Out, But Not Free: A Systematic Review of the Emotional Challenges of Coming Out in the LGBTQI+ Community through the Lens of Minority Stress Theory

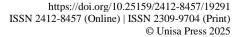
Andile Sokani

https://orcid.org/0000-0002-3835-3501 University of Mpumalanga, South Africa Andile.Sokani@ump.ac.za

Abstract

This study investigates the emotional challenges experienced by LGBTOI+ individuals during the coming-out process. The coming-out experience is often regarded as a personal journey, but it is significantly influenced by psychological and social stressors, such as discrimination, stigma, and fear of rejection. These factors can create emotional turbulence, manifesting as anxiety, depression, or a lack of self-acceptance, which can persist even after the coming-out process. The study uses minority stress theory as a framework to understand how external societal stressors, like societal rejection and discrimination, and internal stressors, such as internalised stigma, shape the emotional experience of coming out. The review systematically examines 103 academic and non-academic sources to explore key themes related to the emotional challenges of coming out. The main themes identified include family rejection, self-identity struggles, social stigma, and cultural influences, particularly how family and societal expectations affect emotional well-being. Additionally, the study explores how intersectionality, understood here as the overlapping of different identity factors such as culture, religion, and gender identity, influences the emotional challenges experienced by participants. However, intersectionality is not employed as a theoretical framework in this study; rather, it is used as a conceptual lens to highlight the complexity of participants' lived experiences. The findings suggest that coming out is not only about revealing one's sexual orientation or gender identity, but also about navigating complex emotional terrain shaped by fear of rejection and societal marginalisation. The emotional challenges are exacerbated by family dynamics, cultural norms, and religious beliefs. However, the study also highlights the emergence of supportive communities and inclusive environments that can offer







emotional resilience and coping strategies for individuals undergoing this process.

Keywords: coming-out challenges; LGBTQI+ mental health; minority stress; stigma; family rejection; intersectionality

Introduction

According to Hall, Dawes, and Plocek (2021), coming out represents a pivotal milestone in the self-identity journey of LGBTQI+ individuals, involving the disclosure of one's sexual orientation or gender identity to others. This deeply personal act carries profound emotional and social implications, particularly within contexts marked by marginalisation and prejudice (Doungphummes and Phanthaphoommee 2024; Goodyear et al. 2022; Mirabella et al. 2024). As a marginalised population, LGBTQI+ individuals often face discrimination, rejection, and mental health challenges during this transition (White, Sepúlveda, and Patterson 2021). This systematic review explores these multifaceted challenges including vulnerability to stigma, the influence of familial reactions, and disparities in healthcare access to highlight how they shape the coming-out experience and its psychological impact.

Familial relationships are especially influential in this process, as the presence or absence of parental support can significantly affect an individual's mental health and identity development. Research by Clark, Dougherty, and Pachankis (2022) demonstrates that parental acceptance fosters resilience and a positive sense of self, while rejection is associated with increased internalised prejudice against LGBTQ+ identities. In this study, *internalised prejudice* refers to the process by which individuals absorb and direct society's negative attitudes or stigma towards LGBTQ+ people inwardly, resulting in feelings of shame, guilt, or self-rejection. Mixed or ambiguous parental responses can further complicate the emotional landscape, intensifying the distress experienced during coming out (Bowden 2024; Mizielińska and Uryga 2024). Understanding how family dynamics intersect with LGBTQI+ identity formation is therefore critical to addressing broader mental health outcomes and supporting identity affirmation.

Healthcare interactions also present significant barriers for LGBTQI+ individuals, especially when disclosing their identities. Studies indicate that discrimination in healthcare settings leads many to withhold personal information, reducing their engagement with vital services and exacerbating existing health inequities (Du Bois et al. 2023). These challenges are compounded by intersectional factors such as socioeconomic status, which can intensify exclusion and vulnerability (Tinner et al. 2023). In addition, societal stigma rooted in historical and cultural frameworks continues to perpetuate implicit bias in sectors like healthcare and education, often triggered by vocal or behavioural cues linked to sexual orientation (Fasoli, Dragojevic, and Rakić 2023; Russell 2021). This review will synthesise existing research to provide insights for healthcare providers, social support systems, and policymakers, emphasising the urgent

need for inclusive and affirming environments that promote resilience and holistic well-being for LGBTQI+ individuals.

