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David M. Frost, Phillip L. Hammack, Bianca D. M. Wilson, Stephen T. Russell, Marguerita Lightfoot, and Ilan H. Meyer

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The Qualitative Interview in Psychology and the Study of Social Change: Sexual Identity Development, Minority Stress, and Health in the Generations Study

David M. Frost
University College London

Phillip L. Hammack
University of California, Santa Cruz

Bianca D. M. Wilson
University of California, Los Angeles

Stephen T. Russell
University of Texas at Austin

Marguerita Lightfoot
University of California, San Francisco

Ilan H. Meyer
University of California, Los Angeles

Interviewing is considered a key form of qualitative inquiry in psychology that yields rich data on lived experience and meaning making of life events. Interviews that contain multiple components informed by specific epistemologies have the potential to provide particularly nuanced perspectives on psychological experience. We offer a methodological model for a multicomponent interview that draws upon both pragmatic and constructivist epistemologies to examine generational differences in the experience of identity development, stress, and health among contemporary sexual minorities in the United States. Grounded in theories of life course, narrative, and intersectionality, we designed and implemented a multicomponent protocol that was administered among a diverse sample of three generations of sexual minority individuals. For each component, we describe the purpose and utility, underlying epistemology, foundational psychological approach, and procedure, and we provide illustrative data from interviewees. We discuss procedures undertaken to ensure methodological integrity in the process of data collection, illustrating the implementation of recent guidelines for qualitative inquiry in psychology. We highlight the utility of this qualitative multicomponent interview to examine the ways in which sexual minorities of distinct generations have made meaning of significant social change over the past half-century.

Keywords: life story, narrative, stigma, prejudice, and discrimination, sexual minority, lesbian, gay, bisexual

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David M. Frost, Department of Social Science, University College London; Phillip L. Hammack, Department of Psychology, University of California, Santa Cruz; Bianca D. M. Wilson, The Williams Institute, University of California, Los Angeles; Stephen T. Russell, Department of Human Development and Family Sciences, University of Texas at Austin; Marguerita Lightfoot, School of Medicine, University of California, San Francisco; Ilan H. Meyer, The Williams Institute, University of California, Los Angeles.

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Correspondence concerning this article should be addressed to David M. Frost, Department of Social Science, University College London, Thomas Coram Research Unit, 27-28 Woburn Square, London WC1H 0AA, United Kingdom. E-mail: d.frost@ucl.ac.uk

The interview method has a long and distinguished history in qualitative inquiry across the social sciences (Platt, 2012). Interviewing has become increasingly widespread in psychology (Brinkmann, 2016), as qualitative methods have gained prominence in the discipline (Gergen, Josselson, & Freeman, 2015). More than simply providing an account of attitudes or experience, the interview represents a site of social practice in which meaning is made in the interaction between researchers and participants (Mishler, 1986; Potter & Hepburn, 2005). An approach that integrates multiple epistemologies acknowledges the coconstructed nature of the interview and capitalizes on the potential of this interaction to produce knowledge grounded in lived experience (Tappan, 1997).

Because of its ability to provide access to meaning making about lived experience in context, the qualitative interview affords the potential to study social change. That is, because the method calls upon individuals to make meaning of life events and experiences, it produces content that can be analyzed for its relation to larger cultural discourses and narratives (e.g., Hammack & Toolis, 2014, 2015b). The personal narratives produced through qualitative interviewing thus reveal the way in which individuals are in active states of navigating social and cultural change (Hammack & Toolis, 2014).

One area of considerable social change has been the meaning of sexual diversity and the rights accorded individuals who identify as sexual minorities (i.e., lesbian, gay, bisexual, queer, and other individuals who do not identify as heterosexual) in the United States, Western Europe, and some Central and South American countries. These developments (e.g., marriage equality for same-sex couples) highlight how social and policy changes create different environments for sexual minorities of different generations. It is clear that the coming of age of a sexual minority person in the United States in the 2010s is vastly different from, for example, that of a sexual minority person in the 1960s, when homosexuality was still criminalized and considered a mental disorder (e.g., Hammack, Frost, Meyer, & Pletta, 2018; Russell & Fish, 2016).

Despite the overall improvements in the social and political climate, inequalities in health based on sexual orientation persist, and sexual minority youth continue to experience high lev-

els of bullying and evidence high rates of suicidality relative to the general population (Meyer, 2016; Russell & Fish, 2016). Thus, important questions about the impact of social change on the lived experience of sexual minorities remain unanswered in the research literature. Are recent social changes translating to more positive lived experiences for today's sexual minority youth relative to older cohorts of sexual minority individuals? Does sexual identity matter less for young people who have more open-minded peers than it did for sexual minorities who came of age in less accepting times? To what extent do sexual minority youth experience prejudice and discrimination in a more progressive climate? Do contemporary sexual minority youth differ from older sexual minorities in the centrality they ascribe to a sexual minority identity (McCormack, 2013; Savin-Williams, 2005)? How should investigators aiming to study the lived experience of sexual minorities assess and adequately account for these shifting social environments?

This paper presents a qualitative approach to answering questions surrounding the lived experience of sexual minority individuals in the context of rapid social change. We use the term "lived experience" to generally refer to people's personal and subjective descriptions, perceptions, understandings, and interpretations of their own psychological and social experiences (e.g., Tappan, 1997). Specifically, the purpose of this article is to describe a methodological approach for understanding sexual identity development and minority stress in the context of social change as developed for and used within the Generations Study: a multisite, mixed methods study of sexual identity, minority stress, and health across three generations of sexual minorities in the United States. The methodological approach consists mainly of an interview protocol informed by multiple epistemologies and innovative in its integration of component methods typically used in isolation (i.e., lifeline methods, identity mapping methods, life story methods, and comparative temporal reflection). Through this integration, this new methodological approach is able to investigate generational differences in the experience of minority stress processes in tandem with identity development processes for the first time in a single study.

Sexual Identity and Minority Stress in the Context of Social Change

The minority stress framework (Meyer, 2003; Meyer & Frost, 2013; Meyer, Schwartz, & Frost, 2008) describes prejudice and stigma as stressors to which sexual minorities are exposed, which, in turn, have an adverse effect on their health and well-being. The minority stress framework outlines how prejudice and stigma lead to specific stress processes, including expectations of rejection, concealment of a stigmatized identity, internalization of negative beliefs about one's social identities, and experiences of discrimination (both acute events and chronic everyday mistreatment). Like all stress, minority stress processes create strain on individuals' ability to adapt to their environment and are therefore associated with decreases in mental health and well-being. Sexual minority individuals utilize a variety of resources located both in the individual (e.g., coping, mastery, meaning making) and the lesbian, gay, bisexual, and transgender (LGBT) community (e.g., connectedness, positive identity development, support from other sexual minority people), which build resilience that can reduce or eliminate the negative impact of minority stress on health (e.g., Bruce, Harper, & Bauermeister, 2015; Frost & Meyer, 2012; Meyer, 2015).

