, and accepted to participate voluntarily in it.

# Table 1

Socio-Demographic Information o	ne sample		
		n	%
Age	20-25	12	15.0
	26-30	41	51.3
	31-35	27	33.8
Education	Primary school	4	5.0
	Highschool	18	22.5
	University	58	72.5
Work status	Yes	71	88.8
	No	9	11.3
Perceived income status	Low	10	12.5
	Medium	40	50.0
	Good	28	35.0
	Very well	2	2.5
Romantic partner status	Yes	63	78.8
•	No	17	21.3
Received psychological support	Yes	42	52.5
	No	38	47.5
Psychiatric drug use status	Yes	45	56.3
	No	25	31.3
	Ongoing	10	12.5

Socio-Demographic Information of the Sample

Table 1 shows that 12 (15%) of the participants are between 20-25 years old, 41 (51.25%) are between 26-30 years old, and 27 (33.75%) are between 31-35 years old. 4 (5%) were primary school graduates, 18 (22.5%) were high school graduates, and 58 (72.5%) were university or higher graduates. 71 participants (88.75%) are working individuals, and 9 (11.25%) are not working. While 10 (12.5%) perceive their income level as low, 40 (50%) perceive medium, 28 (35%) perceive good, and 2 (2.5%) perceive very well. 63 (78.75%) of the participants stated that they had an existing partner, and 17 (21.25%) did not. 42 people (52.5%) had previously received psychological treatment and 38 (47.5%) had not participated in the study. Of these, 45 (56.25%) have used psychological drugs before, 25 (31.25%) have not used them, and 10 (12.5%) are still using them.

## **Data Collection Tools**

This section presents the data collection tools used in the study.

## Socio-Demographic Information Form

In the socio-demographic information form used in the study, there are questions about participants' age, education level, employment status, perceived income level, partner status, psychological treatment status, psychiatric drug use status, sexual intercourse with a woman, marital status, and the age of self-awareness of gay individuals.

## **Expressing Emotions Scale**

The Emotional Expression Scale (ESS) was developed by L. A. King and Emmons in 1990. It originally consisted of 16 items. The scale determines the level at which "positive," "negative," and "closeness" feelings are expressed in interpersonal relationships and individually, verbally or nonverbally. For each item, the scale consists of *strongly disagree-1*, *disagree-2*, *strongly disagree-3*, *undecided-4*, *somewhat agree-5*, *agree-6*, and *strongly agree-7* filled in by choosing one of the expressions. It was adapted to Turkish culture by Kuzucu in 2011. The Cronbach alpha internal consistency coefficient was determined as .85. There are 15 items in the Turkish version of the scale. The total score is obtained by summing the scores obtained from each item in the scale. A high score means a high expression of emotion (Kuzucu, 2011). In this study, the Cronbach Alpha of the scale was found to be .79.

# Adult Life Satisfaction Scale

The Adult Life Satisfaction Scale (LSS) was developed by Kaba et al. in 2017. The scale consists of 21 items. A Likert-type scale and a five-point rating (*not at all* = 1 to *totally agreeable* = 5) were used in the scale. The score that can be obtained from the scale varies between 21 and 105. High scores on the scale mean people have positive thoughts about their lives. The Cronbach-Alpha internal consistency coefficient was found to be .90 (Kaba et al., 2017). In this study, the Cronbach's alpha of the scale was found to be .81.

# The Resilience Scale for Adults

The Resilience Scale for Adults (RSFA), developed by Friborg et al. (2005), was adapted into Turkish by Basım and Çetin (2011). A Likert-type scale and a five-point rating were used in the scale. In the evaluation, the scoring format was released for measuring psychological resilience at low or high levels. The lowest 33 and the highest 165 points can be

obtained from the 5-point scale. Received high scores indicate an increase in positive selfperception (Basım & Çetin, 2011). In this study, the Cronbach's alpha of the scale was found to be .85.

#### **Data Analysis**

Statistical evaluations were made with the SPSS 20 program. Correlation analysis was performed to reveal the relationship between variables. Independent sample T-test, Mann-Whitney U, and Kruskal-Wallis analyses were used for group comparisons. The statistical significance value (p) was considered below .05.

#### Findings

In this section, the statistical analysis findings of the data collected from the participants were presented.

#### Table 2

T-Test Analysis Results on the Comparison of Gay and Heterosexual Men's EES, LSS, RSFA Scores

	Groups	п	М	SD	t	df	р
Expressing	Gay	40	75.95	12.85	2.86	-2.79	.00
Emotions Scale	Heterosexual	40	68.50	10.27			5
Life Satisfaction	Gay	40	74.35	12.73	1.14	-1.58	.25
Scale	Heterosexual	40	70.97	13.68			7
The Resilience	Gay	40	100.72	5.52	2.44	-1.72	.01
Scale	Heterosexual	40	96.25	10.19			7

*Note*. EES= Expressing Emotions Scale; LFS= Life Satisfaction Scale; RSFA= The Resilience Scale

Table 2 shows a statistically significant difference between gay and heterosexual participants' emotional expression and resilience scores. Gay male participants' emotional expression scores (M=75.95; t=2.86; p=.005) and resilience scores (M=100.72; t=2.44; p=.017) were significantly higher than the scores of heterosexual male participants (M=68,50; M=96.25).

