

Discrimination, Concealment, & Multiple Minority Status within LGBTQ+ Populations

by

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**A thesis submitted in partial fulfillment
of the requirements for the degree of
Master of Science
(Psychology)
in the University of Michigan-Dearborn
2021**

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Dedication

It can be difficult growing up queer, especially in a society that makes you feel like it's wrong to do so; especially in a culture that lacks representation and you grow up wondering why you do not feel like others feel; especially when those around you make jokes condemning your secret feelings; especially when you keep those feelings inside year after year after year, hoping that resolve will come and that you will be different – but different never comes, at least not in the way one thinks.

What makes it easier, though, is having somebody going through that struggle with you. Luckily, I got to grow up and evolve with someone else whose pain looked so much like mine, even when I was afraid to admit it.

I dedicate this project to my sister, Riley, one of the bravest and most inspiring people I get the privilege to love. This work is for you, for me, and for those who have struggled like we have.

Acknowledgements

I would first like to state my deepest and sincerest gratitude for Dr. Michelle Leonard for your time, your energy, your mentorship, and all the laughs along the way. You truly have shaped my academic and future professional career in ways that I cannot begin to express, and I am so thankful for all you have taught me over the course of this graduate program.

I would also like to thank Dr. Amy Brainer. Thank your wisdom and wealth of knowledge on the topics pertinent to this project. Your openness and guidance as I learned to think about some of these constructs differently is something that I am so grateful for. Thank you for the meaningful work that you do and for helping me better understand the intricacies of identity and culture.

I would also like to thank Dr. Michael Schmidt of Wayne State University. Thank you for giving me the foundational knowledge and tools to be able to think about queer identity in the way that I do now. Without your intelligence on feminism, queerness, and intersectionality, I would not have been able to complete this project in the way that I have.

To all the professors involved with the University of Michigan-Dearborn Clinical Health Psychology graduate program, thank you for all you have done over the past two years. Your swiftness as we navigated a global pandemic, your patience as we all had to learn to operate differently, and your perseverance through all the newness that these past two years have contained are deeply appreciated and have helped me grow in ways I wasn't able to anticipate.

Thank you to my cohort for all the support, encouragement, and camaraderie throughout our time in the program. I feel lucky to have shared this experience with you all.

Thank you to the World Bank Organization for the collection of and permission to use the dataset utilized in the current study.

Lastly, thank you to my chosen family for allowing me to oscillate between isolation and immersion without question while I focused on my schooling and for supporting me through both the highs and the lows. Without you all, this wouldn't have been possible.

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Abstract

The LGBTQ+ community is a diverse population composed of sub-groups of sexual and gender minorities with unique experiences. While this community faces discrimination and stigma across the globe, it remains an understudied population in psychological literature. These experiences of discrimination, as put forth by the Minority Stress Model (Meyer, 2003), lead to unique stressors experienced by this community. Because membership to the LGBTQ+ community is heavily reliant on identity-centered factors, many members of this community face forms of individual-level (perceived) and institutional-level (systemic) discrimination. Previous research shows that LGBTQ+ individuals who have faced forms of discrimination are more likely to have adverse physical and psychological health consequences and, often, they turn to coping mechanisms that can contribute to other sources of stress. The Minority Stress Model calls these proximal stressors, and they include acts such as concealment of one's identity for protection and safety. Because concealment has been shown to have significant impacts on one's physical and mental health, it's important to understand the types of distal stressors that impact its utilization. Methods: A sample was obtained from Eastern Europe that consists of 2,296 self-identifying LGBTQ+ members. Using this vast, multicultural sample, various relationships were explored, including discrimination and concealment; discrimination and reporting acts of discrimination; multiple minority status and concealment; and the relationship between multiple minority status, concealment, and reporting acts of discrimination. Results: Statistical analyses revealed that those who had experienced institutional-level discrimination were more likely to engage in more frequent identity concealment. Furthermore, results showed that those who had experienced both

individual-level and institutional-level discrimination engaged in more frequent identity concealment than those who did not experience both types of discrimination. Lastly, the study found that those who reported having multiple minority identities engaged in less frequent identity concealment. Discussion: Results support the idea that the frequency of identity concealment increases when institutional-level discrimination is experienced. More so, when both individual-level and institutional-level discrimination are experienced, the frequency of identity concealment is higher than those who experienced only one type of discrimination. Additionally, those who belong to multiple minority groups are less likely to conceal their identities than those that belong to only one minority group. No conclusive relationship was determined between discrimination and reporting. Furthermore, concealment did not moderate the relationship between multiple minority status and reporting acts of discrimination. Implications and suggestions for future research efforts are discussed, as well.

Chapter I

Introduction

LGBTQ+ Population: A Minority Group with Complex Needs and Experiences

The LGBTQ+ acronym is an umbrella term for a community made up of sexual and gender minorities, including people who identify as lesbian, gay, bisexual, transgender, pansexual, asexual, intersex, queer, and other self-identifying labels. Because this population is composed of many different groups of individuals, this community is often studied using both collective and individual lenses. However, because of the complexity of experiences that exist within the LGBTQ+ community, it can be difficult to capture and generalize all experiences within this community, especially when research is conducted using a collective methodology. When the experience of a gay man is compared to a lesbian woman, differences can arise, depending on what is being studied. This grows more complex when other identity factors are considered, such as gender, fluidity, race, socioeconomic status, “outness,” etc.

Research on LGBTQ+ individuals can become even more intricate when it is considered that LGBTQ+ populations are an understudied population throughout a variety of disciplines, with only just above a 2% publication rate between 2000 - 2015 (van Eeden-Moorefield et al., 2018). This lack of understanding of many of the unique factors, barriers, and stressors that those within the LGBTQ+ community face can make it difficult to truly comprehend the distinct experiences of those within this population.

Another barrier to research when studying the LGBTQ+ community is that it is often difficult to recruit members from this community. Sullivan & Losberg (2003) examined common

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characteristics of research studies involving LGBTQ+ participants and found that research on this community struggles with many of the same barriers that research on other minority populations struggle with, including difficulty in defining aspects of the community and concealment within the population due to the possibility of discrimination or stigma. When conducting research with a target population consisting of those who may be apprehensive about disclosing aspects of their identity, it can be difficult to locate participants for a research without the fear of compromising their safety, especially in areas where higher levels of discrimination occur. This phenomenon, along with issues with self-selection of samples and underpowered studies, ultimately lead to a lack of understanding of this population.

Nonetheless, past research has shown that those within the LGBTQ+ community are more susceptible to mood and anxiety disorders (Botswick et al., 2010), suicide attempts (King et al., 2008), and engaging in self-harming behaviors, specifically in LGBTQ+ individuals who have experienced sexual assault (Balsam et al., 2011). One factor that can contribute to the emergence of these is exposure to stress.

Stress

Stress has been shown to have negative health - both physical and mental - effects when individuals are faced with a threatening situation. The stress experience can be worse for those who belong to minority groups (Meyer, 2003), especially for sexual and gender minorities. Research shows that the more minority groups that an individual belongs to, the more stressors they are likely to face (Bowleg et al., 2003).

The Minority Stress Model (Meyer, 2003) posits that the experience of minority stress is positioned within the confines of general environmental circumstances that include factors that give them advantages and disadvantages. These factors can include things such as their

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socioeconomic status, their minority status, and other groups to which they may belong. These factors, then, overlap with one another, which can help determine the individual's exposure to stress and their access to resources to assist with coping (Diaz et al. 2001). The model also considers general stressors, which could include stressful life events, such as losing a job or a loved one. These can be overlapped with minority stressors that are unique to the minority group that the individual belongs to, such as different forms of discrimination or violence that they have experienced. The Minority Stress Model distinguishes between distal and proximal stressors that individuals in minority groups face. Distal stressors are stressors that can be defined as objective, not depending on the appraisal of the individual. Distal stressors often include prejudice events, such as discrimination or violence. Within this model, distal stressors are considered as a whole, as opposed to various types of stressors or the nuances of prejudice that one may face. Distal stressors can lead to proximal stressors, which are stressors that are more subjective in nature since they rely on the individual's appraisal and perception. Proximal stressors often include the concealment of parts of the individual's identity or internalized racism, homophobia, or transphobia as a reaction to a distal stressor.

