

# INTERSECTIONAL EXPERIENCES, STIGMA-RELATED STRESS, AND PSYCHOLOGICAL HEALTH AMONG BLACK LGBTQ+ PEOPLE

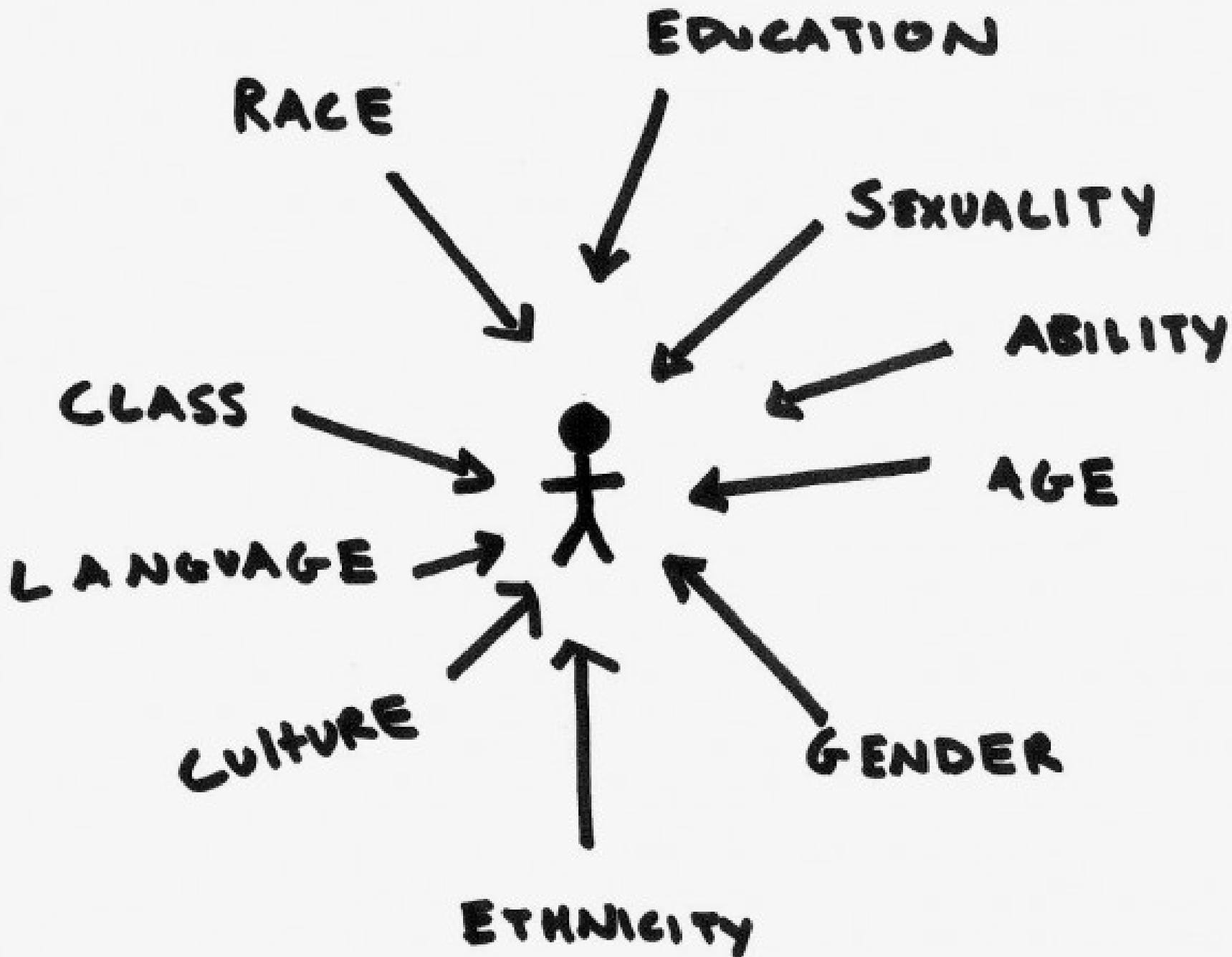


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National Institute on Minority  
Health and Health Disparities



# Stigma and Health Outcomes

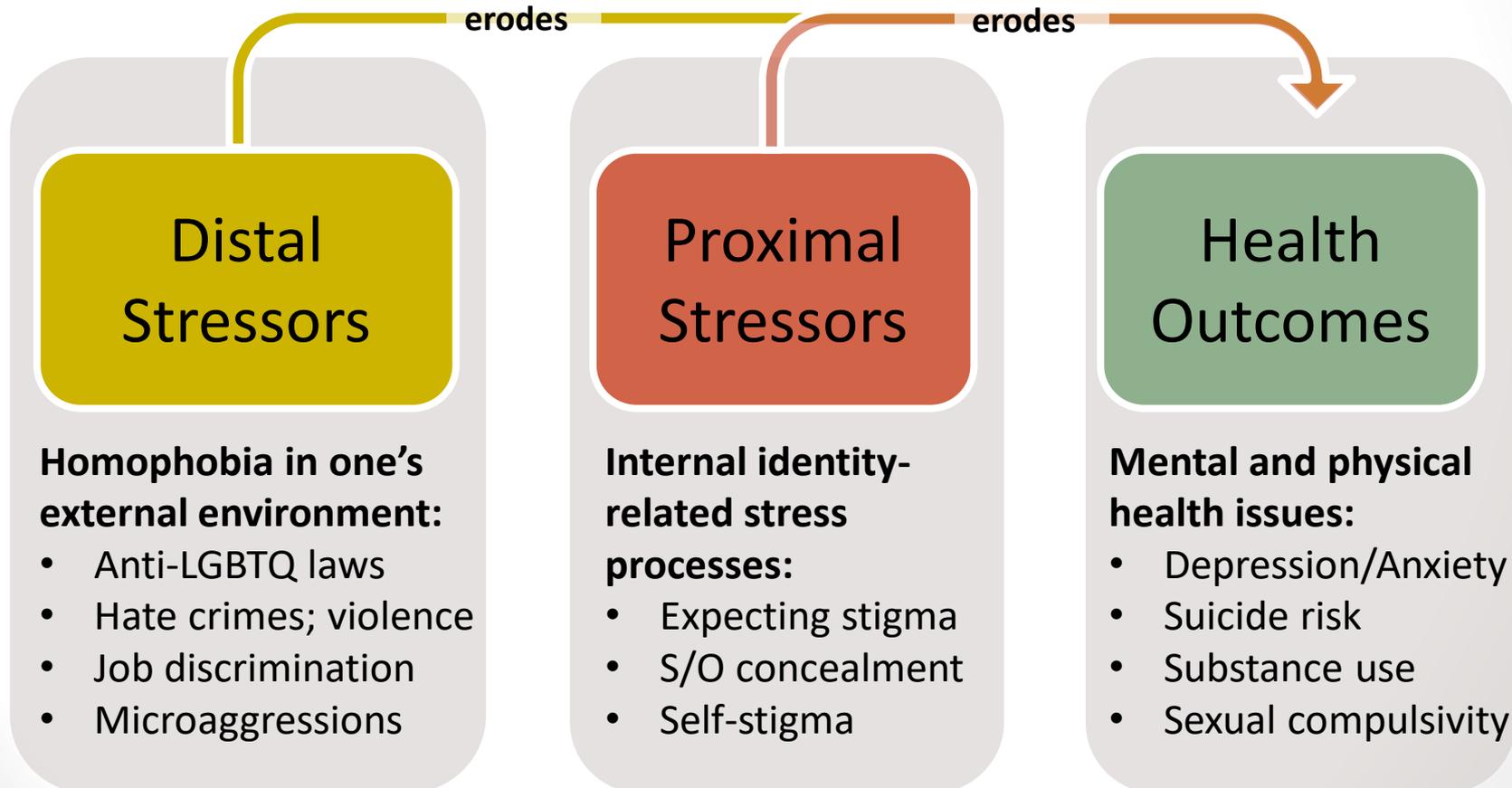
**Perceived discrimination predicts health** (Pascoe & Smart Richman, 2009)



- ↓ Physical health (e.g., hypertension, breast cancer)
- ↓ Mental health (e.g., depression, anxiety, psychological distress, well-being)
- ↑ Disease risk factors (e.g., obesity, high blood pressure, substance use)
- ↑ Physiological responses (e.g., heart rate, cortisol secretions)

# Minority Stress Theory (Brooks, 1981; Meyer, 2003)

**Among LGBTQ+ populations, increased...**



# Black + LGBTQ | Addressing Intersectional health disparities

**Black LGBTQ people demonstrate alarming mental health disparities...**

↑ Increased **risk of suicide** (O'Donnell et al., 2011) and sexual minority stress linked to higher odds of suicide attempt (Layland et al., 2020) compared with White LGBTQs.

↑ Increased prevalence of **psychiatric disorders** as compared with Black heterosexuals (Rodriguez-Seijas et al. 2019).



