

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

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





What is the public health significance of this article?

Whereas most studies of stigma-related stress focus on one type of stigma (e.g., racism) in isolation from others (e.g., homophobia), this study demonstrates that daily events related to both one's race and sexual orientation (i.e., intersectional experiences) are associated with day-to-day changes in Black sexual minorities' psychological well-being. Findings may inform clinical and community interventions aiming to increase the health and resilience of this understudied population.

Keywords: intersectionality, minority stress, racism, homophobia, LGBTQ people of color

Everyday life is peppered with meaningful experiences—positive and negative, mundane and monumental—each with the pos-

sibility to cause stress, build strength, or trigger an emotional reaction. For people with marginalized identities, some of these

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daily events are directly related to their stigmatized status. Such daily experiences may be adverse, such as experiencing hate or discrimination based on race or sexual orientation (Hoggard, Byrd, & Sellers, 2015; Jackson, 2017) but may also be affirming, such as finding one's marginalized status to be reflected in or supported by others (Beals, Peplau, & Gable, 2009; Mohr & Sarno, 2016).

An impressive array of studies have demonstrated links between perceived discrimination and health risks among marginalized populations, such as people of color, women, and sexual minorities (for a review, see Pascoe & Smart Richman, 2009). Albeit less studied, scholars have also examined the role of identity-supportive experiences in protecting against negative health risks associated with stigma and potentially bolstering psychosocial well-being (Mohr & Sarno, 2016). These literatures have highlighted the salience of social identity in shaping the everyday experience and health of individuals holding marginalized group statuses (Hatzenbuehler, Phelan, & Link, 2013; Krieger, 2012) and have supported the notion that the poorer mental health of many marginalized communities is a normative response to environmental stressors and structural oppression (American Psychological Association, 2012). Studies of stigma-related stress help to contextualize not only mental health disparities between majority and marginalized groups (Hatzenbuehler et al., 2013) but also differences in psychological health within marginalized populations (Feinstein, Goldfried, & Davila, 2012; Pachankis, 2015).

Some individuals hold multiple stigmatized identities (e.g., Black sexual minorities), placing them in a position of relative subordination within two larger marginalized populations (Purdie-Vaughns & Eibach, 2008). Whereas the field of psychology has advanced the scientific understanding of daily identity-related experiences among Black people and lesbian, gay, bisexual, and queer (LGBQ) people, respectively (e.g., Hoggard et al., 2015; Mohr & Sarno, 2016), little quantitative research has examined how race and sexual orientation jointly shape the everyday experiences of Black LGBQ individuals. Scholars interested in the mental health of Black sexual minorities have called for increased scholarship that takes into account multiple aspects of identity and interlocking systems of oppression, to better understand the relations between stigma and psychosocial outcomes among this dual minority population (Bowleg, 2013; English, Rendina, & Parsons, 2018; Szymanski & Meyer, 2008). The present quantitative study is designed to address this research gap by examining the daily experiences of LGBQ Black Americans, with a focus on experiences jointly constructed by their race and sexual orientation.

Intersectional Perspectives on Stigma-Related Experiences

Scholarship on stigma has increasingly reflected a concern with the psychological experience of individuals who experience multiple forms of subordination (Purdie-Vaughns et al., 2008; Szymanski et al., 2008; Zamboni & Crawford, 2007). Arguably the most influential theory in this area is intersectionality, a framework born out of Black feminist thought and critical race theory proposing that forms of oppression (e.g., racism, patriarchy, heterosexism) are interlocking and inseparable and thus should be considered simultaneously (Collins, 1990; Crenshaw, 1991). Although intersectional theory was originally developed to highlight the unique legal vulnerabilities of Black women resulting from a legal

justice system that prioritizes the experiences of White people and men (Crenshaw, 1991), the theory has expanded beyond the original focus on women of color to encompass other groups facing multiple forms of oppression, such as Black sexual minorities and LGBQ people of color more generally (e.g., Balsam, Molina, Beadnell, Simoni, & Walters, 2011; Bowleg, 2013; Sarno, Mohr, Jackson, & Fassinger, 2015). Scholars working from this perspective argue that critical information is lost when additive analytic approaches are adopted and suggest that intersectional frameworks offer a more accurate understanding of the lived experiences of individuals with multiple marginalized identities (Bowleg, 2012; Moradi & Grzanka, 2017; Parent, DeBlaere, & Moradi, 2013).

Conceptualizing Negative Intersectional Experiences as Distal Stressors

One strategy for incorporating this complexity into research on the lives of Black LGBQ people is to consider distal stressors that simultaneously engage a person's racial and sexual orientation identities. We refer to such stressors as negative intersectional experiences (IEs). Negative IEs can be defined as distal stigma-related stressors—whether smaller-scale or major life events—that arise because of one's unique combination of social identities. Negative IEs can manifest in the lives of Black LGBQ people in many ways. Black sexual minorities experience distinct forms of intracommunity stigma, including discrimination within the (majority White) LGBQ community and the (majority heterosexual) Black community (Battle & Crum, 2007; Han et al., 2015). Within the LGBQ community, Black sexual minorities report experiences of racism and microaggressions, Western cultural values and Eurocentric standards of beauty, and sexual objectification (Bowleg, 2013; Hunter, 2010). In the Black community, Black LGBQ people may face rejection, religious persecution, and pressure to conform to culturally-normative gender norms (Battle et al., 2007; Morales, 1989; Wilson, 2008). Black LGBQ people may experience invisibility and tokenism in both Black and LGBQ communities as well as in general society and its institutions (Battle et al., 2007; Purdie-Vaughns et al., 2008). Furthermore, Black LGBQ people may face unique stereotypes related to the intersection of their identities (Bowleg, 2013; Collins, 1990).

Some research suggests negative IEs are related to psychological health. Balsam et al. (2011), for example, found that perceived stress and depression were both positively associated with measures of heterosexism in racial minority communities and racism in dating and close relationships (but not with racism in the LGBQ community). In other research measuring intracommunity stigma experiences, racism in LGBQ communities demonstrated associations with greater identity conflict, increased sexual risk behavior, and elevated engagement and pride in one's racial community but not in the LGBQ community (Han et al., 2015; Sarno et al., 2015).

Mediating Links Between Negative IEs and Psychological Distress

Little research has investigated mechanisms through which race and sexual orientation might jointly increase distress (English et al., 2018). However, potential mediators have been tested in stud-

ies focused on single axes of oppression (e.g., heterosexism). For example, living in a discriminatory environment may trigger internal, group-specific stress processes related to the individual's minority status (i.e., proximal stressors), including expectations of rejection and internalized stigma (Meyer, 2003). Research suggests that proximal stressors mediate the relation between LGBQ distal stressors and mental health at both the person level (Feinstein et al., 2012; Velez, Moradi, & Brewster, 2013) and within-person level (Mohr & Sarno, 2016).

Such group-specific mediators have not been conceptualized from an intersectional perspective. One experience, however, that may represent an intersectional form of proximal stress among Black LGBQ people is identity conflict. Race and sexual orientation may feel dissonant within the lives of Black LGBQ people (Battle et al., 2007; Greene, 1997; Wilson, 2008). This sense of identity conflict may be triggered by negative IEs and cause distress (e.g., worry about betraying one community or the other; Morales, 1989). Identity conflict has been shown to be related to higher levels of perceived racism within LGBQ communities and maternal heterosexism (but not paternal heterosexism) in a study of LGBQ people of color (Sarno et al., 2015) and depression level in another investigation (Santos & VanDaalen, 2016). These studies, however, did not include race-specific analyses (e.g., of Black LGBQ people).

Other perspectives have considered ways that general psychological processes, such as rumination, may mediate links between distal stress and psychopathology (Hatzenbuehler, 2009). Rumination, which is characterized by passive, compulsive, and repetitive focus on one's symptoms of distress (or the circumstances surrounding the distress), is theorized to play a salient role in the lives of stigmatized individuals (Hatzenbuehler, Dovidio, Nolen-Hoeksema, & Phillips, 2009). Research has demonstrated that LGBQ people may be more prone to rumination after stressful experiences as compared with their heterosexual peers (Hatzenbuehler, McLaughlin, & Nolen-Hoeksema, 2008) and that ruminative processes mediate daily relations between distal stressors and distress among Black people and LGBQ people (Hatzenbuehler, Nolen-Hoeksema, & Dovidio, 2009). What little research has examined links between distal minority stressors and general psychological processes among Black LGBQ people has not included measures of intersectional stress variables (e.g., negative IEs, identity conflict).