Literature Review

The coming-out process for LGBTQI+ individuals remains one of the most emotionally complex and socially significant experiences, often unfolding within contexts of familial, societal, and institutional scrutiny. Far from being a singular event, coming out involves continuous negotiation of identity in spaces that may not always be safe or supportive (Ahuwalia et al. 2024; Lau 2024; Mizielińska and Uryga 2024). Studies show that family responses are central to shaping this experience. Whipple (2024) argues that while affirming family reactions bolster mental health and identity integration, rejection can result in feelings of isolation, anxiety, and long-term emotional distress. This makes family education and sensitisation essential in creating environments that support LGBTQI+ identities from within the home.

Mental health literature highlights the psychological toll that internalised homophobia and societal stigma exert on LGBTQI+ individuals during the coming-out journey. Scholars such as Strumpf (2024) and Cipollina et al. (2024) have drawn strong correlations between concealment of identity and mental health challenges including depression and anxiety. Therapeutic interventions focused on affirmation and identity validation have proved effective in helping individuals resist internalised stigma (Balcilar 2023; Roum 2025). Yet stigma's pervasive presence in social relationships complicates healing and self-acceptance, suggesting that both interpersonal and structural interventions are required to mitigate the mental health burden LGBTQI+ people experience (Rees, Crowe, and Harris 2021).

Cultural and intersectional contexts further complicate the coming-out experience, as responses to sexual and gender identity disclosure are deeply influenced by ethnic, religious, and socio-cultural norms. Brownfield et al. (2018) demonstrate how bisexual women, for example, navigate compounded discrimination from both within and outside the LGBTQI+ community. Similarly, Farrugia (2018) and Sichel (2024) stress that individuals from conservative or collectivist cultures may face unique forms of silence, erasure, or even violence, making the availability of culturally relevant support systems critical. Understanding the intersecting forces of culture, gender, and sexuality can help expand how we approach advocacy and care for LGBTQI+ individuals from diverse backgrounds.

Healthcare access and provider attitudes also emerge as crucial dimensions in the coming-out narrative. Sileo et al. (2022) point out that fears of discrimination often deter LGBTQI+ individuals from disclosing their identities in clinical settings, leading to underutilisation of essential services. These concerns are magnified when individuals also face barriers related to race, class, or disability identities that intersect and intensify marginalisation (Xin et al. 2023). The COVID-19 pandemic brought these disparities into sharper relief, with studies by Wootton et al. (2024) and Gillani et al. (2024)

highlighting increased mental health crises due to isolation, service disruptions, and preexisting inequities. A shift towards culturally competent and intersectionally informed care models is vital to fostering trust and improving outcomes for LGBTQI+ populations.

The coming-out process is inextricably linked to broader social and structural conditions. Brock (2024) and White, Sepúlveda, and Patterson (2021) argue that renegotiating familial bonds and challenging school-based discrimination are integral to fostering well-being. Meanwhile, Butler (2022) highlights how school environments can either compound harm or serve as protective spaces, depending on the level of institutional support. The role of community networks, particularly those that affirm LGBTQI+ identities, emerges as a powerful counterbalance to rejection and stigma (Cohen 2023). Synthesising these themes, it is clear that coming out is not merely a personal declaration, but a socio-political act shaped by interconnected forces. Addressing these complexities requires holistic, intersectional strategies across families, communities, schools, and healthcare systems to ensure that LGBTQI+ individuals are embraced with dignity and supported in their pursuit of authenticity.

Theoretical Lens

This study adopts minority stress theory (MST), as conceptualised by Ilan Meyer (2013), to critically examine the psychological and social challenges encountered by LGBTQI+ individuals during the process of coming out. Minority stress theory was developed to explain why sexual and gender minorities experience higher rates of mental health difficulties compared to heterosexual and cisgender populations. The theory distinguishes between distal stressors, which are external experiences such as discrimination, harassment, and social exclusion, and proximal stressors, which are internal processes including anticipated rejection, identity concealment, and internalised negative attitudes towards LGBTQI+ identities (Meyer 2003). MST emphasises that the cumulative effect of these stressors can significantly impact psychological well-being, while protective factors such as supportive social networks, affirming relationships, and inclusive environments can mitigate these adverse effects.

The theory effectively illuminates how systemic marginalisation contributes to mental health disparities among sexual and gender minorities by distinguishing between distal stressors—external experiences such as discrimination, stigma, and rejection—and proximal stressors—processes that include fears of rejection, identity concealment, and internalised homophobia (Jaspal, Lopes, and Breakwell 2023; Meyer 2003). In MST, distal stressors refer to observable external events, such as family rejection, social discrimination, and workplace bias, whereas proximal stressors are internalised and include anticipatory stress, fears of disclosure, and internalised prejudice against LGBTQI+ identities. These interrelated stressors interact to shape the coming-out experience, highlighting that coming out is not merely a personal choice, but a context-dependent process influenced by both societal pressures and internal conflicts.