**Despite these trends, most health disparities research...**

- Tends to **focus on one aspect of stigma** in isolation from others
- Thinks about stigma **additively**, overlooks potential for intersectionality
- **Lacks measures** to begin to quantify and model intersectional stigma

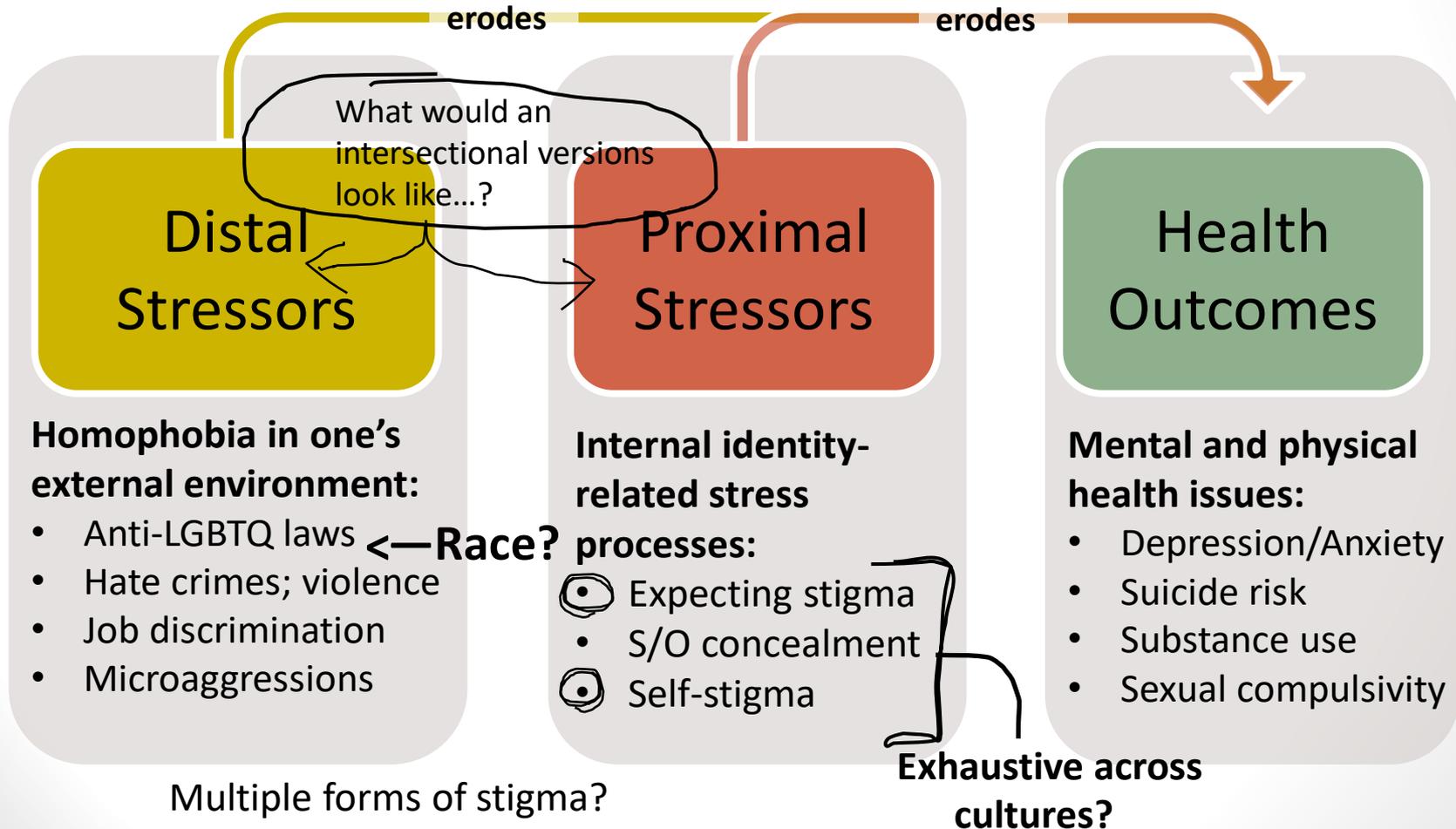
# Framework of Intersectionality

- Roots in Black feminist activism, legal studies, and critical race theory
- Aims to understand people unique experiences, risks, and resiliencies of people impacted by multiple systems of power
- Argues their experience is greater than a sum of its parts
- To understand interlocking nature of oppression, best to assess simultaneously, in integrated manner



# Minority Stress Theory (Brooks, 1981; Meyer, 2003)

Among LGBTQ+ populations, increased...



# Intersectional Experiences, Stigma-Related Stress, and Psychological Health Among Black LGBTQ Individuals

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**Objectives:** We used microlongitudinal methods to examine the prevalence and day-to-day correlates of intersectional experiences (IEs) in a U.S. sample of 131 Black sexual minorities. **Method:** Participants were 97 gay/lesbian people (74.0%) and 34 bisexuals (26.0%); nearly a third of the sample also identified as queer (32.1%). Most participants identified solely as Black; however, 23 participants (17.6%) indicated at least 1 secondary racial/ethnic identification. Every evening for 1 week, participants reported both negative and positive IEs from the last 24 hr and completed measures of identity conflict, rumination, and affect. Multilevel path analysis was used to test daily relations between IEs and mood—as well as the mediating roles of identity conflict and rumination—at the within- and between-person levels, controlling for nonintersectional experiences (e.g., related only to race, related only to sexual orientation, unrelated to identity). **Results:** Negative IEs ( $n = 97$ , 11.4% of total days) were related with identity conflict and negative affect at both levels of analysis and with negative rumination at the within-person level only. Positive IEs ( $n = 263$ , 31.0% of total days) predicted positive rumination and positive affect (but not identity conflict) both within and between persons. Many hypothesized indirect paths were supported—for example, identity conflict and rumination mediated the relation between negative IEs and negative affect at the within-person level. **Conclusion:** Building upon accumulating research linking stigma and health, this study demonstrates that multiple axes of oppression can jointly shape daily events and predict fluctuations in psychological health.

# Study Aims

1. Test **minority stress theory** and **psychological mediation framework** among Black LGBTQ people.
2. Examine **intersectional variables** that may capture unique identity-related **stress processes** among this population.
3. Examine the role of **positive intersectional events** among Black LGBTQ people.
4. In addition to between-person effects, **test effects over time.**

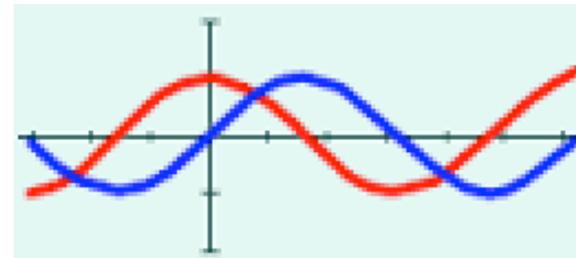
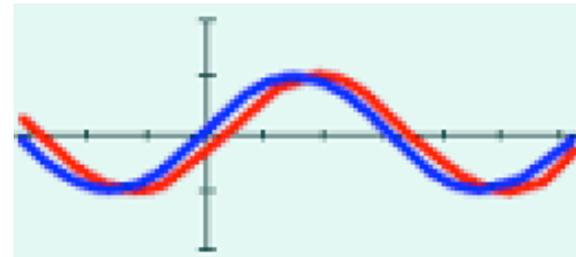


# Daily Variation in Stigma-related stress

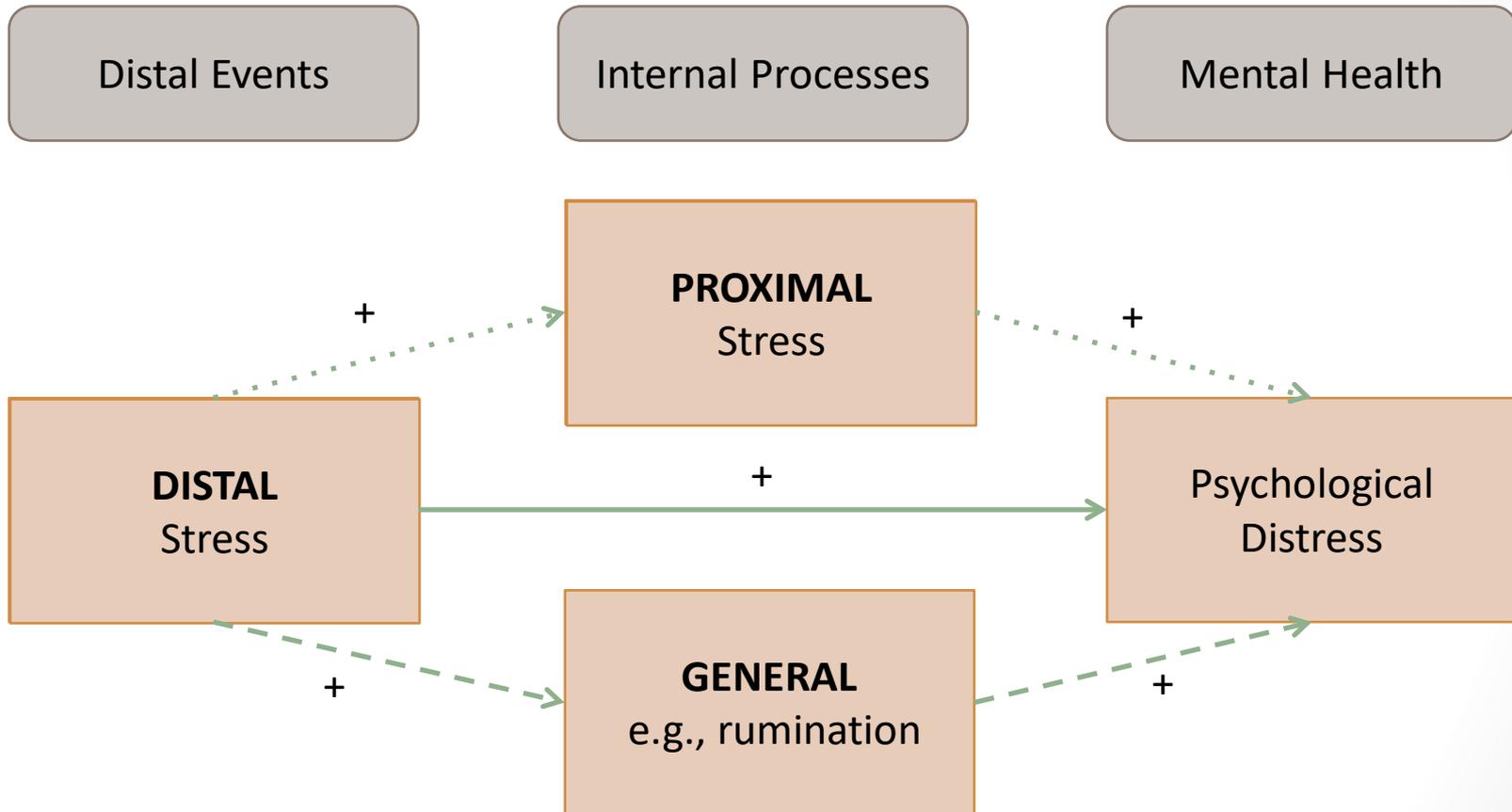
- ✓ **Racism** (Broudy et al., 2007; Hoggard et al., 2012; O'Hara et al., 2015)
- ✓ **Sexism** (Swim et al. 2001)
- ✓ **Homophobia** (Mohr, 2016; Swim et al., 2009)