Present Study

The primary aim of this investigation was to examine within-person relations between IEs and psychological well-being among Black LGBQ individuals as well as the potential mediation of these relations by identity conflict and rumination. This study was designed to address several limitations in the literature on stigma and health. First, the study went beyond the predominant focus on stressors related to a single aspect of identity (e.g., LGBQ identity) in isolation of other stigma-related identities (e.g., Black identity). Second, the use of quantitative methods to study intersectional stress complemented findings from the predominantly qualitative research on the experiences of Black LGBQ people (Bowleg, 2008; Hunter, 2010). Third, the use of a daily diary research design allowed us to examine within-person processes and test temporal relations among variables. Such processes, which reflect the natural ebb and flow of identity-

related experiences, have received relatively little attention because of the prevailing individual differences perspective in minority stress research (Mohr & Sarno, 2016). Additionally, diary methods can reduce the impact of retrospective memory bias on reports of stigma-related events (Beals et al., 2009; Mohr & Sarno, 2016). Finally, although our focus was on the impact of intersectional stigma on emotional distress, the investigation broadens the study of health among Black LGBQ people by examining positive dimensions of experience and psychological health.

The primary hypotheses concerned the within-person relations among components of our proposed intersectional identity-related stress model (see Figure 1), including the hypothesized predictor (negative IEs), mediators (identity conflict, rumination), and outcome (negative affect). First, consistent with stigma-related stress theories (Hatzenbuehler, 2009; Meyer, 2003), we expected negative IEs to be positively associated with negative affect at the within-person level. This proposition has been supported with respect to race and sexual orientation at the within-person level (Hoggard et al., 2015; Mohr & Sarno, 2016) but has never been investigated in samples of Black LGBQ people or with respect to intersectional stressors. Second, as discussed previously, there is reason to believe that intersectional stressors may trigger both social identity conflict and negative ruminative thinking; thus, we expected negative IEs to be positively associated with identity conflict and with negative rumination at the within-person level. Third, consistent with the theory and research reviewed, we hypothesized that both identity conflict and negative rumination would be positively related to negative affect at the within-person level. Finally, we predicted significant indirect relations between negative IEs and negative affect through both identity conflict and negative rumination.

Research suggests that positive identity-related experiences predict decreased identity concerns (e.g., self-stigma, expectations of

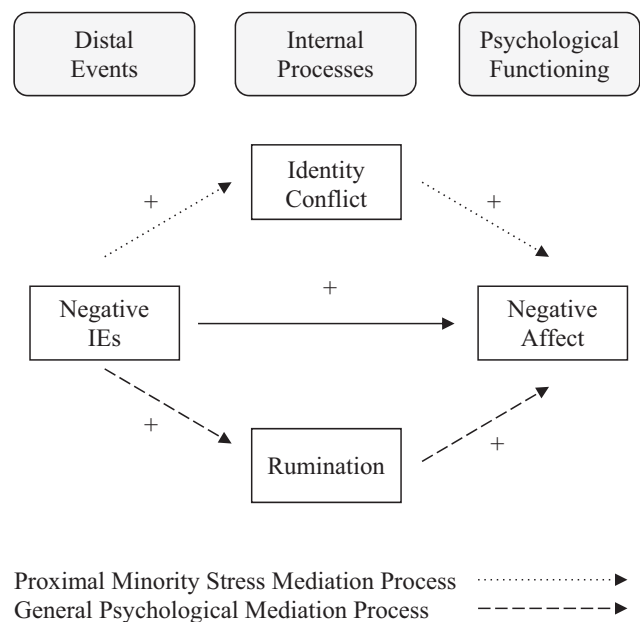


Figure 1. Intersectional conceptual model linking negative IEs and negative affect. IEs = intersectional experiences.

rejection) and improvement in mood at the within-person level in sexual minorities (Mohr & Sarno, 2016). That said, research on the role of positive identity-related experiences in mental health is limited. Even less developed is research on positive events that are intersectional (e.g., feeling pride at an event for queer people of color, meeting a Black same-gender loving role model). To contribute to this underresearched area, exploratory analyses were conducted on positive IEs, mirroring the above hypotheses on negative IEs. Specifically, we examined whether positive IEs predict concurrent and next-day positive affect and will test identity conflict and positive rumination—a variable akin to savoring, which represents the opposite of negative rumination—as possible mediators of these relations.

Although this study was designed to examine relations at the within-person level, similar hypotheses could be made at the between-person level. For example, just as a negative IE could be associated with a spike in daily rumination relative to a person's typical rumination levels, people who experience a higher-than-average number of negative IEs may experience high rumination levels compared with others. Recent daily diary studies (e.g., Mohr & Sarno, 2016) testing hypotheses at both levels of analysis uncovered unexpected findings that would have been difficult to predict *a priori*, including relations that were significant at the between-person level but not the within-person level (and vice versa). Thus, a series of exploratory analyses tested all of the within-person hypotheses at the between-person level.

Method

Participants

The sample consisted of 131 Black LGBQ-identified individuals residing within the United States, ranging from age 18 to 71 years ($M = 31.4$, $SD = 11.6$). All participants indicated their sexual orientation by selecting one of the following three checklist categories: gay ($n = 55$; 42.0%), lesbian ($n = 42$; 32.1%), and bisexual ($n = 34$; 26.0%). Notably, when asked to identify any other sexual orientation labels they strongly identify with, 83 participants (63.0%) provided additional identity labels, the most common of which were queer ($n = 42$; 32.1%), same-gender loving ($n = 17$; 13.0%), homosexual ($n = 9$; 6.9%), and pansexual ($n = 5$; 3.8%). Gender representation was as follows: 70 women (53.4%; all cisgender), 51 men (38.9%; 50 cisgender, one transgender), and 10 individuals of nonbinary genders (e.g., genderqueer, agender; 7.6%). In addition to identifying as Black/African American, 23 participants (17.6%) indicated having at least one secondary racial/ethnic identification, including (categories not mutually exclusive) 13 White/European American (9.2%), 11 Latinx/Hispanic (8.4%), three Native American/American Indian (2.3%), two Asian American/Pacific Islander (1.5%), and one Middle Eastern (0.8%). Highest education completed was as follows: eight completed high school (6.1%), one completed technical/vocational training (0.8%), 32 completed some college (24.4%), 10 completed an associate's degree (7.6%), 43 completed a bachelor's degree (32.8%), 31 completed a graduate degree (23.7%), four completed a professional degree (3.1%), and two did not specify their highest level of education (1.5%).

Procedure

This study and the corresponding recruitment protocol were approved by the Institutional Review Board of the University of Maryland, College Park. Participants were recruited between July 2013 and December 2017. Two methods of recruitment were used. First, participants from a previous cross-sectional study of identity-related experiences among Black LGBQ students (conducted by the authors) were invited to participate in this daily diary investigation as a paid follow-up study. These students were originally recruited via groups related to race and/or sexual orientation on U.S. college campuses. Recruitment was supplemented by contacting leaders of Black- and LGBQ-related community organizations, student clubs, and virtual groups in the United States, who then posted the study announcement on their electronic resources (e.g., mailing lists, social media outlets) and through relevant community-based recruitment opportunities (e.g., advertising the study in-person at a Black LGBQ Pride festival).

E-mail solicitations stated that our research team was looking for Black LGBQ people to participate in a week-long study concerning the ways daily experiences impact their well-being. Recipients were informed that inclusion criteria for the study were as follows: (a) being 18 years of age or older, (b) currently living within the United States, (c) identifying as Black or African American, and (d) identifying as LGBQ. Recipients were informed of the daily diary nature of the study as well as the compensation protocol. Individuals interested in the study were sent an eligibility survey; those who met inclusion criteria received an e-mail to schedule their study period.