Because minority stress is a theory about socially embedded stress, historical shifts in the social environment should correspond with significant shifts in the experience of minority stress. Thus, if prejudice and stigma related to sexual minorities were reduced, we would expect a corresponding reduction in the experience of minority stressors. Not only could the level of stress exposure be changed, but also the types and quality of stressors could change with shifting norms and values. For example, internalized homophobia—a minority stressor—is related to the socialization of a sexual minority person in an environment that teaches prejudice and stigma about homosexuality and bisexuality (e.g., Herek, Gillis, & Cogan, 2009; Herek & McLemore, 2013). Both heterosexual and sexual minority people learn this as they are socialized. People who identify as sexual minorities are at risk of applying negative notions about being a sexual minority to their own sense of self, thus being exposed to internalized homophobia (e.g., Newcomb & Mustanski, 2010;

Puckett & Levitt, 2015). To the extent that socialization in a more positive social environment would reduce homophobic and biphobic prejudice and stigma, then there would be no, or reduced, internalization of such negative attitudes. In this example, because the underlying social environment has changed, internalized homophobia could be eliminated as a stressor.

The Shifting Social Environment of Sexual Minorities

Despite understandable concerns about possible setbacks in LGBT-inclusive public policy in the current presidential administration, the last two decades have nonetheless witnessed significant increases in positive attitudes toward and social inclusion of sexual minorities in the United States. For example, sexual minorities can now serve openly in the military and same-sex couples can now get married in all 50 states. Also, attitudes toward sexual minority individuals and same-sex couples have drastically improved, with most of the United States population supporting same-sex marriage for the first time as of 2014 (Pew, 2016). Acceptance of and positive attitudes toward sexual minorities is very strongly related to age, with younger people having more favorable attitudes than older people (cf., Frost, Meyer, & Hammack, 2015).

Improving attitudes toward same-sex sexuality and relationships among younger generations have led some researchers to contend that youth and emerging adult sexual minorities come of age in a "post-gay" era (e.g., McCormack, 2013; Savin-Williams, 2005). This research suggests that adolescents and emerging adults with same-sex attractions, desires, and behaviors are not as marginalized and stigmatized as older cohorts have been, and thus their sexual minority identity may be a less central component of their overall self, compared with the experience of sexual identity among older cohorts of sexual minorities. This research stands in contrast to other studies, which show that sexual orientation continues to be an important aspect of youth identity and overall sense of self (e.g., Cohler & Hammack, 2007; Russell, Clarke, & Clary, 2009). Further, in spite of a more positive climate for sexual identity diversity, young sexual minorities continue to experience minority stress (e.g., Baams, Grossman, & Russell, 2015) and to engage with

cultural discourses of stigma (e.g., Hammack & Cohler, 2011; Hatzenbuehler, 2017). There is little doubt that today many sexual minority adolescents and emerging adults are socialized in a radically different social environment than any previous generation (Russell & Fish, 2016). Consistently, studies have shown that the current cohort of sexual minority youth are coming out (i.e., disclosing their sexual orientation to important others) at increasingly younger ages (Floyd & Bakeman, 2006; Grov, Bimbi, Nanín, & Parsons, 2006; for review, see Russell & Fish, 2016).

Despite the overall improvements in attitudes toward same-sex sexuality and relationships, inequalities persist (Meyer, 2016). For example, federal law does not protect sexual minorities against employment discrimination. Also, sexual minorities continue to be victims of very high rates of antigay violence and bullying (Kann et al., 2016). Researchers continue to speculate that prejudice and related victimization underlie findings that sexual minority youth (regardless of gender) report higher rates of mental health problems, substance use, sexual risk, and suicidality than their heterosexual peers (e.g., Fish & Pasley, 2015; Marshal et al., 2011; Mohr & Husain, 2012; Russell & Fish, 2016). Thus, it is likely that sexual minority youth and emerging adults continue to experience stigma and victimization, navigating both a new, liberating narrative of “normality” regarding same-sex desire and an older narrative of stigma and subordinate status in the course of their development (e.g., Cohler & Hammack, 2007; Hammack, Thompson, & Pilecki, 2009; White, Moeller, Ivecic, & Brackett, 2018). Further, sexual minority youth of color and gender-nonconforming youth may experience changes in the social climate (or lack thereof) in importantly unique ways that are not accurately represented in the existing body of research evidence (Fine, Torre, Frost, Cabana, & Avory, 2018). Research on sexual identity and minority stress and resilience has not adequately assessed the role of the shifting sociohistorical context in the lives and health of sexual minorities and important variability within such experiences. As a result, many claims have been made about the importance of a sexual minority identity and the extent to which the current social climate for sexual minorities has indeed “gotten better” (e.g., Savin-Williams, 2016), which warrant

further rigorous research to fully investigate (Frost, McClelland, Clark, & Boylan, 2014; Hammack, 2018).

Intersectionality and Life Course Perspectives

In addition to historical consideration of the social environment, research on sexual minorities has yet to fully integrate intersectional and life course perspectives. Specifically, a life course perspective (Elder, 1998) allows for an understanding of how differences in the social and policy context, along with cohort-defining events (e.g., the Stonewall riots, the onset of AIDS, the repeal of “Don’t Ask, Don’t Tell”) shape the identities and lived experience of each generation differently. From a developmental perspective, a life course paradigm further concerns the complex interplay between social and historical context and individual development (Cohler & Galatzer-Levy, 2000; Hammack, 2005). Thus, specific generations of sexual minorities can be considered distinct based on differential exposure to cohort-defining events and other aspects of the social and political context that shaped the historical periods in which they “came of age” (Hammack et al., 2018). A life course perspective is essential to any attempt to directly investigate the degree to which the kinds of social and policy changes described above translate to differences in the lived experiences of the current cohort of sexual minority youth relative to previous generations.

Sexual minorities are diverse with regard to many characteristics including race/ethnicity, geographic region or residence, socioeconomic status, immigration status, and so forth, all of which shape their lived experiences. Intersectionality frameworks implore researchers pay attention to unique intersectional circumstances, especially related to sexual orientation, race/ethnicity, and gender (Cole, 2009; Crenshaw, 1991; McCall, 2005; Rosenthal, 2016; Stirratt, Meyer, Ouellette, & Gara, 2008; Warner, 2008; Wilson et al., 2010). For example, lesbian and bisexual Black women have unique experiences of identity, stress, and health associated with their sexual orientation, race/ethnicity, and gender that cannot be fully captured by considering race and gender categories separately (Bowleg, 2008). Researchers need to explore how multi-

ple social statuses shape the relationship among cohort, identity, minority stress, and health.

Although our focus was primarily on the development of sexual identity, we operate from a position that recognizes that sexual identity development and the experience of minority stress does not occur in isolation and is theoretically and analytically inseparable from other identities, including but not limited to gender and race/ethnicity. Further, as Bowleg (2008) argues, “. . . questions about intersectionality should focus on meaningful constructs such as stress, prejudice, discrimination rather than relying on demographic questions alone” (p. 316). Thus, there is a need for qualitative research to develop experience-oriented tools to examine intersectional experiences of what it is like to live minority stress as a person who is, for example, a young queer Latina woman, rather than simply striving to identify differences in the types and frequencies of minority stress across groups defined by age cohort, sexual orientation, race/ethnicity, and gender.

Examination of intersectionality has been previously achieved through the use of tools such as identity mapping, developed by Narváez, Meyer, Kertzner, Ouellette, and Gordon (2009) and Sirin and Fine (2007), which was designed to study the experience of minority stress at the intersection of various forms of oppression and stigmatized identities. Such tools for assessing these elements of intersectional experiences of oppression and minority stress have thus far been anchored in studies of specific temporal and geographic contexts and have yet to incorporate understandings of intersectionality with understandings of where such intersectional experiences occur within the life course. Conversely, qualitative approaches to understanding the development of identity across the life course, such as narrative life story methods (e.g., McAdams, 2008) and life-line drawing techniques (e.g., Gramling & Carr, 2004), do not explicitly include the kind of intersectionality focus advocated for by Bowleg and other methodologists operating from critical race, feminist, and queer theoretical and methodological perspectives (e.g., Bowleg, 2008; Cho, Crenshaw, & McCall, 2013; Crenshaw, 1991). Thus, in order to understand the complex diversity of lived experiences in sexual identity development and minority stress in the context of social change, a qualitative approach

is needed which combines component methods which have thus far been largely isolated in their use in psychological research.

