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LOYOLA UNIVERSITY CHICAGO

DEVELOPMENT AND PRELIMINARY VALIDATION OF THE
INTERNALIZED HETEROSEXIST RACISM MEASURE FOR
SEXUAL MINORITIES OF COLOR

A DISSERTATION SUBMITTED TO
THE FACULTY OF THE GRADUATE SCHOOL
IN CANDIDACY FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY

PROGRAM IN COUNSELING PSYCHOLOGY

BY

JUAN RAMÓN PANTOJA-PATIÑO, M.S.

CHICAGO, IL

MAY 2024

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I first want to immensely thank my parents who migrated from their homeland San José Casas Caídas, México to the United States of America to give a better life to me and my siblings. Without their perseverance and radical hope, I would not be where I am today. *Gracias amá y apá*. It is only fair, that with gratitude, I share a sliver of their story. From the beginning, their voyage was rooted in liberation and social justice. They experienced a land where systems of oppression were perpetuated vis-à-vis years of Spanish colonization. Poverty, classism, and political corruption plagued their lives making it very difficult to live livable lives. In 1993 when my parents realized they were pregnant with me and my twin sibling, they sought the treacherous journey on foot, guided by *coyotes* to convene with family in Chicago, Illinois. From there on, all they did was provide support, love, and encouragement. They planted seeds of justice that with time ignited a fire within me to challenge systems of oppression.

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ABSTRACT

Research on intersectional internalized oppression among sexual minorities of color is scant. One of the reasons as to why such oppression is understudied amongst such population is the lack of psychological measures. At the same time, sexual minorities of color are faced with the negative impact of living in a racist and heterosexist society. Therefore, this study is one of first to develop and preliminarily validate the Internalized Heterosexist Racism Measure (IHRM) that evaluates internalized heterosexist racism in sexual minorities of color. By applying an intersectionality framework, the IHRM was generated from an extensive literature review and then reviewed by 10 experts to generate scale items. The resulting measure led to 48 items and six dimensions (negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility). The measure was pre-validated ($N = 62$) by establishing construct and criterion validities, along with calculating hierarchical multiple regression to provide evidence of incremental validity. Additionally, Cronbach's alpha was computed to demonstrate internal consistency reliability. Implications are delineated for theoretical contributions, clinical practice, and liberation efforts. Lastly, suggestions for future research and limitations are discussed.

CHAPTER ONE

INTRODUCTION

Sexual minorities (a term encompassing non-heterosexual or straight individuals who identify as lesbian, gay, bisexual, queer, pansexual, questioning, or asexual, to name a few) of color can experience various forms of oppression simultaneously including racism and heterosexism. Prior to delving into the specifics of the research study at hand, a brief explanation of key terminology is provided. Sexual minorities of color refer to individuals who hold non-heterosexual or straight orientations and minoritized racial identities, such as African American or Black; Hispanic, Latine/a/o/x, or Latinx; Asian, Asian American and Pacific Islander; American Indian, Indigenous; Arab, Middle Eastern, and North African; and other non-white identities. Heterosexual or straight is a person with a sexual, emotional, and/or romantic attraction to a sex or gender other than their own. Herein, the term *sexual minority* will refer to a non-heterosexual person's sexual orientation while the acronym LGBTQ+ (lesbian, gay, bisexual, transgender, questioning and queer) will refer to different communities with a variety of sexual orientations, sex, and gender identities. At times the term *queer*, which is also an umbrella term to refer to all LGBTQ+ people/communities will be used interchangeably with LGBTQ+ or LGBQ+, as well as a form of expression to explain a complex, fluid set of identities and experiences. Additionally, further distinction is made between *LGBTQ+* and *LGBQ+* to prevent conflation of the two. When one refers to the LGBTQ+ community, one is centering

both sexual orientation and gender identities which can implicitly emphasize sameness/commonality among different subgroups of people. If someone is exclusively focusing on transness (i.e., transgender, nonbinary, etc.), and not sexual orientation then one ought to explicitly name this distinction by not using the acronym *LGBTQ+*, unless one is speaking in relation to the entire spectrum of communities. Conversely, if one is solely highlighting sexual orientation and sexual minority groups and not aspects of gender, it could be invalidating to use the acronym *LGBTQ+*. As it assumes a degree of sameness of both transgender and gender diverse individuals and sexual minority people (Pantoja-Patiño, 2023). Perhaps a more affirming acronym when only centering sexual minority groups is to use *LGBQ+* where *T* is omitted to avoid obscuring each of the diverse groups' nuanced experiences.

The terms *people of color or communities of color* will include minoritized racial identities and be used equally with the acronym BIPOC (Black, indigenous, and people of color). It is worth noting that terminology to sexual minority populations have changed (and will continue to change) over time and across ecological contexts. The term sexual minority (of color) was selected as it aligns with current trends and professional practice guidelines like the American Psychological Association *Guidelines for Psychological Practice with Sexual Minority Persons* (APA, 2021) and the *Inclusive Language Guidelines, 2nd ed.* (APA, 2023). At the same time, the term may be problematic as it aggregates individuals with different sexual orientations into a single definition. It is critical to contextualize language to explicitly name the limitations or parameters in which certain labels capture and fail to capture the fluidity of people's existence (Phipps et al., 2023). The author chose to utilize the term *sexual minorities of color* to broadly "capture" the intersection of a person being both LGBQ+ and BIPOC and their experiences with oppression.

Experiencing oppression because of a person's social identities such as their race and/or sexual orientation has deleterious effects. These effects include minority stress (Brooks, 1981; McConnell et al., 2018; Meyer, 2003), feeling invisible, disconnected, or alienated from their heterosexual racial and white LGBTQ+ communities (Bowleg, 2013; Ghabrial, 2017; Jackson et al., 2020; Lim & Hewitt, 2018), pressure to assimilate to both white and heterosexual contexts (Bowleg, 2013), identity concealment to families and communities (Lim & Hewitt, 2018; Salerno et al., 2022), internalized heterosexism (Herek et al., 2009; Newcomb & Mustanski, 2010; Szymanski & Gupta, 2009), and internalized racism (David et al., 2019; Gale et al., 2020; Speight, 2007). Sexual minorities of color have different experiences with oppression than individuals who hold single marginalized or minoritized identities like sexual minorities or communities of color but not both. This intersection is especially important when examining multiple systems of oppression such as heterosexism and racism.

Unfortunately, most research has addressed single aspects of oppression, either heterosexism or racism, ignoring the nuance experiences of sexual minorities of color who experience both forms of oppression simultaneously (Jackson et al., 2020; Lim & Hewitt, 2018; Puckett & Levitt, 2015; Velez et al., 2019). When investigating different levels of oppression (e.g., internalized, interpersonal, institutional) among sexual minorities of color, much of the existing research focus has been on interpersonal oppression including microaggressions, discrimination, and violence/hate crimes (Balsam et al., 2011; Fattoracci et al., 2020; McConnell et al., 2018; Nadal et al., 2016), with less attention to either internalized or institutional oppression (David et al., 2019; Herek et al., 2009; Speight, 2007; Szymanski & Gupta, 2009; Szymanski et al., 2008). With respect to internalized oppression, one of the reasons as to why intersectional internalized heterosexism and internalized racism are understudied amongst sexual

minorities of color is the lack of psychological measures (DeBlaere et al., 2010; Riggs, 2007; Snitman, 2019). Therefore, the purpose of the current study was to develop and preliminary test the psychometric properties of a measure that assesses the intersectionality of internalized heterosexism and internalized racism among sexual minorities of color. The development of a psychometrically as well as conceptually solid measure helps to catalyze the research on this much needed topic.

In addition to the present research advancing scholarship about sexual minorities of color, the study also aligns with the values of counseling psychology. Centralizing the experiences of sexual minorities of color in psychological scholarship is critical to generating knowledge about this population, especially since such population is continually overlooked (Torres Rivera, 2020; Moradi et al., 2010). The limited acknowledgement of sexual minorities of color in psychological literature not only makes them inconspicuous, but it also reduces opportunities for scholars to develop practice recommendations, support advocacy and prevention efforts, as well as transmitting knowledge to the next generation of psychologists. Hence, this study makes a commitment to social justice, a foundational value in counseling psychology (Vera & Speight, 2003), by attending to social issues like internalized heterosexism and internalized racism while elevating the voices of underrepresented groups. The author strived to embody a social justice perspective at all levels of the research process, from the conceptualization of constructs, recruitment of participants to interpretation of findings.

Rationale and Purpose of Research

Sexual minorities of color can experience both internalized heterosexism and internalized racism because of their intertwining social identities. For sexual minorities, internalized heterosexism is defined as the process whereby sexual minorities appropriate societal negative

attitudes toward same sex and gender attraction and behaviors as well as toward oneself as a sexual minority (Berg et al., 2016; Szymanski et al., 2008; Velez et al., 2019). Moreover, sexual minorities integrate these societal negative messages as part of their own value system, which involves adapting their self-concept and personality to be congruent with the oppressive responses of society (Herek et al., 2009). Internalized racism refers to the process by which BIPOC appropriate the dominant white culture's oppressive behaviors and beliefs toward BIPOC, while at the same time devaluing their racial worldview and cultural norms (Bailey et al. 2011, Banks & Stephens, 2018; Speight, 2007). BIPOC integrate these oppressive behaviors and beliefs as their own which engenders self-dislike as a member of a minoritized racial group, along with feelings of self-doubt, disgust, and disrespect for one's race (David et al., 2019; Velez et al., 2019).

Consequently, sexual minorities of color are faced with the negative impact of living in a racist and heterosexist society, thus it is imperative to understand their racial and sexual orientation experiences concurrently rather than separately. The separate examination of the two systems of oppressions suggests individuals experience internalized heterosexism and internalized racism in isolation and their social identities do not converge with the systems of heterosexism and racism. This approach is commonly used in quantitative studies with minoritized populations, such as sexual minorities of color (McConnell et al., 2018). Quantitative approaches have historically taken an additive approach, which considers each identity separately and then sums them into an understanding of individuals' overall lived experience, as well as a multiplicative approach, which considers how two or more identities may interact to shape a person's lived experience (McConnell et al., 2018). The former approach ignores the influence of other social identities, yet people have multiple identities. The latter approach

conflates social identities by conceptualizing them separately from each other as equal hence diminishing a person's salient identities and then seeing how these separate identities interact with one another (Fattoracci et al., 2020). By contrast, intersectional approaches move beyond considering identities as single demographic predictors to examining the unique experiences of groups with specific intertwining identities (DeBlaere et al., 2010). For instance, sexual orientation and race intertwine to form distinctive experiences as opposed to the sum or multiplicity of the two identities.

Critical information is lost when additive or multiplicative analytic approaches are used. For example, race can play an important role in the decision of disclosure of sexual orientation to nonfamily members, family, mainstream communities, etc. based on a person's experiences with heterosexism and racism within various subsystems (Aranda et al., 2016; Salerno et al., 2022). This nuance may be missed or trivialized under additive or multiplicative approaches as they may compartmentalize disclosure of sexual orientation under the sexual minority experience and ignore the racial experience. A reason as to why many researchers select these approaches is due to the complexity of identities combined with the lack of established psychometric tools for conducting research on intersectionality. Conducting such research can be challenging without the needed means (Remedios & Snyder, 2018).

Recently, scholars have urged researchers to use an intersectional approach as it can offer a more accurate understanding of the lived experiences of individuals with various minoritized identities (Cole, 2009; DeBlaere et al., 2010; Jackson et al., 2020; Velez et al., 2019). Parent et al. (2013) emphasized intersectional approaches allows for individuals with various identities to construct novel experiences that are distinctive and not necessarily divisible into their single component identities or experiences. For this reason, this research study relied exclusively on an

intersectional approach to develop a measure that assesses both internalized heterosexism and internalized racism simultaneously among sexual minorities of color. By using this approach, the presented measure includes more nuance items specific to sexual minorities of color than existent independent measures of internalized heterosexism and internalized racism.

Another research goal of this study was to develop a new measure that is more specific for sexual minorities of color. Inappropriately, most quantitative research on sexual minorities has been conducted with white sexual minorities and then generalized to other diverse sexual minority populations (Newcomb & Mustanski, 2010; Puckett & Levitt, 2015) partly because researchers use convenience samples that are predominately white American, highly educated, and open about their sexual orientation (Szymanski et al., 2008). This generalization problematically assumes sexual minorities are homogenous rather than diverse. That is, white sexual minorities and sexual minorities of color are assumed to experience internalized heterosexism similarly, by disregarding the racial experience. Subsequently, researchers have noted such concern and encouraged for more construction and validation of measures representative of the intended group (Balsam et al., 2011; Bharat et al., 2021; Newcomb & Mustanski, 2010; Szymanski & Gupta, 2009). For example, a measure that assesses internalized heterosexism among sexual minorities normed on white sexual minorities cannot accurately capture the internalized heterosexism of sexual minorities of color. The use of such measures does little to challenge the normative status or even recognize the experiences of marginalized groups like sexual minorities of color (Riggs, 2007). To that end, novel measures based on the identities of sexual minorities of color is what is needed to assess their internalized heterosexism and internalized racism experiences, rather than adapting current independent measures developed for white sexual minorities.

Similarly, current internalized racism measures seldom consider sexual orientation in their scale development. Majority of recent studies on internalized racism (e.g., Bailey et al., 2011; Campón & Carter, 2015; Choi et al., 2017a) did not attend to sexual orientation as part of their measure content nor was it reflected in their study samples. This is not surprising given that when discussing internalized racism, much of the focus is on variables related to racism such as, white supremacy and powerlessness (Campón & Carter, 2015; David et al., 2019; Speight, 2007), physical appearance (Bailey et al., 2011; Choi et al., 2017a), racial colorblind ideology and discrimination (Neville et al., 2000), and acculturation (David et al., 2019). Nonetheless, research on internalized racism needs to reflect the reality that individuals concurrently possess many intertwining identities. Otherwise for sexual minorities of color, their lived experiences with internalized racism may be further diminished by the premise that when internalized racism is examined, sexual orientation has no influence on individuals' racism experiences. Thus, this research study aimed to increase the intersectional visibility of sexual minorities of color in both scholarship realms of internalized racism and internalized heterosexism. Lastly, to the author's knowledge there presently does not exist a measure of intersectional internalized heterosexism and internalized racism for sexual minorities of color. As such, the study is one of first to contribute significantly to this much needed research area.

As just discussed, there are no validated measures that assess both forms of internalized oppression concurrently. This lack of instruments has yielded researchers to adapt existent measures. In doing so, not only does it replicate additive and multiplicative methods, but it also ignores intersectionality and obscures the internalized heterosexism and internalized racism experiences of sexual minorities of color. The development of the proposed measure will be called the Internalized Heterosexist Racism Measure (IHRM) for sexual minorities of color.

However, internalized heterosexism and internalized racism in sexual minorities of color has not been clearly defined or conceptualized intersectionally (i.e., internalized heterosexist racism) in the literature. The following conceptualization of internalized heterosexist racism (IHR) is proposed: the process whereby sexual minorities of color appropriate or internalize aspects of heterosexist racism toward their intersecting experiences as a sexual minority of color by believing, succumbing, or accepting that their social identities, worldviews, and cultural norms are inferior. Specific details about the conceptualization process of IHR will be discussed further in Chapter 2.

The conceptualization of internalized heterosexist racism has been generated with the sexual minorities of color population in mind. The IHRM scale is not intended to address the additional exclusion of transgender, nonbinary, and gender diverse individuals since gender identity is not the focus of the measure. The term transgender describes a person whose anatomy, appearance, identity, beliefs, personality traits, demeanor or behavior differs from the social expectations of their assigned sex or gender at birth (Maroney et al., 2019; Moradi et al., 2009). While nonbinary is an umbrella term to describe people for whom the labels of *man* and *woman* do not describe their gender identities. Sexual orientation and gender identity are two distinct constructs. *Sexual orientation* refers to a person's sexual, affectional, relational attractions toward other people. An individual may be attracted to men, women, both, neither, or to people with other gender identities (Moradi et al., 2009; Pantoja-Patiño, 2023). *Gender identity* is defined as a person's felt, inherent sense of being a girl or woman; a boy or man; a blend of man and/or women; or an alternative gender (APA, 2015; Maroney et al., 2019). Generally, gender is viewed as a binary construct, with mutually exclusive categories of boy or girl and man or woman. Yet, gender is a nonbinary construct that allows for a range of gender identities. Often

researchers aggregate samples with both sexual minorities and gender diverse individuals which inadvertently conflate gender identity and sexual orientation. Unless researchers are examining both sexual orientation and gender issues together, then one ought to ensure their research questions applies to their target population. Again, the intent in making this distinction between sexual orientation and gender identity it to make each of the groups visible. Because this study investigated phenomena among sexual minorities of color; it would be imprudent to generalize to gender diverse individuals and furthering obscuring their authentic experiences. Although the measure will not assess for transgender, nonbinary, and gender diverse processes directly, participants who self-identify as transgender, nonbinary, or gender diverse will have the opportunity to participate in the study if they meet the inclusion criteria as a sexual minority of color.

Theoretical Framework

Intersectionality is presented as a theoretical framework for examining the intersection of internalized heterosexism and internalized racism among sexual minorities of color.

Intersectionality has roots in Black Feminist activism, specifically Kimberlé Crenshaw coined the term to describe how Black women's and women of color experiences of the unique combination of racism and sexism were obscured by treating race and discrimination as separate matters (Crenshaw, 1991; Moradi & Grzanka, 2017). Additionally, Crenshaw (1991) stated the intersection of racism and sexism factors into Black women's and women of color lives in ways that cannot be captured entirely by examining women's race or gender dimensions separately.

This key premise has extended not only to racism and sexism among women, but across all individuals with both privileged and marginalized identities, such as sexual minorities of color.

Intersectionality encompasses an array of identities and contexts, along with experiences of

social inequities, power, and privilege (Moradi & Grzanka, 2017). Sexual minorities of color simultaneously hold unique gender, disability, social class, political and other identities.

Therefore, such group can experience other forms of intersectional oppression such as cissexism, racial ableism, gendered classism, and so forth. This study focused on a specific intersection of sexual minorities of color experiences (i.e., heterosexism and racism).

Some of the complexities about utilizing intersectionality as a framework is it does not lend itself to the traditional research methods in psychology that are consider the “gold standard” (Warner & Shields, 2013). Typically, researchers operationalize their constructs and variables as single, fixed traits. A researcher quantitatively investigating the effects of internalized racism on Latinx individuals by focusing on discrimination and racial identity may treat discrimination and racial identity as stable constructs without acknowledging the ways that other identities, contexts intertwine with and affect the experience of internalized racism. Intersectionality reminds researchers that any consideration of a single identity must incorporate an analysis of the ways other identities and inequalities combine with and change the experience of a single identity (Bowleg, 2008; Warner & Shields, 2013). However, inclusion of multiple identities in the study sample does not necessarily qualify as an intersectional analysis. Successful engagement with intersectionality is not determined by *who* you study but *how* you study. Foundationally, it is about understanding how the intersectionality of a specific group (e.g., sexual minorities of color) shapes their lived experiences as a member of that group (e.g., internalized heterosexist racism).

An intersectional approach involves consideration of how inequality based on specific social identities occurs at every level of the research process to include measurement, analysis, and interpretation (Bowleg, 2008). Such lens brings attention to how social identity and

inequality function interdependently. Thus, in investigating sexual minorities of color's experiences with internalized heterosexism and internalized racism requires making explicit of their experience with accurate terminology that represents the intersection of internalized heterosexism and internalized racism. Hence, the term internalized heterosexist racism will be used when referring to the intertwining of heterosexism and racism. In addition to naming sexual minorities of color's unique experience, several of Moradi's and Grzanka's (2017) guidelines on employing intersectionality were considered. In particular, the guidelines of developing new measures that simultaneously capture the texture and breadth of sexual minorities of color; replacing conceptualizations and terminology with constructs and terms that explicitly and precisely name the underlying social inequalities (e.g., internalized heterosexist racism); and using research methods emphasizing intersectionality and social justice.

Research Plan and Hypotheses

The development and psychometric properties of a scale to measure internalized heterosexist racism among sexual minorities of color have been reported in the findings section. The new measure specifically examines internalized heterosexist racism associated with the six dimensions generated from a literature review while applying an intersectionality perspective. These dimensions are: (a) negative messages, (b) intersectional minority stress and reactivity, (c) assimilation of beauty and self-expression standards, (d) internalized inferiority, (e) internalized isolation and ostracism, and (f) intersectional invisibility. The name of the measure is called the Internalized Heterosexist Racism Measure (IHRM) for sexual minorities of color. The measure was created from extensively reviewing scholarly literature and feedback from a group of experts for face validity.

After the items were generated, Pearson's correlation, Cronbach's Alpha, and hierarchical multiple regression analyses were calculated to demonstrate preliminary support of the IHRM. The preliminary evidence for the measure including, convergent, discriminant, construct, and incremental validities and reliability scores were examined. To assess convergent validity, it was hypothesized the IHRM would be positively related to measures of internalized heterosexism and internalized racism, given the IHRM is intended to be a measure of internalized heterosexist racism among sexual minorities of color. Discriminant validity was evaluated by assessing the IHRM's relationship with a measure of social desirability. It was expected the IHRM would be non-significantly or only slightly related to a social desirability measure, since internalized heterosexist racism and social desirability are unrelated to each other. Concurrent validity was evaluated by assessing the IHRM's relationship with a measure of psychological distress. It was also hypothesized that the IHRM would be positively related to the measure of psychological distress. Finally, to assess incremental validity, it was expected the IHRM would contribute significantly to assessing internalized heterosexist racism among sexual minorities of color above and beyond what was accounted for by current, independent measures of internalized heterosexism and internalized racism in the variance of psychological distress.

Research Design Considerations

No research study should go without considering possible shortcomings relative to its design. The first consideration is this research study assumes sexual minorities of color equally value their social identities of sexual orientation and race. However, it is important to recognize the saliency of intertwining identities are mutable and could vary depending on a specific context (Purdie-Vaughns & Eibach, 2008). Individuals may negotiate their identities within a salience hierarchy, which refers to an organization of identities according to the likelihood of them being

used or visible in each context (Parmenter, 2018). Within this salience hierarchy, particular sexual minorities of color may process internalized heterosexist racism experiences differently and determine whether certain aspects of their intersectionality are significant to them in specific contexts. Consequently, not all sexual minorities of color will equally value their identities. Some may find their race as more salient in a specific context, while their sexual orientation as less salient in another context or vice versa.

Another limitation of the study design is the nature of studying internalized oppression. By investigating internalized heterosexist racism, it may inadvertently frame the onus on sexual minorities of color that internalized oppression stems from them rather than from societal structures. Namely, this misattribution may draw attention to individuals' appropriation process such as their perception, personality, identity, and among other individual factors versus ecological variables surrounding the intersectional oppression. The internalization or appropriation of heterosexist racism results from socialization and exposure to the systems of heterosexism and racism. Moreover, it may also dissuade prospective researchers from studying the roots of internalized oppression (e.g., systemic, society) by solely focusing their research on internalized oppression. It can also misconstrue findings/implications for sexual minorities of color, as some scholars may erroneously believe it is sexual minorities of color perception of oppression that needs to change rather than the system (Snitman, 2019). Individuals who live in a heterosexist and racist society are bound to experience internalized heterosexist racism, not merely of their own volition but because of their environments (Banks & Stephens, 2018; Szymanski & Mikorski, 2016). Hence, not addressing the root of the social problem will maintain the vicious cycle of oppression. This consideration should be bear in mind as prospective researchers design their own investigations.

A final drawback is that unique differences across sexual minorities of color may be missed since the focus is on sexual minorities of color as a group. Although this present study advances understandings of internalized heterosexist racism among sexual minorities of color tremendously, by grouping heterogeneous subgroups (e.g., asexual queer Indian men, biracial pansexual women, etc.) together it can overlook diverse manifestations of internalized heterosexist racism unique to specific subgroups (Riggs, 2007; Szymanski et al., 2008). For instance, African American bisexual individuals often describe feeling a lack of support from Black heterosexual communities, disconnection from white LGBTQ+ spaces, tokenism and binegativity (Ghabrial & Ross, 2018; Jackson et al., 2020). Among Asian American sexual minorities, coming out as a sexual minority is incompatible with the concept of family obligations and duty. As such, coming out may be seen as a failure of the parents and a rejection of family and culture (Hahm & Adkins, 2009; Szymanski & Sung, 2013). The uniqueness of internalized heterosexist racism among each sexual minority of color subgroup may be overlooked in this study. Nevertheless, it is the hope of the author/researcher future studies are designed to investigate the heterogeneity of sexual minorities of color by validating the proposed measure with specific populations.

CHAPTER TWO

LITERATURE REVIEW

In the following chapter, a review of the literature pertaining to sexual minorities of color and their experiences with internalized heterosexism and internalized racism is explored. First, there will be a discussion of how this topic fits within the values and scholarship of counseling psychology, particularly the pillars of social justice and multiculturalism. Next, a review of internalized heterosexism and its effects are presented. Followed by an examination of internalized racism and a review of internalized heterosexist racism (IHR) among sexual minorities of color – including negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility.

Significance of Study in Counseling Psychology

The current study aligns with the values of counseling psychology, specifically multiculturalism and social justice. Sexual minorities of color are a multifarious group with unique strengths and cultural experiences such as, thriving in a heterosexist and racist society, creating spaces of healing and inclusivity, along with simply living authentically. At the same time, they are continuously oppressed for both their sexual orientation and race. This intersectional injustice is insidious to the lives of individuals by leading to appropriation or internalization of negative attitudes about being a sexual minority of color, less self-acceptance of their identities, and more mental health problems (Parmenter, 2018; Szymanski & Sung, 2013;

Velez et al., 2014; Velez et al., 2019). Therefore, it is imperative to investigate internalized heterosexist racism (IHR) to ameliorate the oppression sexual minorities of color endure. Otherwise, not taking a proactive stance against injustice will further sustain the intersectional systems of oppression.