#### Table 3

Results of The Mann Whitney-U Test on the Comparison of the EES, LSS, and RSFA Scores of Gay Male Individuals According to Their Previous Psychological Treatment Status

		Groups	п	$ar{x}_{rank}$	$\Sigma_{rank}$	U	Z.	р
Expres	ssing	Yes	31	23.05	714.50	60.50	-2.56	.010
Emotio	ons Scale	No	9	11.72	105.50			
Life	Satisfaction	Yes	31	22.60	700.50	74.50	-2.10	.035
Scale		No	9	13.28	119.50			
The	Resilience	Yes	31	20.45	634.00	138.00	-0.04	.961
Scale		No	9	20.67	186.00			

*Note.* EES= Expressing Emotions Scale; LFS= Life Satisfaction Scale; RSFA= The Resilience Scale

Journal of Ethnic and Cultural Studies 2023, Vol.10, No. 4, 102-117 http://dx.doi.org/10.29333/ejecs/1655

Table 3 shows that a statistically significant difference was found in the expression of emotions and life satisfaction scores of gay men who had received psychological treatment before compared to those who had not received psychological treatment before. Expressing emotions ( $\bar{x}_{rank}$ =23.05; *U*=60.50; *p*=.010) and life satisfaction ( $\bar{x}_{rank}$ =22.60; *U*=74.50; *p*=.035) scores of those who had received psychological treatment before were significantly higher ( $\bar{x}_{rank}$ =11.72;  $\bar{x}_{rank}$ =13.28).

#### Table 4

Results of the Kruskal-Wallis H Test on the Comparison of the EES, LSS, and RSFA Scores of Gay Male Individuals According to Their Previous Sexual Intercourse with a Woman

	Groups	п	$ar{x}_{rank}$	$\chi^2$	df	р	Difference
Expressing	Yes <sup>1</sup>	15	20.53	9.47	2	.009	2>1
Emotions	No <sup>2</sup>	20	24.08				
Scale	No comment <sup>3</sup>	5	6.10				
Life	Yes <sup>1</sup>	15	23.07	1.16	2	.558	
Satisfaction	No <sup>2</sup>	20	19.08				
Scale	No comment <sup>3</sup>	5	18.50				
ті р 'l'	Yes <sup>1</sup>	15	21.97	2.16	2	.339	
The Resilience Scale	$No^2$	20	21.18				
	No comment <sup>3</sup>	5	13.40				

*Note.* EES= Expressing Emotions Scale, LFS= Life Satisfaction Scale; RSFA= The Resilience Scale

Table 4 shows that male individuals constituting the gay sample group show a significant difference in their emotional expression scores according to whether they have had sexual intercourse with a woman before ( $\chi^2=9.47$ ; p=.009). According to the pairwise comparison analysis, gay individuals who have not been with a woman before have a significantly higher level of expressing feelings ( $\bar{x}_{rank}=24.08$ ) than those who do not want to share them ( $\bar{x}_{rank}=20.53$ ). There was no difference in life satisfaction or resilience scores.

#### Table 5

	Groups	п	$ar{x}_{rank}$	$\chi^2$	df	р	Difference
	Childhood <sup>1</sup>	15	15.90	11.06	2	.004	2>1
Expressing	Puberty <sup>2</sup>	19	26.82				2>3
Emotions Scale	Adulthood <sup>3</sup>	6	12.00				
	Childhood <sup>1</sup>	15	20.60	.20	2	.904	
Life Satisfaction	Puberty <sup>2</sup>	19	21.03				
Scale	Adulthood <sup>3</sup>	6	18.58				
	Childhood <sup>1</sup>	15	18.90	2.81	2	.245	
The Resilience	Puberty <sup>2</sup>	19	19.45				
Scale	Adulthood <sup>3</sup>	6	27.83				

Results of the Kruskal-Wallis H Test on the Comparison of EES, LSS, and RSFA Scores of Gay Male Individuals by Age of Self-Awareness

*Note.* EES= Expressing Emotions Scale; LFS= Life Satisfaction Scale; RSFA= The Resilience Scale

Table 5 shows that a statistically significant difference was found in the emotion expression scores of the male individuals in the gay sample group according to the age of self-awareness ( $\chi^2$ =11.06; *p*=.004). According to the pairwise comparison analysis, gay individuals who noticed themselves in puberty had a significantly higher level of expression ( $\bar{x}_{rank}$ =26.82) than those who realized themselves in childhood ( $\bar{x}_{rank}$ =15.90) and adulthood ( $\bar{x}_{rank}$ =12.00). There was no difference in life satisfaction or resilience scores.