These interrelated stressors shape individuals' experiences of their identities, rendering coming out not merely a personal choice, but a complex and context-dependent act influenced by both societal pressures and internal conflicts. Through this theoretical lens, the study offers a nuanced understanding of how LGBTQI+ individuals navigate their identities within environments that may be unwelcoming or overtly hostile, shedding light on the emotional burden and identity negotiation that accompany the coming-out experience, particularly when negative reactions are anticipated from family, peers, or institutions (Chrisler 2025; Huang and Chan 2022). Minority stress theory further facilitates an exploration of the persistent mental health implications of such stress, including elevated levels of anxiety, depression, and psychological distress (Kamen et al. 2017; Scheer, Martin-Storey, and Baams 2020), while also highlighting the importance of supportive networks and identity-affirming practices as protective mechanisms against these adverse effects (Moreira, Navaia, and Ribau 2024). Applying MST in this study allows for a systematic analysis of the reviewed literature, linking external factors such as family rejection, cultural and religious pressures, and workplace discrimination with internalised stressors to explain mental health outcomes, including anxiety, depression, and psychological distress. The theory also highlights protective mechanisms, such as social support, affirming relationships, and inclusive environments, which were identified in the literature as pathways to resilience and reconciliation. By using MST, the study captures both the psychological burden and broader social dynamics that influence LGBTQI+ individuals' coming-out experiences, providing a robust theoretical lens for interpreting the findings. As such, this theoretical framework is instrumental in capturing both the psychological toll and the broader social dynamics that define the coming-out journey for LGBTQI+ individuals.

Methodology

This article employed a qualitative systematic literature review to examine the challenges faced by LGBTQI+ individuals during the coming-out process, enabling a structured and in-depth analysis of secondary data from academic and non-academic sources. The review focused exclusively on materials directly addressing this theme, thereby ensuring thematic coherence and methodological rigour. It should be noted that the review intentionally included a substantial proportion of international literature, given the limited availability of South African studies on LGBTQI+ coming-out experiences. The international literature was deliberately drawn from both the Global North and select studies from the Global South to provide a comparative perspective. Literature from the Global North reflected Western cultural, social, and policy contexts, while studies from the Global South offered insights into experiences shaped by non-Western cultural, religious, and socio-political environments. This distinction was crucial in understanding how societal attitudes towards gender and sexuality differ across regions and in highlighting contextual gaps, particularly in African scholarship. This broader inclusion was deliberate to provide a global comparative perspective while identifying contextual gaps in African scholarship.

To locate relevant literature, a systematic search strategy was developed and applied across four established databases, ScienceDirect, Sabinet, Google Scholar, and EBSCOhost, between January and June 2025. A combination of Boolean operators and targeted keywords such as "LGBTQI+ coming-out experiences," "family acceptance," "sexual identity disclosure," "cultural intersectionality," "mental health of LGBTOI+ individuals," and "healthcare access and stigma" was used to retrieve materials. The search results were managed through several systematic stages. First, duplicates were removed. Second, titles and abstracts were screened for topical relevance. Third, fulltext screening confirmed that each source aligned conceptually and methodologically with the study's objectives. Inclusion criteria required that sources be published in English between 1990 and 2025 and provide theoretical, empirical, or policy insights into LGBTQI+ coming-out experiences. Exclusion criteria removed sources that focused solely on heterosexual populations, discussed sexual orientation without reference to identity disclosure, or lacked conceptual depth. This process ensured that only the most pertinent and high-quality literature was included for analysis. Through this selection process, the final 103 sources comprised primarily international studies (approximately 75%) with a smaller proportion of African-focused research (approximately 25%). This balance was intentional, as it allowed for identification of both universal patterns in LGBTQI+ coming-out experiences and region-specific nuances. By explicitly considering the geographic origin of sources, the study ensures that cultural, social, and religious influences on coming-out experiences are interpreted within their appropriate contexts.