Another counseling psychology value the present investigation embodied is to transform the psychological scholarship by making sexual minorities of color more visible. Currently, the research zeitgeist in psychology has heavily focused on white American populations. When sexual orientation is considered, typically white American, sexual minorities are at the center of such research (Puckett & Levitt, 2015; Sarno et al., 2015; Snitman, 2019). The limited acknowledgement of sexual minorities of color in psychological literature not only makes them invisible, but it also drastically reduces opportunities for scholars to develop practice recommendations, support advocacy and prevention efforts, as well as transmitting knowledge to the next generation of psychologists. This study elevated the voices of an underrepresented group. The author also committed to employing a social justice perspective at all levels of the research process: (a) conceptualizing of constructs through an intersectional framework; (b) engaging with humility to recruit participants; (c) attending to diversity within a group by testing for both similarities and differences, and (d) interpreting findings – sensitivity to nuance variations across groups will be maintained even when similarities are identified. The author has also selected a research topic relevant to the sexual minority of color community (e.g., internalized heterosexist racism).

An Overview of Internalized Heterosexism

Internalized heterosexism is a dynamic process that affects sexual minorities in most aspects of their lives, such as spiritual, mental, career, physical, social, and behavioral.

Internalized heterosexism is conceptualized as the process whereby sexual minorities appropriate societal negative attitudes toward same sex and gender attraction and behaviors as well as toward oneself as a sexual minority (Berg et al., 2016; Szymanski et al., 2008; Velez et al., 2019). Its manifestation varies within sexual minority groups (e.g., gay men, lesbian women, etc.; Herek et al., 2009). For instance, a gay cisgender man with internalized heterosexism may be apprehensive to be publicly affectionate towards men in romantic relationships. By contrast, a bisexual cisgender man dealing with internalized heterosexism may feel pressure to change his bisexuality to a monosexual orientation such as, gay or heterosexual (Nadal et al., 2016). This nuance experience is important to recognize when situating internalized heterosexism among specific populations. At the same time, there may be similarities in the way internalized heterosexism is experienced collectively as a group.

Typically, internalized heterosexism involves endorsement of demeaning stereotypes, expectations of rejection based on one's sexual orientation, negative evaluation of sexual minorities, along with self-hatred (Choi et al., 2017b). The appropriation or internalization of heterosexist societal messages should be viewed as the result of a process of social contexts and individual interactions and not as the result of personal characteristics. The latter puts the blame on sexual minorities for their negative perceptions of themselves and their cultural group.

Internalized heterosexism evolves from systems where the dominant discourse favors heterosexuality. The internalized heterosexism is secondary to society's negative attitudes of same sex relationships and behaviors. In the U.S., through socialization, most children begin to internalize the tenets of heterosexism in conjunction with the expectation they will grow up to be heterosexual or straight (Herek et al., 2009). For sexual minorities such socialization creates

dissonance of who they are, how they express themselves to others, and how they feel about themselves.

In turn, it negatively impacts sexual minorities such as, increasing discomfort with disclosure of sexual orientation to others (Newcomb & Mustanski, 2010; Puckett & Levitt, 2015), disconnectedness from other sexual minorities (Szymanski et al., 2008), experiencing anxiety, depression, and substance abuse (Meyer, 2003; Pantoja-Patiño, 2020; Puckett & Levitt, 2015), as well as lower self-esteem (Choi et al., 2017b). The effects of internalized heterosexism on sexual minorities are devastating as they usually affect multiple areas of a person's life. Inevitably, most sexual minorities are likely to experience internalized heterosexism due to their upbringing in a heteronormative society. Nadal et al. (2016) identified several societal heterosexist attitudes toward LGBTQ+ individuals, which includes the use of language/slurs (e.g., "faggot," "that's gay") to denigrate people; expectation of LGBTQ+ people to conceal their identities; assumption of LGBTQ+ people as homogenous or behave like stereotypes (i.e., white, flamboyant gay man; white, butch lesbian woman); exoticization of sexual orientation; expressing discomfort of the LGBTQ+ experience; denial heterosexism exists; and assumption of pathology/abnormality. Other noteworthy heterosexist beliefs consist of assuming one romantic partner is the "man" and the other is the "woman" in same gender monogamous relationships; referring to being a sexual minority as a choice or lifestyle; assuming sexual minorities cannot relate to straight people; asking people how they engage in sex; thinking sexual minorities can become straight; and asking individuals to discuss their "coming out" story (Borresen, 2021). As sexual minorities are bombarded with these messages, their awareness that heterosexist attitudes are prevalent may increase, leading them to internalize the harmful messages.

Effects of Internalized Heterosexism

The impact of internalized heterosexism on sexual minorities is of importance considering its negative effects. Generally, the more internalized heterosexism a sexual minority individual experiences, the less likely they are to disclose sexual orientation to others, experience lower levels of self-esteem, less social support, higher levels of psychological distress and depression, as well as poorer intimate relationship quality and satisfaction (Szymanski et al., 2008). Further, regarding sexual orientation disclosure, sexual minorities may feel less identity congruence, engage in greater concealment about same-sex attractions and relationships, and manage feelings of shame and guilt (Puckett & Levitt, 2015). Since some sexual minorities have concealable identities, they may have to determine to disclose their hidden status or anxiously anticipate the possibility of being found out about their sexual orientation, which can be a very isolating, scary, and distressing experience. This is especially true for individuals who are struggling with internalized heterosexism. Sexual minorities may feel preoccupied in keeping their sexual orientation a secret; may become vigilant for cues that one's sexual orientation may be exposed; may experience hostility, guilt, or shame for maintaining a secret; may engage in strategies to prevent identity from being discovered (e.g., lying, modifying tone of voice, altering appearance); and refrain from social situations to avoid rejection (Pachankis, 2007). More recently, concealment has also been linked to higher rates of depression and anxiety symptoms (including social anxiety), stress levels, and substance use among sexual minorities (Brennan et al, 2021).

Although engaging in concealment of identities can have aversive consequences, it is important to note its function across contexts. For instance, sexual minorities of color may conceal their sexual orientation out of respect for their cultural heritage or for fear of provoking

hostility from their family or community (Lim & Hewitt, 2018). Individuals who embrace their sexual orientation without feeling ashamed or guilty and conceal their identity in specific cultural contexts may not be experiencing internalized heterosexism. In this concealment approach it may be more of a cultural value rather than the effect of internalized heterosexism. At times, both scholars and the public can unintentionally pathologize sexual minorities of color cultural differences. Sexual minorities of color may view the “coming out” discourse as a white LGBTQ+ narrative in which a person is expected to disclose their sexual orientation to feel authentic (Sadika et al., 2020). Nevertheless, sexual minorities of color can appropriate the cultural heterosexism stemming from their racial communities. Such cultural sensitivity needs to be reflected in the construction and validation of internalized heterosexism measures.

Another consequence of internalized heterosexism, as discussed, is isolation and psychological distress. Dealing with external experiences of heterosexism like anti-LGBTQ+ discrimination, rejection or harassment can lead to withdrawal from social spaces and social connections. This withdrawal may manifest itself as feelings of isolation and psychological distress or suffering. When individuals are invalidated, excluded, or humiliated for their sexual orientation, they become hurt or angry and learn to suppress that aspect of their experience. The person begins to be inauthentic of who they are and even mold themselves to fit in to heterosexist spaces to be accepted by others. The individual will internalize these experiences and feel powerless, blame themselves for the stigma and disconnection, feel immobilized, and feel increasingly isolated. Under such conditions, sexual minorities develop strategies to avoid further isolation by keeping parts of their sexual orientation compartmentalized or concealed. This approach, although attempts to protect oneself from external invalidation, exclusion, or humiliation, paradoxically creates more isolation and shame (Singh & Moss, 2016).

The toll of internalized heterosexism among sexual minorities can result in suicidal ideation and substance use. Sexual minorities are at a great risk for suicidality with men being four times as likely to attempt suicide over their lifetimes while women are twice as likely (Mereish et al., 2014). This may influence some sexual minorities to use substances to cope with negative stressors. A significant contributor that puts sexual minorities at risk for suicide and substance use are experiences of minority stress, such as discrimination and internalized heterosexism (Brooks, 1981; Meyer, 2003; Pantoja-Patiño, 2020). Internalized heterosexism can reduce quality of life, increase psychological distress and depression. By compromising one's mental health, internalized heterosexism can indirectly lead to suicidal ideation (Sutter & Perrin, 2016). Additionally, people who experience heterosexist victimization are more likely to report lifetime substance use problems resulting in increased suicide risk (Mereish et al., 2014). Victimization, discrimination, and internalized heterosexism have a significant effect on suicidality and substance use in sexual minorities. For sexual minorities of color who are constantly interacting with heterosexist and racist contexts coupled with substance use can create a myriad of health disparities (Pantoja-Patiño, 2020). Socioecological factors (e.g., acculturation, neighborhoods and gentrification, heterosexism, racism, etc.) are prominent determinants of health among sexual minorities of color seeing their intersectional experiences of oppression center around various identities.

Internalized Heterosexism and Sexual Minorities of Color

Sexual minorities of color experience internalized heterosexism differently than white sexual minorities. Several quantitative research studies have investigated internalized heterosexism among sexual minorities of color with specific minoritized racial identities, including Asian American individuals (Szymanski & Sung, 2013) and Asian and Pacific Islander

groups (Hahm & Adkins, 2009), Latina/o individuals (Velez et al., 2014), and African American and Black individuals (Smith, 2012; Szymanski & Gupta, 2009); all of which the researchers adapted existent internalized heterosexism measures, normed on majority white sexual minorities, given the lack of measures for sexual minorities of color. In addition to these investigations, researchers have made more substantial efforts in examining various correlates of internalized heterosexism among sexual minorities of color. Those include disclosure of sexual orientation and identity development (Aranda et al., 2016; Ghabrial & Ross, 2018; Parmenter, 2018; Sarno et al., 2015); discrimination (Lim & Hewitt, 2018; Smith, 2012; Smith et al., 2020); mental health and psychological distress (Jackson et al., 2020; Mereish et al., 2014; Sutter & Perrin, 2016; Vargas et al., 2020); social support and belonging (Felipe et al., 2020; Sadika et al., 2020); and minority stress (Ajayi & Syed, 2016; Balsam et al., 2011; Noyola et al., 2020; Schmitz et al., 2020). All the studies' findings highlight the intersectionality of sexual minorities. Specifically, how such population's intertwining identities and contexts affect their experiences with internalized heterosexism.

Not surprisingly there are both similarities and differences between sexual minorities of color and white sexual minorities. Perhaps the most notable difference is how each group expresses processes relative to internalized heterosexism. For example, sexual minorities dealing with internalized heterosexism may conceal their sexual orientation out of shame (Brennan et al., 2021). Traditionally for many individuals who choose to "come out" or disclose their sexual orientation might feel a sense of liberation that reduces their feelings of shame. White sexual minorities are more likely to disclose their sexual orientation broadly across contexts than sexual minorities of color (Lim & Hewitt, 2018; Sadika et al., 2020). For sexual minorities of color, the "coming out" discourse deviates from their own racial cultural values. Sexual minorities of color

who endorse traditional values of family obligations (e.g., gender roles, forming a heterosexual family, having children) may be seen as a disappointment by family members if they disclose their sexual orientation (Noyola et al., 2020; Szymanski & Sung, 2013). These cultural values are perhaps interrelated with internalized heterosexism. Although both groups experience internalized heterosexism, for white sexual minorities concealing their sexual orientation is reinforced by heterosexism itself. While for sexual minorities of color the decision to disclose is impacted by heterosexism and cultural values.

Another distinction of the ways internalized heterosexism affects sexual minorities of color is their interactions with both their racial and LGBTQ+ communities. Because of their positionality they are constantly pushed to the margins in contexts they navigate. With respect to racial spaces, sexual minorities of color are usually raised in families and communities who share the same racial identities but not their sexual orientation. Unfortunately, this may result in their family organization transforming into a source of heterosexism. People can experience rejections from their racial communities and families based on religious – cultural prohibitions against being a sexual minority (Sadika et al., 2020; Salerno et al., 2022; Schmitz et al., 2020). Reconciling the tension between cultural and religious views on sexual orientation is emotionally exhausting, impacting health outcomes as people struggle to reframe religion to be positive and supportive of their intersectionality (Schmitz et al., 2020). Through cultural messages and values, sexual minorities of color may feel pressured to abide by their cultural heritage norms despite them being oppressive. Partly because for many, their racial communities are large sources of support in comparison to their LGBTQ+ communities. Since they are primarily socialized in their cultural heritage through their family upbringing, relying on LGBTQ+ communities for support are a novel experience to them. At the same time, internalizing the heterosexism from

one's culture can prevent individuals from developing a connection to LGBTQ+ communities, further depriving sexual minorities of color of a social network.

An Overview of Internalized Racism

Like internalized heterosexism, internalized racism is multidimensional. It also has its roots stemming from societal structures (i.e., racism and white supremacy). White supremacy in the U.S. functions as an invisible system to allot gains and privileges to white individuals while simultaneously creating barriers to assets and resources for minoritized racial minorities (Campón & Carter, 2015; Versey et al., 2019). Moreover, white supremacy fabricates an illusion that white individuals are culturally and biologically superior to other racial groups via ideologies. This results in negative beliefs and attitudes toward BIPOC groups, undergirding differential treatment of members of these groups by both individuals and institutions (Williams et al., 2019). Due to the nature of the invisibility of white supremacy, it can easily be reified by other social institutions such as housing, labor, and credit markets as well as education, criminal justice, economic, and health care systems. To make matters worse, in the U.S., white supremacy is embodied at multiple levels (e.g., individual, interpersonal, institutional) by white American individuals. The dominant group has unearned power to define and name reality, determining what is “normal” and trivialize the racial experiences of minoritized racial groups. The stereotypes, values, images, and ideologies perpetuated by the white populations about different BIPOC groups give rise to racism.

Through socialization in a dominant white society, white individuals and BIPOC are parallelly shaped by racism. White individuals are socialized into practices, attitudes, behaviors that maintain white supremacy, privilege, and systems of inequity such as racial colorblindness, myth of meritocracy, and assimilation to American culture (Neville et al., 2000; Versey et al.,

2019). White individuals rarely think about their racial positionality since they are taught to think of their lives as neutral, average, and ideal. This inculcation of Whiteness protects people from recognizing they benefit from racism, and instead their success reflects their individual efforts which further sustains white supremacy. Minoritized racial communities of color are socialized with the backdrop of a society that continues to view whiteness as normative and cultural processes of BIPOC as inferior.

Minoritized racial individuals therefore have an antithetical racial reality than white individuals. Racism for BIPOC result in exploitation, marginalization, powerlessness, systemic violence, and cultural imperialism (Speight, 2007). According to Speight (2007), it is through cultural imperialism where minoritized racial individuals come to appropriate or internalize racism. White group members can project their own experience as the norm, thus rendering invisible BIPOC groups' perspectives while stereotyping them. Internalized racism refers to the appropriation of racist stereotypes, values, images, and ideologies endorsed by the white dominant society about BIPOC groups, leading to feelings of self-doubt, disgust, and disrespect for one's race and/or oneself (Bailey et al., 2011; David et al., 2019).

Internalized racism can be transmitted via media, stereotyping, and norms within society and its institutions. For instance, portraying white individuals as educated, elite, or kind in media while depicting BIPOC groups as delinquents, poor, or violent. These negative messages are modeled by the dominant white culture which are then appropriated or internalized by minoritized racial groups. Particularly, these racial messages are taken in through exposure and then reflected through a person's thoughts, behaviors, and ways of expressing themselves to the world. Internalized racism can be an instinctive response to, or a deliberate strategy for, navigating normative whiteness ideals embedded in society (Versey et al., 2019). An example of

the latter includes BIPOC presenting an optimal version of themselves to counter negative stereotypes about their racial group like speaking English in public spaces while refraining from their native language.

Campón and Carter (2015) identified five dimensions of internalized racism: (1) appropriation of negative stereotypes of one's own racial group (e.g., whites are superior while minoritized racial groups are inferior), (2) patterns of thinking that maintain the status quo (i.e., denial of racism and beliefs of white superiority), (3) adaptation of white American cultural standards (e.g., BIPOC altering their appearance to reflect white standards of beauty), (4) devaluation of own racial group, and (5) experiencing emotional reactions towards one's own racial status (i.e., shame, anger, embarrassment, depression). Although these dimensions explicate an aspect of internalized racism, they were not specifically developed for and normed on sexual minorities of color. Sexual minorities of color internalized racism incidents will likely intertwine with their sexual orientation experience which ultimately changes their experience of internalized racism.

Effects of Internalized Racism

The effects of internalized racism are pervasive and deleterious. It can deprive individuals from full self-expression and functioning, exercising autonomy, personal growth, and self-actualization (Perrin, 2013). The stress internalized racism causes in the lives of minoritized racial individuals is possibly responsible for the innumerable health disparities affecting communities. Internalized racism is one of the most damaging psychological injuries of racism, since it serves to colonize and recolonize individuals as it redefines a person's reality (Speight, 2007). In this manner, the internalized racism BIPOC groups endure becomes self-sustaining; meaning direct experiences of racism are not needed to affect an individual. Subsequently, this

process impacts a person's lived experience, perception, and coping response to racism which maintains the vicious cycle of oppression (Banks & Stephens, 2018). This can lead to significant negative effects on marginalized racial minorities, including self-destructive behaviors (e.g., substance use, community violence; Bailey et al., 2011); alteration of physical appearance (Campón & Carter, 2015; David et al., 2019); aversive emotional reactions such as shame, anger, embarrassment, depression, and anxiety (Campón & Carter, 2015; Choi et al., 2017a; Roberson & Pieterse, 2021); racial stress and trauma (Carter, 2007); along with loss of connection to one's racial groups, lower career aspirations, lower levels of self-esteem, well-being, and life satisfaction (David et al., 2019; Gale et al., 2020; Perrin, 2013; Versey et al., 2019).

Internalized racism is also a conduit for racial colorblindness and colorism. Racial colorblindness comprises of color evasion or the denial of racial differences by emphasizing sameness, and power evasion which is the denial of racism by highlighting the belief that everyone has equal opportunities (Neville et al., 2013). Regarding colorism, it includes a preference or bias for lighter skin color. Colorism evolved out of European colonization and the enslavement of Africans in which skin color was utilized as a determining factor for superiority (Dixon & Telles, 2017). Presently, colorism continues to permeate globally, emphasizing the notion that lighter skin color is revered and is interpreted as beauty. BIPOC groups with internalized racism may advocate for racial colorblindness and colorism seeing these manifestations are akin to whiteness.

These effects may be experienced consciously or unconsciously. Individuals with internalized racism might deny racism or its consequences exists without realizing they are endorsing tenets of white supremacy. Unbeknownst to minoritized racial communities of color they may support racial colorblind and meritocratic beliefs asserting all racial groups have access

to the same resources equally. For the following people, centering racial disparities and inequities only sustains a past narrative of marginalized racial groups that does not accurately represent communities presently. BIPOC dealing with internalized racism have appropriated a distorted or biased view of oppression, one that reflects racism as a thing of the past (Neville et al., 2000; Neville et al., 2013). At other times, internalized racism may result in devaluation of minoritized racial groups and favoring more Eurocentric values including individualism and independence. Such devaluation is also directed toward one's racial heritage in which individuals see themselves as inherently deficient or weak for being BIPOC (Choi et al., 2017a). Individuals might exclude, avoid, and/or humiliate people of one's own race while viewing their race as inferior to white individuals.

Minoritized communities of color experiencing internalized racism will perhaps adopt American or Western standards of physical attractiveness in their lives as they may feel ashamed or embarrassed about their own racial backgrounds. These adoptions can take the form of desiring lighter skin tones, changing physical appearance, selecting a romantic partner that reflects a more Eurocentric aesthetic, as well as assimilating to white American culture (e.g., speaking English if multiple languages are spoken, avoiding dress attire of one's cultural heritage, engaging in good/proper manners; Bailey et al., 2011; Campón & Carter, 2015; David et al., 2019; Dixon & Telles, 2017). Although engaging in these behaviors can provide validation from white individuals to avoid potential oppression, it can be tiring for BIPOC to create a novel version of themselves that caters to whiteness. Even among people who engage in code-switching, alternating back and forth between two systems of culture to navigate different social contexts, requires constant effort. For some individuals, they may develop a preoccupation regarding one's presentation across social contexts which can lead to poorer mental health

(Versey et al., 2019). It is a physical and mental burden and socially unjust for minoritized racial groups to have to compromise their authentic existence while the dominant white groups get to exercise their reality freely. Unfortunately, the effects of internalized racism are cumulative, spanning generations, communities, time, and place.

The amalgamation of scholarship on racism and BIPOC groups has empirically identified adverse health effects. For individuals dealing with internalized racism, it leads to shame, anger, embarrassment, anxiety, depression, and low self-esteem (David et al., 2019; Roberson & Pieterse, 2021; Sosoo et al., 2020). When people internalize racist messages of their racial groups, they have less of a positive self-appraisal. It is difficult to appropriate negative stereotypes without these views impacting one's self-perception. There has even been links that its effects can increase blood pressure, risk for heart disease, and increased vulnerability to a variety of negative health outcomes which can result in greater psychological and emotional distress (Carter, 2007; Gale et al., 2020). Moreover, significant emotional or physical pain or the threat of physical and emotional pain stemming from racism (i.e., harassment, discrimination, assault) can produce race-based trauma. Individuals with internalized racism may not actively challenge the racist messages or discriminatory events, instead they may engage in emotional dysregulation. Internalized racism creates damage to one's psyche and personality in the same way being subjected to community violence, being held captive, or being psychologically tortured (Carter, 2007; Sosoo et al., 2020). These ramifications are concerning when one thinks about how long racism has persisted in the U.S. Ultimately these health consequences lower self-esteem, well-being, and life satisfaction, preventing minoritized racial individuals to exercise their human potential.

Internalized Racism and Sexual Minorities of Color

Psychological research on internalized racism ought to include the intersectionality of individuals since people possess multiple identities. Such identities intertwine with various systems of oppression to influence individuals' experiences in very complex ways. Regrettably, research on internalized racism among sexual minorities of color is lagging considerably. Most of the studies that examined internalized racism in sexual minorities of color tend to use additive or multiplicative methods, which in essence isolate the racial experience from participants' sexual orientation. This separation implies sexual minorities of color possess identities that do not intertwine with each other. A contributing factor that has limited the research of internalized racism and sexual minorities of color is the lack of instrumentation. To the author's knowledge there are no internalized racism measures developed for sexual minorities of color specifically. Previous studies have relied on measures normed on BIPOC, with their sexual orientation experiences not considered (Aranda et al., 2016; Sutter & Perrin, 2016; Szymanski & Gupta, 2009; Szymanski & Sung, 2013; Velez et al., 2019). Consequently, their unique realities may not be accurately represented. For instance, sexual minorities of color may compartmentalize their identities (sexual orientation and race) even more when dealing with internalized racism from their own LGBQ+ communities (Ghabrial, 2017; Salerno et al., 2022).

In addition to sexual minorities of color internalizing racist messages from white American culture, they may also appropriate tenets of white sexual minorities' culture. Culture refers to shared meanings, understandings, or symbols held by a group of people with a common historical background (Parmenter, 2018; Schwartz et al., 2010). Even though the concept of culture tends to focus on race, culture can also be utilized to describe sexual orientation. Sexual minorities of color are iteratively navigating multiple cultures, giving way for each culture to

influence their realities with internalized racism. With respect to white sexual minority culture, sexual minorities of color frequently report instances where they are expected to assimilate to the white sexual minority culture (Bowleg, 2013; Lim & Hewitt, 2018; Noyola et al., 2020; Sadika et al., 2020). Assimilation, a dimension of acculturation, refers to adopting receiving-culture practices, values, and identifications while discarding those from the culture of origin (Schwartz et al., 2010). In this manner, sexual minorities of color take up from the white sexual minority culture while disregarding their own culture. This generally means adopting culturally specific behaviors, such as expecting to be “out,” concealing or downplaying one’s racial heritage in LGBTQ+ spaces, and prioritizing *family of choice* (a network of LGBTQ+ identified individuals who accept, support, and care for one another like a family) over family of origin.

For white sexual minorities who embrace individualism and independence, prioritizing their *family of choice* may feel easier to do, unlike for sexual minorities of color whose family of origin is invaluable. All these behaviors, whether intentional or not, disregards sexual minorities of color racial values; such behaviors reinforce racial colorblindness which is linked to internalized racism (Neville et al., 2013). On the other hand, sexual minorities of color who assimilate to the white sexual minority culture may devalue their own racial socialization and develop animosity towards their racial groups as well as toward their family. For example, sexual minorities of color whose families uphold cultural heterosexist attitudes such as not accepting of one’s sexual orientation, may result in individuals berating their family members considering they are more assimilated to the white sexual minority culture. As opposed to sexual minorities of color who find their racial cultural heritage more salient than their sexual orientation, will perhaps tolerate their family’s cultural heterosexism out of respect for their cultural values and beliefs.

By internalizing the racial colorblindness within white sexual minority contexts, sexual minorities of color will inevitably display internalized racism. Even in these marginalized contexts, whiteness pervades as white sexual minority cisgender men are centered and valued. Not only does the hegemonic whiteness in LGBTQ+ communities affect a person's self-worth, but it also fosters a sense of isolation and ostracization for sexual minorities of color. At the same time, white sexual minorities can exhibit acts of racism toward sexual minorities of color, including biases in attraction (e.g., only dating people from a specific race, seeking partners with lighter skin color), racial fetishization, and sexual objectification (Balsam et al., 2011; Jackson et al., 2020); becoming uncomfortable when talking about racial issues and denying racism within LGBTQ+ communities (Ajayi & Syed, 2016); as well as acts of overt racism (Felipe et al., 2020; Ghabrial, 2017). These racist experiences not only pose a danger to one's wellbeing, but it also shuns sexual minorities of color from LGBTQ+ spaces. The internalized racism sexual minorities of color deal with, often involves experiences of internalized heterosexism and vice versa. Furthermore, the interplay of racism, heterosexism, and acculturation to white heteronormative contexts creates nuance psychological and socioecological stressors influencing the phenomena of internalized heterosexist racism.