The Generations Study

Following a life course approach to sexual identity development, individuals are understood to make meaning of their same-sex desire in the context of specific historical, cultural, and political contexts (Cohler & Galatzer-Levy, 2000; Hammack & Cohler, 2009). The words and narratives individuals have to understand and describe their desire are historically contingent (Hammack, 2005). Thus, a qualitative approach to access this meaning making directly is essential to document how sexual minorities engage with cultural narratives that shape their sexual identity development and experiences of minority stressors in the context of rapid social change and at the intersection of multiple social identities and statuses. The field still lacks an understanding of generational differences in the experience of minority stress processes in tandem with identity development processes. Research is needed to address these questions about the role of social change across the life span in sexual identity development and experience of minority stress, while taking into consideration intersecting identities and social statuses. Addressing these important but unanswered questions therefore requires an integrative methodological approach that is able to examine the complex interrelations of minority stress, social change, and sexual identity development.

We present one such approach developed by the authors who are coinvestigators in a national multiphase mixed methods research project called the Generations Study, funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development (Grant 1R01HD078526). All aspects of the research involving human subjects were approved by the Institutional Review Board (IRB) at University of California, Los Angeles, with which all other universities' IRBs involved in the study established a relying agreement. The Generations Study explored generation-cohort similarities and differences in sexual identity, minority stress and resilience, access to health care, and health outcomes. The study focused on three cohorts of sexual minorities in the United States.

The three cohorts were defined by the distinct nature of their social environments during two

critical periods of development: adolescence and emerging adulthood. The youngest generation was 18–25 at the beginning of our study in 2015. We refer to them as the *cultural inclusion* generation, as they experienced an improved social context for sexual diversity in which sodomy laws had been ruled unconstitutional and the cultural discourse had shifted to that of equality, leading to inclusion of sexual minorities in the military and equal access to legal marriage. Members of the *institutional advancement* generation were 34–41 years old at the time of our study and had experienced childhood and adolescence at the height of the AIDS epidemic, which disproportionately impacted sexual and gender minorities and led to the development of health organizations around the country that went on to aim to serve the broader LGBT communities. This generation was also the first to have greater access to resources through the Internet. LGBT people, in general, not just the gay men and transgender women who were disproportionately impacted by the epidemic, gained heightened public scrutiny and increased stigma and prejudice due to fear of HIV/AIDS but also greater political awareness and consolidation of LGBT community institutions (like health centers). Members of the *identity formation* generation were 52–59 years old at the time of our study and experienced the post-Stonewall environment, when homosexuality was considered a mental disorder and sodomy was illegal in many states but when the first Gay Pride event took place (in 1970) and a larger discourse of pride in sexual minority identity took hold in the LGBT community.

The qualitative approach of the Generations Study sought to address the following specific aims: (a) to describe similarities and differences among sexual minority cohorts in trajectories of the formation, expression, and experience of sexual identity; (b) to describe similarities and differences among sexual minority cohorts in trajectories of exposure to minority stress and resilience (availability of coping and social support resources); and (c) to describe similarities and differences among sexual minority cohorts in trajectories of utilization of health and social services and public health information. Reflected in the combination of these aims, the Generations Study was guided by both scholarly and practical goals. These goals include the advancement of social scientific knowledge about how social changes have shaped the experience of sexual identity de-

velopment and minority stress, as well as goals to inform interventions and policy change directed at improving the health and well-being of sexual minority individuals, who continued to experience health inequalities relative to their heterosexual peers (Meyer, 2016).

The Qualitative Interview: A Multicomponent Approach

Links Between Paradigm, Epistemology, and Method

The scholarly and pragmatic aims of the Generations Study required an approach to qualitative inquiry which can best be categorized as operating within a paradigm of methodological pluralism and emphasizing paradigmatic complementarity (see Madill & Gough, 2008, for a discussion of qualitative paradigms within psychology). Specifically, our aim was to examine participants' accounts of their lived experiences through the combination of multiple methodological components and the accumulation of multiple researchers' perspectives in the design of the study and collection of data aimed toward achieving scholarly and practical purposes (Madill, Jordan, & Shirley, 2000). The epistemological positions underpinning the design of the qualitative approach can be best described as straddling elements of constructivism and pragmatism. Namely, the approach stems from constructivism in its emphasis on narrative and lived experience and that it did not assume a knowable truth or an "objective" reality of lived experience to exist, but rather that idiographic and subjective meaning of participants' experiences could be examined through one-on-one engagement in research interviews (e.g., Ponterotto, 2005). Elements of pragmatism shaping our approach are evident in our implementation of a diversity of methods and the accumulation of multiple researchers' perspectives for both scholarly and practical purposes (Madill et al., 2000), such as informing social and health policy. As noted in recent guidelines for designing qualitative research, these epistemological positions need not be considered mutually exclusive (Levitt, Motulsky, Wertz, Morrow, & Ponterotto, 2017).

This paradigmatic and epistemological position required a semistructured interview protocol that was open enough to provide storied

accounts of lived experience reflective of narrative meaning making processes, as well as specific content-oriented questions about phenomena central to the aims and research questions of the study (e.g., sex and sexual cultures, community, stress and coping, access to health care). Thus, the instrument included general questions about key events and trajectories in participants' general life stories, as well as specific questions about same-sex desire awareness, sexual experiences and sexual identity development, and minority stress experiences, including stressful life events related to sexuality, experiences with stigma and expectations of discrimination based on sexuality, internalized homophobia, and perceptions of relationships between sexual minority stress and the structural and cultural dimensions of other social statuses (e.g., race/ethnicity, gender, rural residence). Given the focus of the study on identity development and individual-level meaning making of experiences of minority stress, the design of the study involved individual one-on-one interviews (rather than, e.g., focus groups). Interviews were conducted by trained interviewers and lasted, on average, between 2.5 and 3 hours.

Qualitative Interview Protocol

The interview protocol (provided in the online supplemental materials) was organized in eight sections. The course of the interview was designed to progressively narrow in scope from the opening section which was the broadest and most unstructured (i.e., the life story) to the most specific content-focused sections nearing the end of the interview (e.g., health care utilization). The narrowing scope of the interview allowed for constructs relevant to the study (e.g., minority stress, coping) to emerge naturally within the participants' discussion of their overall lived experience initially, with opportunity to obtain more specific accounts of such experiences later in the interview, as opposed to using the focal constructs of the study to guide the course of the interview from the start.

We present each section of the interview protocol below along with a discussion of the conceptual purpose, epistemological foundations, methodological intent, and exemplar data excerpts to illustrate the section's utility. Table 1 provides an overview of the interview components and summarizes these linkages. It is im-

portant to note that the data exemplars are included for the purpose of illustrating the methodological utility of the approach and the richness of the types of data that emerged from the interview: The data presented are in no way intended to reflect the full range of study findings. The sections are presented in the order in which most interviews progressed. However, interviewers were given the freedom to change the order of the sections when warranted by the natural flow of conversation with participants.

