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***Possessing a stigmatized identity: A qualitative study on concealment and self-disclosure among non-heterosexual women in the United States***

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### **Abstract**

The present study employed an interpretative phenomenological analysis (IPA) approach aimed at exploring the lived experience of non-heterosexual women regarding concealment and self-disclosure of their sexual minority status. Participants were recruited through known LGBT networks in the Washington D.C. area. Interviewees were five women between the ages of 24 and 32 years of age. Data was collected through semi-structured interviews and then analyzed using IPA via a double hermeneutic approach. This study discusses three superordinate themes that emerged from the data: (a) facing stigma as a sexual minority, (b) experiences of concealment, and (c) experiences of self-disclosure. Participants reported encountering homophobic attitudes in various contexts, which contributed to what was interpreted as a hypervigilant state where they perceived threats to their safety. The study found variations in the participants' responses to perceived threats including employing various methods to conceal their stigmatized identity through self-regulation of behavior and emotion and the internalization of homophobic attitudes. Conversely, the participants interpreted experiences of safe self-disclosure as an opportunity to be uninhibited in their behavior and emotion. The study revealed environments perceived as safe to self-disclose, or "safe spaces," played varying but significant roles in the participants lives. Safe spaces were shown to facilitate the following: feeling acceptance to be oneself, the dissolution of internalized homophobia, and building community based on shared experience. Theoretical and practical implications of these findings are discussed.

*Keywords:* concealment, hypervigilance, interpretative phenomenological analysis, self-disclosure, self-regulation, sexual minorities, stigma,

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Among Sexual Minority Women in the United States

It is widely recognized that sexual minorities are disproportionately targeted by prejudice and discrimination on the basis of stigmatization (Herek, 1989, 2000; Herek, Gillis, & Cogan, 1999). Much of the existing research that investigates bias based on sexual orientation has focused on perpetrators of prejudice and discrimination to understand the theoretical underpinnings of stigmatization against sexual minorities (e.g., Herek, 1994; Raja & Stokes, 1998). But what happens to the victims of stigmatization on the basis of sexual minority group membership?

Empirical evidence has established alarming mental health disparities among sexual minorities in comparison to their heterosexual counterparts. Studies have shown rates of alcohol (e.g., Cochran, Keenan, Schober, & Mays, 2000; Drabble & Trocki, 2005) and other substance use (e.g., Cochran, Ackerman, Mays, & Ross, 2004; Goldbach, Tanner-Smith, Bagwell, & Dunlap, 2014) to be higher among sexual minority groups than heterosexuals. Research findings have also indicated psychopathological distress such as anxiety and depressive disorders (e.g., Burns, Kamen, Lehman, & Beach, 2010; Cochran, Sullivan, & May, 2003; Feinstein, Goldfried, & Davila, 2012), as well as suicidal ideation and attempts (e.g., Baams, Grossman, & Russell, 2015; Baiocco et al., 2014; Herrell et al., 1999), are also a pervasive mental health concern among sexual minorities. Although some studies have alluded to processes of stigma-related stress, the underlying mechanisms driving these disparities remain more elusive. These grave implications create a demand for more qualitative research that focuses on the first-hand account of possessing a stigmatized identity. Therefore, continued exploration of the lived experiences of sexual minorities could yield important nuances and insights to better understand how those affected perceive and derive meaning from their experiences of stigma.

### **Understanding Stigma**

Experiencing stigma is a dynamic and idiosyncratic phenomenon with far-reaching consequences for its targets (Crocker, Major, & Steele, 1998; Jones et al., 1984; Link & Phelan, 2001). An increased scholarly interest in the concept of stigma has contributed to a growing body of literature, offering a modern review based on Goffman's (1963) foundational work *Stigma: Notes on the Management of a Spoiled Identity* as a point of departure. In contemporary use,

stigma has been conceptualized as the social branding and marginalization of a person who is perceived to possess an attribute that is devalued in a particular social context (Crocker et al., 1998; Jones & Corrigan, 2014; Major & O'Brien, 2005).

While extensive research has been conducted on the experience of possessing a visible and thus conspicuous stigmatized identity (Clark, Anderson, Clark, & Williams, 1999; Crocker et al., 1998; Kessler, Mickelson, & Williams, 1999; Kessler & Neighbors, 1986), research that has focused on 'conduct stigma' is limited and has, only in recent years, gained traction in the scientific community (e.g., Jones & King, 2014; Newheiser & Barreto, 2014; Pachankis, 2007; Smart & Wegner, 1999). Goffman (1963) describes 'conduct stigma' as experiences of stigma based on a target's behaviors that violate established societal norms, which implies that such a stigmatized identity is invisible until it is revealed. As such, sexual orientation is an example of an invisible aspect of identity that can become a source of stigma. Because this stigmatized trait is not necessarily visible or obvious to others, one's sexual orientation can be considered as a 'concealable' source of stigma (Jones and King, 2014; Stenger & Roulet, 2018). Indeed, previous research has indicated that sexual minority individuals are often cautious to self-disclose their sexual orientation (Chrobot-Mason, Button, & DiClementi, 2001; Griffith & Hebl, 2002), and may expend effort to conceal this stigmatized aspect of their identity from others (Meyer, 2003).

**Homophobia.** Considering the prevalence of prejudice, discrimination, and violence experienced by sexual minorities (Herek, 1989, 2000; Herek & Capitanio, 1999), apprehension toward self-disclosure of one's stigmatized sexual orientation is understandable. Sexual minority individuals compose a socially marginalized group subject to various forms of prejudice and discrimination, commonly referred to as homophobia. The Amnesty International Report titled *The State of the World's Human Rights* indicated that sexual minorities worldwide continued to endure pervasive violations of their human rights. Examples of such homophobic abuse ranged from hate speech and community ostracization; government sanctioned discrimination and criminalization; as well as interpersonal violence, assault, and murder (Amnesty International, 2018).

Various research findings have indicated that sexual minorities experience prejudicial and discriminatory life events at an elevated rate, and have suggested that such experiences hold negative consequences for mental and physical health. Herek et al. (1999) surveyed 2,259 sexual minority adults and found that approximately one fifth of the women and one fourth of the men

who participated had experienced criminal victimization that they attributed to bias against their sexual orientation. Additionally, those participants who described experiences of stigma-based victimization also reported significantly elevated rates of psychopathological distress, including anxiety, depression, and posttraumatic stress symptoms (Herek et al., 1999). Similarly, a study conducted by Mays and Cochran (2001) showed that sexual minority adults in the United States reported higher rates of stigma-related life events than their heterosexual counterparts (Mays & Cochran, 2001).

**Internalization of homophobic attitudes.** Internalized homophobia refers to the ways sexual minority individuals may redirect societal homophobic attitudes towards themselves, indicating a “devaluation of the self and resultant internal conflicts and poor self-regard” (Meyer & Dean, 1998, p. 161). Internalized homophobia represents difficulties overcoming negative self-perceptions associated with one’s stigmatized sexual orientation and the struggle to find self-acceptance (Meyer & Dean, 1998). Considering the pervasive exposure to stigma-related events, sexual minorities may integrate homophobic attitudes into their self-concept, which has negative implications for mental health and well-being. A considerable number of studies have indicated that experiences of internalized homophobia are connected to reports of psychological distress among sexual minorities including depression, anxiety, and substance use (e.g., Brubaker, Garrett, & Dew, 2009; Feinstein et al., 2012; Hatzenbuehler, Nolen-Hoeksema, & Erickson, 2008; Lehavot & Simoni, 2011; Span & Derby, 2009; Szymanski, 2005, 2006)

### **Minority Stress Theory**

Minority stress theory is a theoretical framework useful in making sense of the ways stigma-related events, including homophobia and the internalization of homophobic attitudes, inform the complex lived experiences of sexual minority individuals. Minority stress theory postulates that inequalities among sexual minorities are embedded in a sociocultural context and are comprised of the interactions between environmental and individual factors. In other words, experiences of prejudicial and discriminatory life events expose sexual minorities to elevated rates of stigma-related stress, and in response, may develop maladaptive psychological processes associated with negative physical and mental health outcomes (Meyer, 1995, 2003). In order to understand and prevent these negative outcomes, it is necessary to recognize the underlying psychological mechanisms involved in processing experiences of stigma-related stress among sexual minorities.