The model also acknowledges that an individual's minority status within their environment often leads to this individual's unique identification with their minority status, thus contributing to additional stressors related to their perception of themselves as someone who is a member of a group that is oppressed or stigmatized (Miller & Major, 2000).

Multiple Minority Stress (Double Jeopardy)

As mentioned previously, it is known that belonging to more than one minority group - whether it be a combination of a racial minority group, a sexual minority group, or a gender

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minority group - can have detrimental effects when coupled with the experience of discrimination. Like the Minority Stress Model, the concept of multiple minority stress examines how individuals who belong to a minority group are affected by stressors such as stigmatization and discrimination. However, Multiple Minority Stress uses an intersectionality perspective, which utilizes a Black feminist framework to understand the role and experience of multiple minority status (Crenshaw, 1991; Hooks, 1984).

An individual who belongs to two minority groups is often referred to as being in a state of “double jeopardy.” This occurs when somebody with an intersectional identity is discriminated against for multiple aspects of their minority or oppressed identity. McConnell et al. (2019) explored this phenomenon and found that Black individuals reported the highest levels of racial/ethnic stigma within LGBTQ+ spaces, with Hispanic/Latino and Asian participants following, and White participants reported the fewest levels of discrimination. They also found that this was mediated by connectedness to the LGBTQ+ community, which impacted racial groups in different ways. For example, White participants indirectly experienced minority stress through racial/ethnic discrimination in the LGBTQ+ population because it made them feel less connected to the LGBTQ+ community. No similar association was found for Black participants, meaning that Black participants felt the stress directly from the discrimination in the community. This exemplifies how individuals who belong to multiple minority groups may face unique stressors that are not experienced by those who belong to only one or no minority groups.

Discrimination

When thinking about discrimination through the lens of human interaction, discrimination has been described as “the intended or accomplished differential treatment of persons or social groups for reasons of certain generalized traits” (Salentin and Heitmeyer,

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2020). The experience of discrimination is unfortunately not rare, but stigma or fear of the legal system may impact an individual's willingness or ability to report these experiences. Huebner et al. (2004) found that gay or bisexual men who have experienced violence or discrimination were more likely to report this information if they were younger, HIV positive, and if they were less likely to conceal their identity. This supports the idea that people with more stigmatized identities (those who feel that they must conceal their identities) are less likely to report acts of discrimination to legal authorities.

Discrimination can be considered a significant source of stress for individuals (Meyer, 2003). Discrimination can have effects on both physical and psychological health. Individuals who possess socially stigmatized identities, thus more potential for discrimination, are at higher risk for poor health outcomes (Hatzenbuehler et al., 2013). Research has shown that discrimination is related to increases in physiological arousal, such as cardiovascular activity, in individuals with stigmatized identities (Harrell et al. 2003). Richman et al. (2007) found that Black men showed a more intense physiological reaction to stressors than their white peers, which supports the idea that discrimination has the potential to weaken the ability to cope within individuals with stigmatized identities.

Other research suggests that living in an environment where oppression, stigma, and discrimination exist can negatively impact the psychological well-being of LGBTQ+ individuals, especially during youth (Kelleher, 2009). Hostile and unpredictable environments that are composed of discrimination can increase the experience of feelings of vulnerability (Meyer, 2003) and self-doubt (Garnets, Herek, & Levy, 1992), leading to psychological distress. Discrimination has been shown to have effects on various areas of one's life often contributing to poorer mental health outcomes and is associated with higher levels of suicidal ideation - and this

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is especially true for those within minority populations (Sutter, 2016). Research also shows that the higher the expectation of rejection based on discrimination, the individual is more likely to report symptoms of depression, anxiety, and suicidal ideation (Kelleher, 2009). Other studies have revealed that women who find themselves victims of sexist discrimination are more depressed (Kobrynowicz and Branscombe, 1997) and often have lower self-esteem (Swim et al., 2001) than women who have not experienced the same types of discrimination. Other minority groups have similar experiences. Diaz et al. (2001) found that discrimination found in one's social environment can lead to negative outcomes, such as social alienation, low levels of self-esteem, anxiety, and suicidal ideation. The frequency of discrimination can also amplify the effect of discrimination, as daily discrimination has been shown to predict increased levels of anxiety and depression and that these effects were found to be more prevalent among people with stigmatized identities who reported higher levels of identity concealment (Livingston et al., 2020).

Types of Discrimination that LGBTQ+ Individuals Face

Individual. Many people within the LGBTQ+ community face discrimination in their lives. Often, this discrimination is being perceived personally by the individual as the discrimination is being directed towards them. For the current study, this experience of discrimination is referred to as individual discrimination. Another distinguishing feature of individual discrimination is that it often involves the actions of individuals or small groups of people as opposed to wide networks or populations of people (Adams et al., 2018). The New York City Gay and Lesbian Anti-Violence Project (2017) note some of the common types of individual discrimination and violence experienced by the LGBTQ+ community, which include harassment, intimidation, sexual assault, and murder. These types of discrimination can be

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detrimental to mental health, as reported by Gee (2008). In their study, they used multiple tools to measure general psychological distress and found that individual racial discrimination was predictive of low levels of mental health.

Institutional. While discrimination can happen at an individual level, discrimination can also happen at an institutional level. This type of discrimination is often broader than individual discrimination, occurs at a societal level, and is integrated into various institutions throughout a society (Adams et al., 2018). This often includes discrimination that takes place in the workplace, when trying to find housing, seeking out medical care, and through various facets of the legal system.

Work. LGBTQ+ members often face discrimination in the workplace. The Pew Research Center (2013) conducted a national survey and found that 21% of LGBTQ+ participants reported unfair treatment by their employer through either hiring, pay inequality, or promotion-based discrimination. Another national study, the 2008 General Social Survey, reported that 27% of gay and lesbian participants had experienced some form of workplace harassment due to their sexual orientation and that 7% had lost a previous job due to their sexual orientation.

Discriminating against one's sexual orientation is not the only type of workplace discrimination that LGBTQ+ individuals face. Many transgender and gender non-conforming individuals face gender-based discrimination. The 2015 U.S. Transgender Survey reported that 27% of participants disclosed that they have been discriminated against in the workplace through being fired, being denied a promotion, or being denied employment based on their gender identity.

15% of participants also reported that they had been verbally, physically, or sexually harassed in the workplace in the past year based on their gender identity.

Housing. Badgett et al. (2019) report that LGBTQ+ individuals are at least 15% more likely to be poor than individuals who are cisgender and heterosexual. This fact lends itself to the idea that, in a study of 35 states, only about half of LGBTQ+ adults own their house, compared to 70% of straight, cisgender individuals (Conron, 2019). These numbers are even lower among LGBTQ+ members who are of a racial minority or who identify as transgender, suggesting that the phenomenon of multiple minority stress may increase the stress of institutional barriers. When workplace discrimination occurs - through pay differentials, denying job promotions, and other forms - this can have an impact on the ways that LGBTQ+ can and cannot participate in the housing market the same way that the heterosexual, cisgender majority can.

LGBTQ+ individuals who are seeking to rent homes also face discrimination. Renters may be less likely to respond to inquiries from homosexual couples than to heterosexual couples (Friedman et al., 2013) and they may even be likely to raise rent to higher prices for same-sex couples than comparable heterosexual couples (Levy et al., 2017).