## Shown to predict over time:

- Concurrent: Stigma and health ebb and flow together
- Temporal: Stigma leads to later increases in distress



# Minority Stress Processes

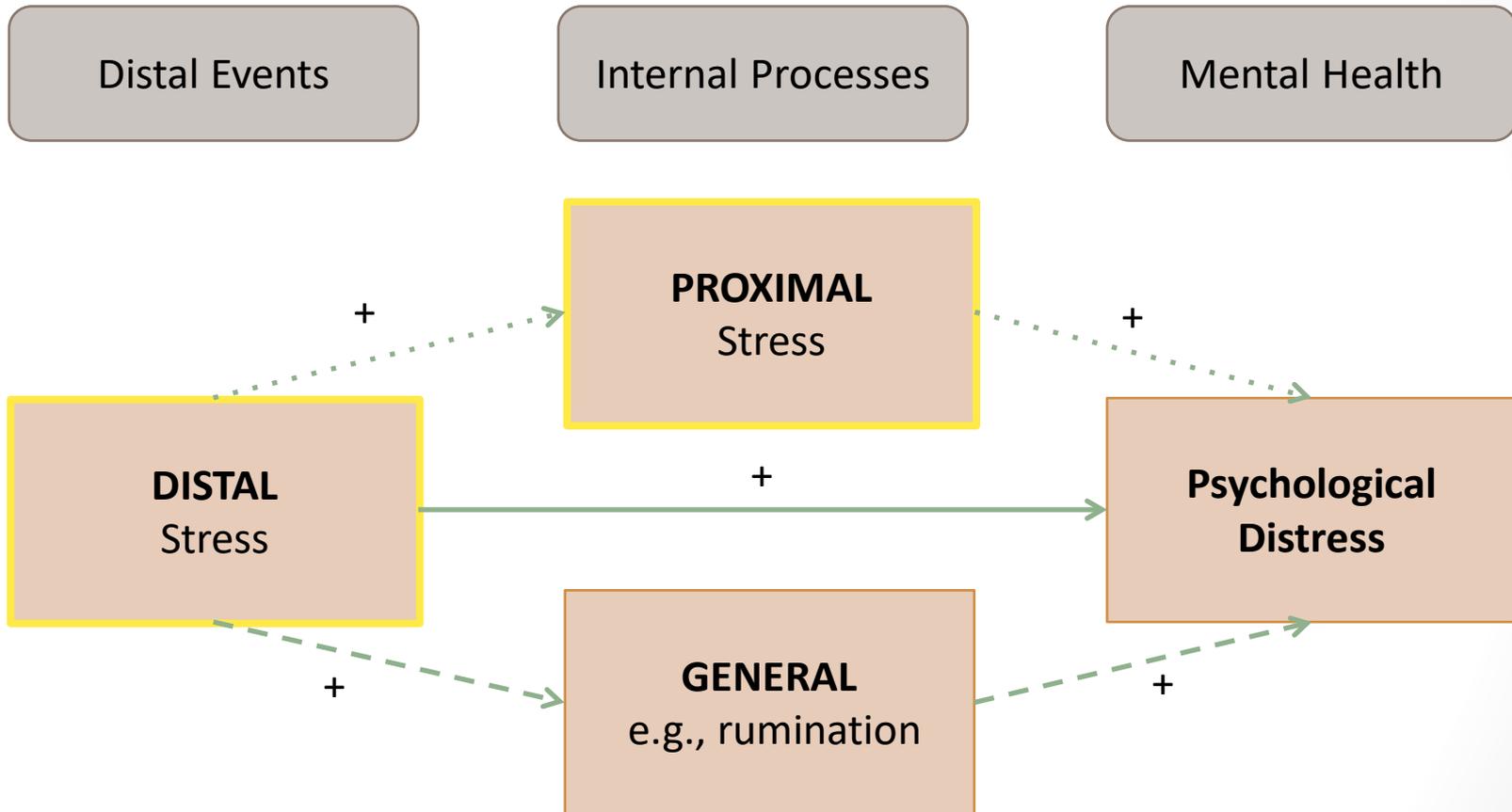


Direct effect  
Mediation pathway



**Psychological Mediation  
Framework** (Hatzenbuehler, 2009)

# Minority Stress Processes



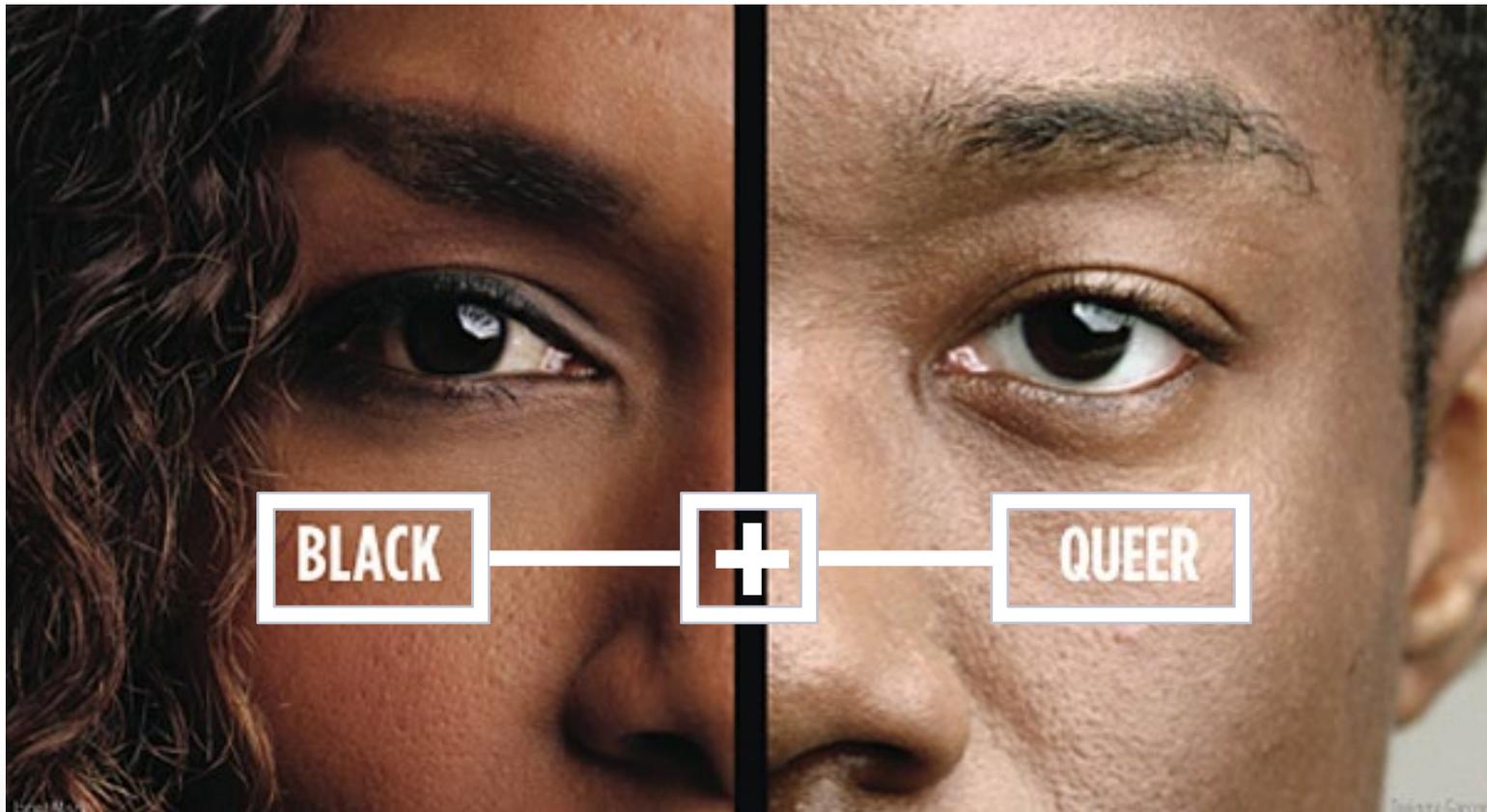
Direct effect  
Mediation pathway



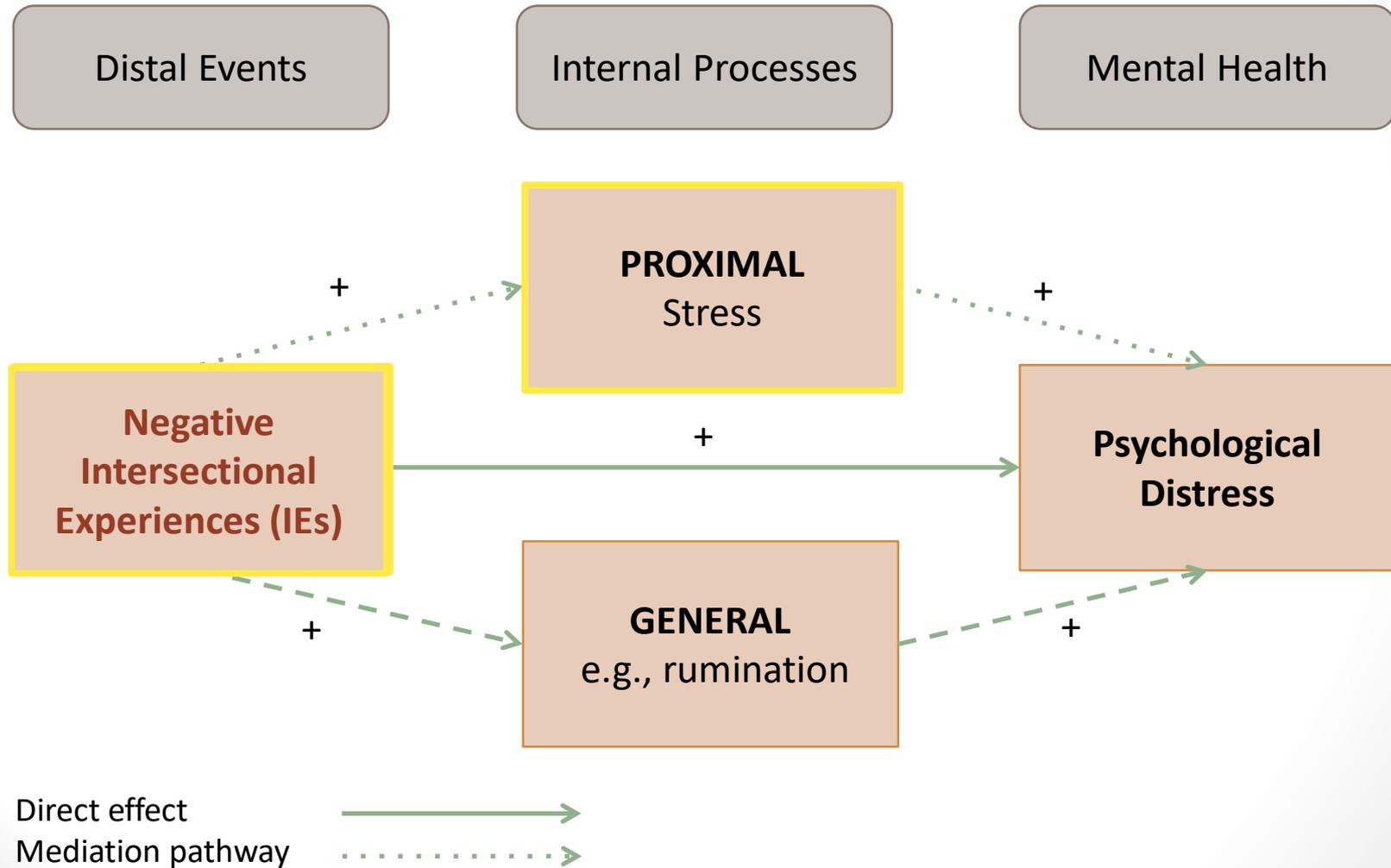
**Psychological Mediation  
Framework** (Hatzenbuehler, 2009)

# Negative Intersectional Experiences

*Distal stigma-related stressors—whether smaller-scale or major life events—that arise due to one’s unique social position.*



# Minority Stress Processes



# Identifying an Intersectional Proximal Stressor

- Morales (1989) created 5-stage model of LGBTQ racial/ethnic minority identity development.
- Third stage, *conflicts in allegiances* – internal sense that one’s race and sexual orientation incompatible.
- Although discussed in clinical/theoretical literature, but little empirical investigation.
- Identity conflict may help explain explain racial/sexual disparities in mental health.



# Measuring identity conflict

[intersectional proximal stressor]

Cultural Diversity and Ethnic Minority Psychology  
2015, Vol. 21, No. 4, 550–559

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1099-9809/15/\$12.00 <http://dx.doi.org/10.1037/cdp0000026>

## When Identities Collide: Conflicts in Allegiances Among LGB People of Color

Elissa L. Sarno, Jonathan J. Mohr, Skyler D. Jackson, and Ruth E. Fassinger  
University of Maryland, College Park

Little research has examined the management of multiple minority identities among lesbian, gay, and bisexual (LGB) people of color, despite a growing theoretical literature on such identity intersections. The present study focused on the intersectional construct of conflicts in allegiances (CIA), defined as perceived incompatibility between one's racial/ethnic and sexual orientation identities. CIA was investigated in relation to experiences of parental heterosexism, racism in LGB communities, outness, and racial/ethnic and sexual orientation group identity. Participants were 124 LGB people of color (main sample) and 124 LGB White people (comparison sample) who completed self-report measures of the main variables as part of a larger survey of same-sex couples. CIA was positively correlated with experiences of racism within LGB communities and