**Concealment as minority stress.** According to psychological theory, the notion of actively hiding a stigmatized attribute is referred to as self-concealment (Larson & Chastain, 1990). In the case of possessing an invisible stigmatized trait, such as a sexual minority status, concealing could be achieved by managing information to others that may lead to stigmatization. A growing body of literature supports the notion that concealing a stigmatized identity may serve as a mechanism of minority stress. Research findings have shown that concealment of a stigmatized sexual orientation during social encounters reduced cognitive resources (Smart & Wegner, 1999), increase intrusive thoughts (Lane & Wegner, 1995), negative self-directed affect (Barreto, Ellemers, & Banal, 2006), and indicated negative physical and psychological outcomes (Cole, Kemeny, Taylor, & Visscher, 1996; Lewis, Derlega, Griffin, & Krowinski, 2003). Additional stressors associated with concealment of a stigmatized status may include experiences of hypervigilance to assess threats of stigmatization (Pachankis, 2007), self-regulation to maintain concealment (Larson, Chastain, Hoyt, & Ayzenberg, 2015), and feelings of inauthenticity (Newheiser & Barreto, 2014; Stenger & Routlet, 2018).

**Hypervigilance.** Hypervigilance refers to a state characterized by increased arousal and attention directed toward screening for stimuli that poses a threat (Peach, Jovev, Foster & Jackson, 2012). This heightened state may develop as a defensive coping mechanism among sexual minorities, aimed at evading threats of stigmatization (Allport, 1954). However, as Pachankis (2007) explained, chronic hypervigilance and ruminating over the safety of one's surroundings may negatively impact cognitive and affective abilities and contribute to experiences of stress. Accordingly, hypervigilance as a coping mechanism may counterintuitively serve as a stressor to sexual minorities and, in turn, inform self-regulatory efforts to conceal their stigmatized identity (Meyer, 2003).

**Self-regulation.** Self-regulation refers to the internal and interpersonal processes that take place in an effort to demonstrate personal beliefs and goals, and reflect societal values across various contexts (Baumeister, Heatherton, & Tice, 1994; Baumeister, Vohs, & Tice, 2007). Possessing a stigmatized identity such as a sexual minority status may require self-regulation on multiple levels. D'augelli and Grossman (2001) suggested that concealing one's sexual orientation involves regulating behavior in order to avoid being victimized (e.g., assault, getting fired) while simultaneously regulating emotions associated with being stigmatized (e.g., shame, guilt, low self-esteem). Hetrick and Martin (1987) described concealing one's stigmatized sexual

orientation as a common and burdensome coping strategy. They argued that efforts to conceal one's sexual minority status may involve chronic self-monitoring and behavioral regulation, ranging from modifying self-expressive speech and mannerisms to limiting personal interests and interpersonal interaction. Larson et al. (2015) conducted a meta-analysis on 137 studies that utilized a Self-Concealment Scale (SCS). The findings revealed a strong association between self-concealment with maladaptive emotion-regulation in the form of suppression, as well as the hindered ability to engage in adaptive emotion-regulation strategies including psychological flexibility and mindfulness. Accordingly, self-regulation as a means of concealment is often used as an avoidant coping strategy to manage negative repercussions of stigma. However, continual management of a stigmatized identity may be detrimental to cognitive and affective functioning as it brings an individual further away from expressing their true identity (Miller & Major, 2000).

***Experiences of inauthenticity.*** The deception implied when hiding a stigmatized attribute may serve as a stressor to sexual minorities and indicates negative consequences for psychological health (Barreto et al., 2006). More specifically, pressure to conceal a stigmatized identity may enhance feelings and experiences of inauthenticity, or an inability to be one's true self. (Goffman, 1963; Wood, Linley, Maltby, Baliouis, & Joseph, 2008). Authenticity requires ignoring pressure to conform to social expectations by living in a way that reflects important personal beliefs and values (i.e., embracing integral aspects of one's identity) (Wood et al., 2008). Experiences of inauthenticity can jeopardize the integrity of one's self-image (Barreto et al., 2006) and may induce negative self-directed affect such as guilt and shame (Major & Gramzow, 1999; Smart & Wegner, 1999), contributing to the internalization of homophobic attitudes (Meyer & Northridge, 2007).

### **Benefits of Self-Disclosure**

Research which suggests the psychological benefits associated with self-disclosure of a stigmatized sexual minority status appears to be more sparse. Wheelless and Grotz (1976) defines self-disclosure as the process of communicating messages about the self to another. In contrast to concealment, self-disclosure of one's stigmatized identity has been shown to play a critical role in the development of a positive self-concept and identity as a sexual minority and has been associated with adaptive psychological processes (Ayala & Coleman, 2000; Cain, 1991; Cass, 1979; Chrobot-Mason et al., 2001). Recent studies have indicated that self-disclosure of one's stigmatized sexual orientation in the face of victimization demonstrated resilience and

authenticity, and was associated with higher self-esteem and well-being, lower perceived stress, and fewer depressive symptoms (Kosciw, Palmer, & Kull, 2015; Riggle, Rostosky, Black, & Rosenkrantz, 2017).

**Developing a group identity.** It has been suggested that self-disclosure of one's stigmatized sexual orientation facilitates group affiliation with other sexual minorities. Social isolation is a common complaint among individuals who conceal a stigmatized identity (Frible, 1993). Concealing a stigmatized group membership, such as being a sexual minority, hinders interactions with others who share a similar stigma, interrupting the development of a group identity and access to supportive social networks (Frible, Wortman, & Joseph, 1997).

Research has provided evidence supporting the idea that affiliation with others who share a stigmatized identity positively impacts self-esteem (Jones et al., 1984; Postmes & Branscombe, 2002). A longitudinal study conducted by Frible, Platt, and Hoey (1998) established findings that supported these claims. Participants with concealable stigmas, such as a sexual minority status, experienced lower self esteem and more symptoms of anxiety and negative affect in comparison to those with conspicuous stigmas and their non-stigmatized counterparts. However, being in environments where other stigmatized individuals were present appeared to have ameliorative effects and led those participants to feel better about themselves.

### **The Present Study**

According to research, it appears that sexual minority individuals may experience tension between concealment and self-disclosure of their stigmatized sexual orientation. On one hand, there is a growing body of research aimed at developing the notion of concealment of a stigmatized identity and investigating the potential consequences for those individuals involved. Among this research, there are very few studies that consider the way personal experiences can provide context for instances of stigma concealment, nor explore the ways that stigmatized sexual minority individuals interpret meaning from experiences of concealment. On the other hand, most research that examines self-disclosure of a stigmatized sexual minority status has not taken into account potential positive outcomes of self-disclosure. Existing research is lacking alternative perspectives which consider possibilities of self-disclosure of a stigmatized sexual minority status to be interpreted as a positive experience, or as having some kind of positive meaning for those self-disclosing. As such, an in-depth exploration of individuals lived experiences could shed light on the nuances of such experiences and contextualize the way sexual



minority individuals perceive and make sense of concealing and self-disclosing their stigmatized sexual orientation.

The current study chose to empirically explore how non-heterosexual women interpret meaning regarding experiences of concealment and self-disclosure of their sexual minority status by contextualizing their experiences through personal narratives. This study employed a qualitative approach with the intention of an exploratory point of entry. By utilizing an interpretative phenomenological analysis (IPA) methodology and semi-structured interviews, the goal of the current study was to elevate the voices of women who are impacted by experiences of concealment and self-disclosure of their stigmatized sexual minority status, and the meaning they assign to these events.

## **Method**

### **The Epistemology of IPA**

It was considered most suitable to employ interpretative phenomenological analysis (IPA) as a framework to examine the participants' first-hand experiences of this distinct, real-world phenomenon. According to Smith, Flowers, and Larkin (2009), IPA is primarily used to investigate how people derive meaning from their life experiences. IPA research is developed upon a central theoretical axis informed by hermeneutics, the theory of interpretation. Most individuals who experience something momentous in their lives will begin to build and reflect on their understanding of what is happening. Experiences of concealment and self-disclosure of one's sexual minority status are bound to be perceived differently from person to person. However, the main unifying factor remains that these phenomena are of major significance to the people experiencing them. As such, those individuals will engage in notable reflection as they process those experiences and aim to make sense of them. IPA research intends to engage with the distinctive understanding of each participant and is committed to the detailed, idiosyncratic examination of the individual case. Once participants communicate their personal accounts to the researcher, IPA research prescribes a second level of interpretation. The IPA researcher approaches the interpretation of meaning via a double hermeneutic approach. This is to say, the researcher attempts to make sense of the participants' derived meaning of an experience via a self-conscious and systematic analysis. Although the central focus of IPA research is engagement with the lifeworlds of the participants, the end result reflects the researcher's analytical account regarding how the focus group in question makes meaning of their life experiences. Thus,

analysis is subjective and the knowledge claims derived from IPA research are tentative. The current study benefits from utilizing IPA in an effort to life the latent essence of the phenomenon being investigated to the explicit level of meaning (Smith et al., 2009).