This study used a daily diary format in which participants logged onto a brief Internet survey once daily for 7 consecutive days. Participants received daily messages at 6 PM ET with individualized survey links (which remained active until 5:59 AM ET the following day). The message requested that they complete the survey shortly before going to sleep. On the first day of participation, participants completed an online informed consent process and demographic questionnaire before completing the main study measures, which were designed to be completed every evening. Most of the daily surveys (80%) were finished in less than 20 min ($M = 14.10$ min). If a respondent failed to complete a survey, a modified reminder e-mail was sent the next day encouraging them to participate the following day. If a participant did not respond for 3 consecutive days, they received an e-mail reminding them that that missing five surveys disqualified them from further participation in the study. To encourage participation in this week-long survey, respondents earned \$1 per survey for completing the first five surveys and \$5 per survey for completing the sixth and seventh surveys.

Measures

Daily surveys first featured measures of affect, rumination, and identity conflict over the previous 24 hr. Participants then viewed questions related to experiences over the past 24 hr, assessing: (a) positive IEs, (b) negative IEs, (c) positive nonintersectional experiences, and (d) negative nonintersectional experiences.

Psychological health variables. Twenty-four items from the Positive and Negative Affect Scale–Expanded Form (Watson & Clark, 1994) were used to measure negative affect and positive affect. Each day, participants indicated how they felt during the

last 24 hr by responding to 16 negative emotions (e.g., scared, alone) and eight positive emotions (e.g., bold, joyful) on a fully anchored scale ranging from 1 (*very slightly or not at all*) to 5 (*extremely*). Subscales were scored by averaging item responses (higher scores indicating stronger affect). In the present study, Cronbach's alpha coefficients for positive affect and negative affect were .94 and .92, respectively. An array of validity evidence has accrued for these scales based on associations with similar measures and convergence between self-reports and peer reports of affect (Crawford & Henry, 2004; Watson & Clark, 1994). Past studies have used negative affect scores to assess psychological distress (e.g., Hatzenbuehler, Dovidio, et al., 2009), given their convergence with established measures of depression and anxiety (Watson & Clark, 1992).

Identity conflict. The 6-item Conflicts in Allegiances Scale (Sarno et al., 2015) was used to assess conflict between one's Black and LGBQ identities. Participants responded to items (e.g., "I felt little or no conflict between my Black identity and my identity as LGB") on a fully anchored 7-point rating scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The six item scores were averaged to create participants' daily identity conflict score, with higher scores representing a greater level of dissonance between their racial and sexual identities. Cronbach's alpha was .84 in the present investigation. Validity of the Conflicts in Allegiances Scale has been supported through positive associations with measures of racism within LGBQ communities and indicators of sexual orientation identity strength (Sarno et al., 2015).

Negative and positive IEs. Negative IEs (distal stressors) and positive IEs (distal supports) were assessed by asking participants to indicate whether they "experienced any [positive/negative] events or situations over the last 24 hours that were related in some way to being both Black and LGBQ." Participants were asked to consider "both minor, everyday experiences as well as more intense, major events." If endorsed, participants were asked to briefly describe the event in five sentences or less (focusing on the event with the biggest impact on them if multiple events occurred), explaining (a) why they consider the event to be [positive/negative] and (b) why it is related to being both Black and LGBQ. After providing an IE description, participants reviewed a list of common categories of positive or negative IEs and selected a checkbox next to any categories that described their event; a write-in option was also provided. The three items used to assess negative IEs—including the checkbox items we provided—can be found in the Appendix. Positive IEs were measured in the same manner.

Some descriptions did not appear consistent with the definition of an IE put forth in this study. Thus, three raters familiar with intersectionality and identity-salient experiences among LGBQ people of color were asked to read each participant-identified and the corresponding checkboxes that the participant selected, if any, including any write-in explanations. Then they were asked to rate the IE on a fully anchored 5-point rating scale ranging from 0 (*very certain it is not intersectional, no substantial doubts*) to 5 (*very certain it is intersectional, no substantial doubts*). Rater responses for each participant IE were averaged. Estimated reliability was .85 for the averaged ratings of the negative IEs and .93 for averaged ratings of the positive IEs (based on the intraclass correlation coefficient [ICC], two-way random effects absolute agreement model; Shrout & Fleiss, 1979). When the average rater score was 0, the experience was not coded as an IE in the final data set;

all other responses were coded as IEs (0 = *no IE reported*, 1 = *IE reported*). This resulted in the recoding of two of the 99 reported negative IEs (2.0%) and 13 of the 276 reported positive IEs (4.5%) to 0 (*no IE reported*).

Negative and positive rumination. A slightly modified version of the 8-item Negative and Positive Work Rumination Scale (Frone, 2015) was used to assess daily negative and positive ruminative thoughts. The language of the original items (e.g., "How often do you replay negative work events in your mind even after you leave work?") was adapted to remove references to work and to reflect a focus on the current day (e.g., "Today, how often did you replay positive events in your mind?"). Participants responded to four negative and four positive rumination items on a fully anchored 4-point rating subscale ranging from 1 (*often*) to 4 (*never*). Negative and positive rumination subscales were scored by averaging item responses (after reverse scoring), with higher scores representing elevated rumination ($\alpha = .94$ and $.92$ in the present study, respectively). The negative work rumination subscale was positively correlated with measures of negative affect, emotionally unpleasant work, and heavy alcohol use. The positive subscale has been shown to be positively associated with positive affect and negatively associated with emotionally unpleasant work and heavy alcohol use (Frone, 2015).

Filler measures. If participants did not indicate having a positive or negative IE, participants were presented with filler items designed to require approximately the same amount of time to complete as the event-related items. The aim was to avoid a situation in which participants might underreport IEs to shorten the length of the survey. When participants had no positive IE to describe, they were asked to identify which of several contexts (e.g., work, neighborhood) made them feel most positive that day. They were then asked to write about their selection and respond to three related multiple-choice questions. A similar set of questions was presented when no negative IE was described, except the focus was on negative environments.

Statistical Analyses

Control variables. Because time-related linear trends can occur as the result of repeated daily measurements (Ong, Fuller-Rowell, & Burrow, 2009), day of participation was coded (1 for *first day*, 2 for *second day*, etc.) to control for this variable at the within-person level. In the temporal within-person models, previous day scores of outcome variables (i.e., affect scores) and mediators were included. Finally, dichotomous variables were created indicating the daily occurrence of positive and negative events "over the last 24 hours that were unrelated to being both Black and LGBQ" (0 = *did not occur*; 1 = *did occur*), which permitted us to control for a general propensity for positive and negative experiences. Participants were informed that such events can fall into three categories: events totally unrelated to racial identity and sexual orientation, events involving race but not sexual orientation, and events involving sexual orientation but not race. Corresponding examples were provided to promote comprehension.

Multilevel modeling. Random intercept multilevel models were used to examine relations among variables at both the within-person level (Level 1) and between-person level (Level 2). Predictor and mediator variables were decomposed into within-person and between-person components that were then entered simulta-

neously into the multilevel regression. The within-person component was created by centering the variable at the mean for each person, whereas the between-person component was created by aggregating daily scores into a person-level mean. This approach yields what Preacher, Zyphur, and Zhang (2010) refer to as the unconfounded multilevel model, that is, a model that disentangles effects at the two levels of analysis. Covariates also were included in each model. Within- and between-person versions of the events unrelated to identity were created in the manner above. Day of participation was entered as a predictor in the Level 1 portion of each model (after within-person centering the variable). To test the hypothesized mediated effects, the multilevel regression model described above was extended to a simple multilevel path analysis (Krull & MacKinnon, 2001). For each mediation model, the paths from IEs to the mediator (path *a*), mediator to affect (path *b*), and IEs to affect (path *c'*) were estimated at both the within-person and between-person levels of analysis. The indirect path at each level of analysis was estimated by calculating the product of the coefficients for paths *a* and *b* and was tested through estimation of 95% confidence intervals using the Monte Carlo method, which has been found to perform comparably with other methods (e.g., nonparametric bootstrap, distribution of product) and—in contrast with other methods—is easily executed with multilevel data (Preacher & Selig, 2012). These confidence intervals were computed using an online utility developed by Selig and Preacher (2008). Nonnormality and missing data were handled with robust full information maximum likelihood estimation using Mplus software (version 7.1).