perceived heterosexism in one's mother (but not one's father), and negatively correlated with outness to family (but not outness to others in one's everyday life). An interaction was found between racial/ethnic and LGB group identity with respect to behavioral engagement: CIA levels were highest among participants with high racial/ethnic behavioral engagement and low sexual orientation behavioral engagement. Results highlight the role of minority and family contexts in CIA among LGB people of color, and, more broadly, the potential value of studying intersectional variables using quantitative methods. Longitudinal and experimental studies are needed to address questions about direction of influence raised by findings.

*Keywords:* identity development, intersectionality, outness, racial/ethnic minorities, sexual minorities

A growing body of scholarly work has enriched knowledge regarding the identity-related experiences of people of color and lesbian, gay, and bisexual (LGB) people, respectively. However, less theory and research has focused on the management of multiple minority identities among LGB people of color, although such work is needed

intersectional theory (Cole, 2009; Crenshaw, 1991) and Black feminist thought more generally (Collins, 1991; Hooks, 1981; Lorde, 1984).

Despite an increase in research on individuals with multiple identities and emerging guidelines for integrating intersectionality into

# Measuring identity conflict

[intersectional proximal stressor]

## Conflicts in Allegiances Scales

*Disagree  
Strongly*

*Agree  
Strongly*

1 - - - - - 2 - - - - - 3 - - - - - 4 - - - - - 5 - - - - - 6 - - - - - 7

- I feel little or no conflict between my [Black] identity and my identity as LGBTQ.
- I have not yet found a way to integrate being LGBTQ with being a member of my cultural group.
- It is easy for me to be both LGBTQ and a member of my cultural group.
- I separate my LGBTQ and [Black] identities.
- I often feel like I'm betraying either the [Black] community or the LGBTQ community.
- I feel as if my sense of [Black] identity is at odds with my LGBTQ identity.

# Participants (N = 364)

## Age

- Ranged from 18 to 44 ( $M = 22.24$ )

## Race

- 141 Black/African American
- 223 White/European American

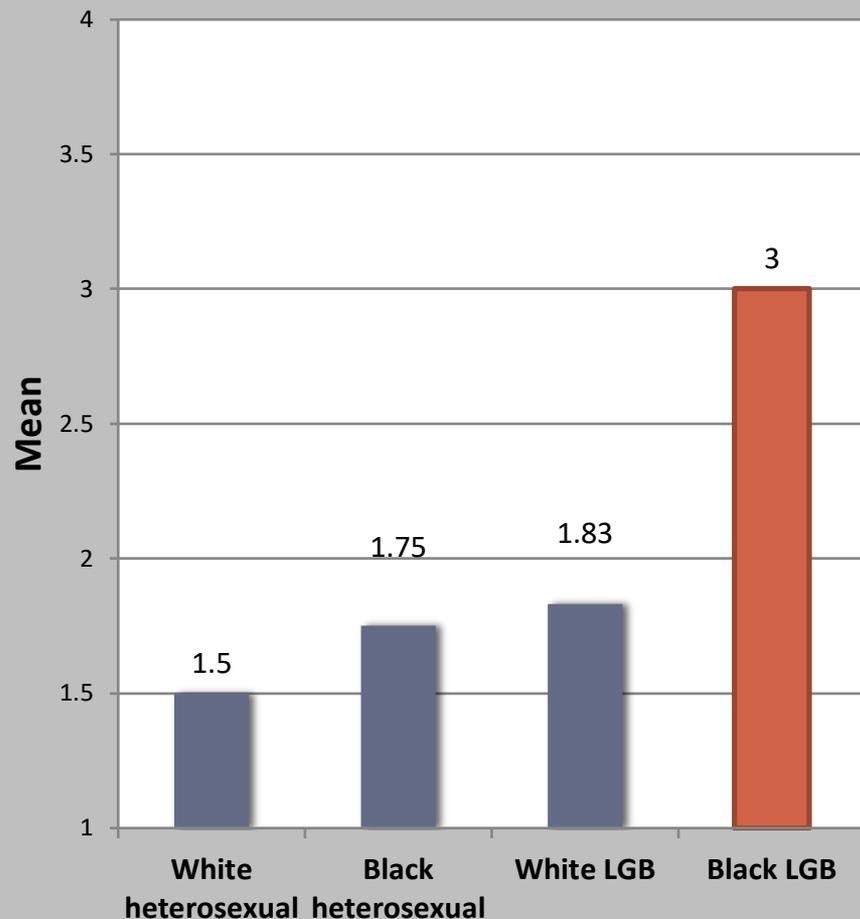
## Sexual Orientation

- 58 lesbian
- 73 gay
- 78 bisexual
- 155 heterosexual

## Gender

- 256 women, including 5 trans women
- 105 men, including 7 trans men
- 3 did not indicate