Internalized Heterosexist Racism: Intersectional Systems of Oppression

Internalized heterosexism and internalized racism are complex systems of oppression. Taking into consideration the recent discussions of each form of oppression on sexual minorities of color, one can better understand the breadth and depth of each respectively. When they are intertwined, they result in even more intricate systems. This type of complexity needs to be centered when investigating the realities of sexual minorities of color. The following conceptualization of internalized heterosexist racism (IHR) is offered to illuminate said

complexity. Internalized heterosexist racism denotes the process whereby sexual minorities of color appropriate or internalize aspects of heterosexist racism toward their intersecting experiences as a sexual minority of color by believing, succumbing, or accepting that their social identities, worldviews, and cultural norms are inferior. The realities of sexual minorities of color's intersectional experiences cannot be fully understood without considering both systems of oppression. It is not enough to solely study internalized heterosexism among sexual minorities of color or internalized racism among sexual minorities of color independently. Which has been the default approach amongst researchers. Intersectionality approaches allow for researchers to explicate individuals' novel experiences that are unique due to their converging experiences with their identities and systems of oppression (Parent et al., 2013). When speaking about internalized heterosexist racism in sexual minorities of color, encounters of acculturation to the heteronormative and white American cultures are relevant.

Acculturation refers to cultural changes because of contact with culturally different people, groups, and social influences (Schwartz et al., 2010). It is commonly studied in individuals living in countries or regions other than where they were born, such as immigrants, refugees, asylum seekers, and sojourners. Culture has primarily been introduced within the literature attending to BIPOC groups and migrants. However, sexual minorities also have a culture to reference. Sexual minorities are not raised within the LGBTQ+ culture and are instead raised within the heteronormative cultural context (Parmenter, 2018). Such interplay between the sexual majority culture and minority culture are reminiscent of acculturation. Relatedly, sexual minorities of color in the U.S. possess racial identities to which they are bound to experience acculturation to a certain degree. Sexual minorities of color may have to reconcile acculturation differences as a sexual minority (e.g., sexual orientation being incompatible with race heritage,

avoiding participation in LGBTQ+ settings) and a BIPOC (e.g., sense of support from racial contexts given one's sexual orientation, disclosure, and concealment of sexual orientation, exoticized in White LGBTQ+ spaces) which influences their experiences with internalized heterosexist racism.

Internalized heterosexist racism stems from a dynamic interplay between racism and heterosexism. These systems of oppression can interlock with other systems, creating a bond in which each respective system influences another system, while also being influenced by the other systems of oppression. This bidirectionality allows for systems of oppression to permeate and mutate across time and place. Making it very difficult to eradicate, especially when a single system of oppression is targeted. Internalized heterosexist racism will look different for different populations. In the case for sexual minorities of color, it can manifest as stress, beauty standards, identity development, disconnection, invisibility, and conflict. These manifestations of internalized heterosexist racism arise from heterosexism and racism systems. In the next few sections, IHR is contextualized to illuminate where this type of oppression forms and how it is appropriated or internalized by sexual minorities of color.

Heterosexist Racism: The Root of Internalized Heterosexist Racism

As previously noted, heterosexism and racism are socioecological contexts in which sexual minorities of color come to internalize heterosexist racism. Sadly, sexual minorities of color are socialized into these intersectional contexts that expose individuals to stigma, negative messages, and attitudes from people, communities, institutions, and society (Schmitz et al., 2020; Szymanski & Sung, 2013). For instance, within LGBTQ+ communities – which are often lacking racial diversity and are primarily white – sexual minorities of color typically experience racism in romantic relationships and social networks by being excluded or objectified (Balsam et

al., 2011; Felipe et al., 2020; Ghabrial, 2017; Weber et al., 2018). Sexual minorities of color may then appropriate or internalize the feelings of exclusion or objectification and integrate them into their sense of self. Even when LGBTQ+ spaces are platonic because they are plagued with whiteness, these communities that are meant to be inclusive instead become spaces in which sexual minorities of color are policed and governed to uphold “desired” behaviors and actions (i.e., white beauty and expression standards), while robbing them of a sense of belonging (Pantoja-Patiño, 2023; Rosenberg, 2016). Sexual minorities of color may then erroneously believe they are inferior because they do not fit society’s prototype. Additionally, individuals may feel the pressure to assimilate (adopting receiving-culture practices, values, and identifications while discarding those from the culture of origin; Schwartz et al., 2010) to white sexual minorities cultural standards. Sexual minorities of color may uphold these standards to present an ideal version of themselves to counter negative stereotypes about their racial groups as well as to be accepted by others (Versey et al., 2019). Specifically, people may alter their hair, bodies (e.g., skin bleaching, tanning, shaving, exercising to achieve the archetype body of white sexual minorities), and eating habits that are more akin to whiteness.

Whiteness functions as a fabric of colonization that is weaved into American institutions, or organizations that regulate resources or programs, including public, educational, political, religious, and legal. It also comprises of policies and practices that prioritize the needs of privileged groups, exclude minoritized groups, and provide unearned privilege and benefits to certain groups like heterosexuals and White individuals (McGeorge & Carlson, 2009; Jun, 2018). In turn, such institutional practices result in health disparities. For example, sexual minorities of color who reside in lower economic neighborhoods due to residential segregation by way of heterosexist racism, creates economic disadvantages (Conron et al., 2023). Sexual minorities of

color may struggle to build generational wealth due to institutional oppression, limiting their ability to attend quality schools, find high-earning jobs, or secure housing. Individuals may then inwardly attribute the economic advantages to their own merits (i.e., myth of meritocracy) and innate qualities of who they are. Another way heterosexist racism may present itself within institutions is in educational settings like colleges and universities. In general, American universities center curriculum, events, and policies around heterosexuality and white individuals. Sexual minorities of color usually do not have access to culturally sensitive support services or resources that reflects their intersectional experiences/needs. For instance, individuals may have access to LGBTQ+ resources at their respective universities, but these are often catering to white sexual minorities and typically focus on singular issues, such as homophobia or heterosexism; consequently, ignoring the racism that affects sexual minorities of color (Graham, 2021). Sexual minorities of color may feel invisible and disconnected in LGBTQ+ and BIPOC spaces for having to choose to express one aspect of their identities (i.e., race or sexual orientation) or having to minimize their identities to succeed in institutions.

Within institutions, sexual minorities of color encounter daily messages and interactions that are hostile, derogatory, or negative toward sexual minorities of color. These messages and interactions or microaggressions are everyday verbal, nonverbal, and environmental slights, snubs, or insults that are hurtful to people (Sue, 2010). Microaggressions can be based on any minoritized group including sexual minorities of color. Sexual minorities of color can experience internalized heterosexist racism (e.g., microaggressions, messages, discrimination) from three different, yet interlocking interpersonal contexts: white heterosexual individuals, white sexual minorities, and heterosexual minoritized racial groups. Heterosexist racism derives from whiteness and heterosexism, thus white heterosexual individuals' control, reproduce, and spread

the insidious oppression. Since sexual minorities of color interact with white heterosexual individuals, they are exposed to such oppression. The reason white sexual minorities and heterosexual minoritized racial individuals are considered perpetrators of heterosexist racism is they can appropriate tenets of each system as well. White sexual minorities can internalize heterosexism and socialize to espouse white supremacy ideology. For example, sexual minorities of color have noted having to educate white sexual minorities about race issues, feeling misunderstood by white sexual minorities, being objectified for one's appearance (e.g., body gestures, tone of voice, etc.), and even being told that "race isn't important" by white sexual minorities (Balsam et al., 2011; Nadal et al., 2016; Weber et al., 2018). Other notable microaggressions that sexual minorities of color have reported, include people assuming their queer experience is universal (e.g., all gay men being flamboyant), assuming their intelligence is based on their race, being viewed as a criminal because of one's race, and being asked intrusive questions about one's sex life (Weber et al., 2018). These microaggressions are then appropriated by sexual minorities of color.

With regards to straight minoritized racial communities espousing heterosexist racism. Such communities may expect sexual minorities of color to fulfill traditional gender roles that implies behaving characteristically "straight" (Noyola et al., 2020; Smith, 2012); may reject their sexual orientation by justifying it goes against religious beliefs or traditional family values (Hahm & Adkins, 2009; Sarno et al., 2015; Schmitz et al., 2020); or use heterosexist language to put down LGBTQ+ people due to cultural values (Nadal et al., 2016; Parmenter, 2018). These interpersonal dynamics in the form of microaggressions can be internalized by sexual minorities of color. Individuals may then feel disconnected to their identities, their groups, or even devalue their experiences. Sexual minorities of color may also try to change or alter who they are to

conform to the microaggressive acts, including trying to be more straight passing, downplaying their intersectional experiences, or even repress their identities by assimilating to the dominant culture of queer whiteness.

Another worthy context that makes way for heterosexist racism is colorblindness. Colorblindness refers to the rejection of racial differences by emphasizing sameness, and power evasion which is the denial of racism by highlighting the belief everyone has equal opportunities regardless of race (Neville et al., 2013). Moreover, it is the belief race along with race-based differences should not be considered when making decisions, forming impressions, and when behaviors are enacted (Apfelbaum et al., 2012). The premise of colorblindness is essentially a distorted one, as well as a contradiction. For example, the idea that by not drawing attention to race and racial differences (i.e., colorblindness), one cannot be racially biased. However, research has shown those who promote a colorblindness approach, tend to display higher rates of racial biases (Apfelbaum et al., 2012; Neville et al., 2013; Versey et al., 2019). By upholding such approach, it places a blanket over the system of racism to suggest racism seldom exists or is visible. Interestingly, colorblindness is linked to internalized racism as it derives from the system of racism, thus colorblindness will intertwine with heterosexism especially among sexual minorities of color. Sexual minorities of color will be exposed to racism in the form of colorblindness via their acculturation and racial socialization as a BIPOC individual (Liu et al., 2019; Parmenter, 2018). Sexual minorities of color will learn cultural and social practices that accommodates white and straight individuals' needs, status, and emotions to live and thrive in the U.S. Those can include, concealing one's sexual orientation to reduce straight people's uncomfortableness, downplay one's cultural heritage by dressing in clothing that resembles whiteness and heterosexuality, as well as devaluing their own cultures. Consequently, sexual

minorities of color may be forfeiting their well-being and intersectional expressions, while internalizing tenets of systems of oppression (Ghabrial & Ross, 2018; Liu et al., 2019; Versey et al., 2019). As a result of the colorblind practices, sexual minorities of color learn to behave in ways that soften their cultural expressions and differences. If individuals attempt to deviate or resist racism and whiteness, or any other dominant system like heterosexism, sexual minorities of color are met with microaggressions, discrimination, assault, and negative messages. This signifies to sexual minorities of color that non-conformity results in consequences. In the remaining section of this chapter, the author synthesized and delineated several dimensions of internalized heterosexist racism among sexual minorities of color from a comprehensive review of the literature. These dimensions aided in the development of the IHRM.

Dimensions of Internalized Heterosexist Racism

Utilizing an intersectionality perspective to capture the fluidity and contexts of internalized heterosexist racism among sexual minorities of color, six salient dimensions were generated. These dimensions are: (a) negative messages, (b) intersectional minority stress and reactivity, (c) assimilation of beauty and self-expression standards, (d) internalized inferiority (e) internalized isolation and ostracism, and (f) intersectional invisibility. In Chapter 3, the process of delineating the dimensions of internalized heterosexist racism among sexual minorities of color from a comprehensive review of the literature is thoroughly discussed.

Negative Messages

The first dimension of negative messages includes the appropriation or internalization of external heterosexist racist messages about sexual minorities of color. Individuals subjected to heterosexist racism are socialized to believe in the superiority of white Americans and heterosexual individuals through negative messages from others, institutions, the media, and

society. Sexual minorities of color then integrate these external messages into their self, their identities, and personality. A notable context in which heterosexist racism arises is families and communities. Families, and the communities the families live in, are one of the first social environments sexual minorities of color interact with. People are likely to hear negative messages about sexual minorities of color. For instance, hearing from one's racial groups say that "homosexuality" is an illness or wrong, delegitimizes their sexual orientation rendering people to feel invisible and alone (Abdi & Van Gilder, 2016). At other times, individuals can experience moral rejection messages from their racial communities and families based on religious prohibitions against being a sexual minority, which can elicit feelings of shame (Sadika et al., 2020; Schmitz et al., 2020). Specifically, individuals may be told to adhere to traditional racialized gender roles to raise straight children and seek a romantic partner to complement their gender identity. If sexual minorities of color move away from the external negative messages, families may utilize religion to justify the racialized gender roles.

At the same time, their families may communicate ambivalent attitudes towards sexual minorities of color by expressing love while rejecting their sexual orientation (Noyola et al., 2020). Salerno et al. (2022) found that sexual minorities of color who experience family rejection from their racial groups, experience more identity concealment of their sexual orientation, and ultimately internalized heterosexist racism. IHR will then impact a person's identity development of their queerness and race. In concealing aspects of one's identities, people begin to be continually preoccupied with keeping their identities at bay, engage in constant self-monitoring form their identities being discovered, or may choose to avoid social situations in which they may be rejected (Pachankis, 2007). Here, the nature of concealment is fueled by fear and concern for one's safety as a sexual minority of color. Relatedly, if one is not "out" or conceals their

sexual orientation to others, especially to white sexual minorities, they often assume that individuals are inauthentic and self-deceptive for not openly disclosing their sexual orientation (Pantoja-Patiño, 2023; Sadika et al., 2020). However, disclosure of sexual orientation, especially to BIPOC families can be offensive and incongruent to one's racial heritage (Szymanski & Sung, 2013; Page et al., 2021). Individuals who find the courage to disclose to their families, there is a chance they may react with lack of acknowledgement, invalidation, and disregard for a person's sexual orientation. To sexual minorities of color, such reaction relays the negative message that their identities are not valid nor worthy, which introduces an entry point for IHR to manifest and be integrated into one's self-concept (Ferguson et al., 2014; Salerno et al., 2022). More specifically to illustrate a pathway of internalization, if sexual minorities of color cannot reconcile the discordant and invalidating experiences, they begin to appropriate the negative messages along with the associated emotions (e.g., inferiority, shame).

For people who are farther in their developmental stages of their intersecting identities, they may no longer experience higher intensity levels of IHR if they have reconciled their identities with the external oppressive messages, so they may be more open with their sexual orientation to others. Unfortunately, however, sexual minorities of color may encounter different negative messages around their expression of intersecting identities in both queer and racialized spaces. It is common for a non-heterosexual orientation (i.e., gay, asexual, questioning, etc.) to be perceived stemming from white LGBTQ+ culture in racialized spaces (Abdi & Van Gilder, 2016; Ikizler & Szymanski, 2014). To be "out" as well as just be a sexual minority means embracing white LGBTQ+ cultural values rooted in Western phenomenon. This may be due to the traditional beliefs on gender and sexual orientation in communities of color that have been transmitted for decades to protect the survival of the family system. At the same time, when

sexual minorities of color make attempts to be a part of the LGBTQ+ community, because such space is heavily androcentric (male/masculine) and ethnocentric (white), many will be othered and rendered invisible (Purdie-Vaughns & Eibach, 2008; Rosenberg, 2016). Even when sexual minorities of color are not concealing their intersecting identities, they are met with other forms of negative messages that remind them they are unwanted.

Intersectional Minority Stress and Reactivity

The second dimension of intersectional minority stress and reactivity considers the minority stress model (Brooks, 1981; Meyer, 2003) and intersectionality theory (Crenshaw, 1991), suggesting sexual minorities of color's internalized heterosexist racism (IHR) results in psychological stress and emotional reactions. This psychological distress and emotional suffering are taxing to individuals and may exceed their capacity to thrive, consequently having the potential to induce mental health concerns such as anxiety, depression, and substance use (Pantoja-Patiño, 2020; Schmitz et al., 2020). Further, intersectional minority stress and reactivity denotes stress processes associated with IHR such as, concealing sexual orientation as it goes against racial-familial values, difficulty in integrating racial identities and sexual orientation due to heterosexism from racial communities and racism in LGBTQ+ contexts, along with exclusion from LGBTQ+ and minoritized racial spaces (Balsam et al., 2011; Brennan et al., 2021; Noyola et al., 2020), just to name a few. Concealment of identities, identity conflict and compartmentalization, and ostracization all cause psychological distress and emotional reactions (e.g., shame, lower self-esteem, feelings of rejection).

Some sexual minorities of color may anxiously anticipate the rejection or hostilities from their racial and queer communities because of their intertwining experiences (Ajayi & Syed, 2016; Lim & Hewitt, 2018). This includes both individuals who may conceal their sexual

orientation and downplay their racial heritage (e.g., language, dress attire, values), as well as those who do not. A person who conceals their identities, even if they rarely dealt with heterosexist racist remarks, may fear if they fully embrace their intersectionality, they might be rejected. On the flipside, a person who embraces their intersectionality and continually deals with heterosexist racist messages, may begin to devalue their identities, and become anxious about future encounters. In both instances, IHR can affect their anticipation process in multiple ways, leading to more stress or exacerbating the effects of stress along with the looming feeling of inferiority (Meyer, 2003; Gale et al., 2020).

Continually encountering the intersectional systems of oppression can cause significant distress and emotional dysregulation to the point that individuals appropriate the psychological pain derived from such oppressive forces. Sexual minorities of color with internalized heterosexist racism may be stressed, anxious, or depressed about feeling pressure to assimilate to white and heterosexist environments. For example, among men, they may be compelled to abide to gender norms of masculinity from their respective racial cultures to not be seen as “flamboyant” or feminine due to their sexual orientation (Bowleg, 2013) or even subscribe to the beauty standards of white sexual minorities (e.g., slim/strong physique, straightening hair, etc.). Individuals can also be stressed, anxious, or depressed from hearing moral rejections against being a sexual minority from their racial families (Sadika et al., 2020; Smith et al., 2020). Other examples that reflect the intersectional minority stress and reactivity dimension are disconnection from white LGBTQ+ and minoritized racial communities (Ghabrial, 2017); devaluation of their intertwining identities (Felipe et al., 2020); and feeling invisible and misrepresented (Page et al., 2021; Purdie-Vaughns & Eibach, 2008). Altogether, these minority stressors induce negative reactions (e.g., emotional, psychological, social, physical, spiritual) in

which sexual minorities of color internalize the insidious reactions colonizing a person's mind and distorting their understanding of themselves as inferior to white sexual minorities and straight minoritized racial groups.

Assimilation of Beauty and Self-Expression Standards

The third dimension of assimilation of beauty and self-expression standards refers to sexual minorities of color consciously or unconsciously adopting white American and heterosexual cultural standards, such as dress attire, language, appearance, and impression management (engaging in strategies to prevent sexual orientation from being discovered; Pachankis, 2007) while concealing or downplaying their sexual orientation and race. The intent in enacting these behaviors is that white and heterosexual cultures are seen as superior to the cultures of sexual minorities of color based on the societal messages they experience (Bowleg, 2013; Campón & Carter, 2015; Lim & Hewitt, 2018). People may selectively uphold these standards of beauty and self-expression to present a version of themselves that caters to whiteness and heterosexism to counter negative stereotypes about their group as well as to be accepted by others (Ghabrial & Ross, 2018; Versey et al., 2019). Certain individuals may be aware of the differential treatment they receive when they embody white American and heterosexual standards versus when they do not. An example of the latter would be being belittled or berated for expressing various forms of intimacy (e.g., touch, holding hands, kissing, etc.) towards their romantic partner in family contexts. Sexual minorities of color's family members may disapprove of one's romantic partner for fear of not continuing the family heritage (i.e., family name, forming a heterosexual family, having biological children; Noyola et al., 2020). A person may internalize this experience and compartmentalize their intersectionality and refrain from being authentic in certain contexts. Coincidentally, they might begin to endorse white

American and heterosexual norms such as not disclosing their sexual orientation, masking their sexual orientation to give the impression they are straight, and dating romantic partners with lighter skin color (i.e., colorism).

Sexual minorities of color may denigrate physical characteristics and behaviors of the sexual minority and racial groups they belong. Internalized heterosexist racism forces people to believe white people – including both queer and straight – are superior and sexual minorities of color should behave/look like them. For instance, in romantic white queer spaces, sexual minorities of color are shunned from the get-go through acts of sexual exclusion or objectification based on race like upholding sexual preferences for a certain race or exoticizing BIPOC's physical characteristics (Balsam et al., 2011; Han & Choi, 2018; Weber et al., 2018). This process can pressure specific individuals to appropriate the beauty and expression standards based on their respective sexual orientation such as gay, lesbian, bisexual, etc. For cisgender queer men this could mean endorsing more low, deep voices to appear increasingly masculine, restricting certain mannerisms/body language, and dressing more casual (Smith, 2012; Nadal et al., 2016). Sexual minorities of color with IHR may inhibit themselves from dressing in their racial attires, avoid speaking their native language (if English is their second language), or distance themselves from their racial cultures as result of feeling ashamed or embarrassed. Subsequently, people may alter their hair, body (e.g., achieving a certain body type via exercising, skin bleaching, tanning, shaving), and eating habits that are more akin to white American culture to be affirmed and accepted.

Internalized Inferiority

The fourth dimension of internalized inferiority relates to sexual minorities of color negatively judging themselves (i.e., feeling less than) or others for their racial and sexual

orientation cultures in comparison to white American and heterosexual cultural standards, ideologies, values, and beliefs. In essence, individuals with internalized heterosexist racism diminish their respective cultures both internally and externally because of the negative societal beliefs and stereotypes of their cultures (Herek et al., 2009; Versey et al., 2019). Sexual minorities of color with IHR accept their subordinate status fed by systems of oppression as deserved, natural, and inevitable. White individuals (including white sexual minorities) and straight people (including straight BIPOC groups) get to project freely their own experience as the norm while stereotyping sexual minorities of color, thereby rendering their experiences invisible, which results in internalized inferiority (Ferguson et al., 2014; Purdie-Vaughns & Eibach, 2008; Rosenberg, 2016; Speight, 2007). Internalized inferiority can manifest with sexual minorities of color devaluing while simultaneously favoring whiteness and heterosexist ideologies along with feeling strong envy or animosity towards white and heterosexual individuals (David et al., 2019). Although people can revere the dominant cultures, at times they might feel a painful awareness of the advantages enjoyed by white and heterosexual individuals and desire to possess the same advantages (e.g., not being discriminated for their race and sexual orientation, ability to live freely and coexist with others). Others will perhaps devalue their cultures without feeling any envy or animosity, or they might displace their resentment towards their own racial-familial groups.

Regarding the internal devaluation of cultures, individuals recognize their positionality within a social hierarchy. They are aware of how different treatments are conferred based on one's race and sexual orientation and ultimately blame themselves for the negative perceptions of their cultures (Berg et al., 2016; Speight, 2007). Sexual minorities of color will see themselves through a deficit perspective such as less capable, beautiful/attractive, or successful in contrast to

white sexual minorities and heterosexual individuals. Individuals with IHR accept the inferiority imposed by society as a sexual minority of color. Furthermore, individuals who harbor these intersectional negative self-evaluations creates identity dissonance. Sexual minorities of color may compartmentalize their identities as they perceive their intertwining identities as mutually exclusive. As to external devaluation of cultures, people may exclude other sexual minorities of color from their social activities and milieus, may avoid spaces frequented by sexual minorities of color to avoid association with both groups (i.e., LGBTQ+ and BIPOC communities), as well as belittle people from either group (Felipe et al., 2020; Ghabrial, 2017).

Sexual minorities of color can also discriminate against their own group members, as well as deny IHR exists or put the onus of oppression on sexual minorities of color as opposed to white supremacy and heterosexism. They may criticize other sexual minorities of color for being in openly romantic relationships, including demonstrating public affection, discussing relationship with others (Szymanski & Sung, 2013), or being openly “out” with their sexual orientation across communities (Aranda et al., 2016). Individuals who are in romantic relationships may reinforce more traditional gender norms and sex roles relative to their racial culture (Bowleg, 2013; Smith, 2012). For example, sexual minorities of color may act more masculine or feminine or expect their partners to be more submissive or dominant. In this case, an individual dealing with IHR will pressure their partner to reduce their queerness and adopt more “straight” passing traits. Others can feel discomfort with sexual activity; those who are more comfortable with engaging in sexual activity, might intentionally select white partners or folks with lighter skin tones (Puckett & Levitt, 2015; Newcomb & Mustanski, 2010). Some will even avoid or distance themselves from other sexual minorities of color (e.g., living in white queer and heterosexual enclaves).