Medical. Another major source of institutional discrimination is within a medical setting and is apparent when we look at the unique experiences of transgender individuals. Many times, transgender individuals find that medical care, whether it be for physical and/or psychological purposes, is biased or that the medical professionals are ill-equipped at handling unique issues that transgender individuals face. White et al. (2015) conducted a survey of 4,262 medical students from a total of 170 different medical schools, including both allopathic and osteopathic universities and found that approximately 67% of the students who participated in the study rated their education on LGBT topics and issues as either “very poor,” “poor,” or “fair.” Obedin-Maliver et al. (2011), in their study, found that the median amount of time spent learning LGBT-curriculum was 5 hours, which was reported by the Deans of 132 medical schools throughout

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Canada and the United States. Irwig (2016) found that only 11% of endocrinologists and endocrinology fellows rated themselves as “very competent” in providing care for transgender individuals. Unger (2015) also found that 80% of gynecologists did not receive education on how to treat transgender folks during their residency. This does not only happen in the United States. Doctors in Bosnia & Herzegovina refuse to conduct sexual reassignment surgery or hormone replacement therapy, despite it being covered by health insurance (Quinn, 2006). This is also true in other countries, such as Albania, Croatia, and Montenegro, meaning that if an individual wants to undergo sexual reassignment surgery, they must travel abroad to do so (Council of Europe, 2011). Furthermore, many health care facilities in Bosnia & Herzegovina claim that none of their clients are from within the LGBTQ+ community, thus they do not have the relevant experience to work with the population. Not only does this cause harm to the individual being denied services that is likely to promote positive physical and mental health outcomes, but this perpetuates a cycle of discrimination against the LGBTQ+ community. These statistics become even more bewildering when one considers that there are studies showing that the implementation of transgender health education can improve knowledge, comfort, and willingness to care for transgender individuals, and attitudes within health professionals (Korpaisarn & Safer, 2018).

Legal. Even looking beyond the knowledge aspect of the institutional discrimination, LGBTQ+ folks face discrimination and system oppression by the government and insurance industries. Stroumsa (2014) reports the ways in which the government and the laws that they have enacted have made it harder for LGBTQ+ individuals to receive care. For instance, Stroumsa explains that while Medicare covers the hormonal treatment that many transgender folks seek out, as well as the routine care that they may need, there is no coverage under

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Medicare and Medicaid for gender reassignment surgery in some states, which is a crucial factor in reducing gender dysphoria in transgender populations. Stroumsa goes on to analyze the language used by the Center for Medicare and Medicaid services and how it seems to demonize transgender care and weaponize the argument that transgender folks do not have a medical need to receive the care they seek out. Medicare and Medicaid using language such as Gender Reassignment Surgery being “experimental” or “controversial” perpetuates a system that works against transgender folks and their desired health care, Stroumsa points out, despite the surgeries not being experimental or controversial for transgender folks. Other research adds that many insurance companies deny coverage for gender reassignment surgery, specifically facial feminization surgery, as they deem it as “cosmetic and not medically necessary treatment for gender dysphoria,” even though research shows lower levels of gender dysphoria after gender reassignment surgeries (Dubov & Fraenkel, 2018).

Coping Mechanisms for Discrimination

The Minority Stress Model accounts for coping and social support of sexual and gender minorities. While there are numerous ways to cope and find social support, members of the LGBTQ+ community may engage in positive or negative coping strategies and may seek out social support through legal avenues (through the police, justice system, etc.) or through social avenues (community resources, friends, and family, etc.).

Research has shown that when coping with discrimination, individuals may choose a variety of strategies to use to try to lessen the stress caused by the discriminatory event. Doan Van et al. (2019) studied discrimination in a bisexual population and found that this subgroup of the LGBTQ+ community was likely to engage in seeking out social support, relying on resilience (strong sense of self, high self-esteem), and consuming media, such as books, television, and

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movies that included bisexual and queer characters to help cope with the discrimination that they faced. Research shows that other forms of coping with discrimination can include discounting the source by attributing the discrimination to ignorance, reminding oneself that the discrimination is temporary and that things will get better, and even harmful ways of coping, such as internalizing blame and detaching from the environment (Madsen & Green, 2012; Puckett et al., 2019). Other deleterious coping strategies include substance use, especially those who have greater experiences with victimization (Mereish, O’Cleirigh, & Bradford, 2014). Additional positive coping strategies may include becoming involved with the LGBTQ+ community and associated organizations, finding friends within the LGBTQ+ community, and reframing thoughts in a way that envision a positive outlook on the future (Toomey et al., 2019).

Concealment as a Coping Strategy for Discrimination

In addition to previously mentioned coping mechanisms, individuals who experience distal stressors often react by engaging in proximal stressors, such as identity concealment. Because belonging to the LGBTQ+ community is centered around aspects of identity, while also knowing that belonging to the LGBTQ+ community is still stigmatized in many cultures today, concealment of identity to keep oneself safe from discrimination seems sensible in potentially threatening situations. Concealment of identity can happen for many reasons, but many times, it can be a method to keep oneself safe after experiencing discrimination or to avoid the stigma or potential discrimination altogether. In most cases, the intention of concealment strategies do not aim to explicitly deny the identity of the individual, but the true aim of concealment is to modulate one’s behavior to avoid signaling specific behaviors, words, or statements that may reveal one’s identity or group membership (Yoshino, 2002).

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While identity concealment strategies can be effective in reducing the individual's exposure to discrimination and victimization on a personal level, research has shown that concealment of identity and prior victimization can predict heightened reactivity to daily discrimination experiences (Livingston et al., 2020), which seems to contribute to a cyclical pattern of identity concealment, where an individual becomes hyperaware of discrimination, contributing to more frequently concealing their identity, and so on.

Although meant to be protective, engaging in concealment can be detrimental to the individual in several ways. Concealment can be mentally taxing to the individual who is concealing their identity, as they must constantly self-monitor and be vigilant in situations where the opportunity of identity exposure exists (Pachankis, 2007). Further research has found that strategies of concealment have the potential to increase the occurrence of intrusive thoughts and contribute to feelings of anxiety in the individual who is concealing their identity (Lane and Wegner, 1995; Smart and Wegner, 1999). Furthermore, this preoccupation with potential disclosure of identity contributes to subsequently worse mental health due to the experience of chronic stress (Quinn and Chaudoir, 2009).

Not only does concealment impact psychological distress within the individual, but research has also shown that identity concealment can also reduce the possibility for healthy interaction with other individuals or members of one's stigmatized group who have the potential to serve a source of social support, which has been shown to be protective factors against suicide in gender and sexual minorities (McKenna and Bargh, 1998). And while some previous research has suggested that different concealment strategies may help to reduce the self-esteem effects that would have been associated to the individual's stigmatized identity (Sedlovskaya et al., 2013; DeJordy, 2008), other research supports the idea that individuals who choose to engage in

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concealment strategies may be worse off than those who choose to self-disclose their identity to selected others. Previous research shows that concealment is related to higher levels of depression (Talley & Bettencourt, 2011). For people with concealable stigmatized identities that can be hidden from other people, such as mental illness or minority sexual/gender identities, disclosing the identity to others (i.e., being “out”) is theorized to bring health benefits (Meyer, 2003).

However, in contrast to many of these ideas, other research argues that there are positive effects that concealment can have for those within the LGBTQ+ community. One way that concealment can bring benefit to an individual, as mentioned previously, is that it helps keep them safe in an environment that discriminates against their identity. Concealment can help promote safety because it can assist the individual in blending or passing as part of the majority or as not belonging to a minority group, helping to avoid stigmatization and discrimination (Xavier et al., 2013). The idea of blending or passing, while having many definitions, has been defined as “either pretending to be an x rather than a y or by trying in some artificial way to make herself into an x rather than a y, instead of simply accepting or affirming herself as a y” (Mills, 1999). Passing or blending isn’t necessarily about denying oneself the reality of their identity. It is imperative to note that the motivation to pass is rooted in oppression. Thus, instead of risking being discriminated against, the individual chooses to conceal by blending or passing, hoping that this results in a diminishment of distal stress.