Results

Across all participants, data from 849 days were submitted ($M = 6.7$, $SD = 0.85$, range = 3 to 7). Negative IEs were reported on 97 study days (11.4% of total days) and positive IEs were reported on 263 study days (31.0% of days). The ICC was estimated for the main continuous variables. The ICC was greatest for positive affect (.65), suggesting that more of the variance in positive affect was due to stable individual differences than within-person variation. ICCs indicated that variability because of between-person differences was roughly equal to variability of within-person fluctuations for identity conflict (.55), positive rumination (.55), and negative affect (.51). The relatively low ICC for negative rumination (.29) indicated most of the variance re-

sulted from differences within a person from day-to-day. For further descriptive statistics of main study variables, see Table 1.

Bivariate Relations Among Main Variables

Bivariate correlations were obtained from a standardized version of a multilevel model in which all of the main variables were allowed to covary (see Table 1). Inspection of within-person associations revealed a number of significant relations among negative IEs, hypothesized mediators (identity conflict, negative rumination), and negative affect. As hypothesized, negative IEs were positively associated with identity conflict, negative rumination, and negative affect. Also, both identity conflict and negative rumination were positively associated with negative affect. Exploratory analyses at the between-person level revealed this same pattern of relations with one exception: Negative IEs were unrelated to negative rumination at the between-person level. Also, although no formal hypotheses were made for positive IEs, the correlates of this variable generally conformed to expectations. Positive IEs were positively associated with positive rumination and positive affect at the within- and between-person levels. Regarding the potential mediators, positive rumination (but not identity conflict) was associated with positive affect in the expected direction at both levels of analysis.

Multilevel Mediation Models Linking IEs and Affect

Eight multilevel indirect effects based on concurrent associations among variables were tested. First, in separate analyses, identity conflict and negative rumination were each tested as a potential mediator of the association of negative IEs and negative affect. Similarly, identity conflict and positive rumination were each tested as a potential mediator of the association between positive IEs and positive affect. These four indirect effects were tested at the within- and between-person levels, resulting in eight potential concurrent indirect effects.

In a separate set of analyses, the four within-person indirect effects were also examined in a temporal manner, in which the direct and indirect relations between IEs and next-day affect were examined. When testing the mediators, there was a choice to be made regarding whether the given mediator score should come from the same day as the (a) predictor (e.g., negative IEs) or (b) next-day outcome (e.g., negative affect). Both versions were tested and generated

Table 1
Univariate and Bivariate Descriptive Statistics for Main Variables

Variable	<i>M</i>	<i>SD</i>	ICC	Possible range	Observed range	1	2	3	4	5	6	7
1. Negative IEs	0.12	.16	—	0.00–1.00	0.00–0.71	—	.26**	.22*	.02	–.05	.37***	–.02
2. Positive IEs	0.32	.25	—	0.00–1.00	0.00–1.00	.09	—	–.01	.15	.25*	–.02	.30***
3. Identity conflict	2.06	1.03	.55	1.00–7.00	1.00–5.06	.22***	.04	—	.31**	.00	.30**	–.11
4. Negative rumination	2.30	.53	.29	1.00–4.00	1.00–3.75	.17*	.06	.11	—	–.04	.51***	–.27*
5. Positive rumination	2.82	.61	.55	1.00–4.00	1.00–4.00	–.03	.14**	–.05	–.03	—	–.19	.63***
6. Negative affect	1.51	.46	.51	1.00–5.00	1.00–3.17	.26***	.04	.18**	.26**	–.24***	—	–.21**
7. Positive affect	2.87	.90	.65	1.00–5.00	1.07–5.00	–.11**	.14***	.01	–.13*	.44***	–.20***	—

Note. IE = intersectional experiences; ICC = intraclass correlation coefficient. Means and standard deviations reflect daily variables aggregated to the person level. Within-person correlations are below the diagonal; between-person correlations are above the diagonal.

* $p < .05$. ** $p < .01$. *** $p < .001$.

identical outcomes: Contrary to hypotheses, no time-lagged analyses yielded significant results. Thus, the results in this section will focus on the eight concurrent mediation models.

Mediation of the link between negative IEs and negative affect. Concurrent relations between negative IEs and negative affect—as well as the mediating roles of identity conflict and rumination—were analyzed at the within- and between-person levels. Findings for each of the models are included as a part of Figure 2 and described separately below, starting with the model featuring identity conflict and moving to the model featuring negative rumination. The focus of these analyses was on the hypothesized within-person effects; however, between-person findings are presented to advance knowledge regarding individual differences in IEs.

Model for identity conflict. Mirroring the pattern of bivariate correlations, the direct effect of negative IEs on negative affect emerged at both levels of analysis in the mediation model. As expected, at the within-person level, participants had higher than usual levels of negative affect on days featuring negative IEs. Furthermore, it was found that participants who had the highest levels of negative affect across days were more likely than others to report negative IEs, reflecting a between-person effect. Negative IEs also predicted identity conflict at the between- and within-person levels. As hypothesized, participants had higher than usual levels of identity conflict on days featuring negative IEs, reflecting a within-person effect. At the between-person level, participants

who had the highest levels of identity conflict across days were more likely than others to report negative IEs. Relations between identity conflict and negative affect emerged at both levels of analysis as well. As expected, at the within-person level, participants had higher than usual levels of negative affect on days featuring higher levels of identity conflict. At the between-person level, participants who reported greater identity conflict also had the highest levels of negative affect. Finally, whether negative IEs indirectly influence variation in negative affect through their association with identity conflict was tested at both levels of analysis. Results demonstrated the expected indirect effect: Identity conflict mediated the concurrent daily association between negative IEs and negative affect at the within-person level. This indirect effect was not found at the between-person level.

Model for negative rumination. The direct effects of negative IEs on negative affect were the same as those found in the model for identity conflict. The association between negative IEs and rumination was found at the within-person level but not the between-person level. In other words, participants had higher than usual levels of negative rumination on days featuring negative IEs, but participants who had higher numbers of negative IEs across days were not more likely than others to report greater negative rumination overall. Relations between negative rumination and negative affect emerged at both levels of analysis. As hypothesized, at the within-person level, participants reported higher negative affect on days featuring increased negative rumination. The

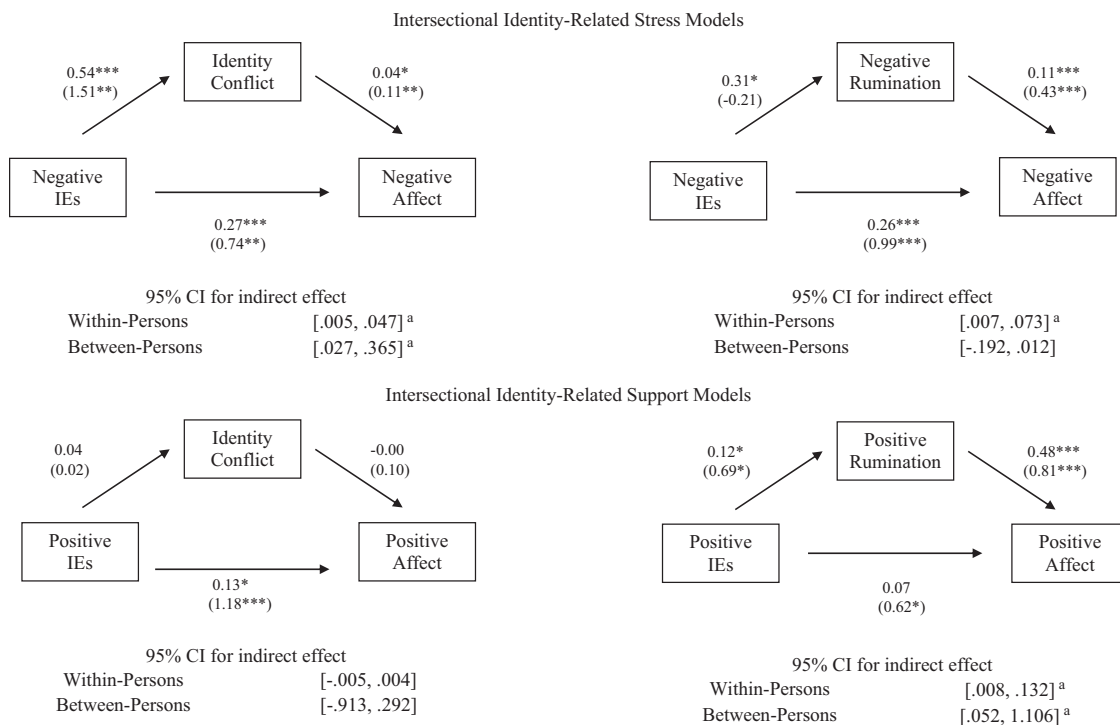


Figure 2. Within- and between-person level direct and indirect effects of intersectional events (IEs) on affect. For each pair of path coefficients, those on top are from the within-person model (Level 1) and those on the bottom in parentheses are from the between-person (Level 2) model. All models included day of study and general positive and negative experiences as covariates. All path coefficients and indirect effect estimates are unstandardized. CI = confidence interval. ^a = CI does not include zero, indicating a significant indirect effect. * $p < .05$. ** $p < .01$. *** $p < .001$.