#### Table 6

Mann Whitney-U Test Results Regarding the Comparison of EES, LSS, and RSFA Scores of Gay Male Individuals by Smoking Status

	Groups	п	$ar{x}_{rank}$	$\Sigma_{rank}$	U	Z.	р
Expressing	Yes	30	18.58	557.50	87.50	10	.915
<b>Emotions Scale</b>	No	6	108.50	108.50			
Life Satisfaction	Yes	30	18.73	562.00	83.00	29	.766
Scale	No	6	17.33	104.00			
The Resilience	Yes	30	16.78	503.50	38.50	-2.19	.028
Scale	No	6	27.08	162.50			

*Note*. EES= Expressing Emotions Scale, LFS= Life Satisfaction Scale; RSFA= The Resilience Scale

Table 6 shows a statistically significant difference in the resilience scores of gay male individuals in favor of non-smokers according to smoking status (U=38.50; p=.028). Resilience scores are significantly higher in individuals who do not smoke ( $\bar{x}_{rank}=27.08$ ).

#### Table 7

Results of Correlation Analysis Regarding the Relationship between EES, LSS, and RSFA Scores in Gay and Heterosexual Male Individuals

		Gay	Sample		Hetero	sexual
Variable	_			Sample		
	1	2	3	1	2	3
1. Expressing $r$ Emotions Scale	_					
2. Life Satisfaction <i>r</i> Scale	.47**			.11		
3. The Resilience r Scale	.06	.11		02	.10	

*Note*. EES= Expressing Emotions Scale, LFS= Life Satisfaction Scale; RSFA= The Resilience Scale

\*\**p*<.01.

Table 7 shows a moderately positive correlation between gay male individuals' scores of expressing emotions and life satisfaction (r=.47; p<.01). No correlation was found between the EES, LSS, and RSFA scores of heterosexual male individuals. Besides these results, there was no significant difference in the expression of emotions, life satisfaction, and resilience scores of gay individuals according to age, educational status, working status, or perceived income level.

#### Discussion

Looking at the results obtained from the study, it was found that gay male individuals have higher emotional expression skills than heterosexual male individuals. This situation shows that gay male individuals can express their feelings more easily than heterosexual men. In many societies, men are expected to behave in a masculine manner (Connor et al., 2021). According to Levant's "code of masculinity" (2001), this masculine identity is created and attained through adherence to specific societal masculinity guidelines or norms. A strong and integral component of male self-identity is emotional restraint (O'Neil, 2015). Men with higher masculinity scores have been found to have significantly higher restricted emotionality (McMahon et al., 2020). This means it is a specific type of masculinity that restricts emotionality. Emotional expression is still viewed as feminine; men have trouble expressing their emotions (Brody & Hall, 2008). Gay men exhibit stronger emotional expression and less conformity to traditional masculine role norms (Blashill & Powlishta, 2009; Wester et al., 2005). The concept of "effeminate men" or "soft men" has been present in Turkish literature and poetry for centuries (Arvas, 2014). Studies show that women have a higher ability to express their emotions compared to men and differ according to gender (L. F. Deng & Zheng, 2004). Women and men differ in terms of both biological and social abilities (Kring & Gordon, 1998), and women express their emotions more easily than men (Davis et al., 2012; Y. Deng et al., 2016; Gross & John, 2003; Yeung et al., 2015). As a result, Turkish gay people who are considered to have more feminine attributes may be more successful at expressing their emotions than men, since women are more empathetic and can do it more readily.

According to the research, the psychological resilience levels of gay male individuals are higher than those of heterosexual men. According to Hatzenbuehler's (2009) theory, those who identify as sexual minorities and are exposed to stress as a result of stigma are more likely to struggle with emotional regulation, interpersonal connections, and negative thoughts. Gay male individuals, who are experiencing individual strain and have similar difficulties in society, have increased their psychological resilience and courage, thus learning to be more resistant to the difficulties they encounter in their life processes (Kwon, 2013).

According to the research, it was found that gay male individuals who previously received psychological support noticed their sexual orientation during puberty and did not have sexual intercourse with women had higher levels of emotional expression. Gay people's psychological health is affected by experiencing discrimination in many contexts (Colpitts & Gahagan, 2016; Dunbar et al., 2017; Russell & Fish, 2016). Due to their marginalization, stigmatization, and exposure to discrimination, gay persons may experience various stresses, such as structural or institutionalized discrimination, rejection, and internalized homophobia (Kaniuka et al., 2019). Their quality of life and mental health are both negatively impacted by these pressures (Price-Feeney et al., 2020). The process of getting psychological help increases the resilience, emotional expression, courage, and life satisfaction of the person as the main purpose against the difficulties they face in the struggle for life. There are studies stating that resilience is a predictor of life satisfaction (Diener et al., 1985). The increase in the resilience of gay individuals who receive psychological support in the difficult struggle of life also has a positive indirect effect on their quality of life. It is seen that these individuals gain their sexual and emotional awareness, which is more difficult than that of heterosexual individuals, and their ability to express these, with the contribution of the psychological help they receive, and increase their life satisfaction. The psychological support of homosexual male individuals enabled them to recognize and express their feelings and thoughts that they could not understand before. As a result, these individuals who can recognize and express their feelings have started to enjoy life more.