Another benefit of concealment is especially apparent when transgender identities are considered. Individuals who identify as transgender may conceal their transgender identity pre-transition (should they choose to transition) to blend/pass to keep them safe. Additionally, concealment can be utilized in another way post-transition. This occurs when the individual

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conceals the aspects of their gender or sex assigned at birth (such as their birth name or their anatomy) after transitioning since their gender or sex assigned at birth does not reflect their identity (Peitzmeier et al., 2016; Factor & Rothblum, 2008). Not only does this provide safety from distal stressors, but it can act in a gender-affirming way, allowing them to live life as their identified gender.

While there is a substantial emphasis on the “coming out” process in Westernized countries, other countries may prohibit coming out or reject the concept altogether. For example, Eliason and Schope (2007) illustrated a linear model for the coming out process for LGBTQ+ individuals in Western society that is composed of four common themes, including: feelings of differentness, where the individual begins to feel that they are different from their peers or that the behaviors that they engage in are incompatible with their heterosexual identity; identity formation as a developmental process; the need for disclosure, such as coming out to those around them; the need for cultural immersion, which consists of a rejection of a heteronormative culture; and lastly, the need for identity integration. While this model may be true for LGBTQ+ individuals in Westernized environments, it has been critiqued for its rigidity and failure to capture the complexity of LGBTQ+ identity. Furthermore, other cultures do not experience a coming out phenomenon at all for their LGBTQ+ community, as well as other groups that may live outside of gender and sexual binaries. Instances of this include the *burrnesha* population in Albania and the *Muxe* population in Mexico. While *burrnesha* are not seen as homosexual or transgender, they consist of gender non-conforming individuals who are accepted by society and do not have the same coming out experience that the LGBTQ+ members in Westernized societies have (Robertson Martinez, 2021). The *Muxe* population consists of biological males who also intertwine femininity into their identities through their dress and attire, but they do not

identify as transgender or have a desire to be a woman (Mirande', 2015). Again, while these individuals do not belong to the LGBTQ+ community, their identities, although outside of the majority, do not require a coming out experience.

Because of the variance in the importance and impact of concealment of one's minority status, this study hopes to widen the understanding of how concealment is used in both an intersectional and multicultural context and of how complex and nuanced the experience of concealment is.

Understanding Discrimination within a Cultural Context

The current study utilizes a sample from Central and Eastern European countries including Albania, Bosnia & Herzegovina, Croatia, Kosovo, Macedonia, Montenegro, and Slovenia. Research done in each specific country surrounding LGBTQ+ issues is limited and a large quantity of LGBTQ+ research is done within the United States (van Eeden-Moorefield et al., 2018). Because of coping strategies such as concealment of identity, many researchers find it difficult to identify and agree on the prevalence and demographic makeup of the LGBTQ+ population (Bell, 2017). This holds true for the countries included within this study, which is why this analysis will mix European and United States literature, hoping to help make sense of an understudied population within an understudied region.

When considering the countries included in this study, it is important to note that LGBTQ+ laws vary by region. While all of the countries included in the study have decriminalized same-sex activity, only Croatia, Montenegro, and Slovenia recognize same-sex unions. None of the countries allow for adoption by same-sex couples, however Croatia, Kosovo, and Slovenia have laws in place around LGBTQ+ individuals being able to adopt or a law that includes guardianship over a stepchild. Even more convoluting, every country allows LGBTQ+

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individuals to serve in the military and they each have their own anti-discrimination laws banning all types of anti-gay discrimination. The United States parallels many of these laws, supporting the idea that there are both social and legal similarities between the two regions.

Generally, there seems to be a broad ideological divide between Eastern and Western Europe. The Pew Research Center (2018) found that the majority of people surveyed in Western Europe were in favor of same-sex marriage, while the majority of people in both Central and Eastern European countries opposed it. There is a similar ideological divide found in the United States between states that are considered more liberal versus states that are more conservative. The Pew Research Center (2011) shows this division in the United States, stating more than 80% of people who identify as liberal express tolerant views of homosexuality, which is contrasted by only 44% of people who identify as conservative holding the same view. It is important to note that the purpose of this comparison is not to label Eastern Europe as homophobic and Western Europe as thoroughly accepting of LGBTQ+ individuals, but rather this comparison in ideological division between the two regions is being highlighted to help conceptualize the experiences of the LGBTQ+ members living within regions that are discriminatory or in opposition to their identities. It also underlines the complexity and intricacies of LGBTQ+ experience and how an environment and culture can shape the experience of someone who belongs to the community.

Reporting Acts of Violence and Discrimination in the LGBTQ+ Community

Reporting acts of violence and discrimination can seem overwhelming and even pointless to those who belong to sexual and gender minority groups. Multiple factors may influence one's decision on whether they should report their experiences to law enforcement and these decisions

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become even more complicated when looked through the perspective of the LGBTQ+ community.

One major barrier to reporting acts of discrimination or violence in the LGBTQ+ community is the fact that these individuals are sexual and gender minorities living within a cisgender, heterosexual framework that is aimed to meet the needs of the majority first. To someone who belongs to the LGBTQ+ community, this often means that their reports are often met with discrimination (Peterman & Dixon, 2003). For instance, the National Transgender Discrimination Survey found that 22% of transgender individuals who reported their experiences with discrimination and violence were met with biased police harassment (Grant et al., 2010). This is especially detrimental when it is considered that being met with further discrimination and harassment when reporting an act of violence can often leave the individual feeling isolated, leaving them vulnerable for similar acts in the future.

This is further exacerbated by a lack of resources available once a member of the LGBTQ+ community reports an act of discrimination or violence. Oftentimes, members of this minority group experience a lack of adequate resources, such as shelters, support groups, and treatment programs to help the individual cope and find support after being harmed. Bornstein et al. (2006) conducted a qualitative study involving female LGBTQ+ domestic violence survivors and found that, even when there were services available, they were reluctant to use them in fear of experiencing transphobia or homophobia.

Another barrier to reporting discrimination and violence in the LGBTQ+ community is the idea of concealment. Wise and Bowman (1997) discovered that when an individual in a same-sex couple seeks resources for assistance, they often face the same risks that they faced when they came out for the first time, as well as other types of discrimination due to the

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heterosexist framework of society. Renzettie (1989) found similar results when surveying a sample of 200 individuals who self-identified as lesbian. These individuals felt as if they could not turn to their family for help because their families were unaware of their sexual orientation.

Additionally, members of the LGBTQ+ community tend to have a distrust of the police, government, or other proponents of procedural justice within their environment, more so than their peers in the majority (Owen et al., 2017). This is plausible when one considers the idea that LGBTQ+ members may reject legal institutions due to having been stigmatized, pathologized, and ostracized for centuries. There may be a desire within this community to exist outside of the legal constructs of society or a hesitation to participate and seek asylum within an institution that has been or still is harmful to their identities due to their minority status. This distrust and experiences with being stigmatized through legal and societal efforts may inhibit members of the LGBTQ+ community from reporting their experiences with discrimination and violence, making it difficult to know just how prevalent these types of acts are.

Lastly, members of the LGBTQ+ community may feel a sense of shame when reporting their experiences with discrimination and violence. The shame that is experienced in this situation can be two-fold: internalized shame for the victim as they may be “outed” during the process, but also a sense of shame brought upon the LGBTQ+ community. Ristock (2001) notes an apprehension within the LGBTQ+ of acknowledging acts of discrimination and violence, in fear that it perpetuates a negative stereotype about those within the community. Morrow and Hawxhurst (1989) found that self-identifying lesbians thought that if they were to speak out about their experiences with violence, they would reinforce the homophobia that they’ve experienced. This fear often expands into adjacent social spheres, such as feminist spaces, and there is a fear that they, too, may also be looked down upon if discrimination and violence is

reported (Oatley, 1994). In this way, it is not only the heterosexist society that can make it difficult to report acts of discrimination and violence, but the LGBTQ+ community and its allies may contribute to the lack of reporting, as well.