corresponding between-person effect indicated that participants who had the highest levels of negative rumination also had the highest levels of negative affect. Finally, the hypothesis that IEs indirectly influence variation in negative affect through their impact on negative rumination was also tested. Results demonstrated an indirect effect at the within-person level in which negative rumination mediated the concurrent association between negative IEs and negative affect. This indirect effect was not found at the between-person level.

Mediation of the link between positive IEs and positive affect. All analyses examining positive IEs were exploratory, as noted above. Concurrent relations between positive IEs and positive affect—as well as the mediating roles of identity conflict and positive rumination—were analyzed at the within- and between-person levels. Findings for each of the two models are described separately below, starting with the model featuring identity conflict and moving to the model featuring positive rumination (see Figure 2).

Model for identity conflict. A direct effect between positive IEs and positive affect emerged at both levels of analysis in the mediation model. The within-person relation suggested that participants had higher than usual levels of positive affect on days featuring positive IEs. Furthermore, reflecting a between-person effect, participants who were more likely than others to report positive IEs had higher levels of positive affect across days. In contrast, positive IEs did not predict identity conflict at the between- or within-person levels. Furthermore, no association emerged between identity conflict and positive affect at the between- or within-person levels. A mediation model in which positive IEs indirectly influence variation in positive affect through its association with identity conflict was also tested. Indirect effects were not detected at the between- or within-person levels.

Model for positive rumination. A direct positive effect of positive IEs on positive affect was found at the between-person level (but not the within-person level) in the mediation model. In other words, although participants did not endorse higher than usual levels of positive affect on days featuring positive IEs (after controlling for positive rumination), those who had the highest levels of positive IEs across days were more likely than others to report positive affect. Relations between positive IEs and positive rumination emerged at both levels of analysis. Said differently, participants had higher than usual levels of positive rumination on days featuring positive IEs (within-person effect), and participants who were more likely than others to report positive IEs had higher levels of positive rumination across days (between-person effect). Similarly, positive rumination was positively associated with positive affect at both levels of analysis as well. Participants had higher than usual levels of positive affect on days featuring elevated positive rumination (within-person level), and participants who had higher levels of positive rumination also had increased levels of positive affect (between-person level). Finally, whether positive IEs indirectly influence variation in positive affect through their association with positive rumination was tested. Positive rumination mediated the association between positive IEs and positive affect when examined day to day (within-person level) and over the course of the study (between-person level).

Discussion

The body of empirical work on the nature, prevalence, and impact of intersectional stressors among LGBQ people of color remains underdeveloped. The present study was designed to contribute to this area of inquiry by examining IEs and identity conflict as they occurred in the everyday lives of Black sexual minorities and to test paths through which IEs may influence daily well-being. Moreover, the study extended work in this area by examining identity-supportive IEs that may contribute to resilience among Black LGBQ people. The present study adapted the minority stress theory (Meyer, 2003) and the psychological mediation framework (Hatzenbuehler, 2009) by replacing single-identity distal and proximal stress variables with intersectional constructs: that is, negative IEs and identity conflict, respectively. Both of these variables predicted psychological distress at the within- and between-person levels, above and beyond the frequency of other negative daily events. Also, identity conflict helped explain the relation between daily negative IEs and psychological distress. Thus, this study adds to growing minority stress research demonstrating that not only do distal and proximal stress variables predict health independently but also that links between distal stress and psychological health are mediated by proximal stressors (Feinstein et al., 2012; Velez et al., 2013). Findings also suggest there is a large within-person component to identity conflict, which has been theorized as a relatively stable construct among LGBQ racial minorities (Morales, 1989).

The second mediator tested (negative rumination) was found to help explain the relation between daily negative IEs and negative affect at the within-person level. This finding builds on research demonstrating that, among Black and LGBQ populations, respectively (Hatzenbuehler, Dovidio, et al., 2009; Hatzenbuehler, Nolen-Hoeksema, et al., 2009), the relation between negative identity-related events and distress is mediated by ruminative processes.

Results from the positive IE models suggested that that identity-related support may be as important as identity-related stress in understanding the experience and well-being of Black LGBQ people. Positive IEs were correlated with positive affect at the within- and between-person levels. Moreover, Black LGBQ participants in this study reported positive intersectional events at nearly three times the rate of negative events, consistent with research on nonintersectional identity-related events (e.g., experiences related to sexual orientation; Mohr & Sarno, 2016).

Results for indirect effects in the positive IE model differed from those in the negative IE model. First, identity conflict did not mediate the relation between daily positive IEs and positive affect. One possible explanation is that identity conflict is the one variable in this study for which there was no mirror-image variable reflecting the same construct but with a positive valence. An indirect effect might have been found with a positive version of identity conflict (e.g., identity integration). Alternatively, identity conflict may operate similarly to another self-referential psychological variable—self-esteem—which (a) has stable and unstable components and (b) may be more greatly predicted by daily negative events than positive events (Kernis, 2005). In contrast, positive rumination explained the relation between positive IEs and positive affect at both the within-person level (full mediation) and between-person level (partial mediation), consistent with evidence

that state and trait measures of savoring (i.e., positive rumination) explain the link between positive events and happiness (Jose, Lim, & Bryant, 2012). This adds to research on the positive aspects of marginalized identity configurations (Bowleg et al., 2016).

Although not central to the main study hypotheses, the finding that negative and positive IEs were positively correlated at the between-person level (but not the within-person level) is interesting. There are many potential explanations for the fact that some individuals may be more prone to report IEs. Black LGBTQ individuals may differ in the frequency of intersectional experiences based on factors influencing the opportunity to have an IE (e.g., the diversity of their social environments, their level of outness as a sexual minority). Alternatively, some people may be more familiar with the concept of intersectionality and thus more likely to appraise daily events as intersectional regardless of valence. Relatedly, Black LGBTQ people who experience their race and sexual orientation as “united identities” (Hunter, 2010, p. 85) may be predisposed to have positive and negative IEs because of the increased salience of this identity intersection.

Although links between discrimination and next-day psychological distress have been demonstrated in studies focusing on race alone (Torres & Ong, 2010), no such temporal relations were detected in the present intersectional study. Although this could mean that no such time-lag associations exist, there are other possible explanations, including power considerations (e.g., the aforementioned study featured nearly 25% larger sample than the present study). Alternatively, time-lag associations may exist but not endure long enough (at a high enough level) to be captured by the next day’s survey. One study found increases in depressive symptomatology among a Black sample after a race-related stressful event, followed by a gradual decline in these symptoms over the next 2 days (Hoggard et al., 2015). Perhaps the duration of intersectional stress is shorter, meaning more frequent measurements (e.g., every 8–12 hr) may have been necessary to detect the temporal relationships between variables. Alternatively, results may have been influenced by our focus on broad dimensions of affect. Indeed, the lagged effects observed in the aforementioned research were all in studies examining depressive symptomatology. Ecological momentary assessment research using more frequent assessments and a variety of outcomes may clarify temporal relations between IEs and well-being.