Internalized Isolation and Ostracism

The fifth dimension of internalized isolation and ostracism involves sexual minorities of color feeling detached from white LGBTQ+ and heterosexual BIPOC communities. Dealing with internalized heterosexist racism leads sexual minorities of color to feel increasingly isolated (Felipe et al., 2020; Singh & Moss, 2016). As such, people might begin to mold themselves or assimilate to fit into heterosexist racist spaces to be accepted. In this process, sexual minorities of color distance themselves from developing a coherent sense of self. Instead, people will create versions of themselves that caters to oppressive structures, inevitably accepting that expressions of heterosexist racism are valid and true. This just highlights the human need for connection, and when minoritized groups are deprived of such that, they will sacrifice authenticity to be relationally connected with others, even if that means assimilating to whiteness and heterosexism. Sadly, because of assimilating oneself to be accepted, paradoxically creates feelings of isolation. This is due to sexual minorities of color detaching from one's true self (i.e., embracing their intersectionality), which can create a feeling of emptiness and isolation (Singh & Moss, 2016). At other times, sexual minorities of color may conceal and/or compartmentalize their identities as a form of self-protection (e.g., experiencing future incidents of oppression), yet such strategy creates internalized feelings of isolation and ostracism. For instance, people who conceal or downplay their intertwining identities may avoid situations in which their identities may be exposed, such as being in romantic relationships or attending LGBTQ+ and BIPOC venues (Pachankis, 2007). For those who choose to remain connected to either their racial communities or LGBTQ+ communities, many are required to lead "dual lives" with each of their respective identity being suppressed. For others, the disconnection may be a conscious process in which individuals intentionally detach themselves for fear of being authentic given some have

learned to repress their intersectionality as a response to navigate whiteness and heterosexist contexts (Lim & Hewitt, 2018).

Sexual minorities of color may also experience disconnection from being excluded or ostracized by others via discrimination, rejection of intersectionality, lack of support or lack of inclusion and belonging (Abdi & Van Gilder, 2016; Felipe et al., 2020; Ghabrial, 2017; Gonzalez, 2019; Mosley et al., 2021; Rosenberg, 2016). Within LGBTQ+ communities, sexual minorities of color often experience racism in relationships and social networks by being excluded or objectified. Similarly, within one's communities of color, individuals may endure heterosexism pathologizing their non-heterosexual orientation (Balsam et al., 2011). These experiences alienate sexual minorities of color from either cultural community leading to a sense of disconnection. It also further compounds a person's ability to experience connection with other sexual minorities of color. Additionally, as a byproduct of being and feeling disconnected within minoritized racial individuals and LGBTQ+ communities, individuals can encounter tension or conflict between their intersecting identities. Each distinctive culture holds attitudes that denigrates the other culture, such as LGBTQ+ communities endorsing racist attitudes (e.g., racial colorblindness, biases in attraction to specific races, racial fetishization) along with BIPOC communities expressing sexual orientation prejudice and viewing non-heterosexual orientation as violating cultural and religious traditions (Lockett et al., 2023; Sarno et al., 2015).

Intersectional Invisibility

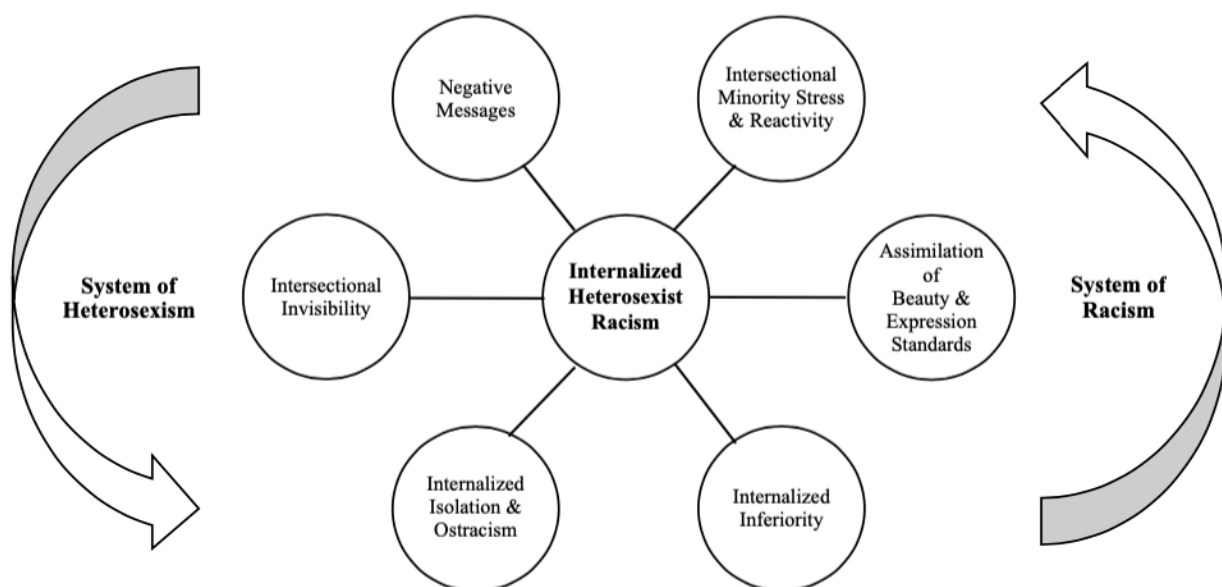
The final dimension of intersectional invisibility deals with sexual minorities of color made to feel invalidated and ignored by external forces (e.g., people, society, institutions, etc.), which creates an internalized sense of invisibility. Sexual minorities of color do not fit society's prototype of their constituent marginalized group: white gay cisgender middle class men nor

heterosexual cisgender minoritized racial groups. This tendency to define and center sexual minorities of color as such, results in members to experience intersectional invisibility (Ferguson et al., 2014; Purdie-Vaughns & Eibach, 2008; Remedios & Snyder, 2018). With respect to LGBTQ+ spaces, the dominance of white gay men has made finding space in the queer community problematic for sexual minorities of color. Unfortunately, said hegemonic whiteness cultivates pressures to abide to the cultural standards established by white gay men that fosters a sense of isolation, displacement, and invisibility (Ikizler & Szymanski, 2014; Sadika et al., 2020). People are essentially vanished from sociocultural constructions and representation of racial queerness, considering whiteness and heterosexuality are reified within LGBTQ+ and BIPOC contexts. Moreover, sexual minorities of color will feel “othered” and out of place by their experiences with heterosexist racism (e.g., communities of color disapproving one’s sexual orientation, religious cultural values, endorsement of traditional gender and sex roles, being shunned by LGBTQ+ for one’s race, racial colorblindness). People will feel misrepresented, further minoritized, and disempowered while appropriating feelings of invisibility.

Sexual minorities of color may feel their lived realities are continuously erased from various spaces such as, white heterosexual communities, white LGBTQ+ communities, and heterosexual BIPOC communities (Jackson et al., 2020; Lim & Hewitt, 2018; Williams et al., 2022). Being constantly rendered invisible can be both exhausting and stressful, especially for those who may put in efforts to feel validated and seen. When sexual minorities of color challenge hegemonic notions of heterosexist racism, their advocacy efforts may be trivialized or be labeled as overly sensitive. This intersectional invisibility may prevent individuals from engaging with others and communities authentically. Even if when they are making strides to express themselves visibly, sexual minorities of color dealing with IHR may have a hard time

seeing themselves visible as it can distort one's perception of their world. Figure 1 visually presents internalized heterosexist racism and its associated dimensions (negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectionality invisibility).

Figure 1. Conceptualization of Internalized Heterosexist Racism



Note. This figure illustrates how internalized heterosexist racism (IHR) is a byproduct of systems of heterosexism and racism. IHR is centered in the middle along with its six dimensions that reflect the construct of IHR. The curved arrows on each side of IHR are going in opposite directions to show that the system of heterosexism intertwines with the system of racism and vice versa.

Summary

This chapter offers a detailed review of literature relevant to internalized heterosexist racism among sexual minorities of color, including a rationale for a measure that captures the intersectional systems of heterosexism and racism, highlights of pertinent studies and the pernicious effects of internalized heterosexist racism, as well as a discussion of the IHRM

including its conceptualization, contextualization, and dimensions. Even though there have been strides to advance the research on internalized heterosexism and internalized racism among sexual minorities of color. Most research has addressed these systems of oppression individually as opposed to intersectionally given the insufficiency of measures. For this reason, the author proposed this study to develop and preliminary test the psychometric properties of a measure assessing internalized heterosexist racism in sexual minorities of color. Presently, there are no validated measures evaluating both systems of oppression, thus the IHRM has more nuance items specific to sexual minorities of color than existent independent measures of internalized heterosexism and internalized racism.

This study posed the following research aims and hypotheses to aid in the construction and preliminary validation of the IHRM:

- (1) Develop and test the psychometric properties of the IHRM for sexual minorities of color utilizing an intersectionality framework.
- (2) Centralize the experiences of sexual minorities of color dealing with internalized heterosexist racism in psychological scholarship to generate novel and accurate knowledge, such as delineating dimensions of internalized heterosexist racism.
- (3) Increase the intersectional visibility of sexual minorities of color in psychological scholarship to help propel intersectional research.

Hypothesis 1: It was anticipated the IHRM will have a multidimensional, 6-factor structure with items describing the six dimensions: negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility.

Hypothesis 2: It was hypothesized the IHRM would be positively related to measures of internalized heterosexism and internalized racism and demonstrate convergent validity.

Hypothesis 3: To evaluate discriminant validity, the IHRM's relationship with a measure of social desirability was assessed. It was expected the IHRM would be non-significantly or only slightly related to a social desirability measure.

Hypothesis 4: It was expected the IHRM would be positively related to a measure of psychological distress, illustrating concurrent validity.

Hypothesis 5: As evidence of incremental validity, it was expected the IHRM would contribute significantly to assessing internalized heterosexist racism among sexual minorities of color above and beyond what was accounted for by current, independent measures of internalized heterosexism and internalized racism in the variance of psychological distress.

CHAPTER THREE

METHOD

This chapter includes a detail discussion of the methodology utilized for the following study. The process of development of the initial items for the proposed measure will be provided, along with an overview of soliciting feedback from a group of expert reviewers, and the preliminary validation of the measure. Lastly, a description of sample, data collection procedure, psychometric characteristics of included measures, and the data analytic plan are outlined.

The current study employed a quantitative research design. To date, the present study is the first to attempt to develop and preliminary validate a measure of internalized heterosexist racism among sexual minorities of color. Two sets of correlations were performed to demonstrate preliminary validation of the Internalized Heterosexist Racism Measure (IHRM), with the first correlation measuring the strength and direction of linear relationships between continuous variables (Pearson's correlation) and the second correlation measuring the reliability of a set of scale items (Cronbach's alpha). Secondly, hierarchical multiple regression was conducted to establish incremental validity by testing if IHRM would explain additional variance in SDS-17 (Stöber, 2001) and above and beyond AROS (Campón & Carter, 2015) and IHP-R (Herek et al., 1998; 2009). Additionally, several considerations were weighed when designing this research study, particularly Bharat et al. (2022) recommendations for psychological research with BIPOC and minoritized identities. First, existent instruments on internalized heterosexism developed with white American sexual minorities and internalized racism developed with

heterosexual communities of color were avoided, as using such approach in scale development would overlook important aspects of sexual minorities of color. Instead, dimensions that centered intersectionality were identified from carefully and extensively reviewing the literature on internalized heterosexist racism among sexual minorities of color. Secondly, an intersectional theoretical framework was applied as it can provide rich knowledge about the intertwining identities of sexual minorities of color with heterosexist racism. Lastly, a group of expert reviewers were consulted to solicit feedback and modify the measure as needed.

Development of the IHRM

Literature Review

To generate the dimensions of internalized heterosexist racism (IHR), as well as the initial pool of items to be preliminary validated, a search of the literature was completed utilizing a content analysis approach. Content analysis is a qualitative research technique to make inferences from text to describe and understand the phenomenon under study (Bengtsson, 2016; Hsieh & Shannon, 2005). Through the systematic classification process of coding and identifying themes, content analysis is advantageous in being able to extract and synthesize themes that describe IHR. Further, a blend of inductive and deductive approaches to content analysis was used. Since existing theory or research literature on IHR among sexual minorities of color is limited, letting categories to emerge from the data would allow for new insights on IHR. With a deductive lens, existing and burgeoning data on IHR is furthered. For example, as discussed in Chapter 2 there is scholarship on internalized heterosexism, internalized racism, and intersectionality among sexual minorities of color. Such bodies of knowledge were considered to generate themes that explicate IHR. It is well established that sexual minorities of color experience negative messages (Bowleg, 2013; Sadika et al., 2020; Salerno et al., 2022), minority

stress (Balsam et al., 2011; Ghabrial, 2017; Meyer, 2003; Pantoja-Patiño, 2020), internalized inferiority (Aranda et al., 2016; Berg et al., 2016; Felipe et al., 2020; Smith, 2012), and invisibility (Jackson et al., 2020; Purdie-Vaughns & Eibach, 2008; Remedios & Snyder, 2018). These identified key concepts served as initial coding categories and were then operationalized using the intersectionality theory (Crenshaw, 1991).

The predetermined codes were then extracted from text sources including articles, book chapters, and dissertations/theses. The sources were identified through searches of the following databases: Google Scholar, Ebscohost, Proquest Dissertation and Theses Global, and PsycINFO. The sources were published from 1981 to 2023. Keywords were selected for the database search focusing on the following fields: (a) LGBTQ+ and BIPOC subgroups (e.g., Latinx queer, Black lesbians, Middle Eastern bisexuals), (b) LGBTQ+ BIPOC groups experiencing heterosexism and racism, and (c) oppressive experiences of sexual minorities of color. All sources were filtered with the aforesaid fields. A total of 48 sources were identified and then each was categorized into four different types based on the source's methodology (qualitative, quantitative, mixed methods, or conceptual). See Table 1 for a complete list of the literature sources used. After identifying and categorizing the sources of literature, each source was carefully reviewed, and key themes were extracted, again with the predetermined codes. At the same time, the researcher took notice of any novel patterns and ideas and coded them under a different name. This method is the inductive approach to content analysis (Hsieh & Shannon, 2005). For instance, emerging codes from the text sources included altering one's dress attire, impression management strategies, avoidance of language, etc. The codes were then sorted into categories based on how each code was related to each other and given a definition. In this example, the codes constituted the category of assimilation of beauty and self-expression standards.

Altogether, relying on both inductive and deductive methods to content analysis led to six major categories or themes. The themes that emerged from inductive inquiry were the assimilation of beauty and self-expression standards and the internalized isolation and ostracism. Under the mode of deductive inquiry, the following themes were derived from existing theory and relevant text findings, including negative messages, intersectionality minority stress and reactivity, internalized inferiority, and intersectional invisibility. These themes became the dimensions of IHR. Following delineation of IHR dimensions, item generation began by providing examples that captured the essence of each dimension. The researcher carefully reviewed the codes from each dimension or theme to formulate the items. The items were then compared to the text sources to ensure each item had good face validity. A total of 61 items were initially generated. Redundant items were deleted or consolidated with other items as well as reviewed each item for clarity of meaning, wording, and grammar. Such process led to having 35 items for the initial version of the IHRM. Thereafter, the items were sent to 10 expert reviewers to assess the content of the IHRM for face validity.

Table 1. Literature Sources Used to Delineate Dimensions and Pool of Items of IHR (N = 48)

Type of source	Literature sources	No. of sources (%)
Qualitative	Abdi & Van Gilder, 2016; Abreu et al., 2023; Ajayi & Syed, 2016; Bowleg, 2013; Ghabrial, 2017; Gonzalez, 2019; Han et al., 2018; Ikizler & Szymanski, 2014; Lim & Hewitt, 2018; Lockett et al., 2023; Mosley et al., 2021; Noyola et al., 2020; Page et al., 2021; Rosenberg, 2016; Schmitz et al., 2020; Weber et al., 2018; Williams et al., 2022	17 (35.4)

Quantitative	Balsam et al., 2011; Berg et al., 2016; Brennan et al., 2021; Campón & Carter, 2015; David et al., 2019; Felipe et al., 2020; Gale et al., 2020; Ghabrial & Ross, 2018; Jackson et al., 2020; Nadal et al., 2016; Newcomb & Mustanski, 2010; Puckett & Levitt, 2015; Sadika et al., 2020; Salerno et al., 2022; Sarno et al., 2015; Smith, 2012; Smith et al., 2020; Szymanski & Gupta, 2009; Szymanski & Sung, 2013	19 (39.5)
Mixed method	Aranda et al., 2016	1 (2.08)
Conceptual	Brooks, 1981; Crenshaw, 1991; Ferguson et al., 2014; Herek et al., 2009; Meyer, 2003; Pachenkis, 2007; Pantoja-Patiño, 2020; Purdie-Vaughns & Eibach, 2008; Remedios & Snyder, 2018; Speight, 2007; Versey et al., 2019	11 (22.9)

Expert Review

It is proudly stated that the development of IHR was pioneered by and for sexual minorities of color. The author self-identifies as a 30 yr. old, cisgender gay/queer Latino man, middle-class, psychologist trainee from Chicago, Illinois born to Mexican immigrant parents. The author utilized their positionality to frame their understanding of IHR. To reduce author bias in the scale development process and ensure face validity to determine the degree to which the measure appears to assess what it is supposed to assess. Expert reviewers were identified across professional listservs (e.g., National Latinx Psychological Association [NLPA], American Psychological Association [APA] Division 44 Society for the Psychology of Sexual Orientation and Gender Diversity, etc.) and social media (e.g., Facebook, Twitter/X, LinkedIn). Interested reviewers completed an online brief screening survey to determine reviewer eligibility. Reviewers needed to be 18 years of age or older, self-identify as a sexual minority of color

within the U.S., and able to read and comprehend English. Additionally, experts had to have familiarity or knowledge with racism and heterosexism among sexual minorities of color. A total of 14 individuals expressed interest to be considered, but only 12 met reviewer eligibility. Once the expert reviewers were selected, email confirmations were sent out to each to confirm their participation. Only 10 responded back and completed all reviewer expectations including providing electronic feedback on the IHRM and meeting for a 30 minute debrief session via Zoom to answer any follow-up questions about their feedback. Expert reviewers were given the definition and dimensions of IHR and asked to identify items that did not reflect the construct and dimensions and/or the dimensions that were not well represented by the items. Reviewers also provided suggestions to include additional items. Altogether, the final IHRM items were refined and modified based on the feedback, resulting in a total of 48 items. See Table 2 for the reviewers' demographics.

Table 2. Demographic Characteristics of Expert Reviewers

Reviewer	Gender Identity	Age	Race	Sexual Orientation	U.S State
1	Cisgender woman	23	Black-African/ Non-Hispanic	Bisexual	PA
2	Cisgender man	35	Black American	Gay	IL
3	Genderfluid	23	Black/African American	Pansexual	OR
4	Nonbinary woman	23	Asian American	Pansexual	MA
5	Genderfluid	22	Black/White	Gay/Queer	GA
6	Cisgender woman	23	White Latina	Bisexual	TX
7	Cisgender man	26	Latino	Bisexual/Queer	PA
8	Cisgender man	34	Asian American	Gay	DC
9	Gender non- conforming man	25	Asian	Queer	NV
10	Cisgender man	29	Latinx/Chicanx	Gay/Queer	MN

Preliminary Validation of the IHRM

Preliminary evidence for the measure including factor structure, convergent, discriminant, construct, and incremental validities, reliability scores, and measurement invariance were investigated via Pearson's correlation and Cronbach's alpha. Moreover, hierarchical multiple regression was conducted to establish incremental validity by testing if IHRM would explain additional variance in SDS-17 (Stöber, 2001) and above and beyond AROS (Campón & Carter, 2015) and IHP-R (Herek et al., 1998; 2009).

Participants

This study included a total of 62 participants who self-identified as a sexual minority of color. As part of the inclusion criteria, participants had to experienced internalized heterosexist racism relative to their intersecting identities as a sexual minority of color. Interested participants completed an online brief screening survey to determine eligibility. The screening survey required participants to disclose their sexual orientation and race. Participants also had to indicate they were above 18 years of age, presently resided in the U.S., and were able to read and comprehend English. The brief screening survey determined if participants met the sexual minority of color criteria and if they had experiences with IHR. The exclusion criteria of this study included, exclusively white sexual minorities (i.e., the only racial identity held is white), sexual minorities of color without having experienced IHR, or individuals who primarily identify as heterosexual. Participant ages ranged from 19 years to 74 years of age with a mean of 28.69 ($SD = 7.783$). With regards to racial identities, individuals self-identified as Asian (32.2%, with 3.2% identifying as Asian Indian), Hispanic/Latine/Latinx (25.8%), Black/African American (22.6%), Multiracial/Biracial (12.8%, see Table 3 for composition of multiraciality), Arab/Middle Eastern (3.2%) and Indigenous (3.2%). In terms of sexual orientation, folks

identified as bisexual (27.4%), queer (27.4%, see Table 3 for composition of queerness), gay (25.8%), pansexual (27.3%), lesbian (4.8%), asexual (1.6%), and questioning (1.6%). In relation to gender identity, people identified as cisgender woman (40.3%), cisgender man (29.0%), nonbinary (12.9%, see Table 3 for composition of nonbinary), agender/genderless (3.2%), genderqueer (3.2%), queer (3.2%), gender nonconforming (1.6%), genderfluid (1.6%), no identification of gender (1.6%), transgender man (1.6%), and transgender nonbinary (1.6%).

Other notable demographic data, included participants predominantly identifying as middle class (45.2%), having no disabilities (72.6%), identifying as religious (71.0%), residing in the Midwest (38.9%), earning a master's degree (35.5%), being American (64.5%), and a student (48.5%).

Refer to Table 3 for a complete list of participants' demographic information.

Table 3. Demographic Characteristics of Participants (N = 62)

Demographic characteristics	Participants	
	<i>n</i>	%
Race		
Arab/Middle Eastern	2	3.2
Asian	20	32.2
<i>Asian Indian</i>	2	3.2
Black/African American	14	22.6
Hispanic/Latine/Latinx	16	25.8
Indigenous	2	3.2
Multiracial/Biracial	8	12.8
<i>Black Latina White</i>	1	1.6
<i>Latine White</i>	2	3.2
<i>Mixed Filipina White</i>	1	1.6
<i>Multiracial – Jamaican, Chinese, White</i>	1	1.6
<i>Multiracial – Native Hawaiian, Filipino, Columbian</i>	1	1.6
Sexual orientation		
Asexual	1	1.6
Bisexual	17	27.4
Gay	16	25.8
Lesbian	3	4.8

Pansexual	7	11.3
Queer	17	27.3
<i>Queer/bisexual</i>	1	1.6
<i>Queer/gay</i>	4	6.4
<i>Queer/pansexual</i>	1	1.6
Questioning	1	1.6
Gender identity		
Agender/genderless	2	3.2
Cisgender man	18	29.0
Cisgender woman	25	40.3
Gender nonconforming	1	1.6
Genderfluid	1	1.6
Genderqueer	2	3.2
No identification of gender	1	1.6
Nonbinary	8	12.9
<i>Nonbinary transfemme</i>	1	1.6
<i>Nonbinary woman</i>	1	1.6
Queer	2	3.2
Trans man	1	1.6
Trans nonbinary	1	1.6
Social status		
Lower	12	19.4
Lower middle	1	1.6
Middle	28	45.2
Upper	1	1.6
Upper middle	3	4.8
Working	17	27.4
Disability status		
No	45	72.6
Yes	17	27.4
Religion		
Agnostic/Agnostic Atheist	8	12.9
Atheist	4	6.5
Baptist	1	1.6
Buddhist	3	4.8
Catholic	4	6.5
Christian/Christian AME/Christian Baptist	10	16.1
Hindu	3	4.8
Muslim	4	6.5

None	18	29.0
Sikh	1	1.6
Spiritual	6	9.7
U.S. geographic region		
West	12	19.2
Midwest	13	20.9
South	13	20.9
Northeast	24	38.9
Highest educational level		
Associate's	1	1.6
Bachelor's	18	29.0
Doctorate	13	21.0
High school	7	11.3
Master's	22	35.5
Middle school	1	1.6
Nationality		
American	40	64.5
Chinese	1	1.6
Dominican	1	1.6
Haitian American	1	1.6
Indian	1	1.6
Korean	1	1.6
Lebanese	1	1.6
Mexican/Mexican American	8	12.9
Non-U.S. Citizen	1	1.6
Puerto Rican	1	1.6
South African	1	1.6
Taiwan	1	1.6
Turkish	1	1.6
Vietnamese/Vietnamese American	3	4.8

Note. $N = 62$. Participants were on average 28.69 years old ($SD = 7.78$).

Procedure

After receiving Loyola University Chicago's Institutional Review Board approval, the IHRM was distributed in a survey format to participants along with a demographic questionnaire, the Social Desirability Scale-17 (Stöber, 2001), the Kessler Psychological Distress Scale-6

(Kessler et al., 2002), the Appropriated Racial Oppression Scale (Campón & Carter, 2015), and the Internalized Homophobia Scale-Revised (Herek et al., 1998). Eligible participants completed the survey using a Web-based survey known as Qualtrics. Prior to participants completing the survey, they were informed of the inclusion and exclusion criteria, approximate time to complete the survey (10 mins.) and reviewed the informed consent and participants' rights. After completion of the survey, participants were provided with a debriefing statement where they can find the primary investigator's contact information, as well as resources should they experience any discomfort associated with their involvement in the study. Recruitment procedures consisted of snowball sampling in which participants shared the survey to friends, family, and other community members who meet the inclusion criteria, along with sexual minorities of color community venues, and online platforms such as listservs and social media (e.g., Facebook, Instagram, Twitter/X, LinkedIn). Specifically, community venues such as LGBTQ centers, multicultural organizations, and listservs such as, NLPA, APA were utilized to recruit to participants.

Participants were asked to read the informed consent and were informed their participation was voluntary and they could withdraw at any point. Recorded responses that did not meet the inclusion criteria, incomplete responses, and detected responses with potential bots who were flagged by Qualtrics analytics were not included in the data analyses for concern that it would introduce bias to the interpretation of the data. A combined total of 100 recorded responses (i.e., ineligible responses, incomplete responses, responses with detected bots) were omitted from the data analyses. In particular, the rationale behind the decision to not include incomplete responses is that the author wanted to capture participants' authentic lived experiences and avoid potential distortion or fabrication of lived experiences via missing data

management practices (Schlomer et al., 2010). Data was kept anonymous and safe in a secure location (i.e., password protected computer) with only the primary researcher having exclusive access to the data. At the end of the survey, participants had the option to be directed to a separate webpage where they provided their email address to enter a raffle to win one of five \$20 online gift cards. Individuals were informed prior to them supplying their email address that their survey responses would not be matched with their identifying information.