Purpose of the Current Study

Because we know the detrimental effects that discrimination can have on LGBTQ+ individuals and that these effects are more pronounced in individuals who are more likely to conceal their identity (Livingston et al., 2020), this study aims to understand if different types of discrimination – such as institutional discrimination versus individual discrimination – may be related to how frequently identity is concealed in those within LGBTQ+ populations in Eastern European countries. Previous research has utilized analyzing the effect of different types of discrimination (individual and institutional) on racial minorities (Gee, 2008). The current study adopts a similar approach in its methodology and seeks to find a relationship between different types of discrimination and the frequency of identity concealment individuals engage in. This study also seeks to understand if having a multiple minority status moderates the amount of concealment an individual engages in, and, lastly, if concealment of identity moderates the relationship between discrimination and reporting instances of discrimination to legal authorities.

The utility of this study lies in the idea that it may help lead researchers to explore the efficacy of existing treatments and create new interventions aimed at helping gender and sexual minorities to cope with different types of discrimination and stressors in diverse cultures. Additionally, there is hope that it will aid in the understanding of the ways to begin to dismantle and transform a legal and social system that discriminates against those who identify within the LGBTQ+ community. It may also assist in helping to better understand the ways that LGBTQ+ individuals conceal their identity after exposure to discrimination, which has the potential to lead

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to better detecting LGBTQ+ individuals to conduct more research on this understudied population. Lastly, it may also help practitioners to help LGBTQ+ clients who deal with various types of discrimination build resilience and coping strategies within a therapeutic setting.

This study makes use of a previously collected data set. The data set includes information from 2,296 LGBTQ+ members from Central and Eastern European Countries. All participants were surveyed about their experiences with various factors in relation to their LGBTQ+ status in their specific country. The hypotheses for the study are:

1. Both types of discrimination will independently predict significantly high levels of concealment within LGBTQ+ individuals, with experiences of individual-level discrimination leading to higher levels of concealment than institutional-level discrimination.
2. Individuals who experienced both individual-level and institutional-level discrimination will engage in higher levels of identity concealment than those who did not experience both.
3. The association between discrimination and reporting will be explored.
4. Members of multiple minority groups will significantly differ in the frequency of identity concealment from those who belong to only one minority group, meaning that those who belong to multiple minority groups will have higher levels of concealment than those from one minority group.
5. It is predicted that concealment will moderate the association between multiple minorities and reporting acts of discrimination or violence.

Chapter II

Methods

Participants

The participants for the current study are 2,296 LGBTQ+ members from various countries in Eastern Europe, including Albania (8.6% n = 197), Bosnia and Herzegovina (16.3%, n = 374), Croatia (25.5%, n = 580), Kosovo (5.5%, n = 127), Macedonia (18.5%, n = 426), Montenegro (7.6%, n = 175), and Slovenia (18.1%, n = 417). This study consisted of individuals who self-identified as gay (41.9%), lesbian (21.8%), bisexual (35.1%), and straight (1.3%). Fifty-three percent of respondents self-identified as male at birth. Most respondents fall between the ages of 18-25 (46.2%, n = 1061) with the average age of this sample being 27.6 years old. Nearly half of the sample had some college or university education and 49% of respondents were employed at the time of data collection. Most respondents lived in an urban area in their country. Fifty-one percent of this sample reported being single and 90% of the study identified as unmarried.

Procedure

The original survey was conducted by the World Bank Organization from February 2017 to April 2017. The survey was conducted online to allow for privacy and confidentiality in responses to survey questions. Questionnaires were translated into local languages using Independent Polling System of Society's (IPSOS) Strategic Marketing data entry program,

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allowing for individuals from various countries to participate in the survey and ensuring anonymity. The data set was obtained from The World Bank Organization's website and permission was gained to use the data for the current study.

The original study collected data on a variety of experiences and sociopolitical variables, however, only a subset of the information that were collected for the original study were used for the current project based on the research questions. The pertinent variables to the current study include measures on discrimination, concealment, minority status, and reporting discrimination to legal authorities.

Measures

Discrimination

Discrimination was examined at two levels: an individual-level discrimination and an institutional-level discrimination. Several questions were utilized to measure these constructs (see Appendix A).

Individual-Level. To examine individual-level discrimination, participants were asked if they had “personally felt discriminated against or harassed” in the last 12 months on a variety of grounds. Anyone who answered that they had been discriminated against or harassed on the basis of sex, gender, sexual orientation, and/or gender expression were coded as having experienced individual-level discrimination.

Institutional-Level. The question that was used to detect institutional-level discrimination was, “In the last 12 months, in the country where you live, have you personally felt discriminated against in any of the following situations because of your sexual orientation and/or gender identity and/or being intersex?” Individuals could choose from options including when looking for a job; at work; when looking for a house or apartment to rent or buy (by people working in a

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public or private housing agency, by a landlord); by a healthcare personnel (e.g., a receptionist, nurse, or doctor); by social service personnel; by school/university personnel. (This could have happened to you as a student or as a parent); in a bank or insurance company (by bank or company personnel); and when showing your ID or any official document that identifies your sex. Individuals were first coded into groups based on whether they have experienced institutional-level discrimination. This was then combined with the total individual-level discrimination variable to create a new variable that contained all types of discrimination that each participant experienced.

Concealment

The question used to measure levels of identity concealment asked, “Where do you avoid being open about your sexual orientation and/or gender identity and/or being intersex for fear of being assaulted, threatened or harassed by others?” Individuals could choose from options including my home; school; workplace; a café, restaurant, pub, club; public transport; a sports club; a street, square, car parking lot or other public place; a park; public premises or buildings; and other. For each participant, the frequency to which they conceal their identity was calculated by summing the total number of places where they endorsed concealment. Higher sums then indicated greater levels of concealment.

Multiple Minority Status

There were two questions that were used to examine multiple minority status. The first question that was utilized asked, “Do you consider yourself to be...” and gave the participant the choices of heterosexual/straight, lesbian, gay, bisexual, other, and not sure. Anyone who answered this question as “lesbian,” “gay,” or “bisexual” were identified as being part of a sexual minority group, counting as “membership” in one minority group status. Any participant

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who answered this question as “heterosexual/straight” was not granted sexual minority status for this question.

The second question used to measure multiple minority status asked, “In the country where you live, do you consider yourself to be part of any of the following?” with options consisting of various minority groups, including “an ethnic minority”; “a religious minority”; “a gender minority”; “a sexual minority”; “a minority in terms of disability”; “other minority group”; and “none of the above.” For this question, participants only chose one option. As long as “none of the above” was not the chosen answer, participants were granted minority status for their respective group.

The data for both questions were combined to reveal multiple minority status. If a participant was considered a sexual minority in the first question and chose a sexual minority as their answer to the second question, they were not identified as having multiple minority status. If a participant was not identified as a sexual minority in the first question but identified as belonging to another minority group in the second question, they were not identified as having multiple minority status. If a participant was identified as being a sexual minority in the first question and chose belonging to a different minority group in the second question, they were identified as having multiple minority status. In the sample, 45% (n = 1040) met this definition of being in a multiple minority.

Reporting

Participants were asked, “Thinking about the most recent incident [of discrimination], did you or anyone else report it anywhere?” and were given response options of “yes,” “no,” or “I don’t know.” Respondents were then categorized into a “I reported” or “I did not report” group to further study the relationship between multiple minority status and reporting of discrimination.

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Participants were further asked, “What happened as a result of reporting the incident?” The answers to this question included options such as “disciplinary action”; “a report was filed, but no disciplinary action yet”; “a report was filed, but no disciplinary action at the end”; and “nothing happened.”

For individuals who answered “no” to the original question, they were further queried about why the discrimination was not reported. These participants could choose from options including “fear of intimidation by perpetrators”; “fear of discrimination or ridicule”; “they did not want to reveal their sexual orientation and/or gender identity and/or being intersex”; “they didn’t know how or where to report”; “they believed that nothing would happen or change”; “they were concerned that the incident would not have been taken seriously”; “they believed that it was not worth reporting it”; “they felt it was too much trouble”; “they dealt with the problem themselves or with help from family or friends”; “they were too emotionally upset to report it”; “they did not think people would understand what they were talking about”; and “other reasons”.