#### Kahraman, S.

It was found that gay male individuals who noticed their sexual orientation during puberty had higher levels of emotional expression. It can be said that as gay individuals realize themselves during adolescence when sexual maturity begins to be attained, they also get to know their feelings better and find it easier to express them. It has been found that non-smoking gay individuals also have high levels of psychological resilience. In the studies conducted, the desire to relieve anxiety has an important place among the reasons for smoking (Kutlu & Çivi, 2006). From this point of view, it can be concluded that as with other people with limited abilities to cope with problems, gay men smoke to increase their psychological resilience.

There is no substantial difference in the expression of emotions, life satisfaction, or resilience ratings of gay individuals based on their age and education level. There has been little research into the relationship between age and emotional experiences, life satisfaction, and resilience among LGBT people. However, studies on the general population have demonstrated that emotional experiences might vary based on individual variations and life circumstances rather than age and education level alone (Yao et al., 2021). As a result, it is possible that age does not play a substantial role in differentiating emotional expression among gay individuals. Age and life satisfaction among gay individuals have a complicated relationship. According to several studies, social support, identity acceptance, and community involvement are more important than age as predictors of life satisfaction (Leung et al., 2022). When analyzing life satisfaction across age groups, it's crucial to take the different experiences and individual characteristics within the LGBT community into account. Studies on resilience among sexual minority populations, in general, have indicated that resilience can be influenced by multiple factors beyond age and education level, such as social support, minority stress, and coping strategies (Fredriksen-Goldsen et al., 2013; Mereish et al., 2017). Therefore, the expression of resilience may not show significant differences based on age and education level alone among gay individuals.

There was no significant difference in the expression of emotions, life satisfaction, and resilience scores of gay individuals according to working status. The relationship between working status and life satisfaction among gay individuals can vary. While some studies suggest that employment can contribute to higher levels of life satisfaction due to financial stability and personal fulfillment (Bockting et al., 2013), other research indicates that the impact of working status on life satisfaction may be more nuanced and influenced by factors such as workplace discrimination or job satisfaction (Dunbar et al., 2017; Russell & Fish, 2016). Therefore, the association between working status and life satisfaction among gay individuals may not be straightforward.

In this study, a moderately positive correlation was found between gay male individuals' scores on expressing emotions and life satisfaction. LGBTI people are more likely to experience depression and other adverse health effects (Cochran & Mays, 2009; Feinstein et al., 2012). According to studies done in the previous two decades, expressing emotions positively impacts one's physical, mental, and emotional well-being (Şener & Köseoğlu, 2020). Emotional expression is one of the good coping skills that one might develop. Life satisfaction is accepted as a measure of emotional happiness (Aşan & Erenler, 2008). According to the results of this study, gay male individuals have higher emotional expression skills than heterosexual male individuals. A correlation between expressing emotions and life satisfaction is more meaningful in this manner.

#### **Limitations and Implications**

The study's limitations include its small sample size and the difficulties in contacting LGBT people. Additionally, because of the sampling, the study does not accurately represent the gay population. Comparing a small group of 5-6 people to a larger group of 30 people can

lead to some limitations. With a small group, there may be a higher chance of individual differences significantly affecting the results. Future studies with a larger sample size will be able to generalize their findings to the broader population and produce significant findings on this topic. Despite the limitations of the study, it was seen that there had been no similar study conducted before. For this reason, this study has the importance of contributing to the literature on gay individuals in Turkey. As an implication, the findings in this study might help mental health specialists. Psychologists might benefit from having a deeper understanding of gay people's emotional expression, life satisfaction, and resilience to create effective interventions for gay populations (Hatzenbuehler, 2009).

In conclusion, according to research findings, gay individuals' emotional expression skills and psychological resilience levels were found to be higher than those of heterosexual men. There was no significant difference between the two groups in terms of life satisfaction. In addition, it has been observed that there is a positive relationship between gay individuals' ability to express their emotions and their life satisfaction.