### **Participants and Sampling**

Recruitment took place between February and April 2017 through LGBT networks and discussion groups in the Washington D.C. area who disseminated information about the study. Inclusion criteria for the study required eligible participants to be native-english speaking individuals who self-identified as non-heterosexual and were willing to be interviewed regarding their experiences of concealing and self-disclosing their sexual orientation. In total, nine individuals initially responded, five of which were interviewed. Upon initial follow-up with potential participants, two individuals explained that they identified as heterosexual but had had same-sex experiences. Based on this, it was determined that those individuals did not meet the inclusion criteria of self-identifying as non-heterosexual, and were thus excluded. Since only one male volunteered to participate, it was decided to keep the focus of the study homogenous and interview the eligible female participants. All respondents were between the ages of 20 and 35 with the exception of one individual who was 46 years old who ultimately did not wish to have a recorded interview. As such five women participated in interviews. One participant was 24, two participants were 25, one participant was 26, and one participant was 32. In terms of their self-identified sexual orientation, two participants identified as lesbian, two identified as pansexual/queer, and one participant identified as bisexual. Four participants indicated that they were raised in a religious household. All participants were American citizens, although three participants specified that they were first generation Americans (see Table 1).

Because IPA research explores how individuals perceive and make sense of an event or experience, Smith et al. (2009) recommends using a small sample size in order to conduct an effective interpretative phenomenological analysis. Approaching the current study from this methodological standpoint required a small sample that possessed intimate knowledge of the phenomenon in question (Smith et al., 2009).

Table 1  
*Demographic Characteristics of Participants (n = 5)*

Participant	Current Age	Sexual Orientation	Raised in Religious Household	First Generation American
Jenna	26	Pansexual/ Queer	Yes	No
Catherine	32	Lesbian	Yes	Yes
Victoria	24	Lesbian	Yes	Yes
Jessica	25	Bisexual	Yes	Yes
Elaine	25	Pansexual/ Queer	No	No

*Note.* Names changed for anonymity

Furthermore, IPA research benefits from using a relatively homogenous sample in order to specify participants for whom the phenomenon in question is salient (Smith et al., 2009). Non-probability sampling is suitable for such qualitative research in an effort to understand a complex psychological phenomenon that exists among a specific focus group (Marshall 1996; Small, 2009; Smith et al., 2009). The current study investigates the lived experiences of non-heterosexual women who were purposively, rather than randomly, sampled. Purposive sampling requires identifying the central focus of the qualitative exploration at hand and then locating participants who are willing to provide information through relevant experiences (Bernard, 2006). As such, participants were recruited through networks where the given sample of interest was known to be found.

### **Procedure**

Data was collected in the form of qualitative semi-structured interviews. The interviews were designed according to guidelines set by Brinkmann and Kvale (2015) regarding qualitative research interviewing. Questions, possible prompts, and follow-up questions were structured with the intention of extracting detailed accounts of the participants' experiences and the meaning they hold. An interview structured as such reflects the IPA approach then used to analyze the data (Smith et al., 2009). There was a set of 11 core questions that all participants responded to, while possible prompts were used as a means of extracting more detail and prompting responses when participants seemed unsure of how to answer questions (see Appendix). As recommended by Brinkmann and Kvale (2015) any points of interest or responses that required clarification were

followed up with open ended, non-leading questions. Interviews commenced once all participants acknowledged written and verbal information regarding the nature of the study and after written and verbal informed consent was obtained. Participation was strictly voluntary and respondents were not compensated for their time. Interviews were conducted via video call and each interview lasted between 30 to 60 minutes. All interviews were audio-recorded in a neutral and private setting and were transcribed verbatim for the data analysis. One interview transcript was checked by a non-affiliated researcher for coherence and a high rate of accuracy was established.

### **Data Analysis**

Implementation of the IPA method in the analysis phase involved systematic interpretation of the data and took place in stages. The analysis began with reviewing the verbatim transcripts multiple times before dividing each text of the interviews into meaningful soundbites. The second stage involved systematically reviewing each excerpt of the interviews and noting exploratory comments. Exploratory comments, though not exhaustive nor prescriptive, were divided into three primary categories: descriptive, linguistic and conceptual. Descriptive comments attempted to highlight what seemed important to a participant by describing the content of the interviews and taking it at face value. Linguistic comments were intended to explore the specific language usage of a participant. Conceptual comments often took a more interrogative form, contextualizing initial descriptive comments and engaging the data in a critical way that raised questions (Larkin, Watts, & Clifton, 2006). This level of exploration circled back to re-analysis and reflection of the data, as well as personal reflection as an interpretative researcher, ultimately leading towards analysis on a more abstract level.

The third stage of analysis was to develop emergent themes and core experiential topics by reflecting on the prior exploratory investigation of the data. This process required focusing on local parts of the transcript by breaking up the narrative flow and aimed to condense the volume of detail while maintaining the complex connections and patterns in the exploratory comments. Tables were then separately created for each interview to organize and make sense of the emergent themes and core topics highlighted for individual participants. Organization of the emergent themes involved using various frames of mind to review the transcripts and exploratory comments and to draw connections. Themes were categorized based on various processes including abstraction (i.e., clustering similar emergent themes to develop a superordinate theme), subsumption (i.e., developing an emergent theme as a subordinate theme by subsuming other

related emergent themes), contextualization (i.e., clustering emergent themes based on a temporal, cultural, narrative, etc., context), and numeration (i.e., taking into account the frequency an emergent theme appears).

The final stage of the analysis required identifying patterns across the interviews, exploring the convergences and divergences between participants' experiences. Themes that were recurrent for at least half the participants were considered group themes which were then categorized into a master table of super- and subordinate themes.

### **Reliability and Validity**

The reliability of a qualitative study is related to the researchers' meticulous interview technique (Brinkmann & Kvale, 2009). Utilization of an IPA approach maintains the importance of question formation when considering the interview structure, and prescribes caution regarding the use of leading questions Smith et al. (2009). Therefore, the interview schedule was carefully constructed, aware that leading questions that may distort the qualitative research outcomes (see Appendix).

Given the subjective nature of IPA methodology, the validity of this qualitative approach is contingent on the skills and methodological knowledge of the researcher (Brinkmann & Kvale, 2009). In order to ensure validity, extensive research with regard to IPA methodology and semi-structured interviewing technique took place before onset of the study. Additionally, a pilot interview was conducted in order to determine the feasibility of the study and presented as an opportunity to practice and refine the interview process. The aim of the current study was to shed light on the experiences of a specific focus group, thus the goal was to offer theoretical generalization rather than generalized inferences on the basis of external validity Smith et al. (2009).

### **Ethical Considerations**

Concerning the research design and procedures, information to participants, informed consent, confidentiality and anonymity, and data utilization, the current study meets the ethical principles established by the local Ethics Committee at the Department of Psychology at Lund University (2016). Participants received detailed information regarding the purpose of the study and how participation would take place. Additionally, participation was explicitly voluntary and participants were assured that they could terminate participation at any point in the study without having to explain the reason for doing so.

All participants were above 18 years of age. Before interviews commenced, participants received written and verbal information regarding their rights, the purpose of the study, data handling, and inclusion criteria for participation. Participants were provided with my contact information should they have any questions or concerns prior and after the interview. After the interview, participants were provided with a debriefing sheet that offered five local resources they could contact in the case that the interview brought up any concerns that required additional support to process. Any data that might identify individuals were omitted including names and specific locations, and names of all participants were changed in presentation of the results.

**Results**

Analysis of the data revealed three superordinate themes and six subordinate themes that encapsulated the participants’ experiences of concealment and self-disclosure regarding their sexual minority status in various contexts (Table 2). The three major themes were (a) facing stigma as a sexual minority, (b) experiences of concealment, and (c) experiences of self-disclosure. These themes and their sub-themes will successively be described and interpreted using direct quotations from the participants’ interviews.

Table 2

*Main Themes and Subthemes*

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Facing stigma as a sexual minority
Experiences of homophobia
Concerns for safety and hypervigilance
Experiences of concealment
Self-regulation of behavior and emotion
Internalized homophobia
Experiences of self-disclosure
The uninhibited self
The importance of safe spaces

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**Theme 1: Facing Stigma as a Sexual Minority**

**Experiences of homophobia.** All participants indicated that they have encountered stigma in the form of homophobia. Expressions of homophobic attitudes ranged from more subtle prejudice to blatant discrimination and varied across contexts. Experiences of homophobia in a familial context was a recurrent occurrence among four participants. For example, Jenna

described how observations of her parents' homophobic attitudes influenced the development of a defensive mentality and the decision to conceal her sexual orientation from her parents.

I have seen my parents, um, seen their behavior in relation to queer people. Um, I'm thinking about how I've seen them react when they see queer people on T.V. ...Um, so when I do have thoughts about being out, it's mostly in relation to, uh, protecting my identity, um, my sexual orientation identity from my parents for that reason.