Measures

Internalized Heterosexist Racism Measure

The final version of the Internalized Heterosexist Racism Measure (IHRM) comprised of 48 items that were represented by six dimensions of internalized heterosexist racism (IHR) among sexual minorities of color, including negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility. Respondents were instructed to indicate their level of agreement to statements on IHR by using a 5-point Likert scale that ranged from 1 (*strongly disagree*) to 5 (*strongly agree*), with a higher score reflecting greater endorsement of IHR. The present study yielded a Cronbach's alpha of $\alpha = .95$.

Demographic Questionnaire

A demographic questionnaire was given to participants to identify key demographic characteristics. The demographic questionnaire gathered information regarding participants' sexual orientation, racial identities, gender, age, social class, disability status, religion, U.S. state of residence, level of education completed, and nationality. These demographic characteristics helped contextualize the findings of the study as well as set the parameters for generalizing the data. Further, disability status and religion are seldom reported in studies which can dilute

participants' rich constellation of identities and lived experiences. As such, the researcher was intentional in accounting for these characteristics in the study.

The Social Desirability Scale-17

To evaluate the discriminant validity of the IHRM, its relationship with the Social Desirability Scale-17 (SDS-17; Stöber, 2001) was assessed. The SDS-17 was selected since internalized heterosexist racism and social desirability are unrelated to each other. The SDS-17 is a 17-item scale that assess social desirability not related to psychopathology. It is a reliable and valid measure of social desirability, suitable for adults of 18 years or older. Participants responded “*true*” or “*false*” to each item. The total score is calculated by adding up the number of “*true*” responses. A high score is indicative of high social desirability. Sample items included, “*I always admit my mistakes openly and face the potential negative consequences*” and “*During arguments I always stay objective and matter-of-fact.*”

In an initial validation study, the SDS-17 demonstrated a correlation of .74 in support of its convergent validity with other measures of social desirability including the Eysenck Personality Questionnaire-Lie Scale, the Sets of Four Scale, and the Marlowe-Crowne Scale (Stöber, 2001). Further, the internal consistency coefficient of this scale was .80 and a test-retest reliability coefficient was .82 in a community sample of adults of 18 to 80 years of age in Berlin, Germany (Stöber, 2001). A limitation of the SDS-17 in this study is scores showed satisfactory internal consistency for participants of 18 to 80 years but not for older participants (i.e., above 80 years). Blake et al. (2006) examined the SDS-17's validity in the U.S. In their three studies, the SDS-17 revealed correlations in support of convergent validity with measures of social desirability including the Marlowe-Crowne Scale (.80 – .91) and the Impression Management subscale of the Balanced Inventory of Desirable Responding (.49). The internal consistency

coefficient ranged from .80 – .92 across the three studies in a sample of adults of community members and students. The internal consistency reliability estimate for this study is $\alpha = .76$.

Kessler Psychological Distress Scale-6

To evaluate the concurrent validity of the IHRM, its relationship with the Kessler Psychological Distress Scale-6 (K6; Kessler et al., 2002) was assessed. The K6 is a 6-item self-report, global measure of psychological distress for English speakers normed on Australian and U.S. populations. The K6 was selected for its brevity and ability to assess a range of psychological distress symptoms. It assesses symptoms of anxiety and depression, including fatigue, nervousness, hopelessness, and restlessness in the most recent 4-week period. Individuals indicated the frequency of an experience such as “*During the last 30 days, how often did you feel nervous?*” on a 5-point, Likert scale (1 = *none of the time*, 5 = *all the time*). An average score for all items is calculated and higher scores represent higher levels of psychological distress. In support of convergent validity, the K6 demonstrated a significant correlation with the Patient Health Questionnaire, a measure assessing depression, in both the research trial sample (.70) and the routine care sample of (.71; Staples et al., 2019). The K6 showed good sensitivity (.68) and specificity (.69) with regards to test validity. The internal consistency reliability coefficient of this scale was $\alpha = .83$. and a test-retest correlation of .89 in a sample of adults 18 to 64 years old with mild symptoms of depression or anxiety (Staples et al., 2019). The current Cronbach’s alpha for this study is $\alpha = .86$.

The Appropriated Racial Oppression Scale

To assess both the convergent and incremental validities of the IHRM, the Appropriated Racial Oppression Scale (AROS; Campón & Carter, 2015) was utilized. This 24-item scale assesses the internalized beliefs, attitudes, and emotional reactions of racial oppression among

BIPOC. As such, the AROS was chosen as it can generally appraise different elements of internalized racism in minoritized racial groups as opposed to specific BIPOC subgroups. The scale has a 7-point Likert response range, (1 = *strongly disagree*) to (7 = *strongly agree*). Sample items include, “*There have been times when I have been embarrassed to be a member of my race*” and “*Because of my race, I feel useless at times.*” The AROS showed a positive relationship with depression ($\beta = .32$) and anxiety ($\beta = .26$) in BIPOC via a simple path analysis. In support of convergent validity, the scale was also positively related to the Color-Blind Racial Attitude Scale ($\beta = .36$) and negatively correlated to the Collective Self-Esteem Scale ($\beta = -.55$). The internal consistency reliability coefficient of this self-report scale was $\alpha = .81$ in a sample of adults ranging from 18 to 85 years of age, born in the U.S., and BIPOC (Campón & Carter, 2015). A drawback of this validation study is the instruments used, such as the Color-Blind Racial Attitude Scale (CoBRAS) were modified to be used with all minoritized racial groups. For instance, the CoBRAS (Neville et al., 2000) was originally normed for white individuals yet was used to determine endorsement of colorblindness in BIPOC. Such modification/adaptation may affect the convergent validity of the AROS. The internal consistency reliability estimate for this present study is $\alpha = .93$.

Internalized Homophobia Scale – Revised

In addition to demonstrating convergent and incremental validities of the IHRM with the internalized racism measure (i.e., AROS), the Internalized Homophobia Scale – Revised (IHP-R; Herek et al., 1998) will also be used since the IHRM will assess both internalized heterosexism and internalized racism concurrently. Moreover, the IHP-R scale was selected following Szymanski et al. (2008) recommendation of using the scale for research settings due to its survey length. The IHP-R can be administered quickly to a large group of participants. The IHP-R is a

5-item scale that measures the extent to which sexual minorities reject their sexual orientation, are uneasy about their sexual and/or gender desires and seek to avoid sexual and/or gender attractions (Frost & Meyer, 2009). The original scale was developed with a sample of gay men (Martin & Dean, 1988). Herek et al. (1998; 2009) later revised the scale to include bisexual individuals, lesbian women, and gay men. Respondents use a 5-point Likert-response scale, ranging from (1 = *strongly disagree*) to (5 = *strongly agree*). The items of the scale were worded to be more inclusive of multiple sexual orientations (e.g., asexual, queer, bisexual, pansexual, etc.) therefore, the identity labels of “*lesbian*,” “*bisexual*,” or “*gay*” were changed to “*sexual minority*.” Sample items include, “*If someone offered me the chance to be completely heterosexual, I would accept the chance*” and “*I wish I weren’t a sexual minority*.” The IHP-R demonstrated convergent validity through significant correlation (.90) with the original Internalized Homophobia Scale (Herek et al., 2009). The internal consistency reliability of this scale was $\alpha = .82$ in sample of lesbian, gay, and bisexual individuals (Herek et al., 2009). For this study, the internal consistency reliability estimate is $\alpha = .90$.

Data Analysis

All data analyses were completed using Statistical Product and Service Solutions (SPSS). Pearson’s correlation was selected to measure the strength and direction of linear relationships between continuous variables, such as internalized racism, internalized heterosexism, IHR, psychological distress, and social desirability. Prior to completing Pearson’s correlations, scatterplots were computed to check for potential outliers as well as get a general sense of what to expect with the computations. Correlations were computed with the IHRM and the AROS (Campón & Carter, 2015) and IHP-R (Herek et al., 1998; 2009) to examine convergent validity, IHRM with the SDS-17 (Stöber, 2001) to establish discriminant validity, and IHRM with the K6

(Kessler et al., 2002) to demonstrate concurrent validity. The Pearson's correlations between variables were reported in a table using the associated Pearson r values. The internal consistency reliability coefficients for all scales were assessed using Cronbach's alpha. Additionally, calculating Cronbach's alpha to measure the degree of consistency between participants' responses to the items on the scales, is helpful before administering the scales to a larger sample. Lastly, hierarchical multiple regression was conducted to establish incremental validity by testing if IHRM would provide evidence for above and beyond what the AROS (Campón & Carter, 2015) and the IHP-R (Herek et al., 1998; 2009) can account for in the variance of psychological distress. Details of findings are articulated in Chapter Four.

CHAPTER FOUR

RESULTS

This chapter outlines the findings from the preliminary validation of the Internalized Heterosexist Racism Measure (IHRM), including: 1) demonstrating both face and content validities; 2) Pearson's correlations providing preliminary evidence for the measure including factor structure, convergent, discriminant, and concurrent validities; 3) Cronbach's alpha for each scale to establish internal consistency scores; 4) hierarchical multiple regression to establish incremental validity; and 5) a summary of the main findings.

Development of the IHRM

After defining the construct under investigation (i.e., internalized heterosexist racism) and dimensions (negative messages, intersectionality minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility), the initial pool of items were developed from a qualitative content analysis including both inductive and deductive approaches. It is best practice to combine both methods when it comes to scale development (Boateng et al., 2018). The use of inductive inquiry moves the phenomenon of interest from an abstract point to the identification of its manifest forms. Contrarily, deductive inquiry in scale development helps the construct be theoretically sound as it will be based on accumulated knowledge of existing items (Boateng et al., 2018). In this study, the construct of interest is IHR, which is defined as the process whereby sexual minorities of color appropriate or internalize aspects of heterosexist racism toward their

intersecting experiences as a sexual minority of color by believing, succumbing, or accepting that their social identities, worldviews, and cultural norms are inferior. The articulation of IHR came about mainly reviewing qualitative and conceptual bodies of knowledge to move the construct from an abstract point to the identification of its manifest forms. Once the forms or dimensions of IHR were delineated via qualitative content analysis, item generation began by providing examples that captured the essence of each dimension. This recursive process included reviewing the sources of literature or texts (see Table 1) with each pool item to ensure each item had good face validity i.e., does the scale seem to measure what it is supposed to measure. A total of 61 items were initially generated. Redundant items were deleted or consolidated with other items as well as reviewed each item for clarity of meaning, wording, and grammar. Such process led to having 35 items for the initial version of the IHRM. Thereafter, the items were sent to 10 expert reviewers to assess the content of the IHRM and determine face and content validity.

Establishing Face and Content Validities

Establishing face and content validities in scale development are imperative as they set the foundation for the items in capturing the relevant experience of the target population being examined. Further, demonstrating strong face and content validities can help prevent pitfalls in the identification of domain and item generation, such as the improper conceptualization and definition of the dimensions (Boateng et al., 2018). One common way to assess face validity is to ask a panel of experts to review the scale and rate its appropriateness as a tool for measuring the construct at hand. If the experts agree that the scale measures what is has been designed to measure, then the scale is said to have face validity. Content validity refers to whether a scale is measuring all the dimensions of a given construct. For instance, in this study, six dimensions of

IHR were outlined, therefore the IHRM contained statements regarding each dimension. Like face validity, content validity can be evaluated by asking experts to examine the scale. If experts agree the scale comprises of items that capture every dimension of the construct, then the scale has content validity (Boateng et al., 2018). Both validities were established by inviting reviewers (expert and community members) to examine the IHRM. Reviewers were given the initial version of the IHRM consisting of 35 items, six dimensions, and the conceptualization of IHR. All reviewers were given specific instructions to inform their review. The instructions consisted of the following: 1) reviewing items for redundancy, clarity, wording, and grammatical errors; 2) determining if the conceptualization of IHR was clear; 3) assessing if the items in each dimension accurately reflected the dimension; 4) recommend any items missing in the initial version of the IHRM; as well as 5) any additional feedback they wanted to communicate.

Once all reviewers provided their feedback electronically via track changes in Word Document, the researcher examined the feedback and noted any unclear recommendations along with any unanimous and conflicting responses. For example, all reviewers agreed that all the six dimensions reflected the construct under investigation including the conceptualization of IHR. In instances where respondents' answers were not clear, the researcher ensured they asked for clarification in the feedback session. In the moments in which reviewers' feedback was conflicting (i.e., one reviewer's feedback conflicted with another reviewer's feedback), the researcher "consulted" the identified sources of literature to map out how each of the feedback aligned or did not align with the intersectionality framework (Crenshaw, 1991). Relatedly, newly suggested items were considered if the items reflected the construct of IHR and one of the six dimensions. A total of 48 items were developed after integrating reviewers' feedback. As another mode of establishing face and content validities, the updated version of the IHRM with 48 items

was sent out to one of the expert reviewers who agreed to assess the updated IHRM. Once the reviewer did not report any issues with the contents of the items, the 48 items were used for the preliminary validation of the IHRM.

Preliminary Validation of the IHRM

Initially, the factor structure or dimensions of the current measure was going to be examined via confirmatory factor analysis (CFA). Unfortunately, due to the low sample size in this study ($N = 62$), CFA was not possible to complete as the recommended minimum sample size to conduct a CFA for a medium size pool of items is 200 – 300 participants (MacCallum et al., 2001). Instead, tests of validity and reliability via Pearson's correlations and Cronbach's alpha, along with hierarchical multiple regression were computed to provide preliminary evidence of the IHRM. In Chapter 5, explanations for the low sample size of this study are further discussed.

Establishing Construct Validity

Construct validity refers to the degree to which an instrument or measure represents and captures a construct of interest (internalized heterosexist racism). It indicates the degree to which the measure accurately reflects the construct it intends to measure, often evaluated through relationships with other variables and measures (e.g., internalized racism, internalized heterosexism, social desirability) theoretically connected to the construct of interest (Cronbach & Meehl, 1955). In demonstrating construct validity, one illustrates the power of the construct under investigation to explain research findings and to predict relationships. To determine construct validity in this study, tests of convergent and discriminant validity were completed.

Convergent Validity

Convergent validity involves taking two tests that are supposed to measure the same construct and administering them to a sample of participants. Evidence of convergent validity of a construct can be provided by the degree to which the newly developed measure correlates highly with other variables designed to measure similar construct (Boateng et al., 2018). In this study, the IHRM was correlated with measures of internalized racism and internalized heterosexism to establish convergent validity. The IHRM was positively correlated with the Appropriated Racial Oppression Scale (AROS; Campón & Carter, 2015) and the Internalized Homophobia Scale – Revised (IHP-R; Herek et al., 1998; 2009). The AROS ($r = .710, p < .001$) and the IHP-R ($r = .759, p < .001$) both had a strong relationship with IHRM. A strong relationship includes scores greater than $r = .5$, with scores between $r = .3$ and $.5$ denoting a moderate relationship, and a weak relationship with scores between $r = 0$ and $.3$. In other words, there is evidence the IHRM measures similar constructs as the AROS (internalized racism) and IHP-R (internalized heterosexism).

Discriminant Validity

Discriminant validity is the degree to which scores on a measure are distinguished from dimensions of other constructs (Boateng et al., 2018). With discriminant validity, two measures that evaluate completely different constructs are administered to the same sample of participants. Since the measures are testing different constructs, there should be a low or weak correlations between the two. When testing for discriminant validity, a ubiquitous class of constructs in which high correlations have been invalidating are instances of strong trait-irrelevant methods factors including social desirability factors (Campbell, 1960). Thus, if a new construct is highly correlated with a construct of social desirability, then the new measure may be invalidated (King

& Bruner, 2000). Conversely, if there are low correlations between the measure of interest and a measure of social desirability, discriminant validity is established. As such, to measure the discriminant validity of the IHRM, it was correlated with the Social Desirability Scale-17 (SDS-17; Stöber, 2001). The IHRM's relationship with a measure of social desirability was only slightly related ($r = .186$). This means the IHRM had a weak relationship with the SDS-17, highlighting each of the measures discern different constructs and ultimately evidence for discriminant validity.

Establishing Criterion Validity

Criterion validity is the extent to which there is a relationship between a given test score (IHRM) and performance on another measure of relevance (psychological distress). There are two types of criterion validity: concurrent validity and predictive validity. Specifically, concurrent validity evaluates how well a measure's results correlate with the results of a previously established measure, when both are administered at the same time. Predictive validity assesses how well a measure predicts a criterion that will occur in the future. Further, it examines the measure's effectiveness in predicting outcomes or results (Boateng et al., 2018). In this study, concurrent validity was estimated using Pearson's correlation, while for predictive validity, incremental validity – a subtype of predictive validity – was established utilizing hierarchical multiple regression.

Concurrent Validity

To examine concurrent validity, this study hypothesized the IHRM would be positively related to a measure of psychological distress (Kessler Psychological Distress Scale-6 [K6]; Kessler et al., 2002). In general, concurrent validity is often more challenging to measure as there may not be a “gold standard” measure for the criterion and is more susceptible to sampling

errors, especially with small sample sizes (Boateng et al., 2018). For instance, in this study criterion measures like internalized racism and internalized heterosexism have already been used to provide evidence for convergent validity. Because the IHRM is a new measure with novel criterion, it is quite difficult to establish concurrent validity with other internalized heterosexist racism (IHR) measures since there are none available presently. As such, measures that capture predictive elements of the criterion (i.e., IHR) were sought. It has been robustly documented IHR (Lim & Hewitt, 2018; Smith et al., 2020; Sutter & Perrin, 2016; Velez et al., 2019) results in psychological distress, along with its single forms of oppression as internalized heterosexism (Brennan et al., 2021; Newcomb & Mustanski, 2010; Szymanski et al., 2008; Szymanski & Mikorski, 2016) and internalized racism (Campón & Carter, 2015; Carter, 2007; Gale et al., 2020; Speight, 2007). Therefore, to establish concurrent validity the IHRM was correlated with the K6 (Kessler et al., 2002). The IHRM had a moderate association with the K6 ($r = .407$), providing evidence the IHRM is a good reflection of an established measure (K6) in the variance of psychological distress. For all the Pearson's correlations providing preliminary evidence for the measure including convergent, discriminant, and concurrent validities, see Table 4.

Incremental Validity

When developing a new measure, it is important to show via validation methods that the addition of the novel measure will produce better predictions than existing measures that assess relatively the same construct. In other words, does the measure add to the prediction of a criterion above what can be predicted by other sources of data. This type of validation is called incremental validity (Hunsley & Meyer, 2003; Sechrest, 1963). Moreover, establishing incremental validity helps create evidence that the new scale is not merely proliferating reconfigured items or variables. A typical way incremental validity is demonstrated is through

hierarchical multiple regression analyses to determine the contribution of one measure to the prediction of the criterion after two or more other variables (known as the predictor variables) have been entered into the analyses. The researcher specifies the order of entry of the predictor variables based on some rationale, like research relevance, casual priority, or theoretical grounds (Heppner et al., 2016; Hunsley & Meyer, 2003). For instance, the criterion variable for this study was psychological distress, with three predictor variables (i.e., internalized racism, internalized heterosexism, internalized heterosexist racism) that estimate this criterion variable.

Table 4. Descriptive Statistics and Correlations for Study Variables

Variable	<i>N</i>	<i>M</i>	<i>SD</i>	1	2	3	4	5
1. Internalized racism (AROS)	62	62.48	25.99	—				
2. Internalized heterosexism (IHP-R)	62	10.01	5.26	.527**	—			
3. Psychological distress (K6)	62	9.77	5.37	.244	.213	—		
4. Social desirability (SDS-17)	62	8.24	3.73	.296*	.307*	.286*	—	
5. Internalized heterosexist racism (IHRM)	62	112.66	33.20	.710**	.759**	.407**	.186	—

* $p < .05$. ** $p < .01$.

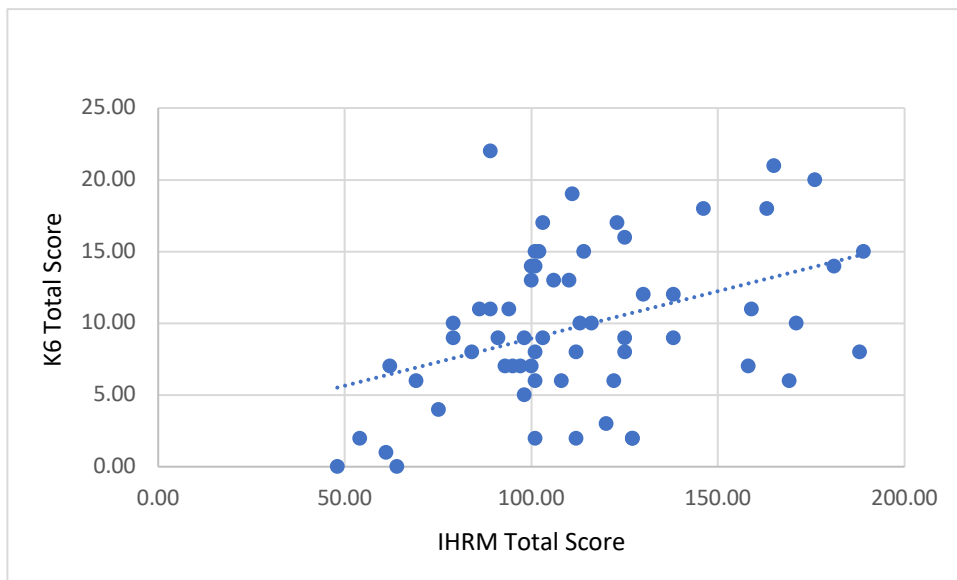
Satisfying Assumptions for Multiple Regression Analysis. Prior to conducting a hierarchical multiple regression analysis, several key assumptions were reviewed to ensure the data was suitable for modeling. The regression assumptions are the following: 1) criterion variable needs to be continuous, 2) there needs to be two or more predictor variables, 3) data ought to have independence of residuals (errors), 4) needs to be a linear relationship between the

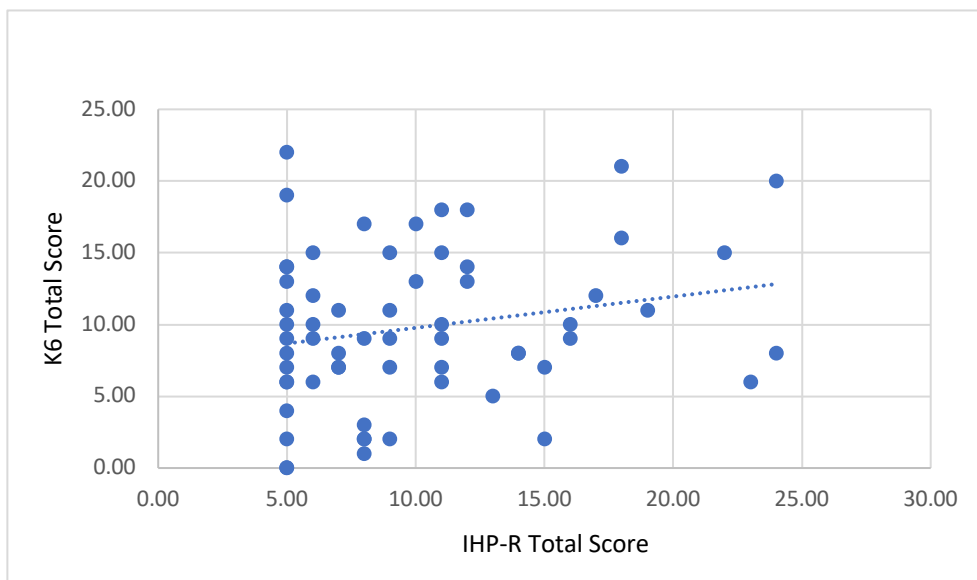
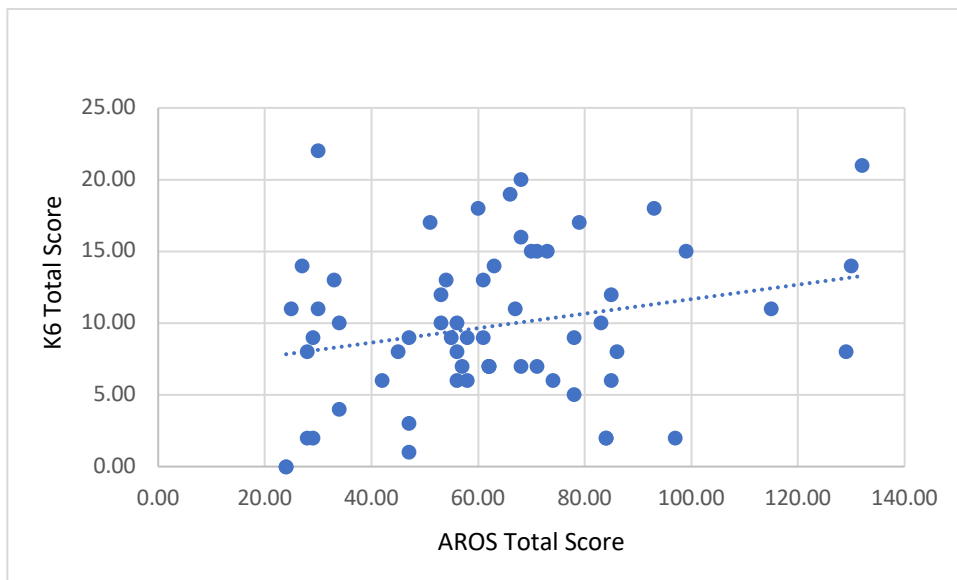
criterion variable and each of the predictor variables as well as collectively, 5) data needs to show homoscedasticity, 6) data must not show multicollinearity, 7) there should be no significant outliers, and lastly 8) residuals need to be approximately normally distributed (Tranmer et al., 2020). The first assumption considered was to verify the criterion variable (i.e., psychological distress) was continuous or having an infinite number of possible values. From a statistical standpoint, continuous variables are categorized into either interval or ratio variables. Because psychological distress in this study was evaluated through the K6 (Kessler et al., 2002) which is a Likert scale, the K6 contains values in ordinal form and not continuous per se. However, researchers have provided empirical justification that Likert type data/variables, although ordinal, can be treated as approximately continuous (Johnson & Creech, 1983; Sullivan & Artino Jr., 2013). Johnson and Creech (1983) examined whether collapsing ordinal variables into continuous variables produces distortions when computing multivariate analyses. The authors did in fact find distortions, yet not sufficient to alter substantive interpretations of the multivariate analyses performed. Additionally, they discouraged ordinal data when only using two to four category ordinal indicators (e.g., 3-Likert scale), as these tended to be biased and inefficient. Another consideration that further supports the use of ordinal variables as continuous variables, is taking the sum or mean of two or more ordinal variables which results in a higher number of categories than the Likert scales they are calculated from (Sullivan & Artino Jr., 2013). As such, taken altogether, the criterion variable in this study was treated as a continuous variable.