## References

- Alkan, E. (2014). A comparison of life satisfaction, coping strategies and resilience levels of individuals with different sexual orientation [Unpublished master's thesis]. Ankara University.
- Arvas, A. (2014). From the Pervert, Back to the Beloved: Homosexuality and Ottoman Literary History, 1453–1923. *The Cambridge History of Gay and Lesbian Literature*, 145-63.
- Aşan, Ö., & Erenler, E. (2008). Relationship between job satisfaction and life satisfaction. Suleyman Demirel University the Journal of Faculty of Economics and Administrative Sciences, 13(2), 203–216. https://doi.org/10.5296/jei.v7i2.18949
- Badgett, M. L. (1995). The wage effects of sexual orientation discrimination. *Industrial & Labor Relations Review*, 48(4), 726–739. https://doi.org/10.2307/2524353
- Başar, K., & Öz, G. (2016). Resilience in individuals with gender dysphoria: Association with perceived social support and discrimination. *Turkish Journal of Psychiatry*, 27, 1– https://doi.org/10. 10.5080/u17071
- Basım, H. N., & Çetin, F. (2011). The reliability and validity of the resilience scale for adults-Turkish version. *Turkish Journal of Psychiatry*, 22(2), 104–114.
- Baydar, M. (2015). Internalized homophobia and psychological distress among gay, lesbian and bisexual individuals [Unpublished master's thesis]. Adnan Menderes University.
- Blashill, A. J., & Powlishta, K. K. (2009). Gay stereotypes: The use of sexual orientation as a cue for gender-related attributes. *Sex Roles*, *61*(11-12), 783–793. https://doi.org/10.1007/s11199-009-9684-7
- Bockting, W. O., Miner, M. H., Swinburne Romine, R. E., Hamilton, A., & Coleman, E. (2013). Stigma, mental health, and resilience in an online sample of the US transgender population. *American Journal of Public Health*, 103(5), 943-951.
- Brody, L. R., & Hall, J. A. (2008). Gender and emotion in context. In M. Lewis, J. M. Haviland-Jones, & L. F. Barrett (Eds.), *Handbook of emotions* (3rd ed., pp. 395–408). Guilford Press.
- Carlson, N. R., Buskist, W., Heth, C. D., & Schmaltz, R. (2010). *Psychology-the science of behaviour* (4th ed.). Pearson.
- Çelik, M., Sanberk, İ., & Şahin, İ. (2017). Psychological resilience in predicting the life satisfaction of Turkish LGB individuals. *Mersin University Journal of the Faculty of Education*, 13(3), 1203–1213.

- Cicchetti, D. (2010). Resilience under conditions of extreme stress: A multilevel perspective. *World Psychiatry*, 9(3), 145–154. https://doi.org/10.1002/j.2051-5545.2010.tb00297.x
- Cochran, S. D., & Mays, V. M. (2009). Burden of psychiatric morbidity among lesbian, gay, and bisexual individuals in the California quality of life survey. *Journal of Abnormal Psychology*, *118*(3), 647–658. https://doi.org/10.1037/a0016501
- Colpitts, E., & Gahagan, J. (2016). The utility of resilience as a conceptual framework for understanding and measuring LGBTQ health. *International Journal for Equity in Health*, 15(1), 1–8. https://doi.org/10.1186/s12939-016-0349-1
- Connor, S., Edvardsson, K., Fisher, C., & Spelten, E. (2021). Perceptions and Interpretation of Contemporary Masculinities in Western Culture: A Systematic Review. *American journal of men's health*, *15*(6), 15579883211061009. https://doi.org/10.1177/15579883211061009
- Davis, E., Greenberger, E., Charles, S., Chen, C., Zhao, L., & Dong, Q. (2012). Emotion experience and regulation in China and the U.S: How do culture and gender shape emotion responding? *International Journal of Psychology* 47(3), 230–239. https://doi.org/10.1080/00207594.2011.626043
- Deng L. F., & Zheng R. C. (2004). Affect variables and mental health in college students. *Chinese Mental Health Journal, 18,* 58–60.
- Deng, Y., Chang, L., Yang, M., Hou, M., & Zhou, R. (2016). Gender differences in emotional response: Inconsistency between experience and expressivity. *PLoS One*, 11(6), Article e0158666. https://doi.org/10.1371/journal.pone.0158666
- Diener, E., Emons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction with life scale. *Journal of Personality Assessment,* 49(1), 71– 75. https://doi.org/10.1207/s15327752jpa4901\_13
- Dunbar, M. S., Sontag-Padilla, L., Ramchand, R., Seelam, R., & Stein, B. D. (2017). Mental health service utilization among lesbian, gay, bisexual, and questioning or queer college students. *Journal of Adolescent Health*, 61(3), 294–301. https://doi.org/10.1016/j.jadohealth. 2017.03.008
- Düzyürek, S. (1994). Homophobic prejudice, gay individuals and their therapists. *3P Journal* of Psychiatry Psychology Psychopharmacology, 2(3), 45–55.
- Erdoğan, B., & Köten, E. (2014). The class dynamics of new social movements: LGBT movement in Turkey. *Marmara University Journal of Political Sciences*, 2(1), 39–113.
- Feinstein, B. A., Goldfried, M. R., & Davila J. (2012). The relationship between experiences of discrimination and mental health among lesbians and gay men: An examination of internalized homonegativity and rejection sensitivity as potential mechanisms. *Journal* of Consulting and Clinical Psychology, 80(5), 917–927. https://doi.org/10.1037/a0029425
- Fredriksen-Goldsen, K., I., Kim, H., J., Barkan, S., E., Muraco, A. & Hoy-Ellis, C., P. (2013). Health disparities among lesbian, gay, and bisexual older adults: Results from a population-based study. *American Journal Public of Health*, 103(10), 1802–1809. https://doi.org/10.2105/AJPH.2012.301110
- Friborg, O., Hjemdal, O., Rosenvinge, J. H., & Martinussen, M. (2003). A new rating scale for adult resilience: what are the central protective resources behind healthy adjustment?. *International journal of methods in psychiatric research*, *12*(2), 65–76.
- Gallup. (2015). Gay and lesbian rights. http://www.gallup.com/poll/1651/gay-lesbian-rights.aspx
- Gramick, J. (1983). Homophobia: A new challenge. *Social Work*, 28(2), 137–141. https://doi.org/10.1093/sw/28.2.137