Lifeline. The first section of the interview was designed to obtain a broad sense of participants' life stories and overall life trajectories. Specific experiences around the focal constructs of the study could be contextualized in later sections. To facilitate this, we used two established qualitative tools to elicit life story narratives: lifeline drawings and the Life Story Interview (LSI).

First, participants were asked to complete a lifeline drawing activity. Lifeline techniques have been used in life course and developmental research to obtain visual depictions of events and transitions that constitute individuals' understandings of their own life histories (e.g., de Vries, LeBlanc, Frost, Alston-Stepnitz, Stephenson, & Woodyatt, 2017; Gramling & Carr, 2004; Hammack, 2006). Informed by both life course and life events traditions (e.g., Elder, 1998), lifeline tools reveal important moments of continuity and change within the life course and provide the foundation for discussion of the social and historical circumstances that shape the life course trajectory (de Vries et al., 2017). In the present use, participants were asked to:

Please draw a line that represents your life. The line should begin when you were born, go to today and then continue into your future. The line should go up when it was a good time in your life and down when it was a bad time in your life. Take a few minutes to think about your life and draw the line, and when you are finished we can discuss it.

Participants were provided with the visual tool, included in Figure 1, on which they could draw their lifeline. After participants completed their drawing, interviewers asked participants to briefly describe why they drew the line the way they did (e.g., "Why did you start off the line at a high point?"; "Why did the line change directions here?").

The example lifeline provided in Figure 1A comes from a 24-year-old Latino gay man.

Table 1
Linkages Between Epistemology, Method, and Utility Within an Integrative Qualitative Approach

Interview component	Purpose and utility	Epistemology	Foundational psychological approach	Procedure
Lifeline	Obtain a broad sense of participants' life stories and overall life trajectories; obtain visual depictions of events and transitions that constitute individuals' understandings of their own life histories	Pragmatism	Life course	Lifeline drawing activity
Life story	Explore identity development through a constructed life story narrative; understand broader life history as context for discussion of specific lived experiences in subsequent sections	Constructivism	Life course and narrative	Adapted life story interview
Identity mapping	Provide participants with a space to describe their identities in their preferred terms and as they relate to one another; elicit detailed discussions of identities and how they relate to one another in the context of a focal lived experience	Pragmatism	Intersectionality	Identity map of social identities and communities
Lived experiences of: Sex and sexual cultures challenges, stress, and coping; social and historical change	Obtain understandings of focal aspects of lived experience in the context of different points in the life course (i.e., adolescence and puberty and at the present time); understand experiences and meanings of continuity and change over time	Constructivism	Life course and narrative	Comparative temporal reflection
Healthcare utilization	Understand participants' perceptions of, barriers to, and ways of engaging with health care; perspectives on LGBT-specific healthcare providers	Pragmatism	Behavioral model of health service use	Descriptive interview
Reflections and goals	Account for imagined futures within a life course framework; end the interview in a positive discussion	Constructivism	Life course and narrative	Comparative temporal reflection

Note. This table describes the primary elements shaping each section of the interview. However, the entire interview protocol was informed by a blending of life course, narrative, and intersectionality approaches, and thus no section was exclusively informed by a singular approach. LGBT = lesbian, gay, bisexual, and transgender.

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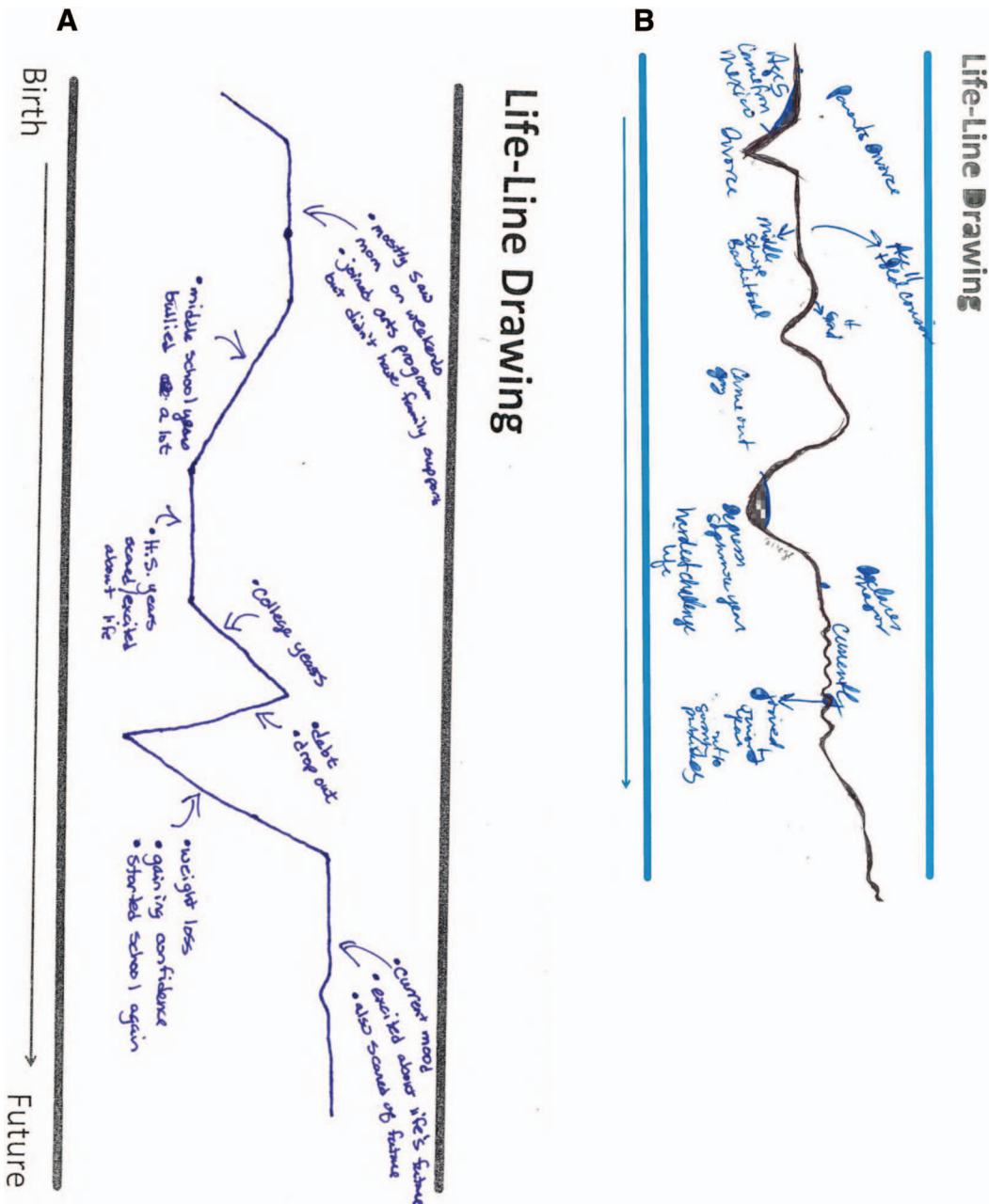


Figure 1. Example lifeline drawing. See the online article for the color version of this figure.

His line illustrates several ups and downs in life, including early childhood bullying and problems with family, financial trouble and dropping out of college, followed by turning points characterized by weight loss, confi-

dence gain, and reenrolling in school. His line also notes a generally high (positive) interpretation of the present but flat trajectory headed toward the future, which he characterizes as exciting but also anxiety provoking.