(Jenna, age 26)

Three participants experienced prejudicial attitudes from family members upon self-disclosing their sexual minority status. Victoria expressed difficulties accepting the way her family members treated her differently after self-disclosing her sexual orientation to them.

Things changed, as much as I didn't want them to. My family would look at me differently, I guess. My aunts and my uncles and cousins started looking at me differently too, you know, I guess 'cause people talk among family members, so at family reunions it would be very awkward.

(Victoria, age 24)

All accounts of homophobic prejudice within the family were associated with aspects of their identity shared by their family members (i.e., culture, race/ethnicity, religious affiliation). For example, Catherine described how her cultural background complicated her experience and informed the selective self-disclosure of her sexual orientation to her family.

I do take into fact cultural background, like when I'm around certain family members that are West African, that I don't discuss certain things, because just culturally-wise they are just vehemently against it.

(Catherine, age 32)

Two participants reported experiences of discrimination from their families based on cultural values. Victoria told about being forced into conversion therapy based on her family's culturally rooted belief that non-heterosexuality was inherently unacceptable and could be treated as an illness.

When I came out to my family it was very hard because of my background and the Caribbean culture frowns upon homosexuality. So I was told that I was sick and needed therapy and that there was no way that I could feel these things about women because it wasn't natural.

(Victoria, age 24)

Although cultural backgrounds differed among the four participants who reported difficulties self-disclosing their sexual minority status to family, they all faced one common obstacle: religious objection to homosexuality. For example, Jessica described how her family's ability to accept her non-heterosexuality was problematized by their cultural origin and religious beliefs, and became a cause of division in her relationship with them.

I'm Polish through and through. Very, very traditional, um, Catholic, um, culture, and it's not, it's not accepted...So...this past Christmas for example, I, I brought my girlfriend and it was a lot more uncomfortable than I thought it would be...Um, I don't know, I just felt a little more disconnected from my family than I ever have.

(Jessica, age 25)

A recurrent topic among four participants was the threat of workplace discrimination based on their sexual minority status. Three of those participants described specific cues in the workplace that they perceived as a threat of prejudice and discrimination rooted in homophobia. This motivated concealment of their sexual minority status to employers, colleagues and clientele and resulted in negative associations with those work experiences. Words such as "angry," "anxiety," "afraid," "unhappy," "unsafe," "uncomfortable" were used when asked to describe how they felt in these contexts (Catherine, age 32; Jessica, age 25; Elaine, age 25). For example, Catherine expressed that working with an employer and colleagues who exhibited homophobic behavior caused her to feel uncomfortable, conflicted, and fearful about her sexual orientation being discovered.

Because of his cultural values and how conservative a Christian he was, that I was already very uncomfortable working there. Because there were certain comments in regards to, you know, transgender people having access to the bathroom of their gender...People would say things like, you know, they saw a woman who was very masculine identified or butch, they would say, like, a "bulldagger" and that's very much a derogatory term...you kind of felt a certain degree of shame because you hear people say things...it was like swallowing bullets sometimes because you want to say something, but you don't want to accidentally out yourself at the same time.

(Catherine, age 32)



**Concerns for safety and hypervigilance.** A common emergent theme among all participants was the notion that self-disclosure of their sexual orientation was grounds for being concerned about their safety, both physical and emotional. All participants agreed that they had to take special consideration for their safety in their day-to-day lives in comparison to their heterosexual counterparts.

I think about a lot of things that, people who are heterosexual and have a certain degree of privilege, they don't have to think about. There's always an extra degree of safety when it comes to me.

(Catherine, age 32)

Each participant detailed an extensive process that helped them determine whether or not it was safe to self-disclose their sexual minority status to others. Although aspects of these processes varied for participants, nearly all experiences were described as a hypervigilant state in which participants assessed threats based on their sexual minority status. All participants described calculated processes that involved expending psychological resources in order to notice potential or actual threats. For example, Victoria indicated a sense of urgency and considerable expenditure of effort in her thought processes when evaluating the safety of new situations.

I have to feel the place out to see like, "Hey, is this, do I feel safe here? Do I feel comfortable here? Do I think that I'm going to get anxiety because I'm too concerned of whether or not I'm going to be accepted, or if I'm going to be looked at, I'm going to be stared? Or is this a place where I can actually be myself and feel that comfort in just being able to be gay, you know?" And it's, it's crazy how, you know, how hard it is for gay people to just feel comfortable at all, all the time. And I don't, I haven't met a gay person who feels comfortable being out all the time.

(Victoria, age 24)

All participants cited instances where they scanned situations for potential threats associated with stigmatization of their minority sexual status. Elaine explained while she and her partner aimed to open about their status as a same-sex couple in spite of their surroundings, they remained cautious and perceived emotional threats ultimately impacted their decisions.

Usually [my partner and I] decide to not let it run our lives and change how we are but we are certainly more vigilant and we are more likely to leave a situation. Like we were at a park where a Trump rally showed up...we didn't want to be like forced to leave because of

the bigotry that was around us. But eventually we did leave because we didn't feel ok, like emotionally safe, anymore.

(Elaine, age 25)

## **Theme 2: Experiences of Concealment**

**Self-regulation of behavior and emotion.** When the participants interpreted experiences as unsafe for self-disclosure of their sexual minority status, they all indicated they found these experiences to be restricting in some way because they were concealing a part of themselves. For example, when asked how concealment of her sexual orientation affected her, Catherine reflected on the way she felt limited because she had to hide this stigmatized aspect of her identity.

How do I think it affects, not being able to be out affects me? Um, I think that a lot of times its limiting. Um, I find that when I'm in a situation that I'm not able to be out, that I feel like I'm only half myself. But not to say that my sexuality is, uh, defines me, but it is a part of who I am.

(Catherine, age 32)

The interviews revealed the participants perceived concealing their sexual minority status as a means of self-regulation, indicated by modification of behavior and management of emotions.

**Modification of behavior.** All participants expressed some form of behavioral modification in order to conceal their sexual minority status from friends, family, coworkers and/or strangers. All participants consistently reported censorship of verbal interaction with others, though the context and the extent to which they did this varied. Two participants described careful use of exclusive language in order to avoid being discovered as a sexual minority.

When I'm around my parents for example, I have to, um, think about how I'm framing my speech. Um, if I'm referring to the gay community, I'm thinking about being really careful to use the word "them" instead of "us."

(Jenna, age 26)

All participants described instances where they avoided certain topics of conversation as a means of concealing their sexual minority status. For example, Elaine explained that she avoided self-disclosing her sexual orientation around men because it often became an uncomfortable conversation or unwanted debate.

I don't feel comfortable talking about that type of thing, about my orientation, around men in particular. I'm way more cautious, um, because they tend to make a lot of comments that focus on, you know, lesbian sex, talking about threesomes, or, um, saying things like, you know, "Well maybe you just haven't, like, had sex with the right man," or, you know, stuff like that.

(Elaine, age 25)

For two participants, concealing their sexual orientation extended to altering mundane details such as their dress, appearance and mannerisms. Catherine expressed that she was more guarded in environments she feared were not accepting, as she became preoccupied that her mannerisms and dress would give away her non-heterosexuality.

Certain mannerisms, certain things that come naturally, I kind of have to curtail when I'm around, when I'm in a community or an environment where it's not very accepting. I feel like I'm a lot more self-conscious when that, when that happens, that I'm feeling like, you know, if I dress a certain way, or if my pants are at a certain height, that I'm kind of like signaling to people that I might be "other."

(Catherine, age 32)

Three participants suggested that, in comparison to their heterosexual counterparts, they felt pressured to restrain their behavior with their same-sex partners in public. Catherine explained how certain public contexts dictated second-guessing an act of affection like holding her partner's hand. For example, she and her partner minimized affectionate behavior to conceal their sexual minority status when they interpreted the threat of unwanted negative attention in conservative environments.

I would say, um being able to engage in certain things that people who are heterosexual have the privilege of doing without having to always think about them. Like, I know depending on where I am I can, or may not be able to hold my partner's hand. Like, if we are in a very conservative area as two women of color, that sometimes we get more looks, um and sometimes we can fly under the veil of people thinking we are sisters, instead of people actually realizing that we are a couple.

(Catherine, age 32)

The same three participants also felt compelled to modify their behavior toward their same-sex partners when it came to being around family. For example, Victoria interpreted a family

function as an opportunity to be negatively judged, and limited her self-expression and affection toward her partner by choosing not to participate in the same dances as the rest of her family.