Chapter III

Results

There was a total of 2,296 individuals who participated in the current study. Prior to data analysis, data screening and an examination of frequency patterns were conducted. Examination of data distribution revealed that the majority of the variables pertinent to the study were significantly skewed. Attempts to mitigate the skew through transformation were conducted. Even with these attempts, the data remained skewed. As a result, the data were analyzed using dichotomous, non-parametric methods for the majority of the analyses. Analysis revealed that there were 24 possible cases of multivariate outliers. This was determined by using Mahalanobis distance with a chi-square critical value of 9.21. Analyses were run with and without these individuals and the patterns of results were similar. Therefore, these participants were left in the data analysis.

Examination of the experience of discrimination and concealment by the sample was completed. The range of participants experiencing individual-level discrimination was between 2.5% (intersex participants) and 27.4% (gay participants). The experience of institutional-level discrimination ranged from 4.1% (experienced in social services) and 13.1% (experienced within the workplace). Approximately half of the participants of the study reported that they did not experience any type of discrimination (45.4%, $n = 1042$). Most participants reported concealing their identity in at least one area of their life (58.5 %, $n = 1352$) with experiences ranging from 0.2% (in a park) and 21.2% (at home).

To test the first hypothesis, the association between discrimination and concealment, a t-

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test was conducted to determine if there were differences in levels of concealment based on the experience of individual or institutional discrimination. Results of these analyses showed that there was not a difference in the experience of individual discrimination and concealment ($t(1323) = -1.12, p = .26$). For institutional discrimination, results showed a significant difference between those who experienced institutional discrimination ($M = 6.24, SD = 2.41$) and those who had not ($M = 5.97, SD = 2.52$), where those who had experienced institutional discrimination engaged in more frequent identity concealment than those who did not experience institutional discrimination ($t(1323) = -1.98, p = .05$).

To test the second hypothesis, a variable was created to represent double discrimination, which included those who experienced discrimination at both the individual and institutional level. Approximately one fourth (25.9%, $n = 595$) of the sample had experienced both types of discrimination. A t-test was run to examine the difference between those who have experienced both types of discrimination and those who have experienced only one or neither type of discrimination on level of concealment. Results showed that there was a significant difference between groups ($t(1323) = -2.37, p = .01$) where those who had not experienced both types of discrimination engaged in less frequent concealment ($M = 5.96, SD = 2.51$) compared to those who had experienced both types of discrimination ($M = 6.30, SD = 2.39$).

To test the third hypothesis, which was aimed at exploring reporting and discrimination, the data on reporting was examined. Of the 2296 participants in the study only 1093 answered the question pertaining to whether they had reported an incident of discrimination. Of these 1093 participants, only 3.7% ($n = 85$) indicated that they had reported an incident of discrimination. Of these 85 participants who reported, the most common outcome (1.6%; $n = 36$) was “Nothing happened.” Other responses to this question included, “Don’t know” (0.7%, n

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= 17), “A report was filed, but no disciplinary action at the end” (0.6%, $n = 13$), “Disciplinary action” (0.4%, $n = 10$), and “A report was filed, but no disciplinary action yet” (0.4%, $n = 9$).

For those who did not report the incident, the most common reason, as seen in Table 1, was “Nothing would happen or change” (25.1%, $n = 577$). Other responses to this question were “Did not want to reveal my sexual orientation and/or gender identity and/or being intersex” (15.9%, $n = 365$); “Fear of discrimination or ridicule” (15.2%, $n = 350$); “Not worth reporting it - ‘it happens all the time’” (14.9%, $n = 341$); “Concerned that the incident would not have been taken seriously” (13.9%, $n = 318$); “I did not think people would understand what I was talking about” (12.7%, $n = 291$); “Didn’t know how or where to report” (7.4%, $n = 170$); “Too much trouble, no time” (6.9%, $n = 158$); “Fear of intimidation by perpetrators” (6.8%, $n = 157$); “Other reasons” (5.7%, $n = 132$, 5.7%); “Because I was too emotionally upset to report it” (5.4%, $n = 124$); and “Dealt with the problem myself/with the help from family or friends” (4.1%, $n = 93$).

To examine how the experience of discrimination was associated with reporting, a chi-square (McHugh, 2013) was conducted between those who reported and those who did not report and those who experienced discrimination and those who did not experience discrimination. Three chi square tests were run, one for individual-level discrimination, one for institutional-level discrimination and one for those who had experienced both types of discrimination. Results showed that there was not a difference in individual-level discrimination and reporting ($X^2 (1, 1093) = .51, p = .28$); institutional-level discrimination and reporting ($X^2 (1, 1093) = 2.01, p = .09$); or in those who had experienced both types of discrimination and reporting ($X^2 (1, 1093) = .94, p = .20$).

To test the fourth hypothesis, multiple minority status first needed to be discerned. In total, 1,040 (45.2%) of the participants in the study fell into a multiple minority classification. All participants who received a multiple minority status belonged to a sexual minority and

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another self-identified minority group. As displayed in Table 2, 170 participants (7.4%) of the study were ethnic multiple minorities; 136 participants (5.9%) were religious multiple minorities; 307 participants (13.4%) were gender multiple minorities; 33 participants (1.4%) were disabled multiple minorities; and 394 participants (17.2%) identified as an “other” multiple minority member. A t-test was run to examine the difference between those who were in the multiple minority group and those who only identified as one minority group on level of concealment. Results showed that there was a significant difference between groups ($t(1323) = 3.43, p < .001$) where those who identified as a multiple minority engaged in less frequent concealment ($M = 5.80, SD = 2.60$) compared to those who did not identify as a multiple minority ($M = 6.28, SD = 2.38$).

The fifth hypothesis was a proposed moderation of concealment on the association between multiple minority status and reporting. There was not a significant difference in reporting discrimination between those who held a multiple minority status and those who did not ($\chi^2(1, 1093) = 2.83, p = .09$). A t-test was conducted to examine the relationship between concealment and reporting. Results showed that there was not a significant difference between those who reported their experience with discrimination ($M = 6.28, SD = 2.30$) and those who did not report their experience with discrimination ($M = 6.12, SD = 2.42$) in levels of concealment ($t(770) = .44, p = .66$). A logistic regression was performed to examine the effects of multiple minority status and concealment on the likelihood that participants would report experienced acts of discrimination. The logistic regression model was not statistically significant, $\chi^2(2) = .50, p = .78$, meaning that concealment did not significantly affect the relationship between multiple minority status and reporting acts of discrimination.

Chapter IV

Discussion

Existing as a sexual and gender minority and belonging to the LGBTQ+ community can be a vulnerable experience for some group members. This study aimed to explore various dynamics between discrimination, identity concealment, multiple minority status, and the act of reporting discrimination within an LGBTQ+ sample using the framework of the Minority Stress Model. Consistent with this model, members of this community are faced with distal stressors, or acts of discrimination and violence. While many studies examine how various aspects of the Minority Stress Model interact, this study fills the gap in the literature surrounding how different types of distal stressors (individual-level and institutional-level discrimination) interact with proximal stressors (identity concealment). The differentiating aspect of this study lies in the idea that it has dissected discrimination into two distinct types (individual-level and institutional-level) within an LGBTQ+ sample. This study also explores how coping and social support (reporting acts of discrimination), and multiple minority status are intertwined within this framework. Lastly, this study examines the impact of a multiple minority status and how this can affect levels of identity concealment.