Literature was sourced from four established databases—ScienceDirect, Sabinet, Google Scholar, and EBSCOhost—and included recently published peer-reviewed journal articles, scholarly books, postgraduate dissertations, online reports, and credible non-academic articles. In total, 103 sources were analysed: 81 journal articles encompassing both qualitative and quantitative studies, two postgraduate dissertations, 10 book chapters, eight online reports, and two non-academic articles. The total of 103 sources was reached through this systematic screening process, which allowed for both inclusion of relevant literature and exclusion of non-pertinent materials, thereby enhancing the credibility and trustworthiness of the review. The process of thematic analysis followed three distinct stages. In the first stage, each source was read closely, and open coding was applied line by line to identify key ideas, recurring concepts, and notable patterns. In the second stage, similar codes were clustered into descriptive categories that reflected common issues or perspectives across studies. In the third and final stage, these categories were synthesised into broader analytical themes. Throughout this process, reflective memo-writing and iterative comparison were used to ensure consistency and to enhance the validity and trustworthiness of the findings. During thematic synthesis, careful attention was paid to contextual differences between studies from the Global North and the Global South. This allowed the study to account for how gender, sexuality, and social norms shape the coming-out process differently across diverse cultural and regional settings, thereby strengthening the applicability and relevance of the analytical themes. This approach ensured that themes presented in the findings were systematically derived from the data. The coding process involved careful reading, annotation, and categorisation, allowing for a transparent connection between the reviewed literature and the analytical themes. Iterative comparison across sources further strengthened the reliability of the identified patterns.

A three-stage thematic analysis was applied: initial line-by-line coding of findings, clustering of codes into descriptive categories, and synthesis of these categories into broader analytical themes. This process allowed for the identification of key thematic areas such as mental health, family dynamics, cultural intersectionality, healthcare barriers, and social stigma. As the study involved only secondary data and no human participants, ethical approval was not required, although ethical sensitivity was maintained throughout. This comprehensive methodology enabled the synthesis of diverse perspectives and contributed to a nuanced understanding of the complex and intersectional realities that shape LGBTQI+ individuals' coming-out experiences. The intentional inclusion of international studies helped provide a comparative lens and contextualise the findings beyond a single national setting, highlighting both universal and region-specific challenges.

Findings

The reviewed studies were critically synthesised and presented in alignment with the study's objective of exploring the challenges encountered by LGBTQI+ individuals during the coming-out process. The thematic synthesis of 48 reviewed sources revealed four interrelated themes and several subthemes that collectively illustrate the multifaceted and complex experiences shaping LGBTQI+ individuals' coming-out journeys. These themes include: (1) fear of rejection and internalised prejudice, which encapsulates the emotional distress and self-stigmatisation arising from societal and familial non-acceptance; (2) cultural and religious barriers, encompassing subthemes such as faith-based exclusion, family honour and communal expectations, and intersectional marginalisation, which reflect how deeply ingrained cultural and spiritual norms contribute to silencing and alienation; (3) emerging pathways of reconciliation and acceptance, which highlight resilience, self-affirmation, and the gradual evolution of inclusive familial and social relationships; and (4) workplace discrimination and inclusion efforts, which reveal the ongoing struggle for visibility, equal treatment, and institutional reform within professional settings. Together, these themes provide a nuanced understanding of how intersecting social, cultural, and structural forces influence the emotional and relational realities of coming out as LGBTQI+.

Challenges Facing the LGBTQI+ Community during the Coming-Out Process

According to Brock (2024), the coming-out process for members of the LGBTQI+ community is a complex and deeply personal journey, shaped by a range of social, cultural, and psychological influences. A key challenge highlighted in the literature is the pervasive fear of rejection from family and close social circles, which can

significantly affect an individual's willingness to disclose their sexual or gender identity. Research indicates that LGBTQI+ youth, particularly those in adolescence and early adulthood, are vulnerable to fears of abandonment and the loss of vital support networks upon coming out (DeChants et al. 2022; Lampe and McKay 2025; Mallon, Paul, and López 2022; Rand et al. 2021; Schultz, Zoucha, and Sekula 2022). This fear often intensifies feelings of isolation and adversely affects mental health, as the prospect of social rejection becomes more immediate during this period (Brock 2024). The emotional toll is compounded by internalised homophobia, which emerges as a significant psychological barrier within the coming-out experience. Numerous studies demonstrate that individuals frequently internalise society's negative attitudes towards LGBTOI+ identities, leading to self-stigma, emotional distress, and reluctance to come out (Bhatia 2024; Flores, Strode, and Haider-Markel 2025; Ghio, Malsch, and McGuigan 2025). These internal conflicts hinder not only self-acceptance but also broader social integration, as individuals struggle to align their private identities with societal norms, thereby perpetuating cycles of concealment and anxiety (Flores, Strode, and Haider-Markel 2025).