At my sister's quinceanera...I was unable to actually be fully expressive with my significant other. We danced one merengue song but that's not as intimate as bachata. So, since I was being looked at by my entire family and family friends, I felt like I needed to level down my, um, my self expression in terms of being affectionate with my significant other.

(Victoria, age 24)

**Management of emotions.** All participants indicated that experiences of concealing their non-heterosexuality involved managing their emotions in different ways as a means of coping with external homophobic attitudes. For example, three participants described how they compartmentalized their emotions when they faced experiences perceived as unsafe for self-disclosure of their sexual minority status. Two of those participants described how they compartmentalized negative emotions related to their family's homophobic attitudes. Victoria expressed how compartmentalizing her negative emotions enabled her to cope with her family's inability to accept her non-heterosexuality.

It doesn't really feel that good, you know, but it's kind of like something that I just, I have to deal with 'cause I can't change [my family's] views as much as I want to.

(Victoria, age 24)

Two participants explained how they compartmentalized feelings of alienation, which allowed them to tolerate working in environments where they perceived a risk of workplace discrimination based on their sexual orientation.

People don't always respond positively to what's different, especially not in business settings sometimes. So because I don't want to take away from, like, people actually seeing my skill and my ability, that if im in an environment where I can't always be out, I'll try to, you know, suck it up and like compartmentalize so that I'm not thinking about how much of an outsider that I feel. That I can just focus on doing my job, or doing what I need to do, um, to get through it.

(Catherine, age 32)

Four participants who expressed inner conflict regarding internalized homophobic attitudes used various methods to suppress feelings of guilt and shame. Two participants recalled maintaining

relationships with men as they tried to reject their own sexual orientation and deny their true feelings, not only to their families, but to themselves.

My feelings didn't matter because they were wrong...I dated a guy, super sweet guy, really loved him to death, but wasn't in love with him and I kept dating him for a very very long time because based on everybody else's' expectations of me...I had strong feelings but I always pushed them aside and told myself that they would go away.

(Jessica, age 25)

**Internalized homophobia.** Four participants alluded to having struggled with the internalization of homophobic attitudes in their experiences of concealing their sexual orientation. Aspects of their backgrounds and upbringings, including culture and religion, made self-disclosure in a familial context particularly difficult and contributed to a sense of internalized homophobia. Jenna, who had not disclosed her sexual orientation to her parents, explained that there were moments where her religious upbringing caused extreme internal discomfort and sometimes led her to question whether she should deny her non-heterosexuality all together.

My upbringing I guess would fall under the realm of religious extremism. Um, my parents...take Mormonism extremely seriously, so, um, that extremely strict anti-gay upbringing, um, sometimes, um, leaves me with, uh, these residual feelings. Uh, sometimes I'll have, uh, nightmares about being out of the closet. Um, sometimes I'll have an existential crisis and panic and think I really should just live like a straight person.

(Jenna, age 26)

Catherine described how her upbringing in a community of ethnic minorities was at odds with accepting and self-disclosing her sexual orientation, which contributed to internalization of the homophobic attitudes emanating from her community.

I was raised in an immigrant community. It was mostly Hispanics, a lot of Caribbean people, a lot of, a lot of people from like West Africa and, and those parts of the world, that a lot of those countries have, um, have laws that object to queer people. So, I know for me, one of the biggest things, um, with coming out was about having to sacrifice being connected to my own community in order to be myself, so that caused a lot of internalized homophobia.”

(Catherine, age 32)

Four participants indicated that struggles with internalized homophobia had directly contributed to development of maladaptive affective and cognitive patterns concerning self-disclosure of their non-heterosexuality. For example, Victoria described how rejection and disapproval from her family negatively impacted her self-esteem, self-talk, and psychological well-being. She used a metaphor of a “little green monster” which personified her inner voice that was motivated by guilt and encouraged her to conceal her sexual orientation.

I didn't know how to handle what other people thought of me, what my family thought of me...I probably had many panic attacks and like breakdowns over it because I just, I didn't know, like how to handle it...knowing I was causing specifically family members unhappy or negative feelings, made me feel guilty. So that guilt has been that little green monster over my shoulder that has told me, “Hey, like, you can't, you can't do this, you can't do this.”

(Victoria, age 24)

Similarly, Jessica expressed that she anticipated rejection from others which led her to reject her own non-heterosexuality and caused internal struggle and feelings of depression.

I questioned myself for too long, way too long...Being taken seriously was hard, but taking myself seriously was even harder...it was really depressing knowing that you felt the way you did about yourself but if you felt that out loud people would think of you differently, you know...So a lot of, a lot of confusion, a lot of depression, you know, a lot of self-hate most of the time. Um, it was something that I internally struggled with for sure.

(Jessica, age 25)

### **Theme 3: Experiences of Self-Disclosure**

**The uninhibited self.** All participants interpreted experiences they perceived as safe to self-disclose their sexual orientation as a means of feeling uninhibited because they were able to be open about this stigmatized aspect of their identity. For example, when asked what self-disclosure of her sexual orientation meant to her, Victoria reflected on how being open about her sexual orientation replaced feelings of fear with a sense of pride because she felt empowered to be her authentic self.

My whole experience with being a lesbian has been, you know, difficult with my past. So I wasn't always able to be out. I had to be in the closet, so to say. So now, it makes me feel very proud because I am not afraid of showing who I am. So that's, that's what it

means to me. Being able to be self-expressive and open now because I wasn't able to do that before

(Victoria, age 24)

The interviews revealed the participants interpreted opportunities to safely self-disclose their sexual minority status as means of being uninhibited by engaging in natural behavior and experiencing emotional liberation.

*Authentic behavior.* All participants associated experiences of being able to self-disclose their non-heterosexuality with the ability to behave in ways they interpreted as natural and unrestricted. Four participants suggested that being open with others about their sexual orientation allowed them to drop the facade they had been upholding so that they could live authentically. Catherine used the simile of feeling like an actress to illustrate the way concealing her sexual orientation inhibited her from behaving naturally.

Before being out I kind of felt like an actress in my own life. Um, now it's just more like, I'm me, you know...I don't have to pretend...I like certain people or that I like certain things.

(Catherine, age 32)

All participants indicated that safe self-disclose their sexual minority status meant they could converse about relevant topics without the pressing need to censor themselves.

I'm someone who's extremely opinionated, um, and I like to talk about politics a lot. Um, so, a lot of it has to do with me being able to, um, talk about, uh, gay issues, queer issues, trans issues a lot, um, and be completely open about my political opinions on those things.

(Jenna, age 26)

One participant explained how an environment that made her feel safe to self-disclose her sexual orientation allowed her to be more self-expressive in her aesthetic instead of feeling pressured to modify her appearance.

I didn't feel the pressure to kind of look a certain way. I could actually wear the things that I wanted. That if i just wanted to braid my hair back and wear beanies, and look a little bit more androgynous, that was fine...Because people who truly were there in my corner didn't mind, and I felt a lot more free.

(Catherine, age 32)

One participant described how she was less inhibited about the way she displayed affection toward her same-sex partner when in a public environment where she felt safe self-disclosing her non-heterosexuality.

At a gay bar or at a gay club or in a gay friendly environment where there, you know, and there are other people that are gay...being expressive about themselves. I think that's the beauty of being around with like-minded people because you can relate. And it's really hard for my significant other and I to, even if we go to a straight club it's, we're still affectionate and stuff, but it's a little bit different.

(Victoria, age 24)

***Emotional liberation.*** All participants perceived opportunities they felt safe self-disclosing their non-heterosexuality as experiences that were emotionally freeing in some way. For example, three participants used the metaphor "comfortable" or "at home in my own skin" to explain what being able to safely self-disclose their sexual orientation felt like to them. When asked to describe what being "comfortable in your own skin" felt like, Jessica expressed how feeling safe to self-disclose her sexual orientation allowed her to feel at ease because she could alleviate the discomfort associated with concealing that part of her identity.

All of me just feels more relaxed and that's a big thing...I was so uncomfortable to the point where it hurt a lot of the time. And, and it's nice not to have to worry about that pain anymore.

(Jessica, age 25)

Elaine discussed how feeling safe to self-disclose her sexual orientation allowed her to feel at ease being herself completely, which she interpreted as necessary relief from the exhausting self-regulation performed in typical social situations. She indicated how experiences of safe disclosure were instrumental in letting down her guard to develop connections with others.

It's important to have a space where I can let loose a little bit more and, um, there haven't historically been a lot of spaces where I could do that. And I think it's important for mental health and just like general happiness to have time where you can, um, connect with people without having to have all your guards and barriers up. That's exhausting, um, and most of the time not worth the energy, um, for me. So, I think feeling relaxed, feeling, um, like I was a full uh complete version of myself was, uh, a relief and, um, was



a necessary break from, you know the kind of interaction management that I typically have to do.