Study Limitations

Although efforts were taken to recruit a diverse sample for this study, participants likely do not represent the full spectrum of Black LGBTQ people and experiences in the United States. Relatedly, it is unclear how results may have been influenced by recruiting from student and community groups serving racial minority people, sexual minority people, or both. People who choose to join such organizations may differ from others in the variables examined in this study; similarly, group membership may itself influence awareness of IEs. It also is important to acknowledge the social identities that were present in the sample but unexamined. For example, this study combined various sexual minority identities (e.g., lesbian, gay, bisexual, queer) into a single group—ignoring the potential for in-group differences—and honed in on one intersection within the study pop-

ulation (i.e., race and sexual orientation) while ignoring other potentially salient identities (e.g., gender, religion, HIV status, socioeconomic status).

The study is also limited by our approach to assessing daily experiences. First, despite the value of studying individuals’ subjective assessments of identity-related stress (Jackson, 2017; Meyer, 2003), our reliance on self-reported experiences raises the possibility that some IEs may have been unreported because they occurred without participants’ awareness. Second, this study limited participants to one survey per day and one reported positive and negative IE per day, which made it impossible to examine within-day dynamics among variables or the impact of multiple same-day IEs. Third, this study is unable to determine whether or how IEs that are not easily categorized as good or bad (e.g., a Black heterosexual family member stating that being gay is a sin, followed by another family member intervening in an LGBTQ-affirming manner) are distinct from IEs that are uniformly positive or negative. These and other events that were not definitively good or bad (e.g., neutral IEs) may have been underreported in light of our method of assessing IEs. We also did not analyze positive and negative IEs based on how pleasing or distressing they were, which may have provided greater nuance. Finally, it is possible that collecting information about positive experiences before negative ones may have reduced the likelihood that participants described a negative experience by priming memory for positive experiences.

Directions for Future Research

This study’s findings highlight intriguing directions for future research. Future studies may examine whether aspects of well-being shown to be associated with racism or homophobia, respectively (e.g., anxiety, depression, substance use; Paradies, 2006; Pascoe et al., 2009) are similarly predicted by negative IEs. Such research may illuminate whether IEs predict different outcomes or produce different effect sizes concerning associations between stigma and distress, as compared with negative daily events based on racism or homophobia alone.

Research also is needed to identify additional intersectional proximal stressors faced by LGBTQ people of color. For example, scholars have suggested that sexual minority Black people may feel invisible within the respective Black and LGBTQ communities (Balsam et al., 2011; Bowleg, 2013), an experience that has been referred to as intersectional invisibility (Purdie-Vaughns et al., 2008). A similar concept—cultural homelessness—was popularized within research on multiracial populations and is described as “a sense of not belonging and not being accepted as members by any existing group because of their uniqueness; for them, all groups are out-groups” (Vivero & Jenkins, 1999, p. 12). Applied to the present study group, it is easy to imagine how experiencing low representation, conflicting social group norms, and pervasive discrimination within the larger Black or LGBTQ communities could leave Black sexual minorities feeling on the margins of their in-groups. Constructs such as intersectional invisibility or cultural homelessness may be ripe for study as proximal stressors among LGBTQ people of color.

It also would be useful to examine the differential prevalence and impact of various categories of IEs. For example, negative IEs featuring perceived discrimination (e.g., racism in LGBTQ commu-

nities) might be most strongly associated with anger, fear, and shame, whereas negative IEs focusing on invisibility (e.g., situations highlighting one's cultural homelessness) may most strongly predict sadness and loneliness. Also, identity conflict and rumination only partially mediated the within-person effect between negative IEs and negative affect, suggesting that there are unexamined mechanisms linking IEs to daily mood. Future research may identify additional intersectional and general psychological pathways between negative IEs and affect. Identifying moderators of this relation could support interventions to reduce intersectional stress.

Further inquiry may also illuminate differences in the frequency or associations of negative and positive IEs among Black LGBQ people within various subgroups, based on factors such as age, gender, religion, geography, or education level. The intersectional approach used in the present study could be profitably applied to other social groups, such as LGBQ individuals of other racial minority backgrounds (e.g., Asian, Latinx, Middle Eastern) and Black people with sexual and gender identities not included in this study (e.g., asexual, transgender, genderqueer).

Furthermore, just as experimental research has helped corroborate the assumed causal link between discrimination—based on racial identity and sexual orientation, respectively—and psychological distress (Paradies, 2006; Pascoe et al., 2009), such approaches can help demonstrate the effects of intersectional stigma-related stress. Laboratory-based research could use simulated IEs (e.g., video clips of a Black person displaying anti-LGBQ rhetoric or an LGBQ person displaying racist viewpoints) to clarify causal links within the intersectional stigma-related stress process proposed in this study—and offer a basis of comparison to stress related to racial identity or sexual orientation alone. Such research may also allow scholars to assess whether negative IEs set into motion a process of biological and physiological responses (e.g., compromised immune function, increased cortisol production, elevated cardiovascular activity), many of which have been associated with perceived discrimination (Pascoe et al., 2009) and are known to correlate with downstream physical and mental health outcomes (Pachankis, 2015).

Implications for Clinical Practice

Most broadly, the present study supports growing calls for clinicians to consider how seemingly distinct aspects of identity (e.g., race, sexual orientation) and subjugation (e.g., racism, heterosexism) combine to inform the lived-experience and psychosocial well-being of LGBQ people of color (American Psychological Association, 2012; Davila & Safren, 2017).

Results also underscore the dynamic nature of identity-related psychological variables. Models of racial minority and sexual minority identity formation often emphasize a gradual process of change in response to identity-salient experiences (Eliason & Schope, 2007; Quintana, 2007). The present study joins a small body of research (Eliason & Schope, 2007; Hoggard et al., 2015; Mohr & Sarno, 2016) suggesting that identity-related variables may ebb and flow from day to day based on daily events. Awareness of this dynamic component of identity opens up new intervention possibilities, such as helping individuals consider ways to minimize exposure to negative IEs and increase resilience in the face of negative IEs (e.g., via coping behavior).

Similar to minority health researchers, psychotherapists may focus on reducing stigma-related stress and overlook the possible benefits of increasing identity-affirming experiences among clients from marginalized backgrounds. The IE descriptions shared by participants underscore the value of supportive IEs for the daily well-being of Black LGBQ people. Participants referred to the personal importance of literature by and about Black LGBQ people (e.g., Audre Lorde, James Baldwin); Black LGBQ representation in art, media, and politics; safe and inclusive spaces (e.g., LGBQ-affirming churches, racially inclusive LGBQ nightclubs); and intersectional spaces that cater to LGBQ racial minorities (e.g., queer people of color organizations, community events for Black lesbians). Clinicians invested in supporting the well-being of LGBQ people of color may consider ways to boost the frequency of their positive IEs and prolong the savoring of such pleasurable events.

Notably, it has been suggested that Black Americans who better understand the dynamics and potential deleterious impact of the racial bias they face, may be better able to cope with such experiences (Sue, Capodilupo, & Holder, 2008). Thus, clinicians may play a role in helping Black LGBQ people understand the basic tenets of intersectionality and apply it to their life events in a manner that promotes resiliency. Also, this study asked participants to write about their IEs, which multiple participants reported enjoying. Research suggests that expressive writing about minority stressors can be therapeutic for sexual minorities who have had severe stressors (Pachankis & Goldfried, 2010). Writing may also help facilitate the savoring of positive IEs.

Conclusion

This microlongitudinal study demonstrates the potential value of recalibrating existing stigma-related stress frameworks to reflect the nuanced, intersectional lives of Black LGBQ people and raises intriguing possibilities for future stigma scholarship. Research is needed to further elucidate the intersectional stressors and vulnerabilities of people holding multiple stigmatized identities and assess the ameliorative power of positive IEs. Such intersectional research could strengthen current clinical and community interventions aimed to support the inclusion, resiliency, and psychosocial well-being of LGBQ people of color.