A contrasting example can be seen in Figure 1B, the lifeline of a 21-year-old Latina lesbian woman. Her lifeline also can be characterized by several ups and downs, starting with immigrating to the United States from Mexico when she was 5, through parental divorce, depression, and declaring a major in college. In contrast to Figure 1A, this woman's lifeline ends in a positive upward trajectory anticipating a better future compared to her past and present.

Grounded in epistemological concerns relating to pragmatism, this section of the interview served several purposes. It provided participants with a "settling in" activity that served to build rapport with the interviewer. It provided the interviewer with broad context for how the participants viewed their overall life trajectory and key events and transitions within that trajectory. It provided a visual sketch of participants' life trajectories that could be referenced in subsequent discussions and used later for formal analysis using narrative analytic methods (Lieblich, Tuval-Mashiach, & Zilber, 1998). Finally, both the lifeline and discussion of its construction provided key data used to frame the following life story segment of the interview.

Life story. Following the creation of the lifeline, the interview employed central elements of the LSI, a flexible protocol commonly used in personality and social psychology to explore identity development through a constructed life story narrative (McAdams, 2008). Modified versions of the LSI have been used successfully with diverse populations, including sexual minorities (Frost, 2011; Hammack & Cohler, 2011). The portion of the LSI employed here inquired about participants' critical life events, social influences, and values. Specifically, interviewers framed the LSI by telling participants:

Now, I'd like us to focus on a few key events that happened to you in your life. For each event, please describe what was happening, where you were, who you were with, and what you were thinking and feeling at the moment.

Participants were asked to talk about their first memory, a high point in their life, a low point in their life, and a turning point. For example, the Latino male participant (Figure 1A) identified the death of his aunt and cousin while he was in university as a low point, and a recent moment when he became financially stable and able to

emerge from debt as his high point. In contrast, the Latina female participant (Figure 1B) identified her graduating high school as the high point in the life story, while her low point was a moment a few weeks before the interview in which she felt like she was "going into a depression," having experienced "a crash" of negative emotions after being questioned by members of her family regarding her sexual orientation.

At no point during this broadest section of the interview were participants asked specifically to talk about sexual identity or minority stress, unless they brought up the topics themselves. However, the lifeline and life story, and associated narratives, were used to anchor specific events and discussions of sexual identity and minority stress in participants' broader life histories when brought up in the following content-specific sections of the interview.

With its roots in narrative and constructivist epistemologies, the LSI provided data that was useful in understanding the meaning of significant events in participants' life histories via processes of narrative (re)telling. Specifically, this portion of the interview provided access to the spontaneously constructed personal narrative of the interviewee. Narrative psychologists view the personal narrative as a source of coherence, continuity, and meaning making (e.g., Cohler, 1982; Hammack & Toolis, 2014; McAdams, 1990, 1997). The personal narrative is especially significant for those who experience adversity or discontinuity in the anticipated life course (Cohler, 1991; Hammack & Toolis, 2014), which describes the likely experience of sexual minorities who are socialized in a context of heterosexism and presumed heterosexuality (Herek & McLemore, 2013). This portion of the interview allowed us to apply an interpretive, hermeneutic approach grounded in constructivist epistemology to the way in which our participants made meaning of significant life events. We were especially interested in the way in which events related to sexual identity development or the experience of sexual minority status might appear in the personal narrative absent specific prompting for such events. This approach allowed us to examine generational similarities and differences in the centrality of a sexual minority identity to the general life story and thus to

address one of our central research questions about social change and the meaning of a sexual minority identity.

Identity mapping of social identities and communities. To shift the discussion from participants' general life histories to specific aspects of their social identities and community memberships, the interviewer guided participants through an identity-mapping activity and discussion. Identity-mapping activities have been successfully employed in previous research designed to elicit detailed discussions of multiple personal and social identities and how they relate to one another in the context of a focal lived experience (e.g., Cruwys et al., 2016; Narváez et al., 2009; Sirin & Fine, 2007). Specifically, participants were presented with the visual tool included in Figure 2. They were asked to use that tool:

as a starting point for listing the identities and roles that describe who you are. You can write words or phrases that represent different aspects of yourself. These

might include social identities or labels related to gender, race, sexuality, class, occupation, different roles in your life, or any words or phrases that describe you.

As visible in the identity map provided in Figure 2, a 38-year-old Pakistani man includes several identities pertaining to his sexual orientation (queer), race/ethnicity (Pakistani, South Asian, POC), gender (cisgender male), as well as identities related to immigration, socioeconomic status, and health. He also notes identities related to his political views (e.g., progressive, activist) and his being a survivor of past abuse.

Given the present study's interest in intersectionality as it relates to the experience of sexual identity development, gender, and race/ethnicity in particular, the following discussion of participants' identity maps focused on these core identities and their intersections. If participants did not spontaneously list something for each of these core identities, the interviewer prompted them to consider whether they would

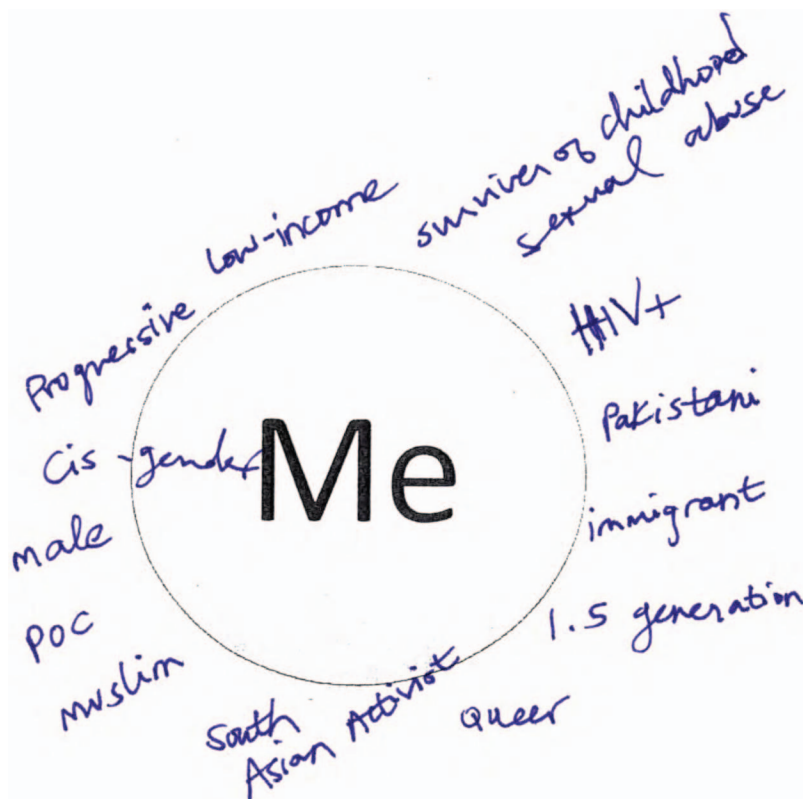


Figure 2. Example identity map. See the online article for the color version of this figure.

like to include them on their maps (e.g., “I noticed you did not include anything about your gender on your map . . .”). Such prompting was more often needed among those with typically privileged or dominant social identities that are often taken for granted in everyday life (e.g., male gender, White race/ethnicity). To prompt participants to reflect on their experiences of their intersecting core identities, interviewers asked participants a series of questions repeating versions of the following adaptable prompt for the possible intersections: “Tell me about your experience of being [SEXUAL IDENTITY] in the [RACE/ETHNICITY/GENDER] community.” These prompts were designed according to Bowleg’s (2008) recommendation that, in order to best assess intersectionality experiences, researchers should ask about them directly.