(Elaine, age 25)

The four participants who had struggled with internalized homophobia emphasized the importance of learning adaptive ways to cope with emotionally damaging homophobic responses from their families. This was instrumental in moving on from the internalized homophobic attitudes and feeling safe to self-disclose their sexual orientation. Victoria indicated that after much emotional distress, she had reached a place of self-acceptance, which enabled her to self-disclose her sexual orientation, protect her self-concept and enhance her general well-being.

At first it used to bother me so much. Sometimes I would cry, because I'm an emotional person, but now it's kind of like, I let it slip off of me because I know that I'm happy, and I know that that's not who I am. That I am not other people's', including my family's, thoughts or judgements or opinions about me. I'm me, and I know me better than they know me, and I don't have to feel that I need to like protect and shelter and myself so much that I need to hide myself and just crawl into a hole.

(Victoria, age 24)

**The importance of safe spaces.** All participants frequently referred to the instances that they felt safe self-disclosing their sexual orientation as “safe spaces” or “gay-friendly environments.” The interviews revealed that four participants understood safe spaces played a meaningful role in their lives.

Four participants expressed various reasons they felt more comfortable being in a perceived safe space. Three participants indicated that safe spaces offered refuge from threats of homophobic responses from others because they felt their non-heterosexuality was accepted. For Victoria, safe spaces served as an accepting environment and welcome contrast to the potential judgement she faced day-to-day.

I feel like gay-friendly environments are so welcoming, 'cause they don't have judgement, being judged for, because of your sexual orientation. And you have a more chance of being judged when you go to non-gay places, I guess, which is everyday life.

(Victoria, age 24)

On the other hand, Catherine indicated that having access to a safe space served as an opportunity to be educated about and exposed to non-heterosexuality. This played a critical role in building an optimistic outlook and enabled her to conquer her own internalized homophobia.

Where I went to highschool overseas in Jamaica, homosexuality was never mentioned...[College] is where I actually met people that were queer professionals, that's where I met people who, you know, taught about the history of queer culture, especially queer culture that involves people of color...Meeting people who were gay parents, people who were gay ministers...You could actually see that you could grow up and it wasn't, you wouldn't just be a pariah in the world. So I think college was my most positive experience, and was like a turning point, 'cause that's where I came out once to myself and then coming out to my chosen family, and then my bio-family afterwards.

(Catherine, age 32)

For three participants, being in safe spaces meant being around other sexual minorities which contributed to a sense of security and thus served as an opportunity to be their uninhibited self. For example, Elaine reflected on the contrast between feeling carefree in a safe space in comparison to her vigilant tendencies in otherwise heteronormative spaces.

I didn't feel like I had to be on the defense like I often do in typically straight environments where I feel like I'm often, like, you know, uh, vigilant about who's around me...I didn't have to do any of that when I was in the environment that was all queer women...I think I was very uninhibited and happy and engaging with people and it was awesome.

(Elaine, age 25)

Four participants discussed how having access to safe spaces served as a vehicle for community building, which contributed positively to their experience of self-disclosure about their non-heterosexuality. Two participants suggested that they found comfort in building a sense of community based on shared experiences with other sexual minorities.

It's just comforting to be around people who've had similar experiences as you. Um, people who have already done the whole coming out process just like I have. Um, people who may have difficulties with their parents like I have. Um, so, so there's an understanding...based on shared experience.

(Jenna, age 26)

Three participants expressed that their experiences in safe spaces gave them a sense of belonging. For example, Catherine explained how building community in safe spaces allowed her to feel connected to others, whereas her non-heterosexuality had otherwise been a cause for ostracization.

Surrounding yourself with the right community, people who don't tolerate you but celebrate you, has been extremely helpful...people who despite their cultural background can still see you as a human being and they don't let that one part of your being overshadow everything else that you are.

(Catherine, age 32)

### **Discussion**

The current study aimed to contextualize non-heterosexual women's experiences of concealment and self-disclosure of their sexual minority status by offering an interpretative account of their personal narratives. An interpretative phenomenological analysis (IPA) approach was positioned as a lens to view the participants' first-hand testimony and obtain a qualitative examination of the phenomenon in question. Employing an IPA approach enabled the present study to access the ways the participants derive meaning from their experiences and then prescribed a hermeneutic analysis of their accounts in order to make sense of the participants' interpretations.

The data analysis revealed three superordinate themes and six subthemes that effectively embody the participants' experiences of concealment and self-disclosure regarding their sexual minority status in various contexts. The first two superordinate themes that emerged naturally from the data are seamlessly supported by Meyer's (2003) proposed continuum intended to further the understanding of minority stress processes. According to Meyer (2003), experiences of possessing a concealable stigmatized identity can be understood as a series of minority stress processes. These stress processes can be conceptualized along a continuum which ranges from distal (i.e., objective events and conditions) to proximal (i.e., subjective perceptions and appraisals). Meyer (2003) suggested the following four specific minority stress processes relevant to sexual minority individuals, ordered from distal to proximal: (a) externally sourced objective stressful contexts, (b) anticipation of external stress and vigilance, (c) concealment of one's sexual orientation, and (d) the internalization of negative societal attitudes.

### **Distal Minority Stress Processes**

The first superordinate theme, “facing stigma as a sexual minority,” reflects interpretations of distal processes of minority stress among non-heterosexual women based on their possession of a stigmatized identity. This theme is formed by abstraction, or in other words, its meaning as a whole is derived from the composite meaning of its subthemes: (a) experiences of homophobia, and (b) concerns for safety and hypervigilance.

**Externally sourced stress.** Interpretation of the data meant to represent the subtheme “experiences of homophobia” is a clear reflection of the most distal minority stress process (i.e., externally sourced objective stressful contexts) (Meyer, 2003). All participants consistently cited experiences of stigma-related prejudice and discrimination that were perceived as a stressor, supporting research which indicates the pervasiveness of victimization on the basis of sexual minority group membership (Amnesty International, 2018, Herek, 1989, 2000; Herek & Capitano, 1999). The contexts emphasized most often across the interviews concerning external sources of homophobia were within the family and the workplace.

Interpretation of the data showed that different contexts of homophobic experiences were more salient to some participant’s than others. Analysis of the interviews revealed that four participants struggled with homophobia in a familial context, and that they perceived these experiences as significantly problematic and complicated in their experience of being a sexual minority. Participants perceived experiences of rejection and disapproval from family members on the basis of stigmatization as detrimental to their self-esteem, well-being, and self-concept. While considerable research has investigated the impact of parental attitudes on sexual minority youth (e.g., Arnold, 2012; Ryan, Diaz, Sanchez, & Huebner, 2009; Rosario, Schrimshaw, & Hunter, 2009), there is almost no research that investigates how homophobia in a familial context may potentially impact the lives of sexual minority adults. Future research could build on these findings to further the mechanistic understanding of homophobia within the family of adult sexual minority individuals and investigate potential long-term consequences for well-being.

Other integral aspects of identity associated with family and upbringing (i.e., cultural background, religion) were perceived as a point of contention for those participants who reported experiences of homophobic attitudes in a familial context. All participants who experienced homophobia within the family consistently discussed the destructive impact religious objection to non-heterosexuality had on their relationships with family, and the negative consequences this

had on their affect and well-being. These findings are supported by research which has shown that perceiving homophobic prejudice in religious and familial contexts is associated with lower self-esteem, and higher levels of distress and internalized homophobia and suggests that psychological consequences are potentially enduring (Barton, 2010; Sowe, Brown, & Taylor, 2014)

Among the participants who were first generation Americans, the intersection between one's sexual minority status and cultural background was interpreted as playing a significantly complicated role in their experience of being a sexual minority. Limited research has investigated the intersection of sexual orientation with other facets of identity such as religion and cultural background in the context of minority stress (e.g., Crawford, Allison, Zamboni, & Soto, 2002; Zamboni & Crawford; 2007), and even fewer studies have employed qualitative methods (e.g., Woody, 2014). The findings of the present study suggest that future research should employ holistic research designs that would benefit studies aiming to capture such multi-layered and idiosyncratic experiences, and that perhaps interdisciplinary qualitative research is necessary to observe a wider scope of identity markers,

Threats and direct experiences of homophobia in a workplace context were relevant for four of the participants. Such negative workplace experiences, though expressed by some as a having uncomfortable consequences, were interpreted as less ubiquitous than experiences of homophobia in the family. This was attributed to the participants' ability to isolate negative impacts of homophobic workplaces to specific periods of employment. Additionally, participants interpreted that they could exercise more control over situations of workplace homophobia and relationships in the workplace (e.g, quitting the job, talking to a manager) in comparison to homophobic attitudes within the family. While a limited number of studies have suggested homophobic threats and discrimination in the workplace negatively impact work performance, (e.g., Sears & Mallory, 2011), none of the participants indicated that they felt their work performance was affected by a hostile environment. However, homophobia in the workplace was perceived as having an adverse effect on job satisfaction as well as other life domains including romantic relationships. Few studies have explored how a homophobic work environment impacts individuals' job satisfaction and how this carries over to life outside of work (e.g., Holman, 2018). Future research could build on these findings to provide more evaluative knowledge of the

boundary between hostile work environments and the personal life domain in the context of possessing a stigmatized sexual minority status.