References

- American Psychological Association. (2012). Guidelines for psychological practice with lesbian, gay, and bisexual clients. *American Psychologist*, 67, 10–42. <http://dx.doi.org/10.1037/a0024659>
- Balsam, K. F., Molina, Y., Beadnell, B., Simoni, J., & Walters, K. (2011). Measuring multiple minority stress: The LGBT People of Color Microaggressions Scale. *Cultural Diversity & Ethnic Minority Psychology*, 17, 163–174. <http://dx.doi.org/10.1037/a0023244>
- Battle, J., & Crum, M. (2007). Black LGB health and well-being. In I. H. Meyer & M. E. Northridge (Eds.), *The health of sexual minorities: Public health perspectives on lesbian, gay, bisexual, and transgender populations* (pp. 320–352). New York, NY: Springer Science. http://dx.doi.org/10.1007/978-0-387-31334-4_13
- Beals, K. P., Peplau, L. A., & Gable, S. L. (2009). Stigma management and well-being: The role of perceived social support, emotional processing, and suppression. *Personality and Social Psychology Bulletin*, 35, 867–879. <http://dx.doi.org/10.1177/0146167209334783>

- Bowleg, L. (2008). When Black + lesbian + woman ≠ Black lesbian woman: The methodological challenges of qualitative and quantitative intersectionality research. *Sex Roles*, 59, 312–325. <http://dx.doi.org/10.1007/s11199-008-9400-z>
- Bowleg, L. (2012). The problem with the phrase women and minorities: Intersectionality-an important theoretical framework for public health. *American Journal of Public Health*, 102, 1267–1273. <http://dx.doi.org/10.2105/AJPH.2012.300750>
- Bowleg, L. (2013). “Once you’ve blended the cake, you can’t take the parts back to the main ingredients”: Black gay and bisexual men’s descriptions and experiences of intersectionality. *Sex Roles*, 68, 754–767. <http://dx.doi.org/10.1007/s11199-012-0152-4>
- Bowleg, L., English, D., Del Rio-Gonzalez, A. M., Burkholder, G. J., Teti, M., & Tschann, J. M. (2016). Measuring the pros and cons of what it means to be a Black man: Development and validation of the Black Men’s Experiences Scale (BMES). *Psychology of Men & Masculinity*, 17, 177–188. <http://dx.doi.org/10.1037/men0000026>
- Collins, P. H. (1990). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment*. New York, NY: Routledge.
- Crawford, J. R., & Henry, J. D. (2004). The positive and negative affect schedule (PANAS): Construct validity, measurement properties and normative data in a large non-clinical sample. *The British Journal of Clinical Psychology*, 43, 245–265. <http://dx.doi.org/10.1348/0144665031752934>
- Crenshaw, K. (1991). Mapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, 43, 1241–1299. <http://dx.doi.org/10.2307/1229039>
- Davila, J., & Safren, S. A. (2017). Introduction to the special section on sexual and gender minority health. *Journal of Consulting and Clinical Psychology*, 85, 1109–1110. <http://dx.doi.org/10.1037/ccp0000271>
- Eliason, M. J., & Schope, R. (2007). Shifting sands or solid foundation? Lesbian, gay, bisexual, and transgender identity formation. In I. H. Meyer & M. E. Northridge (Eds.), *The health of sexual minorities: Public health perspectives on lesbian, gay, bisexual and transgender populations* (pp. 3–26). New York, NY: Springer.
- English, D., Rendina, H. J., & Parsons, J. T. (2018). The effects of intersecting stigma: A longitudinal examination of minority stress, mental health, and substance use among Black, Latino, and multiracial gay and bisexual men. *Psychology of Violence*, 8, 669–679. <http://dx.doi.org/10.1037/vio0000218>
- Feinstein, B. A., Goldfried, M. R., & Davila, J. (2012). The relationship between experiences of discrimination and mental health among lesbians and gay men: An examination of internalized homonegativity and rejection sensitivity as potential mechanisms. *Journal of Consulting and Clinical Psychology*, 80, 917–927. <http://dx.doi.org/10.1037/a0029425>
- Frone, M. R. (2015). Relations of negative and positive work experiences to employee alcohol use: Testing the intervening role of negative and positive work rumination. *Journal of Occupational Health Psychology*, 20, 148–160. <http://dx.doi.org/10.1037/a0038375>
- Greene, B. (Ed.). (1997). Ethnic minority lesbians and gay men: Mental health and treatment issues. *Psychological perspectives on lesbian and gay issues: Vol. 3. Ethnic and cultural diversity among lesbians and gay men* (pp. 216–239). Thousand Oaks, CA: Sage Publications, Inc.
- Han, C. S., Ayala, G., Paul, J. P., Boylan, R., Gregorich, S. E., & Choi, K.-H. (2015). Stress and coping with racism and their role in sexual risk for HIV among African American, Asian/Pacific Islander, and Latino men who have sex with men. *Archives of Sexual Behavior*, 44, 411–420. <http://dx.doi.org/10.1007/s10508-014-0331-1>
- Hatzenbuehler, M. L. (2009). How does sexual minority stigma “get under the skin”? A psychological mediation framework. *Psychological Bulletin*, 135, 707–730. <http://dx.doi.org/10.1037/a0016441>
- Hatzenbuehler, M. L., Dovidio, J. F., Nolen-Hoeksema, S., & Phillips, C. E. (2009). An implicit measure of anti-gay attitudes: Prospective associations with emotion regulation strategies and psychological distress. *Journal of Experimental Social Psychology*, 45, 1316–1320. <http://dx.doi.org/10.1016/j.jesp.2009.08.005>
- Hatzenbuehler, M. L., McLaughlin, K. A., & Nolen-Hoeksema, S. (2008). Emotion regulation and internalizing symptoms in a longitudinal study of sexual minority and heterosexual adolescents. *Journal of Child Psychology and Psychiatry, and Allied Disciplines*, 49, 1270–1278. <http://dx.doi.org/10.1111/j.1469-7610.2008.01924.x>
- Hatzenbuehler, M. L., Nolen-Hoeksema, S., & Dovidio, J. (2009). How does stigma “get under the skin”? The mediating role of emotion regulation. *Psychological Science*, 20, 1282–1289. <http://dx.doi.org/10.1111/j.1467-9280.2009.02441.x>
- Hatzenbuehler, M. L., Phelan, J. C., & Link, B. G. (2013). Stigma as a fundamental cause of population health inequalities. *American Journal of Public Health*, 103, 813–821. <http://dx.doi.org/10.2105/AJPH.2012.301069>
- Hoggard, L. S., Byrd, C. M., & Sellers, R. M. (2015). The lagged effects of racial discrimination on depressive symptomology and interactions with racial identity. *Journal of Counseling Psychology*, 62, 216–225. <http://dx.doi.org/10.1037/cou0000069>
- Hunter, M. A. (2010). All the gays are White and all the Blacks are straight: Black gay men, identity, and community. *Sexuality Research & Social Policy*, 7, 81–92. <http://dx.doi.org/10.1007/s13178-010-0011-4>
- Jackson, S. D. (2017). “Connection is the antidote”: Psychological distress, emotional processing, and virtual community building among LGBTQ students after the Orlando shooting. *Psychology of Sexual Orientation and Gender Diversity*, 4, 160–168. <http://dx.doi.org/10.1037/sgd0000229>
- Jose, P. E., Lim, B. T., & Bryant, F. B. (2012). Does savoring increase happiness? A daily diary study. *Journal of Positive Psychology*, 7, 176–187. <http://dx.doi.org/10.1080/17439760.2012.671345>
- Kernis, M. H. (2005). Measuring self-esteem in context: The importance of stability of self-esteem in psychological functioning. *Journal of Personality*, 73, 1569–1605. <http://dx.doi.org/10.1111/j.1467-6494.2005.00359.x>
- Krieger, N. (2012). Methods for the scientific study of discrimination and health: An ecosocial approach. *American Journal of Public Health*, 102, 936–944. <http://dx.doi.org/10.2105/AJPH.2011.300544>
- Krull, J. L., & MacKinnon, D. P. (2001). Multilevel modeling of individual and group level mediated effects. *Multivariate Behavioral Research*, 36, 249–277. http://dx.doi.org/10.1207/S15327906MBR3602_06
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, 129, 674–697. <http://dx.doi.org/10.1037/0033-2909.129.5.674>
- Mohr, J. J., & Sarno, E. L. (2016). The ups and downs of being lesbian, gay, and bisexual: A daily experience perspective on minority stress and support processes. *Journal of Counseling Psychology*, 63, 106–118. <http://dx.doi.org/10.1037/cou0000125>
- Moradi, B., & Grzanka, P. R. (2017). Using intersectionality responsibly: Toward critical epistemology, structural analysis, and social justice activism. *Journal of Counseling Psychology*, 64, 500–513. <http://dx.doi.org/10.1037/cou0000203>
- Morales, E. S. (1989). Ethnic minority families and minority gays and lesbians. *Marriage & Family Review*, 14, 217–239. http://dx.doi.org/10.1300/J002v14n03_11
- Ong, A. D., Fuller-Rowell, T., & Burrow, A. L. (2009). Racial discrimination and the stress process. *Journal of Personality and Social Psychology*, 96, 1259–1271. <http://dx.doi.org/10.1037/a0015335>
- Pachankis, J. E. (2015). A transdiagnostic minority stress treatment approach for gay and bisexual men’s syndemic health conditions. *Archives of Sexual Behavior*, 44, 1843–1860. <http://dx.doi.org/10.1007/s10508-015-0480-x>
- Pachankis, J. E., & Goldfried, M. R. (2010). Expressive writing for gay-related stress: Psychosocial benefits and mechanisms underlying