**Figure 1.** Mean levels of Identity Conflict



# Daily Identity Conflict

**Theorized to be triggered by (intersectional) discrimination...**

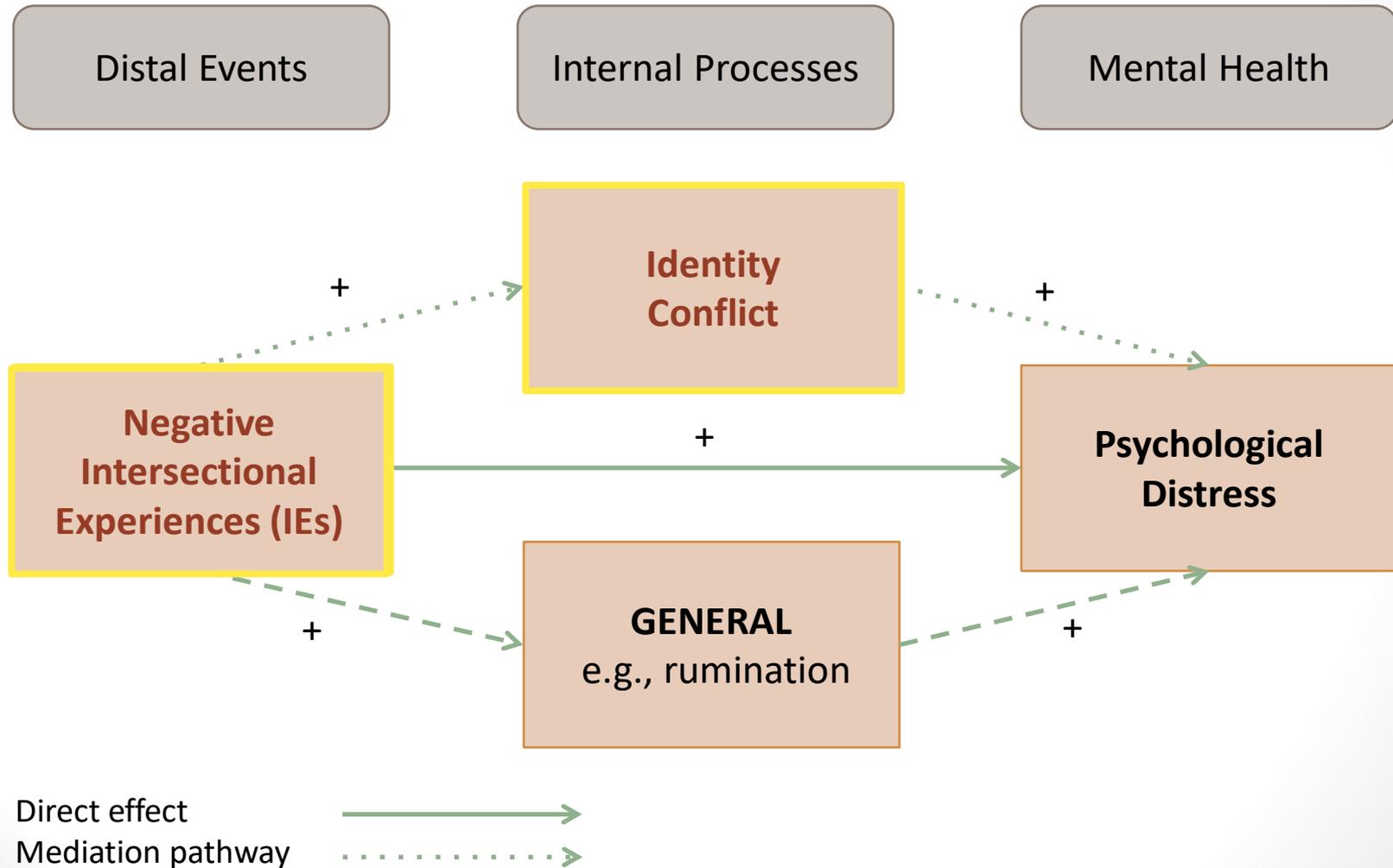
- Racism in LGBTQ community
- Homophobia in racial/ethnic community



**Theorized to increase negative affect...**

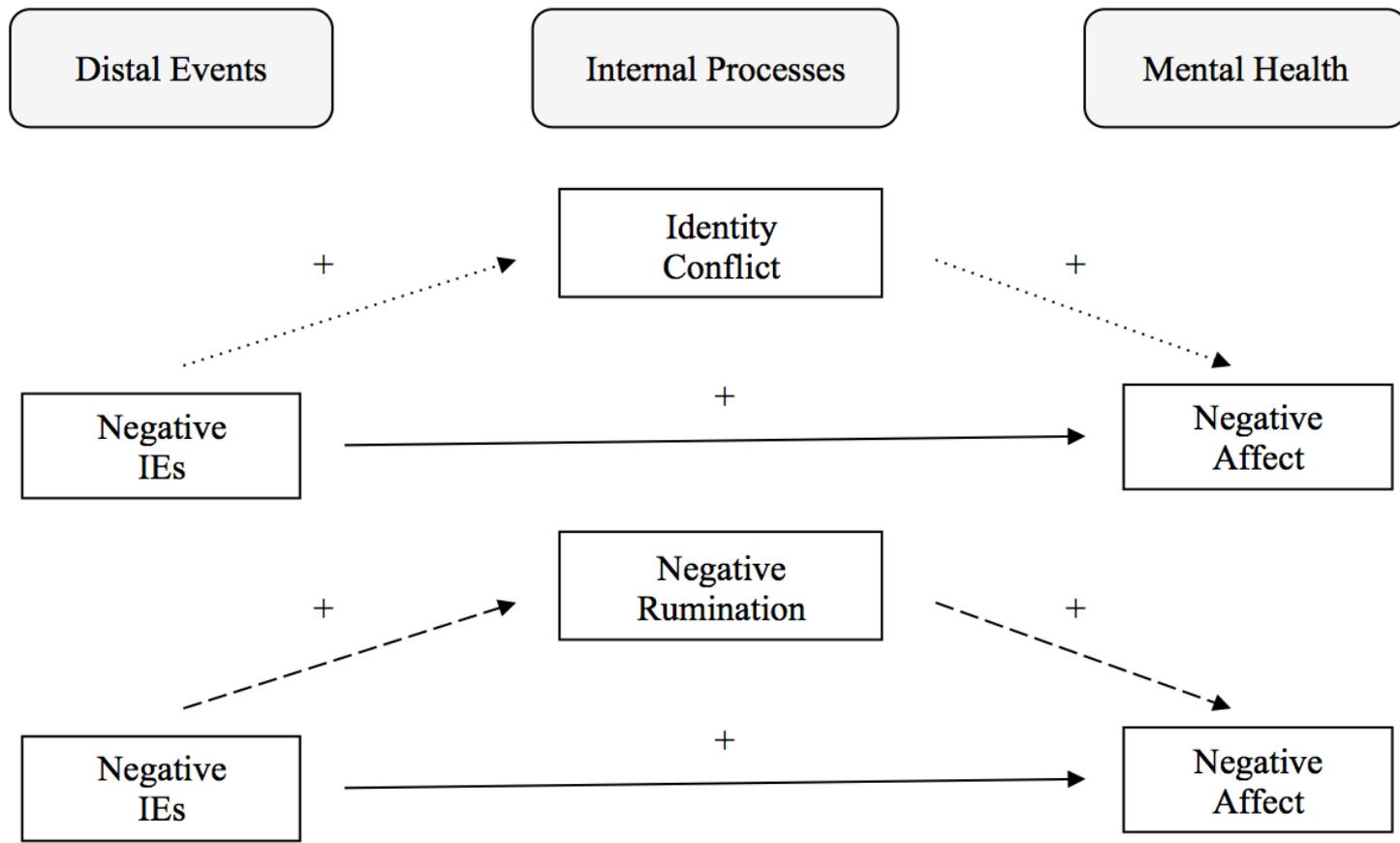
- **Anxiety** over betraying one community of the other
- **Anger** from experiences of ingroup stigmatization
- Shown to be associated with **depression** (Santos & VanDaalen, 2016)