The second key finding of this research identifies the intersection of culture and religion as a significant factor shaping the experiences of LGBTQI+ individuals during the coming-out process, presenting unique challenges rooted in entrenched societal norms and deeply held spiritual beliefs. Libiran et al. (2024) argue that one of the core challenges stems from the widespread rejection of LGBTQI+ identities by religious institutions, which are often influential in communities where faith plays a central social role. Traditional religious views on sexuality and gender frequently lead to the marginalisation and condemnation of LGBTQI+ individuals, especially in societies where conservative values dominate (Joubert 2023; Lefevor et al. 2023; Lekwauwa, Funaro, and Doolittle 2023; Van Droogenbroeck and Spruyt 2021; Westwood 2022). For instance, Sonke Gender Justice (2024) highlights how in Lesotho, Christianity functions as a powerful socialising force that reinforces rigid gender roles, intensifying the difficulties LGBTQI+ persons face in disclosing their identities. The stigma institutionalised by religious norms extends beyond spiritual spaces into familial relationships, with family members often invoking religious doctrine to justify rejection or emotional distance after an individual comes out (Etengoff and Daiute 2014). This results in severe psychological consequences, such as depression, anxiety, and internalised stigma, especially among LGBTQI+ youth (Roe 2024). Furthermore, teachings that associate non-heteronormative identities with immorality or sin deepen feelings of guilt and shame (Gusha 2021). Many individuals internalise these messages, which hinders their willingness to disclose their identities out of fear of spiritual condemnation and familial disappointment, thus exacerbating emotional and psychological distress (Roe 2024). The societal pressure to conform to both religious expectations and gender norms further complicates this struggle, often making affirmation and acceptance appear unreachable.

Cultural perceptions further compound these religiously driven challenges, particularly in non-Western contexts where concepts such as family honour and communal identity are deeply entrenched. In many African, Asian, and Middle Eastern societies, the imperative to uphold familial and cultural honour can significantly hinder the comingout process, as individuals fear bringing shame to their families or being ostracised by their communities (Bekker 2023; Gul, Cross, and Uskul 2021; Gilligan and Akhtar 2006; LaSala 2010). These cultural imperatives place LGBTQI+ individuals in emotionally precarious positions, where they must navigate their personal identities against dominant expectations of heteronormativity and gender conformity. For those who also belong to racial and ethnic minority groups, the burden is further magnified through intersectionality, requiring them to simultaneously confront racism, cultural conservatism, and homophobia (Tuthill and Hill 2024). Cultural norms that enforce rigid gender roles and suppress sexual diversity can leave LGBTQI+ individuals feeling deeply alienated and unsupported (Binyamin 2022; Brown 2011; Cerezo et al. 2020; Venkataraman 2025; Wilchins 2019). The conflict between cultural obligations and personal authenticity often leads to an enduring internal battle. As Robinson (2015) and Roe (2024) note, religion can serve as both a source of comfort and deep conflict, prompting individuals to question their self-worth in light of spiritual and cultural teachings. This ongoing tension between faith, family, and identity contributes to longterm mental health challenges, including depression, anxiety, and spiritual disillusionment, highlighting how culture and religion act not only as external barriers but also as internalised sources of pain throughout the coming-out journey.

Despite the significant challenges posed by cultural and religious contexts, the reviewed literature revealed emerging pathways of reconciliation and acceptance through which LGBTQI+ individuals navigated the coming-out process. These pathways often involved gradual shifts in familial attitudes, the influence of inclusive faith communities, and growing social awareness that fostered empathy and understanding.

As Robinson (2015) argues, increasing visibility of LGBTQI+ people within religious spaces and the rise of more inclusive theological interpretations are gradually reshaping prevailing discourses. Etengoff and Daiute (2014) highlight how shifts in religious narratives have opened the door to more empathetic engagements with LGBTQI+ identities. A growing number of faith communities are beginning to adopt compassionate and accepting attitudes, fostering safer environments for individuals who seek to reconcile their faith with their sexual orientation or gender identity (Abiseid 2023; Compare et al. 2025; McGuire, Short, and Martin 2019; Palm and Gaum 2021; Rodriguez 2025). The support of affirming religious leaders and inclusive community networks is instrumental in facilitating acceptance, providing much-needed guidance for individuals navigating complex intersections of spirituality and identity. While the interplay of societal norms, familial expectations, and internalised religious beliefs continues to create profound and multifaceted barriers, efforts aimed at fostering dialogue and mutual understanding within religious institutions offer meaningful opportunities for healing and integration. These developments can empower LGBTQI+

individuals to embrace their identities without forsaking their cultural or religious affiliations, offering a path towards holistic self-acceptance and emotional well-being.