- Gross, J. J., & John, O. P. (2003). Individual differences in two emotion regulation processes: Implications for affect, relationships, and well-being. *Journal of Personality and Social Psychology*, 85(2), 348–362. https://doi.org/10.1037/0022-3514.85.2.348
- Handlovsky I., Bungay V., Oliffe J., & Johnson J. (2018). Developing resilience: Gay men's response to systemic discrimination. *American Journal of Men's Health*, 12(5), 1473–1485. https://doi.org/10.1177/1557988318768607
- Harris, A. C. (2009). Marginalization by the marginalized: Race, homophobia, heterosexism, and "the problem of the 21st century". *Journal of Gay & Lesbian Social Services*, 21(4), 430–448. https://doi.org/10.1080/10538720903163171
- Hatzenbuehler, M. L. (2009). How does sexual minority stigma "get under the skin?" A psychological mediation framework. *Psychological Bulletin*, 135(5), 707–730. https://doi.org/10.1037/a0016441
- Herek, G. M. (1988). Heterosexuals' attitudes toward lesbians and gay men: Correlates and gender differences. *The Journal of Sex Research*, 25(4), 451–477. https://doi.org/10.1080/00224498809551476
- Herek, G. M. (2002). Heterosexuals' attitudes toward bisexual men and women in the United States. *Journal of Sex Research*, *39*(4), 264–274. https://doi.org/10.1080/00224490209552150
- Hunter, A. J. (2001). A Cross-cultural comparison of resilience in adolescents. *Journal of Pediatric Nursing*, 16(3), 172–179. https://doi.org/10.1053/jpdn.2001.24180
- Jordan, M. J. (2015). *A phenomenological study of risk and resilience: LGB youths' perceptions of homophobia and their resilience* [Unpublished doctoral dissertation]. Fielding Graduate University.
- Kaba, İ., Erol, M., & Güç, K. (2018). Development of adult life satisfaction scale. Anadolu University Journal of Social Sciences, 18(1), 1–14. https://doi.org/10.18037/ausbd.550232
- Kabacaoğlu, G. (2015). *Coming-out process of gays and lesbians: A qualitative study* [Unpublished master's thesis]. Hacettepe University.
- Kaniuka, A., Pugh, K. C., Jordan, M., Brooks, B., Dodd, J., Mann, A. K., Williams, S. L., & Hirsch, J. K. (2019). Stigma and suicide risk among the LGBTQ population: Are anxiety and depression to blame and can connectedness to the LGBTQ community help? *Journal of Gay & Lesbian Mental Health*, 23(2), 205–220. https://doi.org/10.1080/19359705.2018.1560385
- Kaptan, S. (2013). Families' acceptance processes. In Ş. Yüksel & N. Yetkin (Eds.), *Homosexuality (Information File-10)*. CETAD.
- Kim, H., & Fredriksen, K. (2014). Living arrangement and loneliness among lesbian, gay and bisexual older adults. *The Gerontologist*, 56(3), 548–558. https://doi.org/10.1093/geront/gnu083
- King, B. R. (2001). Ranking of stigmatization toward lesbians and their children and the influence of perceptions of controllability of homosexuality. *Journal of Homosexuality*, 41(2), 77–97. https://doi.org/10.1300/J082v41n02\_05
- King, L. A., & Emmons, R. A. (1990). Conflict over emotional expression: Psychological and physical correlates. *Journal of Personality and Social Psychology*, 58(5), 684–877. https://doi.org/10.1037//0022-3514.58.5.864
- King, M., Semlyen, J., Tai, S. S., Killaspy, H., Osborn, D., Popelyuk, D., & Nazareth, I. (2008). A systematic review of mental disorder, suicide, and deliberate self-harm in lesbian, gay and bisexual people. *BMC psychiatry*, 8(1), 70. https://doi.org/10.1186%2F1471-244X-8-70
- Köylü, M. (2016). LGBT rights handbook for the Ministry of Health. KAOS GL.