# Minority Stress Processes



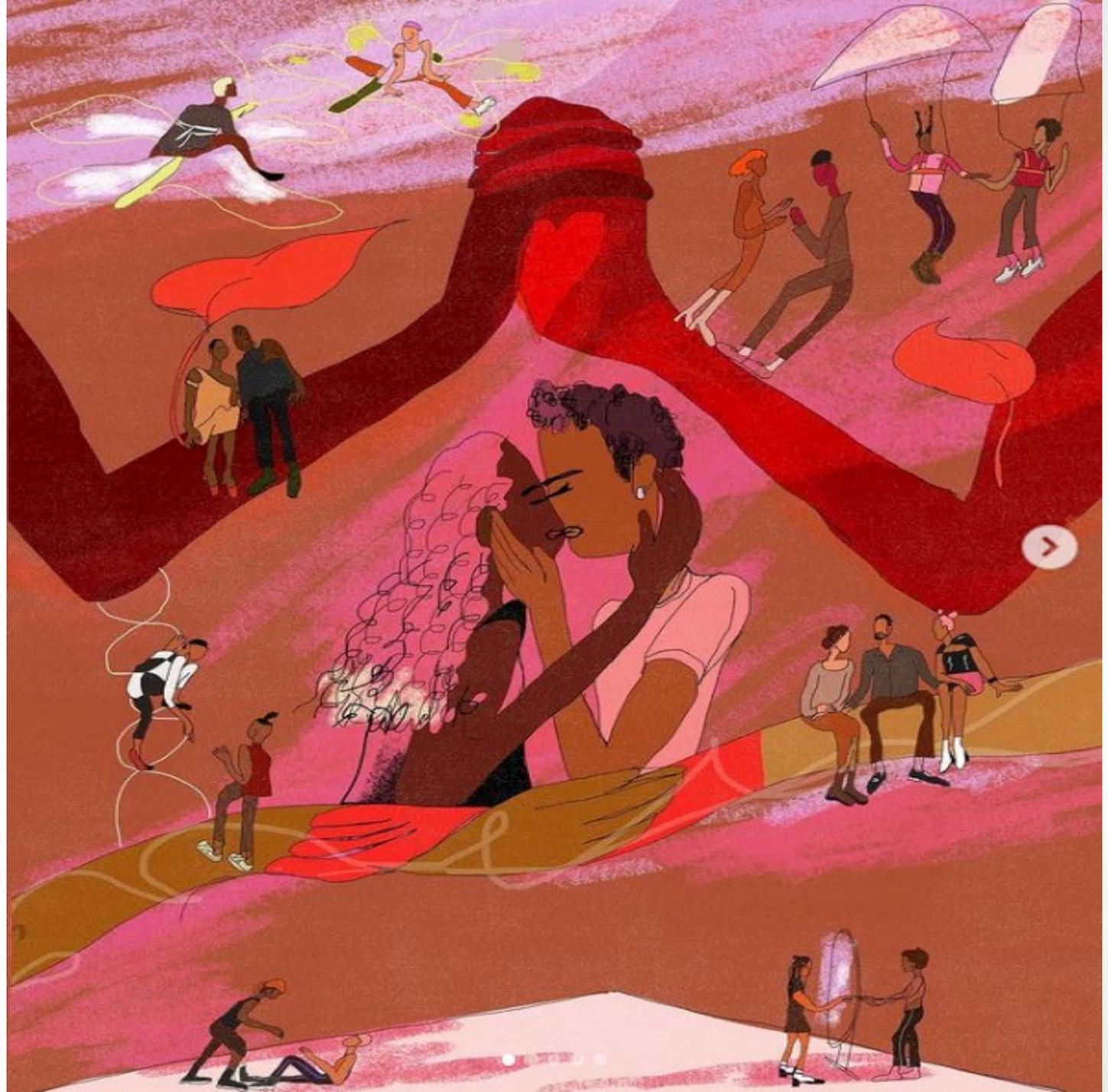
# Negative Mediation Models (hypothesized)

## *Intersectional Identity-Related Stress*



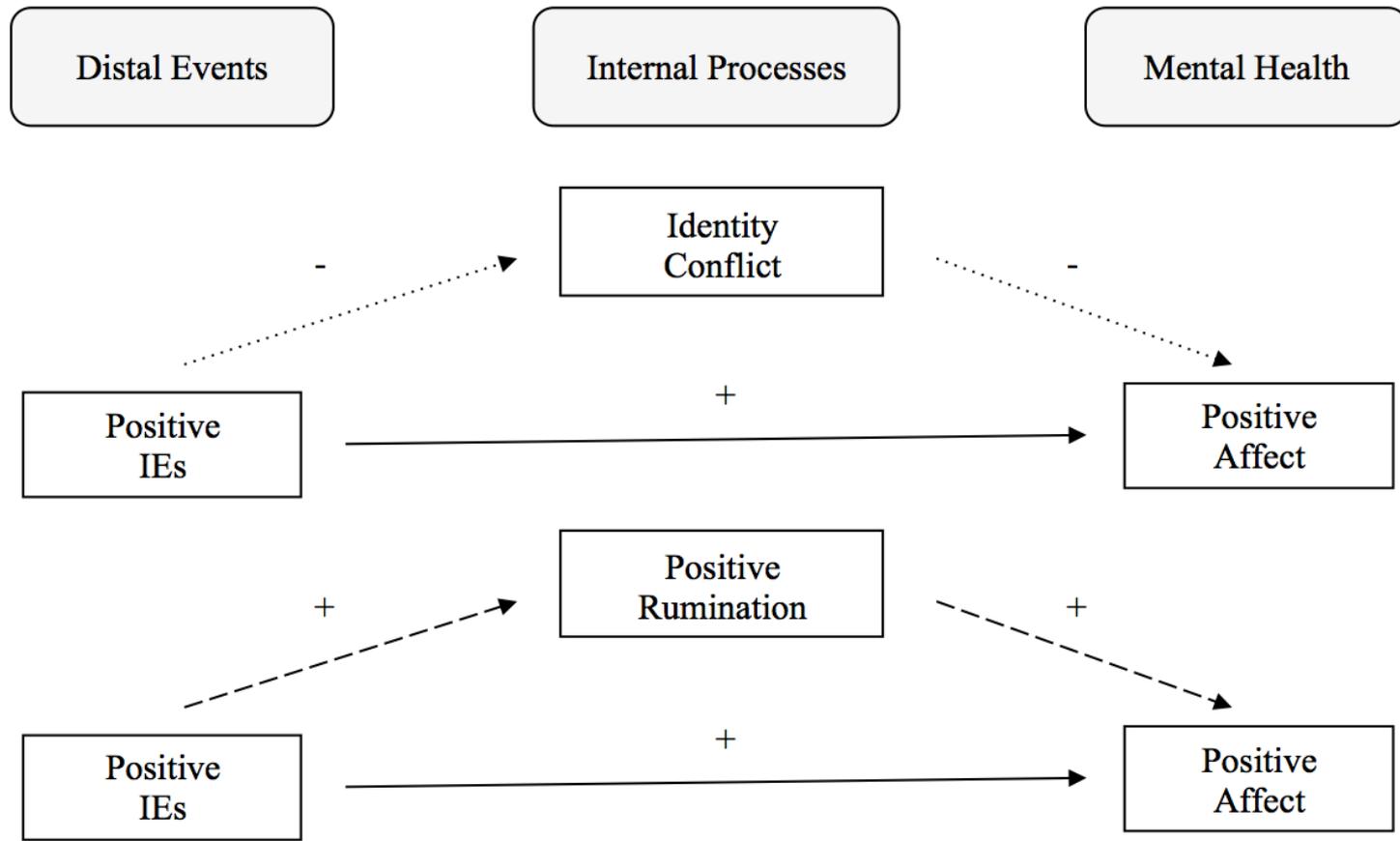
✓ Controlling non-intersectional negative events (e.g., racism, homophobia, general)





# Positive Mediation Models (exploratory)

## *Intersectional Identity-Related Support*



✓ Controlling non-intersectional positive events (e.g., race, sexual orientation, general)

# Methodology | Experience Sampling

## What is it?

- Collecting ongoing data about daily experiences
- Can include quantitative and qualitative items

## What are the benefits?

- Reduces recall bias
- Contextualizes variables of interest in everyday life

## How is it used?

- Allows examination at multiple levels of analysis
- Can reveal direction of influence

## How we implemented it?

- We sent participants daily reminders
- Participants completed up to seven surveys

# Intersectional Experiences

Construct	Measure	Details
<b>Negative Intersectional Experiences</b>	3 items created for this study	<p><i>Take a moment and reflect upon whether you experienced any <b>NEGATIVE</b> events or situations over the last 24 hours that were related in some way to being both Black and LGBTQ. Consider minor, everyday experiences as well as more intense, major events.</i></p> <p><i>Can you think of a <b>NEGATIVE</b> event like this from today?</i></p>
<b>Positive Intersectional Experiences</b>	3 items created for this study	<p><i>Take a moment and reflect upon whether you experienced any <b>POSITIVE</b> events or situations over the last 24 hours that were related in some way to being both Black and LGBTQ. Consider minor, everyday experiences as well as more intense, major events.</i></p> <p><i>Can you think of a <b>POSITIVE</b> event like this from today?</i></p>