Discrimination against LGBTQI+ individuals extends beyond personal interactions and deeply impacts professional environments, where stigma manifests through microaggressions and systemic biases. Studies by Brennan (2017) and Davies and Greensmith (2024) confirm that many LGBTQI+ employees face hostile work settings that discourage openness about their identities. Fears of career setbacks or strained workplace relationships often lead individuals to remain closeted, reinforcing a cycle of concealment that negatively affects mental health and job satisfaction (Dhanani et al. 2024; Kulkarni 2022; Schwartzman and Neel 2025). This heteronormative culture is especially harmful when viewed through an intersectional lens, where overlapping identities based on race, gender, or socioeconomic status intensify experiences of marginalisation (Rodriguez 2024). The result is often elevated anxiety, depression, and isolation, highlighting the critical need for workplace transformation.

Addressing these systemic challenges requires comprehensive and sustained inclusion efforts. Research shows that implementing diversity, equity, and inclusion policies can reduce stigma and promote respectful, supportive environments for LGBTQI+ employees (Maji and Rajeev 2025; Rodriguez 2024; White, Sepúlveda, and Patterson 2021). Affirmative practices help foster authenticity, belonging, and engagement at work, while also dismantling structural barriers (White, Sepúlveda, and Patterson 2023). In addition, mental health-focused interventions tailored to LGBTQI+ experiences are vital to counteract the psychological toll of workplace discrimination (Davies and Greensmith 2024). Cultivating a truly inclusive organisational culture goes beyond policies—it requires valuing diversity as a driver of innovation and performance. Such environments not only protect individual well-being but also strengthen collaboration and unleash the full potential of a diverse workforce.

Discussion

The findings stress the deep emotional and psychological toll LGBTQI+ individuals face during the coming-out process, especially when there is a fear of rejection by family and society. Minority stress theory (Meyer 2003) explains how stigma causes unique stressors that intensify internal conflict, especially during adolescence and early adulthood when support is most needed (Brock 2024; DeChants et al. 2022). Anticipated rejection, particularly from family, is linked to increased depression and anxiety (Lampe and McKay 2025; Mallon, Paul, and López 2022). Internalised homophobia adds another layer, lowering self-worth and worsening mental health (Flores, Strode, and Haider-Markel 2025; Ghio, Malsch, and McGuigan 2025). These pressures, both internal and external, create a compounding psychological burden that hinders identity development and social integration.

Religious and cultural ideologies often deepen this stress, acting as chronic external pressures that legitimise exclusion through moral or spiritual justification. In societies

where religion shapes daily life, anti-LGBTQI+ sentiments are often reinforced through spiritual teachings (Lekwauwa, Funaro, and Doolittle 2023; Westwood 2022). Religious socialisation can foster hostility and lead to rejection by both faith communities and families (Etengoff and Daiute 2014; Libiran et al. 2024). This contributes to spiritual trauma and persistent mental distress (Gusha 2021; Roe 2024). In collectivist cultures, coming out is viewed as socially disruptive, tied to shame and family honour (Bekker 2023; LaSala 2010). For LGBTQI+ people with intersecting marginalised identities, such as racial or religious identities, the stress is even greater, leading to chronic anxiety and identity suppression (Tuthill and Hill 2024; Venkataraman 2025). These compounding stressors often silence individuals and delay self-acceptance.

Yet, inclusive religious discourses and shifting institutional practices can offer hopeful paths forward. LGBTQI+ visibility in affirming faith spaces is helping to challenge traditional norms and provide safer, supportive environments (McGuire, Short, and Martin 2019; Robinson 2015). According to the stress-buffering hypothesis, such support can reduce the impact of minority stress and improve mental health (Meyer 2003). Inclusive theologies grounded in compassion and justice provide new ways to affirm gender and sexual diversity (Abiseid 2023; Compare et al. 2025). Affirming religious leaders and supportive communities are key to reducing spiritual isolation and offering belonging (Palm and Gaum 2021). While cultural resistance remains strong, these changes signal important progress. With ongoing dialogue and support, LGBTQI+ individuals can begin to integrate their identities without sacrificing their faith or cultural ties, enabling greater resilience and emotional well-being.