The first aim of this study was to explore the relationship between discrimination, a distal stressor according to the Minority Stress Model, and identity concealment, a proximal stressor. It was hypothesized that both individual-level and institutional-level discrimination would be positively associated with concealment within this population and that individual discrimination would lead to higher levels of concealment than institutional discrimination. The study found

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that individual-level discrimination was not significantly associated with identity concealment, but the experience of institutional-level discrimination was. This finding suggests that personally experiencing discrimination may not have profound effects on one's need to conceal parts of their identity, but that existing in an environment where discrimination is built-in to societal functions does. While little is known about the prevalence of institutional barriers faced by the LGBTQ+ community in this region, this finding suggests that an individual with a sexual and/or gender minority identity may experience proximal stressors, such as expecting others within their environment to hold prejudiced attitudes, and even with these proximal stressors, the experience of institutional discrimination, such as barriers to access necessities in their environment (i.e., housing, a job, and healthcare), may make these necessities feel unattainable. Thus, it may be that even when an individual is aware of prejudiced attitudes and expects that others within their environment will reject them for their minority status, this alone is not as impactful as discrimination that permeates legal and societal necessities. Therefore, it may be that institutional-level discrimination is more threatening to an individual's sense of identity, as institutional-level discrimination may restrict them from access to the same housing markets, job opportunities, or healthcare benefits that the cisgender, heterosexual majority is afforded. This may, in turn, motivate the individual to conceal parts of their identity to be able to gain access to these necessary societal functions. Previous research has found that institutional discrimination is associated with higher levels of mood, anxiety, and substance use disorders, as well as general life satisfaction (Hatzenbuehler et al., 2010; Pachankis, 2015). This suggests a potential relationship between institutional-level discrimination, various mental health outcomes, and identity concealment. Further research is necessary to better understand the relationship between these variables.

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The relationship between discrimination and concealment was further explored by examining those who had experienced both individual-level and institutional-level discrimination. It was hypothesized that for those who had experienced both types of discrimination, higher levels of concealment would be reported than those who experienced only one or no type of discrimination. The hypothesis was supported, and it was found that those individuals who had experienced both types of discrimination reported higher levels of identity concealment. Although the number of individuals in the sample who had experienced both individual- and institutional-level discrimination was lower than expected, it could be that cumulative effects of discrimination confirm the injurious nature of the environment. This is supported by previous research, which has shown that cumulative exposure to discrimination has negative mental health outcomes on the minorities who experience it (Wallace et al., 2016). Furthermore, this study suggests that experiencing discrimination in only one instance may underestimate the effect that discrimination can have on health outcomes. Therefore, there could be a third variable that is pertinent to the relationship between discrimination and concealment, such as mental health. For instance, it may be that someone who experiences both individual-level and institutional-level discrimination is more susceptible to poor mental health outcomes, such as anxiety, and, thus, engages in more frequent concealment of their sexual orientation or gender identity to avoid the anxiety that can follow acts of discrimination. Previous findings in the literature have shown a relationship between discrimination and various mental health outcomes, including the experience of psychological distress; episodes of depression; experiences of loneliness, and having low self-esteem (Huebner et al., 2005; Zakalik & Wei, 2006; Ramirez-Valles et al., 2005). Future research could also examine how the experience of

multiple types of discrimination could affect these mental health outcomes and consider if concealment is a moderator for those variables.

The results of the hypothesis aimed at examining discrimination and reporting revealed that there was no significant relationship between discrimination and reporting, regardless of discrimination type. This may have resulted from the low level of participants who reported the acts of discrimination that they experienced. As noted, only 85 out of the 2,296 participants (3.7%) reported their experiences of discrimination. This is not surprising as the phenomenon of not reporting acts of discrimination in Eastern Europe has been reported in earlier research (Quinn, 2006). Scheuerman & colleagues (2020) concluded that the act of reporting discrimination is more likely to occur when there is high level of visibility of an LGBTQ+ population in the community and when the environment consists of a greater diversity of sexual orientations. Thus, the lack of reporting discrimination in the current study is unsurprising, especially when we consider the limitation of rights and other social conditions that the LGBTQ+ community experiences in the countries that were included in the study. Additionally, this finding supports research that has been conducted in Eastern Europe. Page (2017) studied the act of reporting discrimination and found that LGBTQ+ members in Eastern Europe who reported acts of discrimination were less likely to feel efficacious than LGBTQ+ in Western Europe, meaning that they did not believe that reporting their act of discrimination would make a difference. It may be that LGBTQ+ members in Eastern Europe do not feel that legal reporting of discrimination will make a difference in the justice system and refrain from reporting such acts. Furthermore, the findings for the current study did highlight that when people report acts of discrimination, nothing happens for these individuals, and it may be beneficial for future research to examine the impact on the individual when nothing happens after reporting an act of

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discrimination. This finding suggests that a lack of reporting may be associated with the idea that sexual and gender minorities have a distrust or negative view of police and systems of justice, which is supported by previous research (Miles-Johnson, 2013). Alternatively, it may be advantageous to explore beyond the act of not reporting discrimination to legal authorities, and instead on focus on how social support from peers, loved ones, and community resources can impact the lives of those within the LGBTQ+ community who have experienced discrimination. Thus, exploring the cycle of discrimination and reporting could be useful for understanding experiences within the LGBTQ+ community. For example, if distal stressors occur in an environment and the individual is hesitant to report the discrimination because of a belief that nothing will happen and then nothing happens when it is reported, reinforcement of this belief may occur and inhibit future reporting of discriminatory acts, perpetuating distal stressors, proximal stressors, and the health effects that come with those experiences.

The next aim of this study was to explore how differences in multiple minority status would affect levels of concealment. It was hypothesized that the more minority groups that one belongs to, the more frequently they were to engage in identity concealment. Surprisingly this hypothesis was not supported, and the results revealed the opposite of this, meaning that those who belonged to multiple minority groups engaged in less frequent identity concealment than those who only belonged to only one minority group. This may be due to various factors, including differences in cultural views on “outness” and the experience of the other minority group that they belong to.

It is important to first consider the concept of “outness.” Outness refers to the “coming out” process that is sensationalized in the United States and other Westernized countries, something that contrasts the experience of LGBTQ+ individuals of other cultures (e.g. Huang &

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Brouwer, 2018). This view assumes that sexual and gender minorities live parts of their lives concealing their true sexual and/or gender identities and that they often reach a climactic point in their lives where they must disclose their identity to a heteronormative society, leading them to begin living their public life in a way that is more in line with their authentic self. Oftentimes, this experience is not translatable to other cultures, as many cultures do not put such an emphasis on this process or even recognize it at all. It may be that the difference in cultural norms and ideas surrounding sexual and gender minority status between the United States and the countries included in the study (as well as the differences between the countries themselves) accounts for some of the reasoning behind why those who belong to multiple minorities engage in less frequent concealment or why those who belonged to only one minority group concealed more frequently.

Another explanation is that people of multiple minority groups may have become desensitized to discrimination whereas those who only belong to one minority group have not. Oftentimes, belonging to a racial, ethnic, and disability minority group can be difficult to conceal. Thus, having an aspect of identity that is outside of the majority and difficult or impossible to conceal may make it easier for these individuals to affirm their identities and engage in less concealment than those whose minority status may be more easily concealed. This supports previous research that found that among queer and transgender people of color, their choice to disclose their sexual orientation was secondary to their racial identity (Grov et al., 2006; Patton, 2011).

For the last hypothesis, the relationship between multiple minority status, concealment and reporting acts of discrimination was examined. It was predicted that concealment would moderate the association between multiple minorities and reporting acts of discrimination.

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Similar to the findings between discrimination and reporting, no significant relationship was found. As noted above, one reason may be the overall low number of reporters. Surprisingly, participants who belonged to multiple minority groups and concealed their identity less frequently were more likely to report acts of discrimination to legal authorities than those of a single minority status (51.7%, $n = 44$). A further exploration of the relationship between these factors may be beneficial, as concealment is significantly associated with various items that were used to explore individual-level discrimination and we know that those who belong to multiple minority groups are less likely to conceal. Thus, it may be that for multiple minority group members, reporting may be viable due to less frequent concealing, but a distrust in police and procedural justice may override and inhibit reporting the incident.