This direct discussion of intersectional identity experiences is reflected in the following experience of a 54-year-old Chinese gay man:

I feel sometime a double discrimination in both community . . . I think I didn’t come out to my family for the longest time, just because I hear these horror story about, especially in the Chinese culture, and probably lot of different culture can relate to it, that family’s very important, and that you do not wanna disgrace your family. I just felt like they would disown me, and they would be ashamed of me. . . . Then, being a Chinese gay in the gay community, . . . I do not feel really totally accepted in the [gay community]. . . . I do not consider it as my community. I always felt angry at people that said oh, “I’m only attracted to White guys only, or I’m only attracted only Asians.” Then I do not want that, either, because I want people to like me for how I look.

As this excerpt from one interview reveals, this section of the protocol elicited narratives of intersectionality to capture the diversity of lived experience among sexual minorities typically unrepresented in traditional quantitative research.

In line with constructivist epistemological foundations, additional questions in this section of the interview focused on how participants see themselves in terms of masculinity and femininity in their gender expression, as well as what communities they feel they belong to and what it is like to be a member of such communities. Just as the life story section provided a life course anchor for specific events and experiences discussed later in the interview, the identity map served as a general sketch of iden-

tity intersections that interviewers returned to in discussing specific experiences related to sexual identity, race, and gender later in the interview. Thus, this section was designed to fulfill pragmatic epistemological goals not only for giving the participant an opportunity to nominate and describe their identities in their own words, but also providing additional foundational data for orienting the subsequent temporal reflective discussions.

Sex and sexual cultures. Next, the interviewer turned the discussion to more narrowly focus on specific types of lived experience within specific life domains. The first of these more specific discussions focused on participants’ “sex life and relationships.” In this section, participants were asked to discuss their experiences of sex and relationships, including how they felt about sex and relationships, how they went about finding partners, and the things that both excited and worried them about sexuality.

Interviewers guided participants through these discussions using a series of questions designed to elicit comparative temporal reflection. Stemming from constructivist perspectives, these discussions were designed to explore the meanings participants give to their lived experiences and how they viewed their own lived experiences staying the same or changing across various ages and developmental periods. The guided discussions involving comparative temporal reflection were designed to avoid imposing an expectation of change, further allowing participants the freedom to describe and interpret the meaning of their lived experiences as stable or changing throughout the life course.

To illustrate this process of comparative temporal reflection, participants were asked to describe their sex life and relationships during adolescence and puberty and at the present time. Participants were asked to reflect on how aspects of their sex life and relationships have changed or stayed the same between puberty and adolescence to the present. If they described changes over time, interviewers prompted them to discuss why they thought the changes had occurred, the ages the changes had occurred, and specific life events or social factors that may have precipitated changes. Participants were also asked to relate their discussions to the

identity map and locate them in relation to other events on their lifelines and in their life stories.

For example, in the following exchange, a 36-year-old Black woman discussed how the ways she looks for sexual and relationship partners have changed as she has gotten older, especially now that she has a child from a previous relationship. She reflected on the role that the Internet now plays—both positive and negative—in her search for sexual and relationship partners, along with her changing needs/desires from a partner.

Interviewer: How about the ways with age, what's changed in the ways you go looking for sex, in the kinds of things you're looking for in a relationship?

Interviewee: The kind of things I'm looking for? Nobody wants stability. . . . Nobody wants somebody with kids. That's number one. [chuckles] Or, they're young and they want kids. I'm like, "My eggs are powdered." [chuckles] . . . As far as sex, my sex drive has not changed since I was 15 . . . The sex is not an issue. . . . Just relationship.

Interviewer: How about the way you go about finding it? Where did you find your relationships before? How did you find [previous partner]?

Interviewee: Online. . . . Internet makes it a lot easier, but also Internet makes it a lot harder, because . . . It's all about looks. . . . Going out in person, looking for relationships . . . is hard, because I do not look like a lesbian from what I've been told. I've had to kind of learn to step up and be the aggressor.

As this excerpt reveals, in this section of the interview we were able to elicit narratives of sex and sexual culture in both the remembered past

and the experienced present. This excerpt reveals the ways that changing personal motives for sex and relationships can be both facilitated and frustrated by elements of one's sexual culture (e.g., online dating, community standards of attraction, gender roles). Interviewees provided rich data on understandings of intimacy and sexual minority communities that revealed the ways in which radical social change—in this case, coupled with technological change—over the past half-century impacted their understandings of identity, community, and sexual practice.

Challenges, stress, and coping. Again involving comparative temporal reflection, the fifth section of the interview contained questions about challenges and stressors in participants' lives and how they coped with them. The opening questions focused on participants' "single greatest challenge in life," how they "handled" that challenge, and how this challenge impacted them "as a person." Participants were asked to locate the challenge on their lifeline to contextualize it within the broader scope of their life course development. This discussion was not focused on sexual orientation or minority stress. Indeed, we asked about "challenges" to avoid guiding participants to narratives of stress and pathology, allowing the participants' narratives to take a natural form. This approach allowed us to document the degree to which participants' most challenging and stressful life experiences came about, were shaped by, or involved minority stress, without explicitly prompting about sexual minority status.

After the general discussion of challenges, questions focused on participants' experiences of minority stress and coping directly. Participants were asked if they experienced any challenges in their life specifically related to being a sexual minority person (the interviewer used the sexual identity label from each participant's identity map). For any event that participants recalled, they were asked to narrate what happened, who was involved, how they felt about the experience, and how they coped with the experience. These prompts were used to produce an account of the experience with a clear narrative trajectory and evaluative frame. Participants were also asked to reflect back across their lives and discuss any times they struggled to

accept themselves as a sexual minority person and times when they had to negotiate being out and concealing their sexual identities. This section also included an opportunity for participants to reflect on the question, “in your day-to-day experiences, do you feel that society is accepting of you and other LGB people?” and whether or not their perspectives on societal acceptance have changed over time.

The following exchange between an interviewer and a 22-year-old Asian man illustrates the kinds of narratives elicited in this section. The participant described challenges in accepting himself as gay during adolescence and how it has remained a challenge throughout his life:

Interviewee: When I was a kid, I did—I was a Boy Scout. I was on the swim team. I also did martial arts. I had a lot of very stereotypically masculine things. It was sort of okay for a while. Then I began to see small tinges of homophobia from time to time. Every single time, when I would see it, I would make a mental note of, “Prob’ly should not tell you.” Because you’ll have some offensive—they’ll shout out a homophobic slur. . . . When in other cases, for instance—a few years ago, actually, I was working with a project with a friend. . . . He said that he would not be comfortable with changing in front of me. I’ve known this guy for about three years. When he said that I was taken aback, because I told myself—I said, “Why am I friends with a bigot? Why is he the—the implicit homophobia? Why am I getting this from him?”

Interviewer: He knew you were gay and made the comment?

Interviewee: He knew I was gay, and then he made the comment. Which is, I would say, is even worse. . . . It reminds me to be very careful with my identity. Because there have been certain times when I’ve felt that if I were to share that bit of my identity, I would be unsafe. There have been a few times here or there. There are very few straight men that are truly comfortable with me. . . . There are certain people that stick out to me where just—no, it is not safe. It’s just feeling—being excluded from that community. From the greater community.