- Kring, A. M., & Gordon, A. H. (1998). Sex differences in emotion: Expression, experience and physiology. *Journal of Personality and Social Psychology*, 74(3), 686–703. https://doi.org/10.1037//0022-3514.74.3.686
- Kutlu, R., & Çivi, S. (2006). The frequency and affecting factors of smoking among the students at Seydisehir vocational school. *Journal of Dependence*, *7*, 71–79.
- Kuzucu, Y. (2011). Adaptation of the emotional expression questionnaire: Validity and reliability studies. *Kastamonu Education Journal*, 19(3), 779–792.
- Kwon, P. (2013). Resilience in lesbian, gay, and bisexual individuals. *Personality and Social Psychology Review*, *17*(4), 371–383. https://doi.org/10.1177/1088868313490248
- Leung, E., Kassel-Gomez, G., Sullivan, S., Murahara, F., & Flanagan, T. (2022). Social support in schools and related outcomes for LGBTQ youth: A scoping review. *Discover Education*, 1(1), Article 18. https://doi.org/10.1007/s44217-022-00016-9
- Levant, R. F. (2001). The crises in boyhood. In G. R. Brooks & G. E. Good (Eds.), *The new* handbook of psychotherapy and counseling with men: A comprehensive guide to settings, problems and treatment approaches (pp. 355–368). Jossey-Bass Inc.
- Lewis, M. (1995). Shame: The exposed self. The Free Press.
- Lidderdale, M. A. (2009). *Phenomenological study of resilience in the lives of white, midlife lesbian psychologists in clinical practice* [Unpublished doctoral dissertation]). Western Michigan University.
- Limonero, J. T., Tomás-Sábado, J., Fernández-Castro, J., Gómez-Romero, M. J., & Ardilla-Herrero, A. (2012). Resilient coping strategies and emotion regulation: Predictors of life satisfaction. *Behavioral Psychology*, 20(1), 183–196.
- Lytle, M. C., Vaughan, M. D., Rodriguez, E. M., & Shmerler, D. L. (2014). Working with LGBT individuals: Incorporating positive psychology into training and practice. *Psychology of Sexual Orientation and Gender Diversity*, 1(4), 335–347. https://doi.org/10.1037/sgd0000064
- McMahon, J., Tiernan, J., & Moane, G. (2020). Differences in gay and heterosexual men's emotional restriction through their femininity: An Irish study. *Journal of Gender Studies*, 29(4), 457–469. https://doi.org/10.1080/09589236.2020.1724084
- Mereish, E. H., Goldbach, J. T., Burgess, C., & DiBello, A. M. (2017). Sexual orientation, minority stress, social norms, and substance use among racially diverse adolescents. *Drug and Alcohol Dependence*, 178, 49–56. https://doi.org/10.1016/j.drugalcdep.2017.04.013
- Meyer, I. H. (2003a). Prejudice as stress: Conceptual and measurement problems. American *Journal of Public Health*, 93(2), 262–265. https://doi.org/10.2105/ajph.93.2.262
- Meyer, I. H. (2003b). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, *129*(5), 674–697. https://doi.org/10.1037/0033-2909.129.5.674
- Moagi, M. M., van Der Wath, A. E., Jiyane, P. M., & Rikhotso, R. S. (2021). Mental health challenges of lesbian, gay, bisexual and transgender people: An integrated literature review. *Health* SA = SA Gesondheid, 26, 1487. https://doi.org/10.4102/hsag.v26i0.1487
- Muedini, F. (2021). Justice and development (AKP) attitudes towards the LGBTI community in Turkey. In Aydin, H. & Langley, W. (eds). *Human rights in Turkey: Assaults on human dignity*, [pp. 131-140]. Springer.
- Nolen-Hoeksama, S., Morrow, J., & Fredickson, B. L. (1993). Response styles and the duration of episodes of depressed mood. *Journal of Abnormal Psychology*, *102*(1), 20–28. https://doi.org/10.1037//0021-843x.102.1.20
- O'Neil, J. M. (2015). Men's gender role conflict: Psychological cost, consequences, and an agenda for change. APA Books.