The second assumption was met, as there were three predictor variables including internalized racism, internalized heterosexism, and internalized heterosexist racism measured by the AROS (Campón & Carter, 2015), the IHP-R (Herek et al., 1998; 2009), and the IHRM

respectively. The next assumption of independence of observations or independence of residuals (errors) was achieved by calculating the Durbin-Watson statistic, which is a test for autocorrelation of regression residuals (Bartels & Goodhew, 1981). The Durbin-Watson statistic ranges from 0 to 4, with a value of near 2 indicating no autocorrelation. If autocorrelation is present in the data, that can be problematic as it refers to the lack of independence between values. The Durbin-Watson statistic for all four variables, including the criterion and predictor variables, was 1.96. This denotes that the values of the data in this study had no impact on the next value. To meet the assumption of linearity and determine that each predictor variable has a linear relationship with the criterion variable, scatterplots (Figure 2) were conducted. All three scatterplots for each predictor variable displayed linearity as evidenced by the horizontal fitted lines.

Figure 2. Scatterplots of Predictor and Criterion Variables





Note. All three predictor variables were plotted in the x-axis, while the criterion variable in the y-axis.

To test the assumption of homoscedasticity, a scatterplot of the residuals against the predicted values of the criterion variable was generated. Homoscedasticity refers to the assumption of equal variances in different groups being compared. Simplistically, it is when the variance of errors is constant across all values of the predictor variables. On the other hand,

heteroscedasticity is the violation of homoscedasticity (Rosopa et al., 2013; Tranmer et al., 2020). If heteroscedasticity is present, it can lead to incorrect standard errors or decreased statistical power, ultimately adversely affecting substantive conclusions. Therefore, homoscedasticity was established by computing a simple linear regression and inspecting its scatterplot to see if the plotted values were dispersed and not in a “fan-shaped” manner as the latter denotes heteroscedasticity. The scatterplot revealed the plotted values were dispersed endorsing homoscedasticity (see Figure 3). With respect to multicollinearity the tolerance statistic and the Variance Inflation Factor (VIF) were performed. Multicollinearity or collinearity is the high correlation of the predictor variables. This leads to problems with understanding which predictor variables contributes to the variance explained in the criterion variable (Wampold & Freund, 1987). The tolerance statistic and VIF are commonly computed to detect multicollinearity. VIF measures how much the variance or standard error of the estimated regression coefficient is inflated due to collinearity, while the reciprocal of VIF is called tolerance. Both were calculated, yielding acceptable scores for the tolerance statistic of each predictor variable: IHRM (.290), AROS (.495), and IHP-R (.423) while slightly satisfactory VIF scores: IHRM (3.44), AROS (2.01), and IHP-R (2.36). Generally, if the tolerance statistic falls below .20 and closer to .00 then that indicates high levels of collinearity. A VIF score of 1 indicates there is no multicollinearity present. Scores between 1 and 5 suggests moderate multicollinearity may exist, while a VIF score above 10 has significant multicollinearity that would need to be corrected (Bhandari, 2023). As such, the tests’ scores generated here showed acceptable levels of multicollinearity, which means the assumption of multicollinearity was met. Limitations and implications on the existence of multicollinearity amongst the predictor

variables will be outlined in Chapter 5. Review Table 5 for regression coefficients and collinearity statistics.

Figure 3. Scatterplot Demonstrating Homoscedasticity

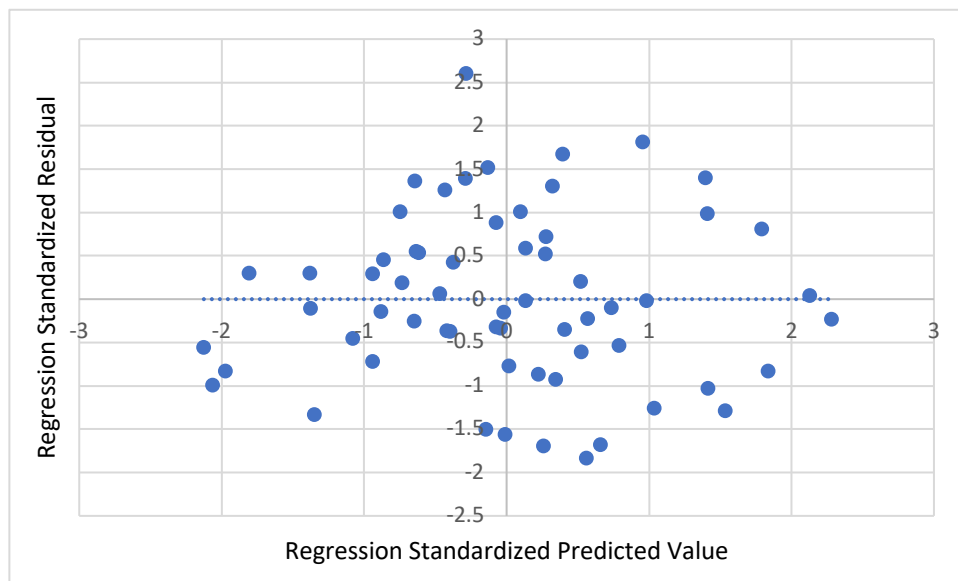


Table 5. Collinearity Statistics and Regression Coefficients ^a

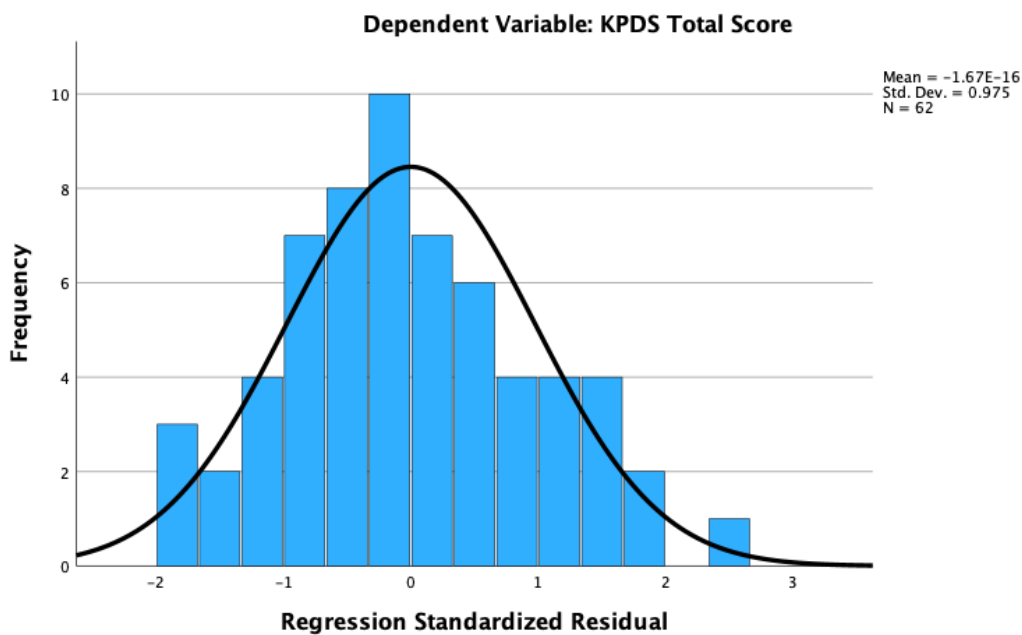
	Unstandardized Coefficients		Standardized Coefficients			Collinearity Statistics	
	<i>B</i>	Std. Error	Beta	<i>t</i>	Sig.	Tolerance	VIF
(Constant)	1.524	2.337		.652	.517		
IHRM Total Score ^b	.105	.035	.649	2.961	.004	.290	3.444
AROS Total Score ^b	-.020	.035	-.096	-.574	.568	.495	2.019
IHP-R Total Score ^b	-.233	.185	-.228	-1.258	.213	.423	2.362

^a Criterion variable: K6 Total Score. ^b Predictor variables: Internalized heterosexist racism (IHRM), internalized racism (AROS), internalized heterosexism (IHP-R).

Finally, to satisfy the assumptions of the data showing no significant outliers and residuals or errors being normally distributed (i.e., normality), a histogram and normal probability plot (P-P plot) were executed. The importance of normality in regressions is

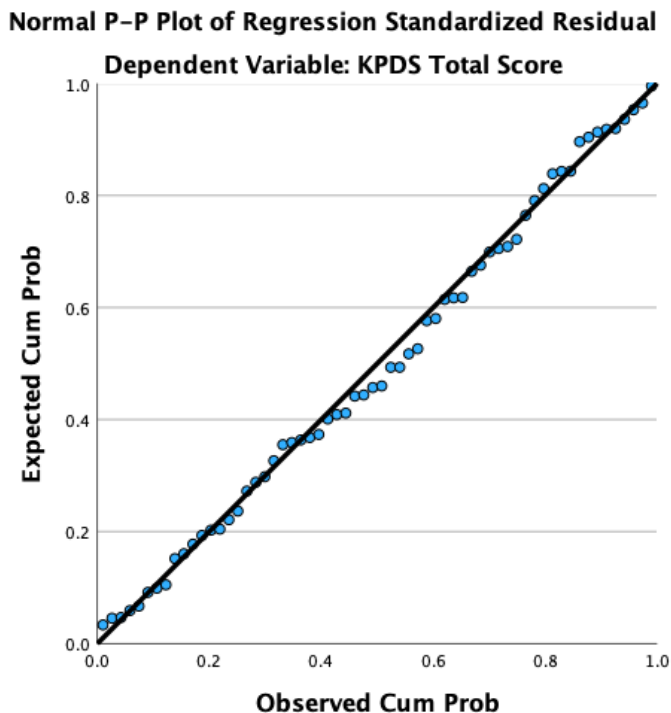
threefold: 1) for confidence intervals around a parameter to be accurate, 2) for significance tests of models to be accurate, and 3) to get the best estimates of parameters. Respectively, verifying that there are no outliers in the data helps to prevent significant outliers biasing parameter estimates, sums of squares, standard error, and confidence intervals (Altman & Bland, 1995). After computing a histogram and normal probability plot, both calculations demonstrated a normal distribution with no significant outliers as well as the plotted residuals normally distributing along the diagonal line (Figures 4 and 5). Conclusively, once all the regression assumptions were fulfilled to ensure the data was suitable for modeling, a hierarchical multiple regression was estimated.

Figure 4. Histogram of Predictor and Criterion Variables



Note. “KPDS Total Score” refers to the K6 Total Score (Criterion Variable).

Figure 5. Normal Probability Plot of Predictor and Criterion Variables



Note. “KPDS Total Score” refers to the K6 Total Score (Criterion Variable).

Hierarchical Multiple Regression. In hierarchical multiple regression or simply hierarchical regression, one specifies the order of entry of predictor variables based on some rationale (e.g., research relevance, casual priority, or theoretical grounds; Heppner et al., 2016). Hierarchical regression is an appropriate tool for analysis when the variance on a criterion variable is being explained by predictor variables that are correlated with each other. In this case, the criterion variable of psychological distress is explained by the predictor variables of IHRM, internalized racism, and internalized heterosexism. Thus, it was hypothesized the IHRM would contribute significantly to assessing internalized heterosexist racism among sexual minorities of color above and beyond what was accounted for by current, independent measures of

internalized heterosexism (IHP-R; Herek et al., 1998; 2009) and internalized racism (AROS; Campón & Carter, 2015) in the variance of psychological distress.

To test this hypothesis, a hierarchical regression analysis was performed to evaluate the prediction of psychological distress via the K6 (Kessler et al., 2002) from internalized heterosexual racism (IHRM), internalized racism (AROS; Campón & Carter, 2015), and internalized heterosexism (IHP-R; Herek et al., 1998; 2009). For the first step of the regression consisted of the predictor variables internalized racism (AROS Total Score) and internalized heterosexism (IHP-R Total Score) were added to the regression equation, while for the second step the predictor variable of interest (IHRM Total Score) was added to the regression. The results of the first step of analysis revealed that 3.8% of the variance in psychological distress can be accounted for by internalized racism and internalized heterosexism, however this was not statistically significant, $R^2 = .070$, Adjusted $R^2 = .038$, $F(2, 59) = 2.205$, $p > .001$. When internalized heterosexual racism was added to the second step of the regression, it accounted for an additional and significant 12.2 % of the variance in psychological distress, $R^2_{\text{change}} = .122$, $F_{\text{change}}(1, 58) = 8.768$, $p = .004$. In total, the three predictor variables accounted for a statistically significant 15.0% of the variance in psychological distress, $R^2 = .192$, Adjusted $R^2 = .150$, $F(3, 58) = 4.586$, $p < .001$. Looking at the unique individual contributions of the predictors in both steps of the regression, the findings show for the first model that internalized racism ($\beta = .182$, $t = 1.234$, $p = .222$) and internalized heterosexism ($\beta = .117$, $t = .794$, $p = .430$) did not significantly predict psychological distress. For the second model, results demonstrate that again internalized racism ($\beta = -.096$, $t = -.574$, $p = .568$) and internalized heterosexism ($\beta = -.228$, $t = -1.258$, $p = .213$) did not significantly predict psychological distress. However, internalized heterosexual racism ($\beta = .649$, $t = 2.961$, $p = .004$) did significantly predict psychological distress.

This suggests that the IHRM does in fact contribute significantly to assessing internalized heterosexual racism among sexual minorities of color above and beyond what the IHP-R (Herek et al., 1998; 2009) and the AROS (Campón & Carter, 2015) are able to account for in the variance of psychological distress. For hierarchical regression analyses, see Tables 6, 7, and 8.

Table 6. Summary of Hierarchical Regression Model Predicting Psychological Distress ^c

Model	<i>R</i>	<i>R</i> ²	Adjusted <i>R</i> ²	Std. Err. Est.	Change Stats.				
					<i>R</i> ²	<i>F</i>	<i>df</i> ₁	<i>df</i> ₂	<i>Sig. F</i>
Model 1	.264 ^a	.070	.038	5.27261	.070	2.205	2	59	.119
Model 2	.438 ^b	.192	.150	4.9564	.122	8.768	1	58	.004

Note. *N* = 62. *df* = degrees of freedom.

^a Predictors: (Constant), internalized heterosexism (IHP-R), internalized racism (AROS).

^b Predictors: (Constant), internalized heterosexism (IHP-R), internalized racism (AROS), internalized heterosexual racism (IHRM). ^c Criterion: Psychological distress (K6).

Table 7. Sum of Squares, Mean Square, and Analyses of Variance of Hierarchical Regression Model Predicting Psychological Distress ^a

Model		Sum of Squares	<i>df</i>	Mean Square	<i>F</i>	<i>Sig.</i>
Model 1	Regression	122.614	2	61.307	2.205	.119 ^b
	Residual	1640.225	59	27.800		
	Total	1762.839	61			
Model 2	Regression	338.001	3	112.667	4.586	.006 ^c
	Residual	1424.838	58	24.566		
	Total	1762.839	61			

^a Criterion: Psychological distress (K6). ^b Predictors: (Constant), internalized heterosexism (IHP-R), internalized racism (AROS). ^c Predictors: (Constant), internalized heterosexism (IHP-R), internalized racism (AROS), internalized heterosexual racism (IHRM).

Table 8. Coefficients of Hierarchical Regression Model Predicting Psychological Distress ^a

Model		Unstandardized Coefficients		Standardized Coefficients		Collinearity Statistics		
		<i>B</i>	Std. Error	Beta	<i>t</i>	Sig.	Tolerance	VIF
1	(Constant)	6.217	1.827		3.403	.001		
	AROS	.038	.031	.182	1.234	.222	.723	1.384
	IHP-R	.120	.151	.117	.794	.430	.723	1.384
2	(Constant)	1.524	2.337		.652	.517		
	AROS	-.020	.035	-.096	-.574	.568	.495	2.019
	IHP-R	-.233	.185	-.228	-1.258	.213	.423	2.362
	IHRM	.105	.035	.649	2.961	.004	.290	3.444

^a Criterion: Psychological distress (K6).

Reliability: Internal Consistency

The last analysis completed relative to the preliminary validation of the IHRM was to demonstrate evidence of reliability. Reliability is the degree of consistency displayed when a scale is administered under identical conditions (Boateng et al., 2018). Reliability, like validity, is a critical aspect in scale development as it helps illustrate when a given measure is used, the same general results will be obtained. One of the methods to estimate reliability is by measuring internal consistency, which is the extent to which items within a scale consistently measure the same construct (Boateng et al., 2018; Cronbach, 1951). This can be done by performing Cronbach's alpha. All scales used in this study generated acceptable Cronbach's alpha scores. Specifically, the SDS-17 ($\alpha = .763$) showed an acceptable score, the IHP-R ($\alpha = .899$) and the K6 ($\alpha = .862$) revealed good scores, and the AROS ($\alpha = .934$) and the IHRM ($\alpha = .954$) exhibited excellent scores. The Cronbach's alpha scores of the IHRM provides preliminary support that the items in the scale have good internal consistency. Moreover, in calculating Cronbach's alpha to evaluate the degree of consistency between participants' responses to items

on a scale is helpful prior to administering the measure to a larger sample. This is especially important considering this study had a lower sample ($N = 62$) than expected. Refer to Table 9 for the reliability and scale statistics of each scale.

Table 9. Reliability and Scale Statistics of Study Measures

Scale	N. of Items	α	Mean	Variance	Standard Dev.
1. AROS	24	.934	62.483	675.533	25.991
2. IHP-R	5	.899	10.016	27.888	5.261
3. K6	6	.862	9.774	28.899	5.375
4. SDS-17	17	.763	8.241	13.957	3.735
5. IHRM	48	.954	112.661	1102.654	33.206

CHAPTER FIVE

DISCUSSION

This final chapter summarizes the study's findings and how they contribute to the existent psychological literature. Additionally, the researcher discusses how the field of counseling psychology is furthered by the study and its results. Implications are delineated for theoretical contributions, clinical practice, and liberation efforts. Lastly, suggestions for future research and limitations are presented along with a conclusion.

Overview of Present Study and Findings

This research study relied exclusively on an intersectional approach to develop a measure that assesses both internalized heterosexism and internalized racism simultaneously among sexual minorities of color. By using this approach, the presented measure includes more nuance items specific to sexual minorities of color than existent independent measures of internalized heterosexism and internalized racism. Inappropriately, most quantitative research on sexual minorities has been conducted with white sexual minorities and then generalized to other diverse sexual minority populations (Newcomb & Mustanski, 2010; Puckett & Levitt, 2015) partly because researchers use convenience samples that are predominately white American, highly educated, and open about their sexual orientation (Szymanski et al., 2008). This generalization problematically assumes sexual minorities are homogenous rather than diverse. That is, white sexual minorities and sexual minorities of color are assumed to experience internalized heterosexism similarly, by disregarding the racial experience. Relatedly, current internalized

racism measures seldom consider sexual orientation in their scale development. Majority of recent studies on internalized racism (e.g., Bailey et al., 2011; Campón & Carter, 2015; Choi et al., 2017a) did not attend to sexual orientation as part of their measure content nor was it reflected in their study samples. At the same time, there presently does not exist a measure of intersectional internalized heterosexism and internalized racism for sexual minorities of color. As such, this study was one of first to contribute significantly to this much needed research area. Ultimately the study sought the following research aims to aid in the construction and preliminary validation of the Internalized Heterosexist Racism Measure (IHRM): 1) Develop and test the psychometric properties of the IHRM for sexual minorities of color utilizing an intersectionality framework, 2) centralize the experiences of sexual minorities of color dealing with internalized heterosexist racism (IHR) in psychological scholarship to generate novel and accurate knowledge, such as delineating dimensions of IHR, and lastly 3) increase the intersectional visibility of sexual minorities of color in psychological scholarship to help propel intersectional research. Further, several hypotheses were investigated.

Hypothesis One: Multidimensionality of the IHRM

It was anticipated the IHRM would have a multidimensional, 6-factor structure with items describing the following six dimensions: negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility. As previously mentioned, the factor structure or dimensions of the measure was going to be examined via confirmatory factor analysis (CFA). Due to the low sample size in this study ($N = 62$), CFA was not possible to complete as the recommended minimum sample size to conduct a CFA for a medium size pool of items is 200 – 300 participants (MacCallum et al., 2001). Furthermore, without completing a

CFA, the researcher was not able to test the 6-factor structure of the IHRM. Nonetheless, there were a few items that had small item-total correlations, inferring that these items are not assessing the same construct (IHR) measured by the other items included in the scale. Some items included “*People like me should not be represented in the media (e.g., TV, films, magazines),*” “*I am ashamed of members within my sexual and racial communities,*” and “*At times, my reality as a sexual minority of color feels erased by others.*” The low item-total correlations were from five of the six dimensions. The dimension of internalized inferiority of the IHRM was the only dimension in which all items had good item-total correlations, indicating the items in this dimension are correlated with each other and overall measure the same construct. With respect to the other five dimensions (negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized isolation and ostracism, and intersectional invisibility), as they all had low item-total correlations it may mean the items within each dimension will need to be furthered evaluated and perhaps even deleted. This could lead to dimensions being reconfigured possibly changing the factor structure of the scale. Again, this can be done via factor analysis to confirm the unidimensionality of each dimension in the structure (Boateng et al., 2018).

All in all, the measure demonstrated excellent internal consistency reliability illustrating the IHRM items consistently measure the same characteristic or construct. Some experts have caution Cronbach’s alpha with too high of scores generally $> .95$, as it may suggest redundancies and show the measure should be shortened (Heppner et al., 2016; Tavakol & Dennick, 2011). To address the fact that a high score may be due to item redundancy rather than the items measuring the same construct, a factor analysis would need to be employed. Computing a factor analysis would help to provide statistical evidence that the construct of IHR is unidimensional.

Moreover, items can also evaluate multiple related concepts and, thus, produce high scores giving the impression that a high Cronbach's alpha is in fact indicative of strong reliability.

Hypothesis Two: Evidence of the IHRM Measuring Same Constructs Across Other Scales

The results for the Pearson's correlations between the IHRM and related measures such as the AROS (Campón & Carter, 2015) and the IHP-R (Herek et al., 1998; 2009) showed that the IHRM was positively related to measures of internalized heterosexism (IHP-R) and internalized racism (AROS), supporting the proposed hypothesis. This implies the IHRM does in fact measure similar constructs that can be expected on theoretical grounds to be close to the one tapped into by the proposed instrument. In other words, the construct of IHR is like constructs of internalized racism and internalized heterosexism. This makes sense given IHR captures elements of both systems of racism and heterosexism, hence there will be some convergence amongst the constructs. If one goes back to the conceptualization of IHR, which is the process whereby sexual minorities of color appropriate or internalize aspects of heterosexist racism toward their intersecting experiences as a sexual minority of color by believing, succumbing, or accepting that their social identities, worldviews, and cultural norms are inferior, one can see how all three constructs are intertwined. This is valuable as it evidently highlights the IHRM items do represent and measure IHR. Conversely, if the IHRM had not illustrated correlations with the AROS and the IHP-R, then it could have signaled the measure (i.e., IHRM) had a confound or an alternate construct that cannot be logically or statistically differentiated from the hypothesized construct (Heppner et al., 2016).

From a macrolevel perspective, the root of internalized heterosexist racism stems from systems of heterosexism and racism. It is in these systemic contexts that sexual minorities of color appropriate the insidious forms of heterosexism and racism (Schmitz et al., 2020;

Szymanski & Sung, 2013). Centering an intersectionality framework, helps paint a holistic picture of how sexual minorities of color come to experience IHR, particularly in the forms or dimensions of negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility. In this study, these dimensions have been statistically tested to demonstrate that each is a correlate of heterosexism, racism, and heterosexist racism. Thus, a positive correlation with the IHRM, the AROS, and the IHP-R gives credibility for the new construct of IHR and hopefully captures the unfortunate experience that sexual minorities of color endure. A positive correlation also signifies construct validity has been established by way of convergent validity and hence the construct is not underrepresented, nor does it have irrelevant aspects as part of the construct (i.e., surplus construct irrelevancies). This indicates the hypothesized construct does in fact capture pivotal aspects of IHR. One of the explanations as to why the IHRM correlated well with the AROS and the IHP-R was due to a careful, thorough conceptualization and operationalization of IHR as well as a review of the literature. Such steps were crucial in developing a novel measure, as the researcher searched relevant literature to increase their knowledge about the construct.