Conclusion and Recommendations

The coming-out process for LGBTQI+ individuals is a complex journey, shaped by societal, cultural, and religious influences that often present profound challenges. Fear of rejection, internalised homophobia, and the intersection of religious and cultural norms create environments that hinder self-acceptance and exacerbate emotional distress. Cultural expectations regarding family honour and communal identity further intensify these pressures, particularly in contexts that stigmatise non-heteronormative identities. Despite these barriers, the literature indicates emerging pathways of reconciliation and acceptance. Increasing visibility and affirmation of LGBTQI+identities within both religious and cultural spaces provide some hope for inclusion. However, significant work remains to ensure fully safe and inclusive environments. Societies must actively address structural, institutional, and interpersonal discrimination to reduce stigma and support mental health.

To promote meaningful inclusivity, a multi-layered approach is essential. Religious and cultural institutions should adopt inclusive narratives, with leaders fostering acceptance and safe spaces for LGBTQI+ individuals. Educational initiatives in schools, workplaces, and communities are necessary to challenge stereotypes, reduce stigma, and enhance understanding of sexual and gender diversity. Strengthened workplace policies, including diversity, equity, and inclusion (DEI) initiatives and tailored mental

health support, can empower individuals to express their authentic identities while enhancing well-being and job satisfaction. Family support programmes are also vital, providing guidance that encourages unconditional support and mitigates rejection and emotional distress. By integrating these approaches at individual, institutional, and societal levels, communities can create environments where LGBTQI+ individuals are valued, supported, and able to navigate the coming-out process with dignity and resilience. The study underscores that while progress has been made, continued efforts are critical to address enduring barriers, promote mental health, and foster comprehensive inclusion.

References

- Abiseid, C. 2023. "LGBTQIA+ People and Religious Trauma." MSW diss., University of Arkansas. https://scholarworks.uark.edu/etd/4948/.
- Ahuwalia, D. C., P. Singh, H. Jami, E. Ummak, and E. Osin. 2024. "From Oppressive to Affirmative: Situating the Health and Well-Being of LGBTIQ+ People as Impacted by Systemic and Structural Transitions in Russia, Türkiye, Pakistan, and India." In "Reimagining LGBTIQ+ Research—Acknowledging Differences across Subpopulations, Methods, and Countries," edited by T. Hässler, A. Gonzalez, J. Anderson, N. Fogwell, Y.-C. Wang, special issue, *Journal of Social Issues* 80 (3): 1056–1078. https://doi.org/10.1111/josi.12644.
- Balcilar, B. 2023. "Mediating Role of Perceived Social Support in the Relationship between Internalized Homophobia, Depressive Symptoms, and Self-Esteem among LGBTI+ Individuals." MA diss., İzmir University of Economics. https://gcris.ieu.edu.tr/bitstream/20.500.14365/5086/1/817063.pdf.
- Bekker, S. 2023. "An Intersectional Analysis of the Systemic Discrimination Confronting LGBTQ+ Individuals in the Middle East: The Cases of Iran, Türkiye, and Egypt." MA diss., University of the Free State. http://hdl.handle.net/11660/12450.
- Bhatia, I. 2024. "Psychological Safety and Its Correlates among LGBTQIA+." *International Journal of Interdisciplinary Approaches in Psychology* 2 (8): 115–208. https://psychopediajournals.com/index.php/ijiap/article/view/517/404.
- Binyamin, G. 2022. "Religion, Gender, and Profession: The Role of Intersectionality in Developing a Professional Identity." *Journal of Management, Spirituality and Religion* 19 (5): 453–474. https://doi.org/10.51327/SNPW7818.
- Bowden, M. T. 2024. "To Love Me for Me: Reflections of Parent Acceptance and Self-Acceptance of Sexual Minority Young Adults." PhD diss., Northern Arizona University.
- Brennan, N. 2017. "LGBTQI Guidance Counsellors' Experiences of Negotiating Their Personal and Professional Identities in Second-Level Schools in Ireland." MA diss., University of Limerick. https://researchrepository.ul.ie/handle/10344/6481.