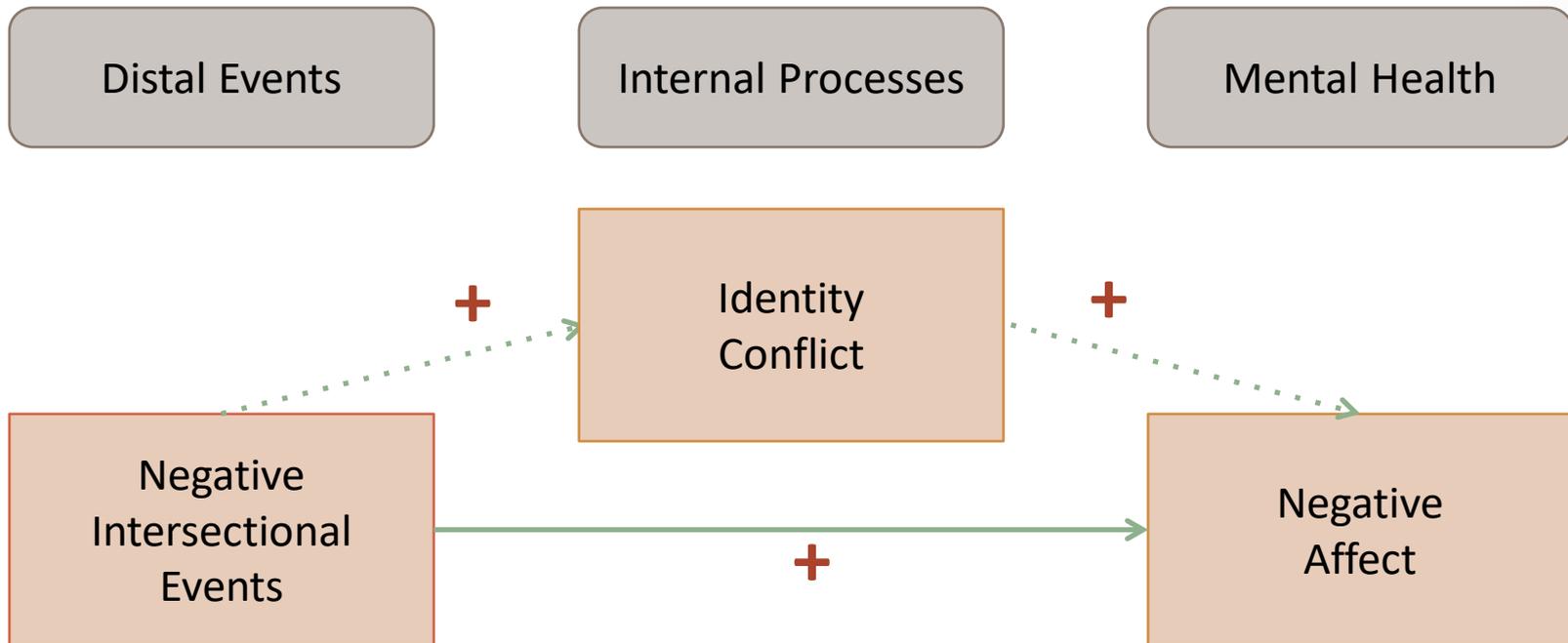
# Negative Intersectional Events

Total study days: **849**

Days with a negative intersectional event: **97 (11.4%)**

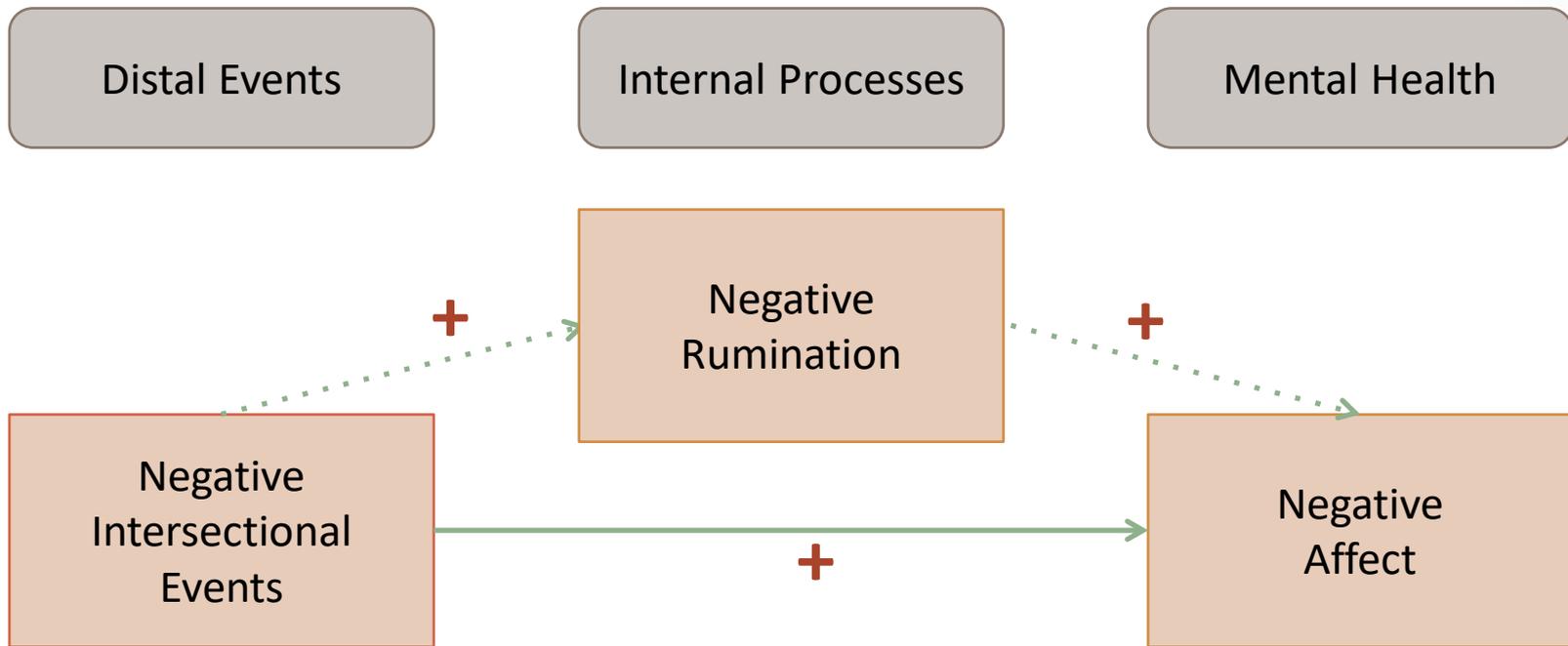
- “I'm in a dance class and in order to get to my dance class I have to walk through the gym. Today the basketball team was practicing and when they saw me heading to class they made very crude [homophobic] comments. They were black. And I'm sure I can shoot baskets around them.”
- “After work I decided to stop by a bar [...] in the ‘Gayborhood’ [...] and hung around for a bit when I realized that I was being pretty much completely ignored. I felt invisible and undesirable in a bar consisting of mostly cis-gender white gay males. This wasn't the first time I'd felt this way, but I always hope that it will be different.”

# Modeling Stigma-related Stress



Within-person indirect effect | **Mediation Significant**

# Modeling Stigma-related Stress



Within-person indirect effect | **Mediation Significant**

# Positive Intersectional Events

Total study days: **849**

Days with a negative intersectional event: **97 (11.4%)**

Days with a positive intersectional event: **263 (31.0%)**

- “I was just very proud to discuss the intersectionality of the experiences of black and LGBT people. I had this conversation with my grandmother [...] about her gay friends’ experiences in the 1960s and 1970s in New York and New Jersey.”
- “I have recently started talking to another Black girl who is bisexual. I'm very happy we are interested in each other [...]. I have issues dating white women (not sure if they're racist) and many Black women I know are not queer, so my dating pool tends to be limited. But this gives me hope.”

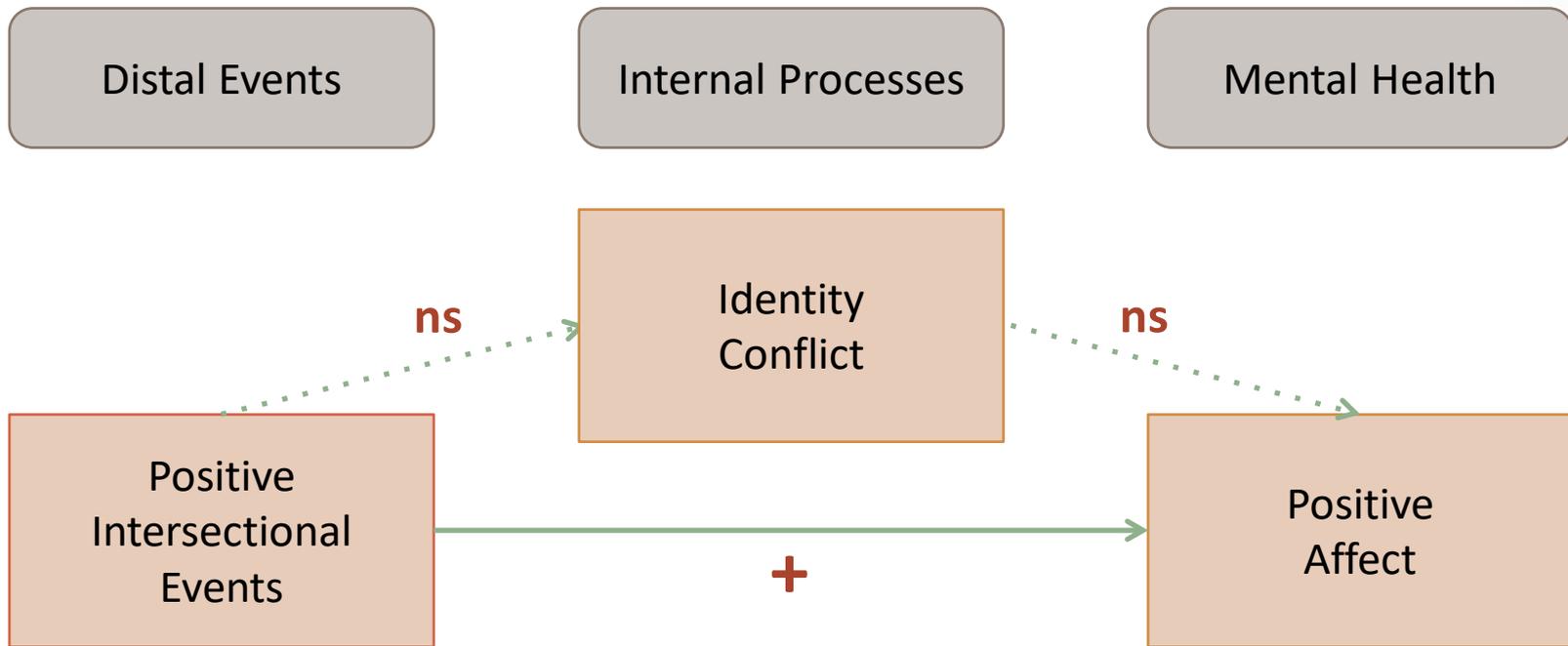
# Complex Intersectional Events

“An appointment with my doctor started with me having a long wait in a cramped receptionist room with all Black patients. While waiting, there was a TV program about marriage equity that prompted one patient to make homophobic statements about same-gender marriages and relationships in general.