In addition to illustrating his struggle to feel fully included in society, this participant’s narrative illustrates experiences of prejudice and the cognitive burden and stress associated with managing concealment, which can be both psychologically damaging and protective (e.g., a cognitive burden of secret keeping, which can sometimes help to avoid prejudice and discrimination; Meyer, 2003).

This section of the interview ended with a discussion of participants’ use of coping strategies and access to social support available to help them deal with general challenges and challenges related to minority stress. Specifically, they were asked “what types of things helped you deal with challenges and negative experiences you’ve had related to being (sexual identity label)?” As in previous sections, participants were asked to reflect on whether or not their coping strategies and access to support have remained the same or changed over the years. Given the role of community connectedness as a coping resource in the minority stress experience (Frost & Meyer, 2012; Meyer, 2003), participants were also asked to reflect on the extent to which they utilized sexual minority community resources (e.g., an LGBT center) or services targeted to sexual minority communities.

Interpretations of social and historical change. Again utilizing comparative temporal reflection methods, the next section of the interview focused on participants’ memories of

historical events, cultural moments, and social representations of sexual minority people and issues. Participants were asked: “Can you tell me about your memories during puberty and adolescence about what was happening in society with regard to LGBT issues?” They were then prompted to reflect on how LGBT issues were talked about in the wider society at this time in their lives, from whom and where they heard LGBT issues discussed, and what they felt and thought about such mentions when they occurred. They were then asked to reflect on how LGBT issues are discussed today, and what they feel and think about such discussions.

Illustrating both perceptions of a shift in cultural discussions of LGBT issues, as well as the persistence of stigma in the dominant narratives that are told about the LGBT community, the following younger Black genderqueer person’s narrative illustrates the value of directly interrogating participants’ perceptions of social and historical moments and how they shape lived experiences of sexual identity and minority stress:

Interviewee: I do not remember—yeah, my hometown was not—so I didn’t have—I didn’t have super great Internet access all the time, as a kid. Or growing up, I didn’t—our computer was really shitty and was not super great. Yeah, local media didn’t report on it. People didn’t talk about it.

Interviewer: How about now? What do you see as major issues today, with regard to LGBT people?

Interviewee: The murder of trans people I guess I’d include in that group, but also just homeless youth that are lesbian, gay, bi, queer youth that are homeless because they couldn’t stay where they lived, out of either because they weren’t accepted or violence happened or assault happened, I think is really intense and a lot

more prevalent than a lot of people would realize. Yeah, and it’s not always super safe out there.

As this excerpt reveals, this section of the interview provided the opportunity for participants to offer their own interpretations of the social context of sexual identity development and minority stress at two points in their development—during adolescence (a critical period for identity development; Hammack & Toolis, 2015a) and today. Notably, this participant reported not hearing much in the news about sexual minority people when growing up, but they remembered having access to a “space” that was accepting. They further noted a recognition of violence against trans people as characterizing the social and historical events shaping the present climate surrounding sexual minority lives. These narrative accounts allow us to examine diversity in how members of different generations have interpreted the social and historical changes for sexual minorities over the past half-century. They also allow us to examine generational differences in interpretations of the present social and political context for sexual and gender identity diversity.

Health care utilization. Given the focus of the broader study on health and health care utilization, the last major section of the interview contained very specific questions about experiences of seeking and receiving care related to mental and physical health. Participants were asked to discuss where they go when they need care, including whether they go to or would prefer to use LGBT-specific health care providers. They were asked about their last experience seeking health care and specific aspects of that experience. Interviewers also prompted participants to discuss deterrents to seeking health care, how open they are about their sexual identities in health care contexts, and whether they have ever sought care for reasons related to sexual identity or gender expression.

To illustrate the types of narratives elicited by this section of the interview, the following example from a 39-year-old White woman exemplifies the complexities of navigating minority stress in health care contexts:

Health care's harder to navigate in many ways. I feel like I end up making choices around what's good for my lymphedema. Then secondary is, "Are they queer-friendly?" My GP, not particularly queer-friendly. In fact, on my—I can tell that she's a little horrified that I'm poly on my diagnosis form for my last annual. One of the things she put was "high-risk bisexual activity" as one of my diagnoses. I do not know how you get treated for that, [*laughs*] but I was pretty horrified, because I'd been with one man my whole life, right?

Noting how her identification as polyamorous on her medical records resulted in her provider's assumption that she was engaging in high-risk sexual behavior, this participant's narrative provided a critical experiential window into the health care experiences of sexual minorities. Given that she has a serious health problem, she noted she must privilege her seeking care for this over seeking care that is LGBT-affirming.

This portion of the interview was primarily rooted in pragmatist aims. Following from the behavioral model of health services use (Martos, Wilson, Gordon, Lightfoot, & Meyer, 2018), it was designed to understand and document participants' preferences for certain types of health care provision and allowed us to obtain data on the health care decisions and challenges associated with potential minority stressors in health care settings.

Reflections and goals. In order to (a) account for imagined futures within a life course framework, and (b) end the interview in a positive discussion (given that the last few sections of the interview were primarily focused on negative experiences), the last section prompted participants to discuss their goals for the future. They were asked to look back at their lifeline and tell the interviewer about their goals for the future regarding work, relationships, and family life. Finally, they were asked to consider their entire lifeline, and reflect on what they thought has been the most positive aspect of being a sexual minority (interviewers used participants' preferred sexual identity labels).

The following excerpt from a 25-year-old Black woman provides an illustrative response to these final questions of the interview.

Interviewer: Finally, looking back over your life, what would you say has been the most positive aspect of being bisexual?

Interviewee: The struggles. It forces you to be accepting, I think, because I do not feel like anyone who has this type of sexual orientation is any different from anyone else who is heterosexual. I think that other people would want to treat you like you're different. I feel like it forces you to be able to express yourself and be able to be open-minded enough to accept that everybody's not gonna accept your sexuality. You can still help them to understand you as a person, as much as they will allow. If you can be patient enough to help other people see that you're just another person, and you just want to be respected as just that, then it makes you pretty strong.

As this excerpt reveals, this final section of the interview provided the valuable opportunity for participants to narrate their future life goals and to consider the positive value of a sexual minority identity. It also illustrates the concepts of resilience and stress-related growth, noting struggles associated with being a sexual minority person, but also the strength derived from such experiences.

Methodological Integrity

The Generations Study's methodological approach strived to achieve methodological integrity throughout the process of data collection. In doing so, we follow the recommendations for promoting methodological integrity offered by Levitt and colleagues (2017). Specifically, we highlight how aspects of sampling, interviewing training, and quality assurance were implemented to enhance fidelity to the substantive focus of the study and utility of the methodological approach to achieve the study's aims and purpose.

Sampling was central to achieving the aims of the study and allowing sufficient representation and diversity of lived experience to reflect the

study's conceptual foundations in minority stress, life course, intersectionality, and social change. For example, many qualitative studies focus on one geographic area and lack the ability to compare across locations, potentially missing important diversity in lived experiences. To address this issue, we recruited participants from culturally distinct geographic regions of the country. Each site had a catchment area of 80 miles, which included urban and nonurban areas. Based on the study's foundations in intersectionality and life course perspectives, we used quota sampling to ensure roughly equal representation of participants across age cohort, gender, and racial/ethnic groups. Obtaining a diverse sample also contributes to the study's potential to achieve a high degree of one form of generalizability in qualitative research—transferability (Polit & Beck, 2010). Combined with thick descriptions of the data and study design, ensuring recruitment of participants from several core social status groups relevant to the phenomenon under study increases readers' understandings of whether and under what conditions various findings may reflect the experiences of people not included in the study directly.