- Oyman, S. (2010). The role of participant sex, education level and homophobic attitudes in blame attributions and personality trait ascriptions to the victims and perpetrators having different sexual orientations [Unpublished master's thesis]. Hacettepe University.
- Öztürk, A. (2011). *The field of gay masculinity as a subfield of masculinity* [Unpublished master's thesis]. Akdeniz University.
- Price-Feeney, M., Green, A. E., & Dorison, S. (2020). Understanding the mental health of transgender and nonbinary youth. *The Journal of Adolescent Health: Official Publication of the Society for Adolescent Medicine*, 66(6), 684–690. https://doi.org/10.1016/j.jadohealth. 2019.11.314
- Russell S. T., Clarke T. J., Clary J. (2009). Are teens "post-gay"? Contemporary adolescents' sexual identity labels. *Journal of Youth and Adolescence*, *38*(7), 884–890. https://doi.org/10.1007/s10964-008-9388-2
- Russell, S. T., & Fish, J. N. (2016). Mental health in lesbian, gay, bisexual, and transgender (LGBT) youth. Annual Review of Clinical Psychology, 12(1), 465–487. https://doi.org/10.1146/annurev-clinpsy-021815-093153
- Şah, U. (2009). Social representations of young people regarding sexual orientations and homophobia in Turkey [Unpublished master's thesis]. Ankara University.
- Sakallı-Uğurlu, N. (2006). Attitudes towards homosexuals: Empirical studies in Turkey. *Turkish Psychological Reports*, 9(17), 53–69.
- Sanberk, İ., Çelik, M., & Gök, M. (2016). An investigation of university students' homophobia levels regarding gender and gender roles. *Journal of Human Sciences*, 13(3), 4011– 4019. https://doi.org/10.14687/jhs.v13i3.4044
- Sansal, B. (2020). LGBTQ Rights in Turkey: Do Not Touch My Body!. In Aydin, H & Langley, W. (eds), *Human Rights in Turkey: Assaults on Human Dignity* [pp. 141-155]. Springer.
- Schellenberg, E. G., Hirt, J., & Sears, A. (1999). Attitudes toward homosexuals among students at a Canadian University. *Sex Roles*, 40, 139–152. https://doi.org/10.1023/A:1018838602905
- Şenel, B. (2014). *Reflections of sexual orientation discrimination in everyday life* [Unpublished master's thesis]. Hacettepe University.
- Şener, Ö., & Köseoğlu S. A. (2020). The Effects of Psychodrama on Emotional Expression and Spontaneity of University Students Suffering Alexithymia. *Journal of Higher Education and Science*, 10(2), 318–327. https://doi.org/10.5961/jhes.2020.393
- Smith, M. S., & Gray, S. W. (2009). The Courage to challenge: A new measure of hardiness in LGBT adults. *Journal of Gay & Lesbian Social Services*, 21, 73– 89. https://doi.org/10.1080/10538720802494776
- Stone, N. M. (1976). On the assessment of sexual orientation: A reply to Anderson. *Journal of Personality Assessment, 40*(1), 54–56. https://doi.org/10.1207/s15327752jpa4001\_11
- Tasker, F., Barret, H., & De Simon, F. (2010). "Coming out tales": Adult sons and daughters' feelings about their gay father's sexual identity. *Australian and New Zealand Journal* of Family Therapy, 31, 326–337. https://10.1375/anft.31.4.326
- Vaughan, M. D., & Rodriguez, E. M. (2014). LGBT strengths: Incorporating positive psychology into theory, research, training, and practice. *Psychology of Sexual Orientation and Gender Diversity*, 1(4), 325–334. https://doi.org/10.1037/sgd0000053
- Westefeld, J., Maples, M., Buford, B., & Taylor S. (2001). Gay, lesbian and bisexual college students: The relationship between sexual orientation and depression, loneliness and suicide. *Journal of College Student Psychotherapy*, 15(3), 71–82. https://doi.org/10.1300/J035v15n03\_06

- Wester, S. R., Pionke, D. R., & Vogel, D. L. (2005). Male gender role conflict, gay men, and same-sex romantic relationships. *Psychology of Men and Masculinity*, 6(3), 195–208. https://doi.org/10.1037/1524-9220.6.3.195
- Wilkinson, W. W. (2004). Religiosity, authoritarianism, and homophobia: A multidimensional approach. *The International Journal for The Psychology of Religion*, 14(1), 55–67. https://doi.org/10.1207/s15327582ijpr1401\_5
- Yao, L., Wang, M., Lu, Y., Li, H., & Zhang, X. (2021). EEG-based emotion recognition by exploiting fused network entropy measures of complex networks across subjects. *Entropy*, 23(8), Article 984. https://doi.org/10.3390/e23080984
- Yeung, N., Mak, W., & Cheung, L. (2015). Conformity to the emotional-control masculine norm and psychological well-being among Chinese Men in Hong Kong: The mediating role of stress appraisal for expressing tender emotions. *Psychology of Men & Masculinity*, 16(3), 304–311. https://doi.org/10.1037/a0038578

#### **Notes on Contributors**

*Süleyman Kahraman*, PhD is a faculty member in the Department of Psychology at Istanbul Beykent University. He teaches various courses in psychology undergraduate and clinical psychology graduate programs. He specializes in gifted education, parent education, and adult education.

*Özlem Şener*, PhD is a faculty member in the Department of Psychological Counseling and Guidance at Bartin University. She is an expert in psychodrama and provides specialized support in the treatment of trauma and psycho-somatic disorders.

*Eylül Fatma Kaytaz*, MA is an independent clinical psychologist in Istanbul, Turkey. She is interested in depression, anxiety, panic disorder and OCD.

# ORCID

*Süleyman Kahraman,* https://orcid.org/0000-0002-8223-4614 *Özlem Şener,* https://orcid.org/0000-0002-0081-7374 *Eylül Fatma Kaytaz,* https://orcid.org/0000-0002-9496-8236