Limitations

While this study explored relationships between crucial factors that deeply affect those within the LGBTQ+ community, there are notable limitations that must be considered when integrating these findings into the literature. One limitation is that questions were translated using IPSOS Strategic Marketing's data entry software. While this made the questions readable to the participant in their native language, the questions were not written specifically for the language itself and there may have been words or phrases that did not translate properly. This may have led to open interpretation of the meanings of words, especially LGBTQ+-specific terminology.

Another limitation of the study is that, due to the safety and anonymity of participants, transgender- and intersex-related questions were removed to hide the identities of those participants. While ensuring safety is crucial when conducting such sensitive research, the removal of these items did not allow for examining, specifically, the experiences of transgender

and intersex individuals. Further explanation was given by the author of the survey, stating that “we had to exclude [these items] from the data set for privacy concerns.” Because we know that generalizing the experiences of LGBTQ+ individuals does not always capture the full experience of those within the community, it’s important to note that because of this lack of access to transgender- and intersex-specific questions, generalized conclusions were drawn from the study.

Additionally, the survey utilized for the current study did not include a measure of health (either physical or mental) or well-being variables, thus the current study did not include such variables. While previous research has shown potential detrimental effects of discrimination and concealment on LGBTQ+ populations, this study is not able to be integrated into that area of research due to the lack of inclusion of any related variables.

Strengths

Despite the limitations this study has several significant strengths. One strength of the study is that it included over 2,000 participants in the sample. Being able to include this many participants in the study is vital to ensuring that the diverse experiences that exist within the LGBTQ+ community are captured and represented. Another strength is that the survey employed within this study contained multiple questions that were utilized to examine a single construct. While not every question asked for each construct was used in the current study, multiple questions surrounding the same variable allowed for flexibility in constructing variables while ensuring that the questions were examining the correct variable. This is especially important as previous research has found that the wording used in questionnaires during research can cause response options to be utilized differently (Holleman, 2000). Because the survey that was employed for this research often contained multiple questions for a given construct, it allowed

flexibility in constructing variables, as well as ensuring that the intended variable was being measured during data collection.

Clinical Implications

Clinical implications that can be derived from this study include finding ways to build crucial factors, such as resilience, self-efficacy, and social support, in clients who experience distal and proximal stressors because of minority status. This includes those who belong to multiple minority groups, who may be less likely to conceal parts of their minority status. Attention to resilience is particularly important as it has been shown to be linked to mental health outcomes, especially within sexual and gender minority populations (Bockting et al., 2013; Grossman et al., 2010). Finding ways to adapt these techniques into an intersectional approach may be most beneficial for clients who belong to more than one minority group.

Relatedly, professionals need to be able to disentangle the identities of our sexual and gender minorities from the generalized LGBTQ+ research and consider how the individual may experience and live out their minority status differently than that of the community or group that they identify with due to other factors, such as multiple minority status, socioeconomic status, hostility within their environment, norms of their culture, etc. This supports the notion that narrower studies of identities within the LGBTQ+ community, especially around understudied populations, such as transgender and intersex individuals, would be beneficial. More in-depth studies of specific subgroups of the LGBTQ+ community would help to provide rich information about the unique experiences that exist within the LGBTQ+ community. While generalizing results to this community benefits a broad overview of those within this population, future efforts should strive to promote equity and inclusion of those within each of the subgroups that compose

the LGBTQ+ community and focus more on lived experiences of these individuals rather than group identity.

Lastly, because the harmful effects of distal and proximal stressors are known in the literature, specifically the ways that these can have profound impacts on the mental health and financial stability of somebody who belongs to a sexual or gender minority, clinicians should continue to advocate for equitable and accessible health care for this under-studied and under-represented population.

Directions for Future Research

Many options for future studies have been stated throughout the paper, but most notably, future research may benefit from examining these questions: within the Minority Stress Model, do the outcomes of seeking community and social support (such as reporting) have an impact on the relationship between distal and proximal stressors? (i.e., if nothing happens after reporting an act of discrimination, does this change the frequency of identity concealment?); do access to community resources, as opposed to legal resources, have an impact on the experience of proximal stressors and, if so, which ones have the biggest impact?; and, is there a meaningful way to reconstruct the Minority Stress Model to introduce and embed intersectionality as a crucial component of minority stress processes?

Tables

Table 1*Reasons for Not Reporting Acts of Discrimination*

	<i>n</i>	<i>%</i>
Fear of intimidation by perpetrators	157	6.8%
Fear of discrimination or ridicule	350	15.2%
Did not want to reveal my sexual orientation and/or gender identity and/or being intersex	365	15.9%
Didn't know how or where to report	170	7.4%
Nothing would happen or change	577	25.1%
Concerned that the incident would not have been taken seriously	318	13.9%
Not worth reporting – “it happens all of the time”	341	14.9%
Too much trouble, no time	158	6.9%
Dealt with the problem myself / with the help from family or friends	93	4.1%
Because I was too emotionally upset to report it	124	5.4%
I did not think people would understand what I was talking about	291	12.7%
Other reason(s)	132	5.7%

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Table 2
Frequency of Multiple Minority Group Members

	<i>n</i>	<i>%</i>
Ethnicity	170	7.4%
Religious	136	5.9%
Gender	307	13.4%
Disabled	33	1.4%
Other	394	17.2%

Appendix A

Questions used for study variables

Discrimination

Individual

C2.) In the last 12 months, in the country where you live, have you personally felt discriminated against or harassed on the basis of one or more of the following grounds?

- 1.) Sex
- 2.) Gender Identity
- 3.) Sexual Orientation
- 4.) Gender Expression

Institutional

C4.) In the last 12 months, in the country where you live, have you personally felt discriminated against in any of the following situations because of your sexual orientation and/or gender identity and/or being intersex, as you described above:

- 1.) When looking for a job
- 2.) At work
- 3.) When looking for a house or apartment to rent or buy (by people working in a public or private housing agency, by a landlord)
- 4.) By a healthcare personnel (e.g., a receptionist, nurse, or doctor)
- 5.) By social service personnel
- 6.) By school/university personnel (This could have happened to you as a student or as a parent)
- 7.) In a bank or insurance company (by bank or company personnel)
- 8.) When showing your ID or any official document that identifies your sex

Concealment

E3.) Where do you avoid being open about your sexual orientation and/or gender identity and/or being intersex for fear of being assaulted, threatened, or harassed by others?

- 1.) My home
- 2.) School
- 3.) Workplace
- 4.) A café, restaurant, pub, club
- 5.) Public Transport
- 6.) A sports club
- 7.) A street, square, car parking lot, or other public place
- 8.) A park
- 9.) Public premises or buildings
- 10.) Other

Multiple Minority Status

H16.) In the country where you live, do you consider yourself to be part of any of the following?

- 1.) Ethnic minority
- 2.) Religious minority
- 3.) Gender minority
- 4.) Sexual minority
- 5.) Minority in terms of disability
- 6.) Other minority group

Reporting

C6.) Thinking about the most recent incident [of discrimination], did you or anyone else report it anywhere?

C6.B.) What happened as a result of reporting the incident?

- 1.) Disciplinary action
- 2.) A report was filed, but no disciplinary action yet
- 3.) A report was filed, but no disciplinary action at the end
- 4.) Nothing happened

C7.) Why was it not reported?

- 1.) Fear of intimidation by perpetrators
- 2.) Fear of discrimination or ridicule
- 3.) Did not want to reveal my sexual orientation and/or gender identity and/or being intersex
- 4.) Didn't know how or where to report
- 5.) Nothing would happen or change
- 6.) Concerned that the incident would not have been taken seriously
- 7.) Not worth reporting it – 'it happens all the time'
- 8.) Too much trouble, no time
- 9.) Dealt with the problem myself/with help from family or friends
- 10.) Because I was too emotionally upset to report it
- 11.) I did not think people would understand what I was talking about
- 12.) Other reasons

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