**Anticipation and vigilance.** According to Meyer (2003), the next distal minority stress process on his proposed continuum framework is the anticipation of external stress and vigilance. Interpretation of the data that represented the subtheme “concerns for safety and hypervigilance” clearly demonstrates this minority stress process. All participants consistently expressed concerns for their physical and/or emotional safety on the basis of their stigmatized sexual minority status. This is consistent with previous research which suggests vigilance is required to remain alert of situations that may lead to victimization based on a sexual minority status (Crocker et al., 1998, Jones et al. 1984).

The results showed that participants’ anticipation of stigma-related stress and consequent hypervigilance was logically grounded in actual experiences of homophobia. Anticipation of victimization required hypervigilance, which heightened participants’ perceptions of threats in their surroundings. Chronic hypervigilance and rumination over personal safety were interpreted among all participants and were perceived as an effortful expenditure of psychological resources. This is consistent with previous research which indicates the negative impacts of hypervigilance on cognitive and affective functioning in the context of possessing a stigmatized sexual minority status (Pachankis, 2007).

### **Toward Proximal Minority Stress Processes**

The second superordinate theme, “experiences of concealment,” represents interpretations of proximal processes of minority stress among non-heterosexual women based on instances of concealing their stigmatized sexual minority status. The second superordinate theme is also formed by abstraction, in which the subthemes “self-regulation of behavior and emotion” and “internalized homophobia” encapsulate the essence of the participant’s experiences of concealing their sexual orientation.

**Concealment of one’s sexual orientation.** Meyer’s (2003) proposed continuum holds that the next step toward proximal minority stress processes is the experience of concealing one’s sexual orientation. Interpretation of data that represented the subtheme “self-regulation of behavior and emotion,” reflected increasingly proximal minority stress processes in which participants engaged in self-regulation in order to conceal their stigmatized sexual minority status. The interviews revealed that all participants had various experiences they interpreted as physically

and/or emotionally unsafe, which led them to modify their behavior in accordance with concealment strategies. Such accounts were interpreted across the interviews as negatively marked experiences that ranged from uncomfortable situations to feelings of dysphoria. These findings are consistent with previous research, which has demonstrated behavioral regulation processes motivated by concealment of a stigmatized sexual minority status (D'augelli & Grossman, 2001). Participants' accounts are also supported by research which has shown concealment of a stigmatized status to be detrimental to cognitive and affective functioning as it elevates stress and reduces well-being (Miller & Major, 2000; Smart & Wegner, 1999; Waldo, 1999).

Accounts that were interpreted as behavioral regulation included modifying one's dress, censoring speech and topics of conversation, and restricting affectionate behavior towards a same-sex partner. Limited research has investigated how routine practices of behavioral regulation play a role in concealment of a sexual minority status (Hetrick & Martin, 1987), and there was no research available that examined concealment of a sexual minority status in the context of same-sex partnership. The findings of the present study distinguishes concealment of a same-sex relationship as a mutual process of behavioral regulation that occurs between same-sex partners. Future research could build on these findings to examine exactly how these processes take place, and to evaluate the implications this holds for same-sex couples who experience stigmatization. Generally speaking, a notable gap in the literature indicates a need for further investigation of the underlying mechanisms of behavioral regulation in regard to concealment of a stigmatized sexual minority status.

All participants described processes that were interpreted as emotion regulation to manage negative affect resulting from experiences of stigmatization. Methods of emotional regulation observed during data analysis included compartmentalization and suppression of negative emotions. For three participants, the compartmentalization of negative emotions associated with stigmatization was interpreted as a helpful coping mechanism in various contexts. Participant's considered compartmentalization tactics a useful way of protecting their self-concept and coping with negative emotions associated with victimizing situations they felt they could not ignore (i.e., homophobia in familial and work contexts). These interpretations are consistent with previous literature that indicates compartmentalization as a psychological mechanism used to avoid experiences of dissonance by allowing conflicting cognitions and emotions to exist within the self

(Leary & Tangney, 2003). No research was found that investigated emotional compartmentalization in the context of managing a stigmatized sexual orientation. Thus, future research could look to develop the understanding of such emotion regulation processes among sexual minority individuals.

Four participants interpreted the suppression of negative emotions associated with internalized homophobic attitudes as a harmful process. For example, the participants who recalled maintaining heterosexual relationships as a means of suppressing internalized guilt and shame viewed these experiences as a maladaptive and ineffective means of self-deceit with negative consequences for their well-being. These findings are consistent with previous research which has shown concealment to be a tenuous coping strategy that is associated with maladaptive emotion-regulation, increased negative self-directed affect, and impaired cognitive and affective functioning (Barreto et al., 2006; Miller & Major, 2000; Larson et al., 2015).

**Internalization of negative societal attitudes.** Interpretation of the data meant to represent the subtheme “internalization of homophobic attitudes,” is a clear reflection of the most proximal minority stress process (i.e., internalization of negative societal attitudes) (Meyer, 2003). Four participants discussed how elements of their upbringing (i.e., cultural background, religion) contextualized their struggles with internalized homophobia. For those participants, their cultural background and/or religious upbringing was interpreted as the central reason they struggled to gain acceptance within their family, which served as a major contributor to a sense of internalized homophobia. This is consistent with research which has shown the association between homophobic prejudice in religious and familial contexts and the internalization of homophobic attitudes (Barton, 2010; Crawford et al., 2002; Sowe et al., 2014; Woody, 2014; Zamboni & Crawford; 2007).

Only one participant, did not indicate experiences with internalized homophobia. This participant was a first generation American not raised in a religious household, and did not describe any experiences of rejection within her family regarding her sexual minority status. The analysis revealed this important distinction in contrast to the other four participants who experienced internalized homophobia coupled with familial rejection based on cultural and religious background. These findings support the notion that familial acceptance of a stigmatized sexual minority status is a protective factor which contributes to resilience (Ryan, Russell, Huebner, Diaz, & Sanchez, 2010). Future research is needed to further the understanding of how



sexual orientation intersects with other aspects of identity to contextualize experiences of internalized homophobia and to educate parents about the pervasive negative consequences of rejection within the family on the basis of cultural background and religion.

### **Safe Disclosure and Inhibition**

The third superordinate theme, “experiences of self-disclosure,” also formed by abstraction, represents behavioral and emotional inhibition in relation to self-disclosure of a stigmatized sexual minority status and highlights the perceived importance of “safe spaces,” or contexts deemed secure for self-disclosure.

When asked to reflect on experiences that participants described as conducive to self-disclosure of their sexual minority status, perceptions of these accounts all had one thing in common: it was important that they perceived a situation for self-disclosure as “safe.” All participants interpreted such experiences as empowering, as being able to self-disclose their sexual minority status enabled them to embrace this stigmatized aspect of their identity and contributed to a sense of pride and inhibition. These findings are consistent with research that indicates self-disclosure of one’s stigmatized identity as an instrumental process in the development of a positive and stable self-concept as a sexual minority (Ayala & Coleman, 2000; Cain, 1991; Cass, 1979; Chrobot-Mason et al., 2001).

Additionally, all participants expressed that opportunities for safe self-disclosure were interpreted as instances in which they were behaviorally and emotionally unrestrained. This distinction can be made in contrast to participants’ perceptions of pressure to restrict their behavior and emotions during experiences characterized by concealment of their sexual orientation. Interestingly, the four participants who expressed having struggled with internalized homophobia all felt that opportunities for self-disclosure were an instrumental step toward behaving in a way that was authentic. In regard to emotional inhibition, the same four participants described experiences of safe self-disclosure as significant in learning to cope with emotionally damaging homophobic responses from family members. These findings indicate that behavioral and emotional efforts to conceal a stigmatized sexual minority status are related to experiences of inauthenticity, where as safe self-disclosure is a vehicle bringing individuals closer to being their true and happier selves. These findings are relevant to recent studies that have indicated the association between self-disclosure of one’s stigmatized sexual orientation and measures of authenticity, and have indicated implications for positive psychological outcomes

(Kosciw, Palmer, & Kull, 2015; Riggle, Rostosky, Black, & Rosenkrantz, 2017). However, no available studies have applied a qualitative approach when considering behavioral and emotional processes regarding self-disclosure of a stigmatized sexual minority status. The findings of the present study shed light on the need for more qualitative research that examines the complexity joining behavioral and emotional mechanistic processes with self-disclosure practices.