- improvement. *Journal of Consulting and Clinical Psychology*, 78, 98–110. <http://dx.doi.org/10.1037/a0017580>
- Paradies, Y. (2006). A systematic review of empirical research on self-reported racism and health. *International Journal of Epidemiology*, 35, 888–901. <http://dx.doi.org/10.1093/ije/dyl056>
- Parent, M. C., DeBlanc, C., & Moradi, B. (2013). Approaches to research on intersectionality: Perspectives on gender, LGBT, and racial/ethnic identities. *Sex Roles*, 68, 639–645. <http://dx.doi.org/10.1007/s11199-013-0283-2>
- Pascoe, E. A., & Smart Richman, L. (2009). Perceived discrimination and health: A meta-analytic review. *Psychological Bulletin*, 135, 531–554. <http://dx.doi.org/10.1037/a0016059>
- Preacher, K. J., & Selig, J. P. (2012). Advantages of Monte Carlo confidence intervals for indirect effects. *Communication Methods and Measures*, 6, 77–98. <http://dx.doi.org/10.1080/19312458.2012.679848>
- Preacher, K. J., Zyphur, M. J., & Zhang, Z. (2010). A general multilevel SEM framework for assessing multilevel mediation. *Psychological Methods*, 15, 209–233. <http://dx.doi.org/10.1037/a0020141>
- Purdie-Vaughns, V., & Eibach, R. P. (2008). Intersectional invisibility: The distinctive advantages and disadvantages of multiple subordinate-group identities. *Sex Roles*, 59, 377–391. <http://dx.doi.org/10.1007/s11199-008-9424-4>
- Quintana, S. M. (2007). Racial and ethnic identity: Developmental perspectives and research. *Journal of Counseling Psychology*, 54, 259.
- Santos, C. E., & VanDaalen, R. A. (2016). The associations of sexual and ethnic-racial identity commitment, conflicts in allegiances, and mental health among lesbian, gay, and bisexual racial and ethnic minority adults. *Journal of Counseling Psychology*, 63, 668–676. <http://dx.doi.org/10.1037/cou0000170>
- Sarno, E. L., Mohr, J. J., Jackson, S. D., & Fassinger, R. E. (2015). When identities collide: Conflicts in allegiances among LGB people of color. *Cultural Diversity & Ethnic Minority Psychology*, 21, 550–559. <http://dx.doi.org/10.1037/cdp0000026>
- Selig, J. P., & Preacher, K. J. (2008). Monte Carlo method for assessing mediation: An interactive tool for creating confidence intervals for indirect effects [Computer software]. Retrieved from <http://quantpsy.org/>
- Shrout, P. E., & Fleiss, J. L. (1979). Intraclass correlations: Uses in assessing rater reliability. *Psychological Bulletin*, 86, 420–428. <http://dx.doi.org/10.1037/0033-2909.86.2.420>
- Sue, D. W., Capodilupo, C. M., & Holder, A. M. B. (2008). Racial microaggressions in the life experience of Black Americans. *Professional Psychology, Research and Practice*, 39, 329–336. <http://dx.doi.org/10.1037/0735-7028.39.3.329>
- Szymanski, D. M., & Meyer, D. (2008). Racism and heterosexism as correlates of psychological distress in African American sexual minority women. *Journal of LGBT Issues in Counseling*, 2, 94–108. <http://dx.doi.org/10.1080/15538600802125423>
- Torres, L., & Ong, A. D. (2010). A daily diary investigation of Latino ethnic identity, discrimination, and depression. *Cultural Diversity & Ethnic Minority Psychology*, 16, 561–568. <http://dx.doi.org/10.1037/a0020652>
- Velez, B. L., Moradi, B., & Brewster, M. E. (2013). Testing the tenets of minority stress theory in workplace contexts. *Journal of Counseling Psychology*, 60, 532–542. <http://dx.doi.org/10.1037/a0033346>
- Vivero, V. N., & Jenkins, S. R. (1999). Existential hazards of the multicultural individual: Defining and understanding “cultural homelessness.” *Cultural Diversity & Ethnic Minority Psychology*, 5, 6–26. <http://dx.doi.org/10.1037/1099-9809.5.1.6>
- Watson, D., & Clark, L. A. (1992). Affects separable and inseparable: On the hierarchical arrangement of the negative affects. *Journal of Personality and Social Psychology*, 62, 489–505. <http://dx.doi.org/10.1037/0022-3514.62.3.489>
- Watson, D., & Clark, L. A. (1994). *The PANAS-X: Manual for the Positive and Negative Affect Schedule—Expanded Form*. Unpublished manuscript, Department of Psychology, University of Iowa, Iowa City, IA.
- Wilson, P. A. (2008). A dynamic-ecological model of identity formation and conflict among bisexually-behaving African-American men. *Archives of Sexual Behavior*, 37, 794–809. <http://dx.doi.org/10.1007/s10508-008-9362-9>
- Zamboni, B. D., & Crawford, I. (2007). Minority stress and sexual problems among African-American gay and bisexual men. *Archives of Sexual Behavior*, 36, 569–578. <http://dx.doi.org/10.1007/s10508-006-9081-z>

(Appendix follows)

Appendix

Daily Assessment of Negative Intersectional Experiences

Take a moment and reflect upon whether you experienced any **NEGATIVE** events or situations over the last 24 hours that were **RELATED** in some way to being both Black and LGBTQ. Consider both minor, everyday experiences as well as more intense, major events.

1. Can you think of a negative event like this from today?

☐ Yes

☐ No

2. In five sentences or less, briefly describe one negative event or situation that you experienced in the last 24 hours that relates to your identity as a Black/LGBTQ person. If you experienced more than one negative event in the last 24 hours that was related to being both Black and LGBTQ, please choose the one that had the biggest impact on you. In this description, please be sure to explain why the experience was negative and state why it is related to being both Black and LGBTQ.

3. Keeping the event you described above in mind, please check the boxes that describe the experience. You may check more than one item. If none, describe your particular experience; simply leave all items blank.

☐ An event or situation in which you experienced racial prejudice/stereotypes in the LGBTQ community.

☐ An event or situation in which you attempted to minimize or downplay your black identity around non-black LGBTQ

people (e.g., changing appearance or mannerisms, concealing interests in black music or culture).

☐ An event or situation in which you received subtle or direct messages that all LGBTQ people are white (e.g., from friends, family, church, the media).

☐ An event or situation in which you felt anxious or uncomfortable during a conversation about race/ethnicity among non-Black LGBTQ people.

☐ An event or situation in which you experienced homophobic prejudice/stereotypes in the Black community.

☐ An event or situation in which you minimized or downplayed your sexual orientation around heterosexual Black people (e.g., hiding your sexual orientation, acting more masculine/feminine).

☐ An event or situation in which you received subtle or direct messages that all Black people are heterosexual (e.g., from friends, family, church, the media).

☐ An event or situation in which you felt anxious or uncomfortable during a conversation about sexual orientation among heterosexual Black people.

☐ An event or situation in which you felt that you must choose between your racial identity and your sexual orientation identity or rank one identity higher than the other.

☐ An event or situation in which you felt misunderstood, invisible, or isolated because you are both Black and LGBTQ.

☐ Other (please specify)

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