Several procedures were established to achieve consistency in the interviews across the four study sites and to ensure the data collected were sufficiently rich in detail pertaining to content and narrative reflection. First, interviewers from each study site met in person, were trained on the interview protocol, and conducted mock interviews. All investigators in the study listened to the mock interviews for each interviewer and provided feedback until interviewers were deemed ready to begin interviewing. Interview quality and consistency were assured through weekly in-site meetings between interviewers and the lead investigator at each site. In addition, online meetings among all interviewers across the sites took place biweekly using video conferencing software. Different reflexive and engagement exercises were conducted. The purpose of this engagement in reflexivity and positionality was to recognize and manage the role of researchers' perspectives in the data collection process, to maintain consistency in the implementation of the interview protocol, and to continue to hone the skills of the interviewers (Barry, Britten, Barber, Bradley, & Stevenson, 1999).

Discussion and Conclusions

Interview methods are increasingly common in qualitative psychology (Brinkmann, 2016), but few interview studies specify the purpose, epistemological grounding, theoretical foundation, or procedure associated with their protocol. With greater attention to methodological standards in qualitative psychology, there is a need for greater specificity of protocols and practices to ensure integrity and fidelity in the data collection process. Our aim was to provide a model for qualitative inquiry that can address this need.

In presenting the methodological approach utilized in the Generations Study, our goal was to highlight the unique potential for a qualitative approach—employing life course, narrative, and intersectionality perspectives through a combination of component methods previously used in isolation from one another—to provide a rich and nuanced understanding of the complex lived experiences of diverse sexual minority individuals in the context of social change. At the center of this methodological approach is a novel multicomponent interview protocol, the first to integrate life-line methods, life story methods, identity mapping methods, and comparative temporal reflection about personal identity, social change, minority stress, and health. Through this integration, this new methodological approach was able to investigate generational similarities and differences in the experience of minority stress processes in tandem with identity development processes for the first time in a single study. This approach also achieves an understanding of the experience of sexual identity and minority stress at the intersection of multiple social identities and forms of oppression related to sexual orientation, gender, and race/ethnicity, rather than falling into the methodological “trap” of using simplistic additive combinations of demographic characteristics as a proxy for an intersectionality approach (Bowleg, 2008).

To understand how social change has shaped the lives of sexual minority individuals, research needs to directly investigate generational differences in lived experience of sexual identity development and minority stress. The life course (e.g., Elder, 1998; Hammack et al., 2018) and intersectionality perspectives (e.g., Bowleg, 2008; Cole, 2009; Crenshaw, 1991) highlight the importance of understanding sexual identity development in relation to sociohistorical context and focus on

how variability in lived experience exists within unique intersections of age cohort, gender, race/ethnicity, and geographic location (McCall, 2005; Stirratt et al., 2008; Warner, 2008; Wilson et al., 2010). The qualitative approach we presented reflects these theoretical and methodological foundations, and as a result is positioned to address gaps in existing knowledge about how social change has shaped the lives of sexual minority individuals (e.g., Frost et al., 2015; Hammack, 2018; Meyer, 2016).

The general approach utilized in the content-specific sections of the interview protocol prompted participants to reflect on specific events or experiences in adolescence relative to their present experiences and the changes they see over their lives. This methodological strategy was designed to directly interrogate developmental trajectories and changes throughout the life course, along with the meanings and explanations of such trajectories. Furthermore, because each participant was asked to provide such reflection, regardless of their present age cohort, the resulting dataset as a whole allowed for generational comparisons in experiences (during the same historical period, but different ages), as well as for all individuals when they were in adolescence (same age, different historical period).

The novel structure of the interview protocol, along with the purposive sampling strategy, allows for between-cohort analyses in the study's aims to answer nomothetic research questions focused on group differences. Additionally, the intraindividual developmental reflections discussed previously allow for change analyses oriented toward answering idiographic questions focusing on individual persons and the nuances of their lived experience. Thus, the qualitative data obtained within the present approach allows for an examination of the broader aims relating to the role of social change in the experience of sexual identity development and minority stress with a direct analytic window into the role that social change plays in these experiences. The data exemplars included in this methodological paper were intended to illustrate the utility of this approach and analytic potentials emerging from its use. However, it is important to reiterate that the data presented in the paper are for illustrative purposes only and do not reflect the breadth of findings of the Generations Study.

In addition to understanding the role that social change has played in the lives and well-being of sexual minority individuals, data produced from the present qualitative approach is intended to be useful within policy making and social change efforts (Gergen et al., 2015). Specifically, the qualitative data in the Generations Study has the potential to illustrate how social policies have potentially both restricted and facilitated development of positive sexual identities and shaped the experiences of minority stress throughout the target generations' lived experiences. Qualitative data, particularly in the form of narratives, has the potential to illuminate the intersection of lived experience and the social influence of structural factors such as cultural attitudes and social policies (e.g., Frost, 2018; Frost & Ouellette, 2004, 2011). Given sexual minorities continue to experience social and health inequalities due to their stigmatized social status (Meyer, 2016), there remains a need for data on how the shifting social climate shapes their identities and lived experiences, in both negative and positive ways.

We recognize that this study is potentially unique in terms of its scope and scale, and not all qualitative researchers interested in similar questions will have access to the same amount of resources for staffing and sampling that the Generations Study had as a result of its federal funding. However, the possibilities produced by the integration of the various component methods (i.e., lifeline drawing, LSI, identity mapping, narrative reflection) will likely prove useful to researchers who desire the ability to simultaneously understand intersectional identity development and social change by using a single interview protocol. Thus, we intend this integrative aspect of the present methodological approach to be adaptable for future research. Similarly, the processes undertaken to promote methodological integrity in the form of fidelity and utility can serve as useful illustrations of such processes (Levitt et al., 2017) and hopefully prove useful in other team-based qualitative research projects.

The qualitative approach utilized in the Generations Study is not without its limitations. As a result of the scale and collaborative nature of the research, a significant amount of effort was needed to train interviewers and engage a team of researchers across the country in simultaneous data collection efforts, thus posing a chal-

lenge to consistency in data collection. As described above, several procedures were implemented to address these concerns and promote methodological integrity, but these may not be possible in smaller scale projects. Further, the scope of the work required a significant amount of burden on the participants and researchers, both in terms of time investment and willingness to engage with emotionally difficult topics in a high degree of depth in the interviews. For these reasons, the degree to which the current approach can be useful in achieving similar aims with a smaller sample remains a question.

Despite these limitations, the success of the Generations Study in achieving its aims hinges on its nuanced and multifaceted qualitative approach. Namely, the insights produced from this approach will allow for an understanding of the ways in which social change has shaped the lived experience of three diverse cohorts of sexual minority individuals through the application of life course, narrative, and intersectionality perspectives. This article outlined the qualitative approach utilized to examine the impact of social change with the hope that it can be usefully adapted for other researchers in need of tools to assess the impact of social change on the lived experience of sexual minorities or other populations of people who face the challenge of identity development within rapidly shifting social environments. By combining life course and intersectionality frameworks, along with multiple qualitative methods that allow for a variety of analytical potentials, we hope this integrative qualitative approach will prove valuable in such socially engaged qualitative research efforts.

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