**Building a community.** The four participants who described struggles with internalized homophobic attitudes highlighted the importance of access to contexts that were interpreted as safe spaces, and specifically spaces where other sexual minorities were present. It was in such spaces that these participants most often perceived being accepted and felt they were able to build a sense of community with others based on shared experience. It was in a safe community setting that one participant described becoming educated about sexual minority populations which aided in normalizing a stigmatized sexual minority status, and played a pivotal role in the dissolution of her internalized homophobic attitudes and moving toward self-acceptance. Four participants felt that safe spaces based on community facilitated self-expression such that they could embrace their true self without the risk of being judged. Three participants expressed that affiliation with a community based on the shared experience of possessing a stigmatized identity gave them a sense of belonging and provided them with valuable social resources. These cumulative interpretations of the roles safe spaces played in the participants' lives reflect recent literature that supports the notion of community-based resilience (Meyer, 2015). Community resilience suggests that engagement in a marginalized community capacitates empowerment of its members and focuses on social support networking and resources (Fergus & Zimmerman, 2005; Meyer, 2015). Most research on resilience has prioritized focus on individual factors that impact resilience. Therefore, findings of present study hold implications for the development of community-based intervention and suggest a need for research that moves beyond the individual level to investigate how interpreting a sense of community contributes to resilience and impacts the well-being of sexual minority individuals.

### **Limitations and Future Directions**

The extent to which the findings of the present study are credible is contingent on the ability to apply theoretical perspectives in analysis of the data. The applicability of Meyer's (2003) distal-proximal minority stress process continuum, as well as Meyer's (2015) community-based resilience model suggests that credibility of the present research is evident. However, the

credibility of this study would benefit from a collaborative effort including at least one other researcher. IPA methodology prescribes that the second layer of hermeneutic analysis is subject to personal bias because it requires a self-conscious exchange between the researcher, the coded data, and their psychological knowledge (Larkin et al., 2006). Having at least one other researcher independently double-checking each stage of analysis, to determine major discrepancies and illuminate blind spots during the interpretative process, would aid in minimizing personal bias and would strengthen the credibility of the present study. Finally, the credibility of the present study would be strengthened given more prior experience with qualitative research methodology and semi-structured interviewing techniques. This is an issue that can only be addressed by gaining practical experience in conducting semi-structured interviews and qualitative research methods.

An important methodological flaw of the present study is related to fact that the interview schedule was designed before recruitment of participants took place. The interview questions were constructed to be gender-neutral so that the study could be inclusive for male and female participants. However, once recruitment and interviews commenced, it became clear the vast majority of respondents were female, and given the benefits of a homogenous sample in IPA research, it seemed beneficial to focus the analysis on interviews with female participants (Smith et al., 2009). Unfortunately, since the interviews had already begun, the interview schedule remained unchanged and the present study does not include gender-specific questions designed to extract descriptive accounts of how being a woman might impact experiences regarding concealment and self-disclosure of a sexual minority status. Future research could address this limitation by focusing their target population before recruitment and designing interview questions intended to explore experiences of concealment and self-disclosure as it relates to gender identity. Comparative qualitative studies conducted on a focus group of female and male participants would also provide interesting insight into the ways men and women perceive experiences of concealment and self-disclosure of their sexual minority status.

Utilizing a small, purposive sample is appropriate given the idiographic nature of IPA research (Smith et al., 2009). However, purposive sampling methods share strengths and weaknesses. In terms of strengths, purposive sampling in an IPA approach offers researchers an element of control over participant selection, ensuring that the obtained sample represents the population intended to be analyzed. Thus, in the context of IPA research, purposive sampling

reduces the effects of selection bias in comparison to some other research that samples pre-existing groups (Rosaline, 2001). However, research conducted on a purposive sample is limited in its ability to generalize findings to the larger population. Although the epistemological underpinnings of an IPA approach do not require generalizability, it is important to assess the transferability of the research findings. Transferability demonstrates to the extent to which the research findings can be applicable to other contexts. The execution of the methodology and emergent findings indicate that such a study could be transferable to other contexts. The findings of the present study unveil important implications regarding the intersection of a stigmatized sexual minority status with other integral aspects of identity (e.g., cultural background, religion) and identify important areas of focus for future studies. The findings of the present study can be built upon in future research by conducting a similar qualitative study to explore the lived experiences of sexual minorities in other sociocultural contexts.

### **Conclusion**

Utilizing an IPA approach, the research aims of the present study were fulfilled and the research question thoroughly explored. Based on the three superordinate themes and six subthemes that emerged from the collected data, this study offers a cohesive narrative regarding the complex lived experiences of concealment and self-disclosure among women who possess a stigmatized sexual minority status.

In conclusion, the findings of the present study indicate that sexual minority individuals perceive tension between concealment and disclosure of their sexual minority status, and hold implications for the ways intersectional identities inform these experiences. On one hand, interpretations of the narratives provided by the participants indicate that experiences of stigma and concealment can be understood within the framework of distal-proximal minority stress processes (Meyer, 2003). On the other hand, interpretations of experiences characterized by safe self-disclosure were in support of a community-based resilience model (Meyer, 2015). The participants' first-hand testimonies offer contextualization of these real-world phenomena and the subsequent interpretative analysis introduces avenues for future research to further the understanding of minority stress processes and develop community-based interventions to mitigate the related negative outcomes.

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## Appendix

**Interview Schedule**

Hello, and thank you for taking the time to participate in my study. Please verbally confirm now that you have read and understood all the information I have provided to you regarding the study, its focus, content and procedures and that you are by your own decision participating in this interview. \_\_\_ As previously mentioned, this interview is audio-recorded. Please verbally confirm now if I have your permission to do so. \_\_\_\_\_

Thank you. As you know, this study is aiming to explore your experience as a self-identified non-heterosexual individual. I am interested in your past and/or present experience of disclosing and/or not disclosing your sexuality. I am particularly interested to know the ways you think, feel and behave regarding this. To be clear, when I say "disclosure" or "non-disclosure" of your sexual orientation, I am referring to the more commonly used terms "coming/being out." I may use these terms interchangeably.

Shortly, we will begin a interview consisting of a series of questions aiming to capture your first hand account of what this experience is like for you. Please be aware that this interview will be much like a one-sided conversation and you can expect to do most of the talking.

I can assure you that your identity will remain anonymous. For any reason, you can go into as little or as much detail as you feel comfortable with, choose not to answer specific questions, and end the interview at any time.

You can reference anything from your past or present experience, including specific examples. Feel free to reference behaviors, feelings and thoughts you have had in the past or have currently. Do you have any questions before we begin?

1) What does "being out" about your sexual orientation mean to you?

*Possible prompts:* what does it look like for you? present, past? behavior, feelings, thoughts? Why? How?

2) In what contexts do you feel you can "be out" about your sexual orientation (if any)?

*Possible prompts:* present, past? Why? How?

3) Can you please tell me about a time (if any?) that you felt you could fully "be out" regarding your sexuality?

*Possible prompts:* What happened? How did you Behave? Feel? Think?

4) How do you evaluate a scenario (if any) to decide if you can disclose your sexual orientation?

*Possible prompts:* present, past? Why? How?

5) How do you think being able to "be out" affects you?

*Possible prompts:* Why? How? Your behavior? Feelings? Thoughts?

6) In what contexts do you feel you can not "be out" about your sexual orientation (if any)?

*Possible prompts:* present, past? Why? How?

7) Can you please tell me about a time that you felt you could not fully "be out" regarding your sexuality?

*Possible prompts:* What happened? How did you Behave, Feel, Think?

8) How do you evaluate a scenario to decide if you can not disclose your sexual orientation (if any)?

*Possible prompts:* present, past? Why? How?

9) How do you think not being able to "be out" affects you?

*Possible prompts:* Your behavior? Feelings? Thoughts?

10) How has your experience of "being out" changed for you over time (if at all)?

*Possible prompts:* How have your behaviors, feelings, thoughts changed?

(POSSIBLE PROBING/SPECIFYING QUESTIONS:)

What Happened? Why? How? Could you say something more about that? Do you have further examples of this? What did you actually do when...? How did you react when....?

Thank you for your honest responses. The interview is nearly over, but before we end the interview I want to ask a last question.

11) How do you feel now, having participated in this study and completing this interview?

Thank you so much for taking the time to participate. If you are feeling now, or at any point that this interview has been a difficult experience and you would like to seek additional support, please contact me and/or reference the debriefing sheet I have provided to you for additional support resources.