I opened my mouth to counter her comments, but several persons beat me to it and read her up one side and down the other. The discussion continued after the homophobic person went in to see the doctor and I was able to participate in the discussion with lots of affirmation about marriage equity.”

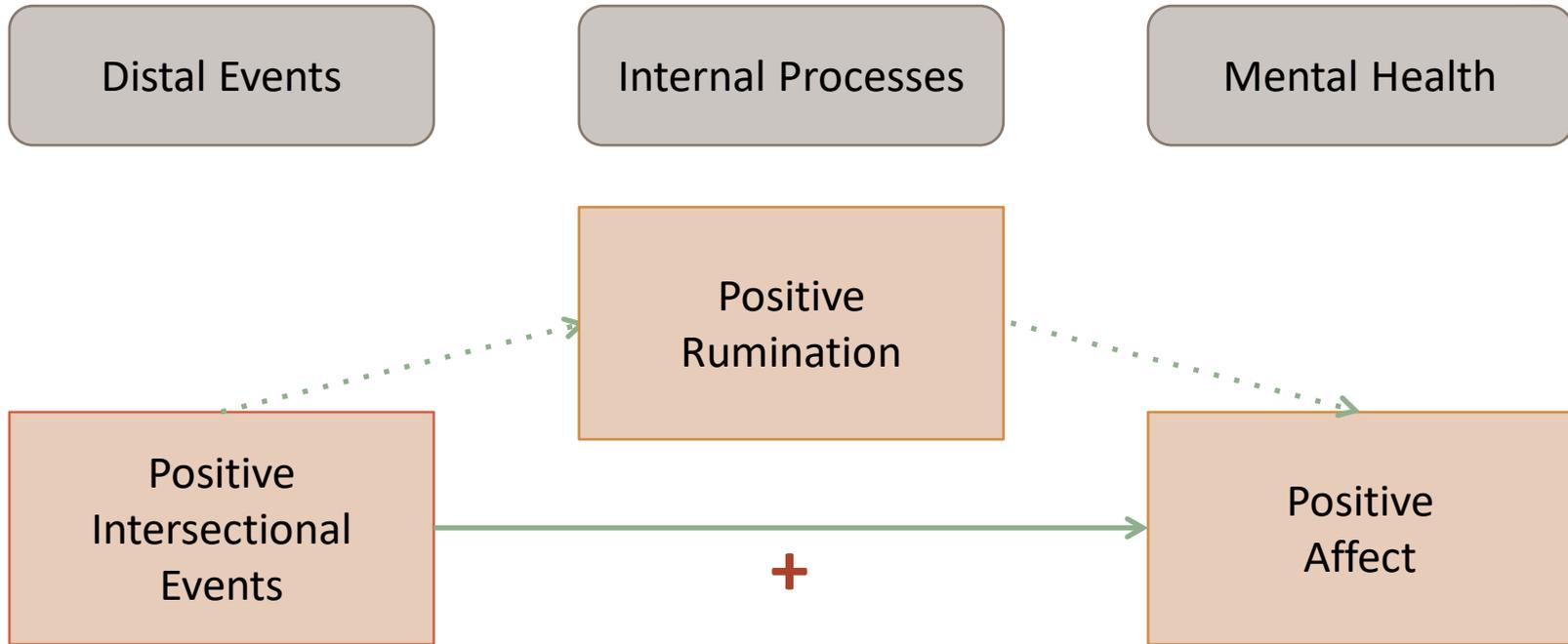
– *Bisexual male, age 71*

# Modeling Stigma-related Support

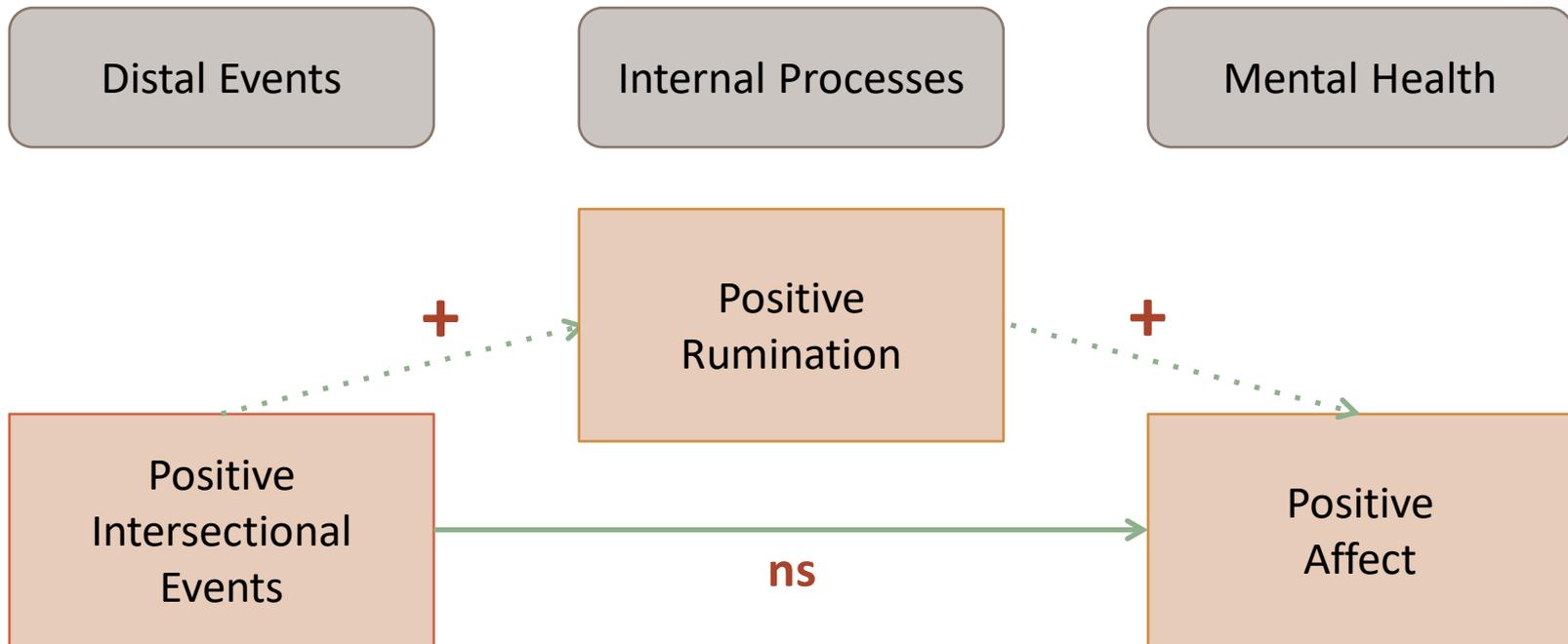


Within-person indirect effect | **Mediation Not Significant**

# Modeling Stigma-related Support



# Modeling Stigma-related Support



Within-person indirect effect | **Mediation Significant**

# Jackson et al. (2021)



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## Intersectional Experiences: A Mixed Methods Experience Sampling Approach to Studying an Elusive Phenomenon

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Social scientists are increasingly interested in methodological advances that can illuminate the distinct experiences and health outcomes produced by various systems of inequality (e.g., race, gender, religion, sexual orientation). However, innovative methodological strategies are needed to (a) capture the breadth, complexity, and dynamic nature of moments co-constructed by multiple axes of power and oppression (i.e., intersectional experiences) and (b) keep pace with the increasing interest in testing links between such events and health among underresearched groups. Mixed methods designs may be particularly well suited for these needs, but are seldom adopted. In light of this, we describe a new mixed methods experience sampling approach that can aid researchers in detecting and understanding intersectional experiences, as well as testing their day-to-day associations with aspects of health. Drawn from two separate experience sampling studies examining day-to-day links between intersectional experiences and psychological health—one focusing on Black American LGBTQ individuals and another on Muslim American LGBTQ individuals—we provide quantitative and qualitative data examples to illustrate how mixed methods investigations can advance the assessment, interpretation, and analysis of everyday experiences constructed by multiple systems of power. Limitations, possible future adaptations, implications for research, and relevance to the clinical context are discussed.

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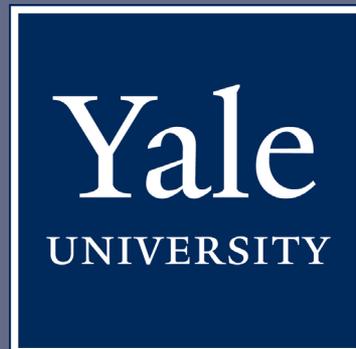
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