For example, looking at how the IHR-P and the IHRM converges, one can see some degree of shared phenomena. The IHR-P (Herek et al., 1998; 2009) measures the extent to which sexual minorities reject their sexual orientation, are uneasy about their sexual and/or gender desires and seek to avoid sexual and/or gender attractions. These feelings of rejection, uneasiness, and avoidance toward one's sexual orientation is due to internalized heterosexism (Berg et al., 2016; Szymanski et al., 2008; Velez et al., 2019). For sexual minorities of color dealing with internalized heterosexism may conceal their sexual orientation out of shame, as the

“coming out” discourse deviates from their own racial cultural values (Brennan et al., 2021). Sexual minorities of color who endorse traditional values of family obligations (e.g., gender roles, forming a heterosexual family, having children) may be seen as a disappointment by family members if they disclose their sexual orientation (Noyola et al., 2020; Szymanski & Sung, 2013). In this instance, the IHP-R captures the internalized heterosexism experienced by sexual minorities of color. However, the IHRM captures the internalized heterosexism intertwining with internalized racism experienced by sexual minorities of color. Expanding on the same example of concealment of sexual orientation, sexual minorities of color who are not “out” or conceal their sexual orientation to others, especially to white sexual minorities, are often assumed that sexual minorities of color are being inauthentic and self-deceptive for not openly disclosing their sexual orientation (Pantoja-Patiño, 2023; Sadika et al., 2020). Yet, disclosure of sexual orientation, especially to BIPOC families can be offensive and incongruent to one’s racial heritage (Szymanski & Sung, 2013; Page et al., 2021). Here the heterosexism (concealment) endured by individuals is reactively met with racism, such as white sexual minorities questioning people’s decision to not disclose their sexual orientation. Often there is an expectation created and imposed by white sexual minorities that one needs to be “out” to be authentic, yet such narrative only considers one’s sexual orientation and not how racialized experiences change the coming out narrative for minoritized racial groups.

Regarding, the AROS and its evaluation of internalized racism, it exclusively measures the internalized beliefs, attitudes, and emotional reactions of racial oppression among BIPOC (Campón & Carter, 2015). As previously defined, internalized racism refers to the appropriation of racist stereotypes, values, images, and ideologies endorsed by the white dominant society about BIPOC groups, leading to feelings of self-doubt, disgust, and disrespect for one’s race

and/or oneself (Bailey et al., 2011; David et al., 2019). Sexual minorities of color struggling with internalized racism may feel it by altering their appearance to reflect white American standards of beauty and expression, like changing their hairstyle or wearing clothing to embody the archetype of white American individuals. Additionally, sexual minorities of color can take up from the white sexual minority culture while disregarding their own culture. This generally means adopting culturally specific behaviors, such as expecting to be “out,” concealing or downplaying one’s racial heritage in LGBTQ+ spaces, and prioritizing *family of choice* over family of origin. Similarly, to the IHP-R capturing internalized heterosexism the AROS reflects characteristics of internalized racism experienced by sexual minorities of color. Nevertheless, the IHRM captures the internalized racism intertwining with internalized heterosexism experienced by sexual minorities of color. For instance, sexual minorities of color may disparage physical characteristics and behaviors of sexual minority and racial groups they belong. Through the social expectations and messages around beauty and expression, it forces people to believe white people – including both queer and straight – are superior and sexual minorities of color should behave/look like them. Take for consideration, in romantic white queer spaces, sexual minorities of color are shunned from the beginning through acts of sexual exclusion or objectification based on race like upholding sexual preferences for a certain race or exoticizing BIPOC’s physical characteristics (Balsam et al., 2011; Han & Choi, 2018; Weber et al., 2018). It is also not uncommon for gay cisgender white men to exclusively seek other gay cisgender white men with masculine traits that innately resemble a level of heterosexuality, subsequently, pushing sexual minorities of color who do not possess the desired traits to the margins (Rosenberg, 2016).

Hypothesis Three: Distinguishing the IHRM from Another Construct

To distinguish the IHRM from other scales, the IHRM's relationship with a measure of social desirability was assessed to establish discriminant validity. It was expected the IHRM would be non-significantly or only slightly related to a social desirability measure, which was supported by Pearson's correlations. A low correlation between the target scale like the IHRM and a social desirability scale would indicate the content instrument is not confounded with social desirability (King & Bruner, 2000). Because social desirability is a construct theoretically defined as the tendency for individuals to seek approval (Stöber, 2001), it should not strongly correlate with the construct of IHR which denotes the process of internalization of elements of white supremacy and heterosexism. The results of the Pearson's correlations revealed a low correlation between the constructs, which is an acceptable correlation that does not imply participants are responding in a problematic way (King & Bruner, 2000), as well as that the construct of IHR is not being confounded with the construct of social desirability.

This low association between social desirability and IHR in this study may be explained by the dimension of seeking approval. The seeking approval in social desirability can manifest as individuals attributing personal traits that others generally value along with deliberately changing their public image to exaggerate positive attributes (Stöber, 200). Regarding how seeking approval manifests in IHR, one can look to one if its dimension of assimilation of beauty and self-expression standards. Sexual minorities of color who espouse aspects of IHR may seek approval by enacting white American and heterosexual cultural standards (e.g., inhibit themselves from dressing in their racial attires, avoid speaking their native language, or distance themselves from their racial cultures) to present a version of themselves that caters to whiteness and heterosexism while dispelling negative stereotypes about their group and namely be

approved by others (Ghabrial & Ross, 2018; Versey et al., 2019). It is quite possible, that the concept of seeking approval is being slightly reflected in both social desirability and IHR, just in different ways, which has resulted in a low correlation between the two constructs. If there had been a higher correlation between the two, that would have been problematic, especially since IHR and the IHRM are a newly developed construct and measure; consequently, would undermine discriminant validity.

Interestingly, both the AROS and the IHP-R correlated higher with the SDS-17 than what the IHRM did with the SDS-17. Continuing the thread of seeking approval in social desirability, it is plausible the construct is being represented more in the AROS and the IHP-R measures than in the IHRM, hence resulting in higher correlations. In reviewing the items in the AROS, about 37% referenced some form of seeking approval, while about 60% of the items did for the IHP-R. That is in comparison to about 21% of the items in the IHRM referencing elements of social desirability or seeking approval. This potentially explains the differences in correlations between the AROS and the IHP-R and the IHRM.

Hypothesis Four: Correlating the IHRM with a Measure of Psychological Distress

To establish concurrent validity, it was expected the IHRM would be positively related to a measure of psychological distress (K6; Kessler et al., 2002), which was supported by Pearson's correlations. It has been robustly documented intersectional forms of oppression result in psychological distress (Lim & Hewitt, 2018; Smith et al., 2020; Sutter & Perrin, 2016; Velez et al., 2019), along with its single forms of oppression as internalized heterosexism (Brennan et al., 2021; Newcomb & Mustanski, 2010; Szymanski et al., 2008; Szymanski & Mikorski, 2016) and internalized racism (Campón & Carter, 2015; Carter, 2007; Gale et al., 2020; Speight, 2007). As such, it makes sense the IHRM would positively correlate with the K6. As participants endorse

higher levels of internalized heterosexist racism, they also report higher levels of psychological distress. Both the minority stress model (Brooks, 1981; Meyer, 2003) and intersectionality theory (Crenshaw, 1991), can explain why sexual minorities of color dealing with IHR also experience psychological stress. As a reminder, intersectionality is the complex, cumulative way in which the effects of multiple forms of oppression combine, overlap, or intersect especially in the lived experiences of minoritized individuals (e.g., sexual minorities of color) to produce and maintain complex inequities (Crenshaw, 1991). In turn, due to the pervasive and multilevel stigma directed at such individuals because of their sexual orientation, causes disproportionately higher rates of mental health risks. For instance, concealing one's sexual orientation due to racial-familial values, difficulty in integrating racial identities and sexual orientation due to heterosexism from racial communities and racism in LGBTQ+ contexts, along with exclusion from LGBTQ+ and minoritized racial spaces (Balsam et al., 2011; Brennan et al., 2021; Noyola et al., 2020), all cause psychological distress (e.g., anxiety, depression, shame, lower self-esteem, feelings of rejection, etc.).

Elucidating the psychological distress stemming from IHR using the lens of the minority stress model (Brooks, 1981; Meyer, 2003), helps provide support that the IHRM would positively correlate with the K6. Minority stress posits that stigma, prejudice, and discrimination create a hostile and stressful social environment for sexual minorities that leads to mental health problems (Meyer, 2003). Further, the model names stress processes, including the experience of prejudice events, expectations of rejection, hiding and concealing, along with internalized homophobia. Minority stress is different than general stress, distinguishably it is the excess stress to which people from minoritized social categories are exposed because of their social positionality. Since sexual minorities of color fall into the minoritized social categories, they are

bound to encounter negative stressors in their environments. Continually encountering the intersectional systems of oppression can cause individuals to appropriate the psychological pain derived from such oppressive environments. As such, sexual minorities of color with IHR may be stressed, anxious, or depressed about navigating white and heterosexist environments. Individuals can also be stressed, anxious, or depressed from hearing moral rejections against being a sexual minority from their racial families (Sadika et al., 2020; Smith et al., 2020). Altogether, these minority stressors induce negative reactions (e.g., emotional, psychological, social, physical, spiritual) in which sexual minorities of color internalize the insidious reactions colonizing a person's mind and distorting their understanding of themselves as inferior to white sexual minorities and straight minoritized racial groups.

Hypothesis Five: Predicting Psychological Distress

At last, to estimate incremental validity, it was hypothesized the IHRM would contribute significantly to assessing internalized heterosexist racism among sexual minorities of color above and beyond what was accounted for by current, independent measures of internalized heterosexism (i.e., IHP-R) and internalized racism (i.e., AROS) in the variance of psychological distress (K6). Hierarchical multiple regression analyses revealed that the proposed measure of IHRM does contribute significantly to assessing internalized heterosexist racism among sexual minorities of color above and beyond what the IHP-R (Herek et al., 1998; 2009) and the AROS (Campón & Carter, 2015) are able to account for in the variance of psychological distress. The first step of the regression analysis revealed that 3.8% of the variance in psychological distress was accounted for by the AROS and the IHP-R, yet this was not statistically significant. In the second step of the regression, when the IHRM was added, it accounted for an additional and significant 12.2% of the variance in psychological distress. In total, all three predictor variables

(internalized racism, internalized heterosexism, and internalized heterosexist racism) accounted for a statistically significant 15.0% of the variance in psychological distress. This finding is also supported in the literature of intersectional oppression among sexual minorities of color.

Since there are no known measures that precisely measure IHR among sexual minorities of color, the IHRM – developed by and for sexual minorities of color – can nuancedly capture IHR including psychological distress. In comparison to the existent measures that independently only assess single forms of oppression either racism or heterosexism but not both, would in theory miss the psychological distress stemming from IHR. This explains the findings of the regression analyses in that the IHRM accounted for an additional and significant of the variance in psychological distress. Additionally, both independent measures of the AROS and the IHP-R were not normed for sexual minorities of color, and instead normed with general populations of BIPOC communities and sexual minorities respectively (Campón & Carter, 2015; Herek et al., 1998; 2009). As such, the efficiency of the measures is lessened when trying to utilize them to evaluate either internalized racism or internalized heterosexism in sexual minorities of color. Even if one was trying to measure sexual minorities of color's experiences with either internalized racism or internalized heterosexism, from an intersectionality perspective, both of their experiences would undoubtedly intertwine with each other eventually changing the overall experience of both forms of oppression. For instance, sexual minorities of color may see themselves through a deficit perspective such as less capable, beautiful/attractive, or successful in contrast to white sexual minorities and heterosexual individuals. Furthermore, individuals who harbor these intersectional negative self-evaluations creates identity dissonance potentially ensuing compartmentalization of their identities as they are perceived as mutually exclusive. Something the AROS and the IHP-R would not be able to capture, nor the psychological distress

derived from such intersectional experience. For this reason, the regression findings critically provide incremental validity for the IHRM. In doing so, it helps to establish statistical credibility of the newly developed and validated measure, which makes groundbreaking contributions to the field of psychology as the IHRM is the first of its kind.

Internalized Heterosexist Racism and Counseling Psychology

The findings of this current study uphold essential values of counseling psychology, specifically emphasis on multiculturalism and social justice. Since the inception of the field of counseling psychology in the 1940s, attention to issues of multiculturalism have been addressed (DeBlaere et al., 2019). For example, counseling psychologists noting the importance of appreciating the needs of minoritized groups, like sexual minorities of color. More recently in the 2000s there has been a call for the field to continue evolving in the implementation of social justice (Vera & Speight, 2003). Vera and Speight (2003) argued social justice is at the heart of multiculturalism in that existence of systems of oppression including racism and heterosexism are what give way to inequitable experiences for minoritized populations. Sexual minorities of color are continuously oppressed for their sexual orientation and race, ultimately thwarting their freedom, willpower, and existence. As such, it is necessary to challenge the toxic social conditions that systematically hurt sexual minorities of color. One of the ways the researcher decided to put into action the values of multiculturalism and social justice is by conducting a study on internalized heterosexist racism among sexual minorities of color.

Since there are no measures evaluating IHR among sexual minorities of color until presently, there is ample opportunities to meet the gap and add to the nascent scholarship of IHR. The present investigation aimed to transform the psychological scholarship by making sexual minorities of color more visible and challenge the research zeitgeist in psychology of white

American sexual minorities (Puckett & Levitt, 2015; Sarno et al., 2015; Snitman, 2019). The limited acknowledgement of sexual minorities of color in psychological literature drastically reduces opportunities for scholars to develop practice recommendations, support advocacy and liberation efforts, as well as transmitting knowledge to the next generation of psychologists. For starters, the conceptualization of IHR will guide clinicians, educators, researchers, and advocates better support sexual minorities of color and join the fight towards liberation. Secondly, the development and preliminary validation of the IHRM will help assess IHR, thus creating opportunities to address the IHR experienced by sexual minorities of color. Below are implications on how both the conceptualization of IHR and the IHRM can generate efforts for psychologists to enact their roles as scientist-practitioner-advocates.

Implications

Theoretical Contributions

The findings of this study provide the following theoretical contributions. Firstly, the study utilized an intersectionality framework (Crenshaw, 1991) that helped illustrate the intersections of racism and heterosexism among sexual minorities of color. In investigating sexual minorities of color's experiences requires making explicit of their experience with accurate terminology that captures the intersection of internalized heterosexism and internalized racism. Hence, the term internalized heterosexist racism was conceptualized and operationalized to refer to the intertwining of both systems of oppression. In doing so, it replaces existent, independent conceptualizations and terminology with novel constructs that explicitly and precisely name the underlying social inequalities/inequities (e.g., internalized heterosexist racism), which aligns with intersectionality practices (Bharat et al., 2022; Moradi & Grzanka, 2017). Having new ideas developed by and for sexual minorities of color creates pathways for

professionals and community members to put words to their narratives of oppression. This also includes constructing new measures that capture the texture and breadth of sexual minorities of color, as such it was hypothesized the IHRM would have a 6-factor structure with items describing six dimensions: negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility. In general, the IHRM demonstrated convergent, discriminant, concurrent, and incremental validities, along with significant reliability scores providing preliminary evidence for the measure.

To reiterate the importance of this study, the IHRM is the first of its kind. Nonetheless, there are current measures designed for sexual minorities of color, however they do not measure the construct of IHR. For instance, Balsam et al. (2011) constructed the LGBT People of Color Microaggressions Scale (LGBT-POCMS) which is an 18-item self-report scale measuring the types of microaggressions experienced by minoritized racial LGBT adults. Even though microaggressions can become internalized, they are distinctive from each type of oppression (e.g., internalized, interpersonal, institutional, systemic, etc.). Microaggressions are external forms of oppression, while internalized oppression refers to the appropriation of external forms of oppression. Further, microaggressions breed in institutional and systemic contexts. Take for consideration, within LGBTQ+ communities sexual minorities of color typically experience racism in romantic relationships and social networks by being excluded or objectified (Balsam et al., 2011; Felipe et al., 2020; Ghabrial, 2017; Weber et al., 2018). Consequently, sexual minorities of color may internalize the feelings of exclusion or objectification and integrate them into their sense of self. So, despite Balsam et al.'s (2011) pivotal measure, it can only capture a degree of IHR. About 33.3% of its items reflected elements of IHR, whereas the IHRM reflected

87.5%. In theory, 100% of the items ought to represent IHR, yet there were six items after computing Cronbach's alpha that had non-significant scores. This study was not able to investigate the unidimensionality of the construct given the low sample size.

Other notable measures include the Queer People of Color Identity Affirmation Scale (QPCIAS; Ghabrial & Andersen, 2021) and the Experienced Sexual Racism Scale (ESRS; Bhambhani et al., 2023), with the QPCIAS intended to evaluate the degree a queer person of color feels affirmed, and the ESRS measures men of color who have sex with men and their level of sexual racism experienced. Similarly, to the LGBT-POCMS (Balsam et al., 2011), both measures QPCIAS (Ghabrial & Andersen, 2021) and ESRS (Bhambhani et al., 2023), only measured a small portion of IHR with 25.0% and 9.5% respectively. The researcher had a difficult time identifying measures of IHR for sexual minorities of color. This again speaks to the needed construct and the IHRM. Now that they have been developed and preliminarily validated, the results of this study establish statistical and theoretical credibility for both the construct and measure at hand. The conceptualization and operationalization of IHR and the construction of the IHRM will give guidance and meaning to what sexual minorities of color sadly experience.

Clinical Training, Supervision, and Practice

When thinking of sexual minorities of color, psychologists still need significant foundation to be able to work with such population. Despite there being an increased attention to sexual minorities in general, the field of psychology lacks curricula needed to ensure the requisite knowledge and skills for working with sexual minorities of color are imparted effectively (American Psychological Association [APA] Task Force on Psychological Practice with Sexual Minority Persons, 2021). Learning about IHR can help guide psychologists critically examine the ways the nefarious oppression manifests in sexual minorities of color lives.

Specifically, training programs can integrate the conceptualization of IHR in their multicultural and social justice, research, community, and outreach courses. Students may benefit from assignments that allow them to understand and apply IHR through case studies, research proposals, as well as conceptualizing clients' own IHR experiences. Further, students and psychologists can examine how IHR fits different subgroups of sexual minorities of color.

Another important training aspect to account for is supervision. Supervisors need to encourage trainees to continually explore the impact of their own heterosexist racism on their work with sexual minorities of color. They can do so by utilizing the dimensions of IHR to aid trainees' development. For many beginning trainees, especially for folks with significant privileged identities, it can be challenging to grasp at how oppression exist. Nevertheless, if trainees do not have sufficient understanding of how IHR operates, trainees working with sexual minorities of color are at risk for perpetuating the same systems of oppression and cause psychological injuries to clients (Snitman, 2019). Additionally, training programs need to take steps to increase knowledge on sexual minorities of color with their staff at their sites. Training programs can provide workshops on IHR, so staff are able to assess and develop clinical interventions for sexual minorities of color dealing with IHR. For instance, the content can include how IHR is associated with mental health outcomes and psychological difficulties (Pantoja-Patiño, 2020; Snitman, 2019; Velez et al., 2019).

Regarding clinical practice, identifying IHR, exploring how it develops, and examining how it continues to affect current functioning of clients may offer validation and a sense of relief to sexual minorities of color that their feelings of inferiority are not a result of their own volition (Snitman, 2019). To some individuals, IHR may be their root of their suffering. Therefore, utilizing the conceptualization of IHR can help clients see their suffering does not exist within

themselves entirely, rather they have internalized aspects of systems of oppression. Psychologists can help recognize which six dimensions from the construct of IHR clients are experiencing oppression from. In doing so, psychologists will be able to externalize/contextualize client's concerns to systemic and environmental factors. For clients to effectively deal with their suffering and self-determine, they ought to develop critical awareness of how their pain is rooted in toxic environments. This shift in conceptualization of psychopathology allows room for healing or thriving and moves away from the individualistic focus (Torres Rivera, 2020; French et al., 2020). Typically, individual coping is rooted in Western interventions that do very little to challenge or address suffering at the source, and seldom consider environments interacting with client's concerns. If anything, traditional therapies aim at "changing" people via behaviors and symptom reduction and not the environments that produces/reinforces individuals' pain (Vera & Speight, 2003).

Psychologists can also create interventions based on specific IHR dimensions where clients are experiencing oppression. For instance, a client who is angry and lonely with themselves about not feeling connected to their university's LGBTQ+ (primarily white) support spaces may find solace to know their feelings of anger and loneliness are stemming from being made invisible and invalidated by the institution not providing services/resources that reflects their intersectionality (e.g., IHR dimension of intersectional invisibility). Psychologists and clients can work together to challenge the institution to create more of a sense of belonging that affirms their intersectionality. Similarly, psychologists who self-identify as a sexual minority of color may find it powerful and even healing to name their IHR experiences. Conversely, if psychologists have blind spots that manifest in their values, beliefs, attitudes, and behaviors

toward other sexual minorities of color, they may then render services that are more damaging than healing to their clients.

Liberation Efforts

In general, queer people and communities have been silenced and erased in much of the liberation psychology literature (Mosley et al., 2021; Singh et al., 2020). Liberation psychology in essence is an anti-oppressive approach that counteracts oppression and marginalization. It contends that all knowledge is socially and politically constructed, rather than knowledge being discovered (Torres Rivera, 2020). Therefore, analyzing and bringing attention to issues of queerness is an act of liberation, as it gives an opportunity to correct this silence and erasure. As discussed, IHR is a novel concept that names the internalized oppressive structures and processes sexual minorities of color experience. The IHRM can discern characteristics of IHR, with the goal of being able to address a person's IHR experience. In knowing one has internalized heterosexist racism, it gives the chance for individuals to resist and challenge the wrongly imposed narrative of inferiority toward their minoritized identities. Healing of IHR occurs only when people gain the awareness or the critical consciousness about their oppression (Adames et al., 2023; French et al., 2020). Critical consciousness involves a person's willpower to critically reflect and act upon their sociopolitical environment to begin the process of radical healing (French et al., 2020).

The IHRM can identify IHR and in such process, be able to aid sexual minorities of color from resolving any identity conflicts because of their internalized oppression. There is extensive research noting the negative correlation between positive queer identity development and internalized oppression (Bowleg, 2013; Ferguson et al., 2014; Ghabrial, 2017; Sarno et al., 2015). This is due to sexual minorities of color being nested in the system of heterosexist racism,

which innately thwarts affirmative and positive forms of identity. As such, being able to pinpoint IHR, one can externalize IHR to systems of oppression. In doing so, helps people to differentiate between what is truly them and what aspects of oppression they have appropriated that obscures their expression of their intersecting identities (Pantoja-Patiño, 2023). Subsequently, it allows individuals to liberate themselves from the nefarious form of oppression. The grandfather of liberation psychology, Martín-Baró (1994) argued once problems are externalized or deideologized, minoritized groups could then create their own theories of solutions and liberations. Although, the creation of IHR and the IHRM is tailored for sexual minorities of color, the questioning and comprehension of IHR is also crucial for the liberation of white sexual minorities and straight BIPOC communities who hold significant power over sexual minorities of color, and in some ways influence the poisonous seeds of IHR.

Future Research Directions and Limitations

First and foremost, because the low sample size in this study ($N = 62$), confirmatory factor analysis (CFA) was not possible to complete (MacCallum et al., 2001). Instead, tests of validity and reliability via Pearson's correlations and Cronbach's alpha, along with hierarchical multiple regression were computed to provide preliminary evidence of the IHRM. A possible explanation as for the low sample size is that sexual minorities of color may be cautious about participating in research studies that requires them to be "out," which can create a fear that the information they disclose may be publicly shared, possibly outing someone who is not ready to be "out." Although the researcher ensured to maintain participants' responses confidential through a thorough inspection by Loyola University Chicago's Institutional Review Board, individuals may still feel reluctant to participate. As such, researchers are highly encouraged to build long-term relationships/partnerships with sexual of color communities. This necessitates

researchers to be directly involved with individuals which may take several months or years.

This practice is not conducive to Western research methodologies, as traditional research methods do not encourage researchers to build relationships before they collect information (Snow et al., 2016). The researcher attempted to utilize their networks given their connection to the sexual minority of color community, however those networks were small.

Another limitation of this study, again due to the low sample size, CFA was not possible hence, the six-factor structure of the IHRM was not tested. Future studies ought to validate the measure with a sufficient sample size to establish evidence for unidimensionality of the IHR construct. For example, in this study, five out of six dimensions (negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized isolation and ostracism, and intersectional invisibility), all had low item-total correlations. Those included item 1 “*People like me should not be represented in the media (e.g., TV, films, magazines),*” item 15 “*I am ashamed of members within my sexual and racial communities,*” item 21 “*I change my hair (e.g., straightening, relaxing/texturizing, etc.), skin color (i.e., bleaching, tanning), and/or grooming practices (e.g., shaving body hair) to fit in with society,*” item 29 “*I often make negative comments about other people of color and sexual minorities’ appearances,*” item 42 “*I feel unwelcome in white spaces, including those for white sexual minorities (e.g., family, Pride events, etc.) I am in,*” and item 48 “*At times, my reality as a sexuality minority of color feels erased by others.*” This means the items within each dimension will need to be furthered evaluated and perhaps even deleted. This could lead to dimensions being reconfigured possibly changing the factor structure of the scale. Ultimately, a CFA would be able to analyze such reconfiguration (Boateng et al., 2018).

Thirdly, the predictor variables in the regression analyses had VIF scores that suggested the presence of multicollinearity and suppression. For instance, the VIF scores of the IHRM, the AROS, and the IHP-R were 3.44, 2.01, and 2.36 respectively. Multicollinearity occurs when the predictor variables are highly correlated with each other. This can lead to unstable and potentially unreliable coefficient estimates, making it difficult to interpret the results and draw meaningful inferences from the hierarchical regression models (Beckstead, 2012; Bhandari, 2023). Two factors that may have contributed to the multicollinearity in these analyses is the creation of a new variable that relies on existent theory-driven constructs and insufficient data. As mentioned before, the IHR was informed by established scholarship since the construct of interest has never been conceptualized nor operationalized. This study garnered relevant knowledge to delineate the dimensions of IHR which overlapped with aspects of internalized heterosexism and internalized racism. Consequently, such convergence between all three constructs can come at a statistical cost which requires meticulous efforts to differentiate between the three. Even through these attempts (e.g., conceptualizing from an intersectionality framework, applying both inductive and deductive methods to content analysis) it is plausible that there is a presence of correlation amongst the predictor variables causing multicollinearity. The second factor which has been the crux of this study is not having a sufficient representative sample to conduct the necessary analyses including examining for potential suppression effects. Suppression is the result of criterion-irrelevant variance operating among predictors (Beckstead, 2012). For example, a “valid” predictor(s) has many features in common with the criterion but also contains some elements (i.e., irrelevant features) that are not shared. On the other hand, a suppressor variable is a predictor that has no or very few elements in common with the criterion but also shares many irrelevant features with the other predictors (Beckstead, 2012). In sum,

future studies ought to isolate, examine/diagnose, and remove potential suppression effects, specifically employing the criterion-irrelevant-variance-omitted (CIVO) regression weights approach. This approach is valuable as it can provide insight that tolerance and VIF cannot as well as offers an alternative to simply dropping potentially relevant variables from regression models (Beckstead, 2012).

A final limitation includes the demographic composition of participants. Since the study did not have enough of a representative sample size, the researcher was not able to execute analyses to examine differences among different groups with diverse identities including race, sexual orientation, gender identity, social status, religion, U.S. geographic region, and highest educational level. There was an overrepresentation of Asian (32.2%), Black/African American (22.6%), and Hispanic/Latine/Latinx (25.8%). With respect to sexual orientation, folks who identified as bisexual (27.4%), gay (25.8%), and queer (27.3%) were well represented, similarly to cisgender men (29.0%) and cisgender woman (40.3%). Future studies should include a sizable number of individuals from varying demographic groups given the heterogeneity of sexual minorities of color to examine group differences. Interestingly, 71.0% of participants identified with being religious. Sexual minorities of color frequently experience moral rejections from their racial communities and families which sadly creates fear in disclosing their sexual orientation to family and friends (Abreu et al., 2023; Sadika et al., 2020). This sentiment is also reflected in larger religious institutions and systems, including churches, faith-based universities, and even countries (Lockett et al., 2023). More nuancedly, Latine/x sexual minorities can grow up in families where LGBTQ+ experiences are stigmatized, consequently shaping their IHR experiences (Schmitz et al., 2020). Similarly, Black/African American sexual minorities report a lack of acceptance in the Black community as well as a diminished sense of belonging in both

their Black and queer communities because of their intersectional experiences including religious backgrounds (Ajayi & Syed, 2016; Bowleg, 2013; Mosley et al., 2021). This is also true for many Middle Eastern/Arab American sexual minorities (Ikizler & Szymanski, 2014), including other minoritized racial groups. Thus, it is worth exploring the relationship with religion and IHR, and whether those who do identify with a religion would have higher rates of IHR. There has been sufficient literature documenting the influence of religion and internalized oppression. Particularly, how sexual minorities of color appropriate negative religious messages around their sexual orientation which consequently results in higher rates of internalized oppression including IHR (Sadika et al., 2020; Sarno et al., 2015; Schmitz et al., 2020; Szymanski et al., 2008). Examining this relationship between the two would help determine if it is at play in this study.

Conclusion

In conclusion, the IHRM was developed to assess internalized heterosexist racism among sexual minorities of color. As there are no validated measures evaluating both systems of racism and heterosexism intersectionally, there was a dire need for a such a measure to be created. The IHRM has more nuance items specific for sexual minorities of color than existent independent measures of internalized heterosexism and internalized racism as evidenced by incremental validity. This study utilized an intersectionality framework (Crenshaw, 1991) that guided the development of the IHRM, the conceptualization of IHR and its six dimensions: negative messages, intersectional minority stress and reactivity, assimilation of beauty and self-expression standards, internalized inferiority, internalized isolation and ostracism, and intersectional invisibility. In general, the IHRM demonstrated convergent, discriminant, concurrent, and incremental validities, along with significant reliability scores providing preliminary evidence

for the measure. Implications were delineated with the intention of furthering the findings of this study, all while uplifting the lived experiences of sexual minorities of color.

APPENDIX A
EXPERT REVIEW INSTRUCTIONS

Reviewer Instructions

Thank you for taking the time to offer your expertise in the development of the proposed measure (Internalized Heterosexist Racism Measure). Please complete the brief demographic questions below to the degree you feel comfortable sharing. The information below will help contextualize the development process of the measure. No identifiable information will be shared, and all information will be anonymous.

Name of Reviewer:

Age:

Gender:

Sexual Orientation:

Race:

Current Occupation:

In making your review, consider the following:

- In general, any items of the measure that may be redundant or repeated, any items that are unclear, have weird wording, or grammatical errors.
- Is the conceptualization or definition of internalized heterosexist racism clear? Does it make sense?
- Are the items in each dimension or category reflecting that said dimension? For instance, do the items in the Negative Messages dimension reflect the definition of Negative Messages?
- Are there items missing?
- Additional feedback?

Conceptualization of internalized heterosexist racism is proposed: the process whereby sexual minorities of color appropriate tenets from systems of White supremacy (i.e., racism) and heterosexism toward their intersecting experiences as a sexual minority of color by believing, succumbing, or accepting that their interacting identities, worldviews, and cultural norms are inferior.

Instructions: Respondents will indicate their level of agreement by using a 5-point Likert scale that ranges from 1 (strongly disagree) to 5 (strongly agree), with a higher score reflecting greater endorsement of internalized heterosexist racism.

Total items = 35

Negative Messages: includes the appropriation or internalization of heterosexist racist messages about sexual minorities of color from others, institutions, the media, and society.

- Item: I feel it is wrong for me to express my queerness with racial communities and my family because it goes against their/our religious beliefs.
- Item: I agree with racial communities that being a sexual minority is harmful, gross, and/or weird.
- Item: In general, I feel my family and others would love me more if I was not a sexual minority of color.
- Generally, I like being a sexual minority of color but at times I despise or hate my race and/or sexual orientation.
- Item: I believe that if I am not “out” or if I conceal my sexual orientation to others, I am being inauthentic.
- Item: Sexual minorities of color should follow traditional gender roles (e.g., raising heterosexual children, men being masculine, women being feminine).
- Item: White sexual minorities are more attractive, trustworthy, and intelligent than sexual minorities of color.

Intersectional Minority Stress and Reactivity: internalized heterosexist racism results in psychological stress and emotional reactions.

- Item: I anxiously anticipate the rejection from my racial communities and family.
- Item: I get sad/angry knowing I can't change my identities (race, sexual orientation).
- Item: Being a sexual minority of color makes my future look hopeless.
- Item: I am ashamed of members of my sexual minority of color communities.
- Item: I am embarrassed to be a sexual minority of color.
- Item: There are moments when I wish I was White and/or straight.
- Item: I have downplayed my identities (race, sexual orientation) so people would like me.
- Item: It's uncomfortable for me to interact with sexual and/or racial minorities.
- Item: I feel tension or conflict between my sexual orientation and race.

Assimilation of Beauty and Self-Expression Standards: sexual minorities of color consciously or unconsciously adopting White American and heterosexual cultural standards, such as dress attire, language, appearance, and impression management (engaging in strategies to prevent or suppress one's sexual orientation and race).

- Item: I will intentionally change my hair, skin color (i.e., bleaching, tanning), and/or grooming practices (e.g., shaving body hair) to impress White sexual minorities and racial minorities.
- Item: I mostly eat mainstream foods and engage in exercise with the goal of having a slim/strong physique and feel more attractive.
- Item: I avoid using language/slang, including tone of voice that would indicate my sexual orientation and/or racial heritage.
- Item: I am hesitant to express my identities (sexual orientation, race) through clothing, language, and body movements.
- Item: I find people who are openly expressive about their identities (sexual orientation, race) to be off-putting.
- Item: I often make negative comments about other racial and/or sexual minorities.

Internalized Inferiority: sexual minorities of color negatively judging themselves or others for their racial and sexual orientation cultures in comparison to White American and heterosexual cultural standards, ideologies, values, and beliefs.

- Item: I see sexual minorities of color as less than White American and heterosexual individuals.
- Item: I envy White American and heterosexual individuals.
- Item: I dislike my cultural groups: sexual minorities of color.
- Item: It is hard for me to feel good about myself because of people's negative views about my identities (sexual orientation, race).
- Item: If sexual minorities of color would adapt to the larger society, they would not have to deal with so much negativity and discrimination.

Internalized Isolation and Ostracism: sexual minorities of color feeling detached from White LGBTQ and heterosexual racial minority communities.

- Item: I often feel lonely and isolated from others as a sexual minority of color.
- Item: When interacting with White LGBTQ and/or heterosexual racial minorities, I feel different and alone.
- Item: I often feel misunderstood by White LGBTQ people and/or racial minority communities.
- Item: I feel unwelcome at groups or events in White LGBTQ spaces, as well as in my racial groups.

Intersectional Invisibility: deals with sexual minorities of color feeling invalidated and their intersectionality ignored due to internalized heterosexist racism.

- Item: Having limited affirming spaces for sexual minorities of color creates a sense of invisibility for me.
- Item: Due to experiences with heterosexism and racism, I feel “othered” and out of place.
- Item: I continually feel invalidated for being a sexual minority of color.
- Item: At times, my reality as a sexual minority of color feels erased by others.

APPENDIX B

INFORMED CONSENTS AND BRIEF SCREENING SURVEY

CONSENT TO PARTICIPATE AS EXPERT REVIEWER

Project Title: Development and Validation of the Internalized Heterosexist Racism Measure for Sexual Minorities of Color

Principal Researcher: Juan R. Pantoja-Patiño, M.S. (he/him)

Faculty Advisor: Dr. Elizabeth Vera, Ph.D.

Introduction: I am a doctoral student in Counseling Psychology at Loyola University Chicago and conducting a research study as part of a doctoral dissertation. I am recruiting reviewers to develop and validate a new measure called the Internalized Heterosexist Racism Measure since there are no known measures that assess internalized intersectional oppression among sexual minorities of color (LGBQ+ and racial minority). The new measure will help professionals study and diagnose internalized heterosexist racism. Please read this form carefully and ask any questions you may have before deciding whether to be an expert reviewer.

Purpose: This research study intends to develop and validate a new measure called the Internalized Heterosexist Racism Measure since there are no known measures that assess internalized intersectional oppression among sexual minorities of color. The new measure will help professionals study and diagnose internalized heterosexist racism. The research study also hopes to elevate the experiences of sexual minorities of color dealing with internalized heterosexist racism to eliminate the discrimination/negativity.

Procedures: If selected as a reviewer, it is expected you will commit to the reviewing of the proposed measure (~ 1 hour) at your own leisure with a deadline of 2 weeks. Once you have completed your review, you will virtually meet (via Zoom) with the principal investigator for 30 mins to discuss your feedback and answer questions about the proposed measure.

To be considered as a reviewer, you must be 18 years or older, presently reside in the U.S., and able to read and comprehend English. You must also have familiarity or knowledge with racism and heterosexism among sexual minorities of color. All are encouraged to be a reviewer from any occupational background. If selected, you will be given the definition of internalized heterosexist racism and items of the proposed measure and be asked to evaluate the measure. Your feedback will be used to refine and modify the measure.

Risks/Benefits: There are no foreseeable risks involved in participating in this research beyond those experienced in everyday life. There are no direct benefits to you from participation, but the feedback will be used to develop a measure that will help eliminate internalized heterosexist racism, along with its effects on sexual minorities of color.

Compensation: There is no compensation to be an expert reviewer.

Confidentiality: Confidentiality will be maintained to the degree permitted by the technology used. All your responses will be kept secured and accessed only by the principal researcher using a password-protected computer.

Voluntary Participation: Participation in this study as an expert reviewer is voluntary. If you do not want to participate, you can decline. If you decide to participate, you are free to decline answering any questions and to withdraw from participation at any time without penalty or consequence.

Contacts & Questions: If you have questions about this research study, please contact the primary researcher Juan R. Pantoja-Patiño at jpantoja@luc.edu or (414) 793-8147, along with the research advisor Dr. Elizabeth Vera at evera@luc.edu or (312) 915-6958. If you have questions about your rights as a research participant, you may contact the Loyola Office of Research Services at (773) 508-2689.

Statement of Consent: By completing the survey, you are agreeing to participate in the research. Your completion of the survey will indicate consent for an informed participation. If you decide not to participate in this study, you may simply disregard this survey. Thank you very much for your time and effort. You can print or save this form to keep for your records.

CONSENT TO PARTICIPATE IN RESEARCH STUDY

Project Title: Development and Validation of the Internalized Heterosexist Racism Measure for Sexual Minorities of Color

Principal Researcher: Juan R. Pantoja-Patiño, M.S. (he/him)

Faculty Advisor: Dr. Elizabeth Vera, Ph.D.

Introduction: You are being asked to take part in a research study conducted by Juan R. Pantoja-Patiño as part of a doctoral dissertation in Counseling Psychology at Loyola University Chicago. You are invited to participate if you identify as a sexual minority of color (LGBQ+ and racial minority) and who has experienced discrimination/negativity for being a sexual minority of color. Please read this form carefully and ask any questions you may have before deciding whether to participate in this voluntary study.

Purpose: This research study intends to develop and validate a new measure called the Internalized Heterosexist Racism Measure since there are no known measures that assess internalized intersectional oppression among sexual minorities of color. The new measure will help professionals study and diagnose internalized heterosexist racism. The research study also hopes to elevate the experiences of sexual minorities of color dealing with internalized heterosexist racism to eliminate the discrimination/negativity.

Procedures: If you agree to be in the study, you will be asked to participate in an anonymous on-line survey. The survey will take approximately 15-20 minutes to complete. In the survey you will be asked a few demographic questions and about your experiences with heterosexism and racism, such as negative messages, stress and emotional reactions, cultural standards of beauty and expression, values, connection to LGBTQ+ and racial groups, along with feelings of invisibility.

Risks/Benefits: There are no foreseeable risks involved in participating in this research beyond those experienced in everyday life. There are no direct benefits to you from participation, but the results will be used to develop a measure that will help eliminate internalized heterosexist racism, along with its effects on sexual minorities of color.

Given the content of the research study, there may be moments when you experience discomfort as you are completing the study. As a reminder, participation is voluntary and at any point you may withdraw from the study without any penalty. Additionally, a list of resources have been gathered should you need support and will be available at the end of the survey.

Compensation: Participants will have a 1 in 40 chance to win a \$20 gift card. Participants will need to fully complete the survey to be considered for 5 of the \$20 gift cards. If participants do not complete the survey, they will not have the chance to participate in the raffle. Only those who complete the survey, will be presented with a page at the end of the survey to click on a link to voluntarily enter their emails for a chance to win a \$20 gift card. The page/link will take

participants to a separate page of the survey should they be interested in the raffle. If participants provide an email, their survey data will not be associated with their email. The page/link will ensure that their survey and emails will not be associated.

Confidentiality: Confidentiality will be maintained to the degree permitted by the technology used. Once you complete the anonymous survey and then submit it to the researcher, the researcher will be unable to extract your anonymous response from the database should you wish to be withdrawn. All your responses will be kept secured and accessed only by the principal researcher using a password-protected computer. Participant names will not be collected, nor individual identifying data, and data will only be reported in aggregate form.

Voluntary Participation: Participation in this study is voluntary. If you do not want to participate, you can decline. If you decide to participate, you are free to decline answering any questions and to withdraw from participation at any time without penalty or consequence.

Contacts & Questions: If you have questions about this research study, please contact the primary researcher Juan R. Pantoja-Patiño at jpantoja@luc.edu or (414) 793-8147, along with the research advisor Dr. Elizabeth Vera at evera@luc.edu or (312) 915-6958. If you have questions about your rights as a research participant, you may contact the Loyola Office of Research Services at (773) 508-2689.

Statement of Consent: By completing the survey, you are agreeing to participate in the research. Your completion of the survey will indicate consent for an informed participation. If you decide not to participate in this study, you may simply disregard this survey. Thank you very much for your time and effort. You can print or save this form to keep for your records.

BRIEF SCREENING SURVEY

1. Do you identify as a sexual minority of color (e.g., LGBTQ+ and racial minority)? Yes or No
2. Have you experienced discrimination, negativity for being a sexual minority of color?
Yes or No
3. Are you 18 years or older? Yes or No
4. Do you currently live in the U.S.? Yes or No
5. Can you comprehend and read English? Yes or No

APPENDIX C
DEMOGRAPHIC SURVEY AND STUDY MEASURES

DEMOGRAPHIC SURVEY

1. What is your age?
2. How do you identify racially?
3. What is your sexual orientation?
4. What is your gender?
5. What is your social status/class?
6. Do you have a disability? Yes or no.
7. What is your religion?
8. What is your average income?
9. What is your U.S. state of residence?
10. What is your highest level of education completed?
11. What is your nationality?

The Appropriated Racial Oppression Scale (Campón & Carter, 2015)

Scoring: 7-point Likert scale response format, ranging from 1 (*strongly disagree*) to 7 (*strongly agree*).

1. There have been times when I have been embarrassed to be a member of my race.
2. I wish I could have more respect for my racial group.
3. I feel critical about my racial group.
4. Sometimes I have a negative feeling about being a member of my race.
5. In general, I am ashamed of members of my racial group because of the way they act.
6. When interacting with other members of my race, I often feel like I don't fit in.
7. I don't really identify with my racial group's values and beliefs.
8. I find persons with lighter skin-tones to be more attractive.
9. I would like for my children to have light skin.
10. I find people who have straight and narrow noses to be more attractive.
11. I prefer my children not to have broad noses.
12. I wish my nose were narrower.
13. Good hair (i.e., straight) is better.
14. Because of my race, I feel useless at times.
15. I wish I were not a member of my race.
16. Whenever I think a lot about being a member of my racial group, I feel depressed.
17. Whites are better at a lot of things than people of my race.
18. People of my race don't have much to be proud of.
19. It is a compliment to be told "You don't act like a member of your race."
20. When I look in the mirror, sometimes I do not feel good about what I see because of my race.
21. I feel that being a member of my racial group is a shortcoming.
22. People of my race shouldn't be so sensitive about race/racial matters.
23. People take racial jokes too seriously.
24. Although discrimination in America is real, it is definitely overplayed by some members of my race.

Internalized Homophobia Scale – Revised (Herek et al., 1998; 2009)

Administration: 5-point response scale, ranging from 1 (*strongly disagree*) to 5 (*strongly agree*).

1. I have tried to stop being attracted to the same gender/sex in general.
2. If someone offered me the chance to be completely heterosexual, I would accept the chance.
3. I wish I weren't a sexual minority.
4. I feel that being a sexual minority is a personal shortcoming for me.
5. I would like to get professional help in order to change my sexual orientation from sexual minority to straight.

Kessler Psychological Distress Scale – 6 (Kessler et al., 2002)

The following questions ask about how you have been feeling during the past 30 days. For each question, please indicate the number that best describes how often you had this feeling.

1. During the past 30 day, about how often did you feel ...	All of the time	Most of the time	Some of the time	A little of the time	None of the time
Nervous?	1 (4)	2 (3)	3 (2)	4 (1)	5 (0)
Hopeless?	1	2	3	4	5
Restless or fidgety?	1	2	3	4	5
So depressed that nothing could cheer you up?	1	2	3	4	5
That everything was an effort?	1	2	3	4	5
Worthless?	1	2	3	4	5

The Social Desirability Scale – 17 (Stöber, 2001)

Instruction: Below you will find a list of statements. Please read each statement carefully and decide if that statement describes you or not. If it describes you, check the word “true” if not, check the word “false.”

1. I sometimes litter.
2. I always admit my mistakes openly and face the potential negative consequences.
3. In traffic I am always polite and considerate of others.
4. I have tried illegal drugs (for example, weed, cocaine, etc.)
5. I always accept others’ opinions, even when they don’t agree with my own.
6. I take out my bad moods on others now and then.
7. There has been an occasion when I took advantage of someone else.
8. In conversations I always listen attentively and let others finish their sentences.
9. I never hesitate to help someone in case of emergency.
10. When I have made a promise, I keep it – no ifs, ands or buts.
11. I occasionally speak badly of others behind their back.
12. I would never live off other people.
13. I always stay friendly and courteous with other people, even when I am stressed out.
14. During arguments I always stay objective and matter-of-fact.
15. There has been at least one occasion when I failed to return an item that I borrowed.
16. I always eat a healthy diet.
17. Sometimes I only help because I expect something in return.

Internalized Heterosexist Racism Measure for Sexual Minorities of Color

Instructions: The following statements are about your experiences with racism and heterosexism or homophobia as a sexual minority of color (i.e., lesbian, gay, bisexual, queer, etc. and a person of color). Please indicate your level of agreement to each statement by selecting the number that corresponds to your choice.

1 = Strongly Disagree, 2 = Disagree, 3 = Neither Agree nor Disagree, 4 = Agree, 5 = Strongly Agree

Note: In this scale, sexual minority refers to people who identify as non-straight such as lesbian, gay, bisexual, and/or queer.

1. People like me should not be represented in the media (e.g., TV, films, magazines).
2. It is wrong for me to express my sexual orientation within my racial groups or my family.
3. I will be a disappointment to my family if I express my identity as a sexual minority of color.
4. It is wrong to express my sexual orientation because it goes against my cultural beliefs.
5. Being a sexual minority of color is harmful, ugly, and/or weird to society.
6. I hate being a sexual minority of color because of what others have said to me.
7. I believe that if I am not “out” or if I conceal my sexual orientation from others, I am being inauthentic.
8. Sexual minorities of color should follow traditional gender roles (e.g., raising straight children, men being masculine, women being feminine).
9. I agree with society that White sexual minorities are more attractive than sexual minorities of color.
10. I feel my family and others would love me more if I was not a sexual minority of color.
11. I anxiously anticipate the rejection from my family or racial groups.
12. I have a fear of coming out because I don’t want to fit negative stereotypes.
13. I get sad/angry knowing I can’t change my identity as a sexual minority of color.
14. Being a sexual minority of color makes my future look hopeless.
15. I am ashamed of members within my sexual and racial communities.

16. I am embarrassed to be a sexual minority of color.
17. There are moments when I wish I was white and straight.
18. I have downplayed my identity as a sexual minority of color so people would like me.
19. It's uncomfortable for me to interact with sexual minorities and people of color.
20. I feel tension or conflict between my sexual orientation and my racial identity.
21. I change my hair (e.g., straightening, relaxing/texturizing, etc.), skin color (i.e., bleaching, tanning), and/or grooming practices (e.g., shaving body hair) to fit in with society.
22. I find people with lighter skin tones more attractive than people with darker skin tones.
23. Sexual minorities of color need to act more like white sexual minorities.
24. American foods are generally more desirable and better than other foods.
25. I exercise with the goal of having a slim/strong physique body that resembles white sexual minorities.
26. I avoid using language/slang, including tone of voice that would indicate my sexual orientation and racial heritage.
27. I am hesitant to express my identity as a sexual minority of color through clothing, language, and body movements.
28. I find people who are openly expressive about their identity as a sexual minority of color to be off-putting.
29. I often make negative comments about other people of color and sexual minorities' appearances.
30. I intentionally surround myself with white individuals, including white sexual minorities as they are better.
31. I seek the attention from straight white individuals much more than sexual minorities of color.
32. I see sexual minorities of color as less valuable than white American and straight individuals.
33. I am jealous of white American and straight individuals.
34. I dislike sexual minorities of color.

35. It is hard for me to feel good about myself because of people's negative views of my identity as a sexual minority of color.
36. If sexual minorities of color would adapt to society, they would not have to deal with so much discrimination.
37. I often feel lonely and isolated from others as a sexual minority of color.
38. When interacting with white sexual minorities, I feel different and alone.
39. When interacting within my racial groups, I feel different and alone.
40. I often feel misunderstood by white people and my racial groups.
41. I often feel a sense of rejection from white sexual minorities.
42. I feel unwelcome in white spaces, including those for white sexual minorities (e.g., gay bars, drag shows, Pride events, etc.).
43. I feel unwelcome within my family and racial groups.
44. I feel invisible as a sexual minority of color.
45. As a sexual minority of color, I don't feel supported in spaces (e.g., family, Pride events, etc.) I am in.
46. Due to experiences with heterosexism or homophobia and racism, I feel "othered" and out of place.
47. I continually feel invalidated for being a sexual minority of color.
48. At times, my reality as a sexual minority of color feels erased by others.

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VITA

Juan R. Pantoja-Patiño (he/him) was born in Chicago, Illinois along with his twin sibling. He later relocated to Milwaukee, Wisconsin. He first completed his Bachelor of Arts in Spanish in 2015 at the University of Wisconsin-Parkside in Kenosha, Wisconsin. A year later in 2016 he earned his second Bachelor of Science in Psychology at the same undergraduate institution. From 2016 to 2018, he attended Marquette University in Milwaukee, Wisconsin where he received a Master of Science in Clinical Mental Health Counseling.

In 2018, he began his doctoral studies at Loyola University Chicago pursuing a Ph.D. in Counseling Psychology. Juan served as a Teaching Assistant for his first year, then exclusively worked as a Research Assistant on various research teams. He led his own research on internalized oppression amongst sexual minorities of color. This research earned Juan the prestigious Distinguished Student Contribution Award by the American Psychological Association (APA) Division 44 Society for the Psychology of Sexual Orientation and Gender Diversity in 2021. In 2022 he was awarded Poster of the Year at the APA Conference by Div. 44 for introducing the new concept of internalized heterosexist racism. Regarding scholarly publications, he has contributed to seven peer-reviewed articles, including a solo author publication. He trained at Northern Illinois University and the University of Illinois at Chicago, providing counseling services to college students. He recently completed his pre-doctoral internship in health service psychology and is currently completing his post-doctoral fellowship at the University of Notre Dame.