- Brock, M. 2024. "Supporting LGBTQ+ Coming Out: Environmental Factors and Social Work Implications." MSW diss., California State University. http://hdl.handle.net/20.500.12680/w3763g690.
- Brown, M. A. 2011. "Coming Out Narratives: Realities of Intersectionality." PhD diss., Georgia State University. https://scholarworks.gsu.edu/server/api/core/bitstreams/97e32b3f-e96b-4112-b398-9fabff7e98b9/content.
- Brownfield, J. M., C. Brown, S. B. Jeevanba, and S. B. VanMattson. 2018. "More Than Simply Getting Bi: An Examination of Coming Out Growth for Bisexual Individuals." *Psychology of Sexual Orientation and Gender Diversity* 5 (2): 220–232. https://doi.org/10.1037/sgd0000282.
- Butler, D. T. 2022. "Representation and Inclusion for LGBTQI Youth." MSW diss., California State University. https://scholarworks.calstate.edu/downloads/5999nb05p.
- Cerezo, A., M. Cummings, M. Holmes, and C. Williams. 2020. "Identity as Resistance: Identity Formation at the Intersection of Race, Gender Identity, and Sexual Orientation." *Psychology of Women Quarterly* 44 (1): 67–83. https://doi.org/10.1177/0361684319875977.
- Cipollina, R., M. A. Ruben, M. R. Maroney, C. Fu, A. Gonzalez, N. T. Fogwell, J. Bettergarcia, and H. M. Levitt. 2024. "The Damaging Legacy of Damage-Centered LGBTIQ+ Research: Implications for Healthcare and LGBTIQ+ Health." In "Reimagining LGBTIQ+ Research—Acknowledging Differences across Subpopulations, Methods, and Countries," edited by T. Hässler, A. Gonzalez, J. Anderson, N. Fogwell, Y.-C. Wang, special issue, *Journal of Social Issues* 80 (3): 973–999. https://doi.org/10.1111/josi.12641.
- Clark, K. A., L. R. Dougherty, and J. E. Pachankis. 2022. "A Study of Parents of Sexual and Gender Minority Children: Linking Parental Reactions with Child Mental Health." *Psychology of Sexual Orientation and Gender Diversity* 9 (3): 300–308. https://doi.org/10.1037/sgd0000456.
- Cohen, J. 2023. "Exploring the Lived Experiences of Transgender Individuals During the Coming Out Process: How Positive Protective Factors Contribute to Perceived Resilience and Better Mental Health Outcomes." PhD diss., The Chicago School of Professional Psychology.
- Compare, C., F. Rosati, C. Albanesi, R. Baiocco, and M. M. Lorusso. 2025. "Embracing Diversity: Exploring Attitudes and Beliefs toward Transgender and Gender-Diverse People in the LGBTQIA+ Communities." *International Journal of Transgender Health* 26 (3): 837–850. https://doi.org/10.1080/26895269.2024.2335517.
- Chrisler, A. 2025. "Parent Reactions to Coming Out as Lesbian, Gay, or Bisexual: Investigating a Theoretical Framework." *Family Relations* 74 (2): 830–850. https://doi.org/10.1111/fare.13150.

- Davies, A., and C. Greensmith, eds. 2024. *Queering Professionalism: Pitfalls and Possibilities*. Toronto: University of Toronto Press. https://doi.org/10.3138/9781487550943.
- DeChants, J. P., J. Shelton, Y. Anyon, and K. Bender. 2022. "It Kinda Breaks My Heart': LGBTQ Young Adults' Responses to Family Rejection." *Family Relations* 71 (3): 968–986. https://doi.org/10.1111/fare.12638.
- Dhanani, L. Y., R. R. Totton, T. K. Hall, and C. T. Pham. 2024. "Visible But Hidden: An Intersectional Examination of Identity Management among Sexual Minority Employees." *Journal of Management* 50 (3): 949–978. https://doi.org/10.1177/01492063221121787.
- Doungphummes, N., and N. Phanthaphoommee. 2024. "They Trusted Me, Even If I'ma *Tom* Like This': Exploring Sexual-Professional Identity Communication of LGBTQ+ Primary Schoolteachers." *Gender and Education* 36 (7): 730–746. https://doi.org/10.1080/09540253.2024.2389104.
- Du Bois, S., K. A. Manser, W. Guerra, M. Cannon, J. Lee, and A. C. Moller. 2023. "Examining Facilitators and Barriers to Sexual Orientation and Gender Identity Disclosure to Healthcare Providers among US College Students." *Journal of Gay and Lesbian Social Services* 35 (3): 378–397. https://doi.org/10.1080/10538720.2022.2116139.
- Etengoff, C., and C. Daiute. 2014. "Family Members' Uses of Religion in Post–Coming-Out Conflicts with Their Gay Relative." *Psychology of Religion and Spirituality* 6 (1): 33–43. https://doi.org/10.1037/a0035198.
- Farrugia, J. 2018. "Walking the Tightrope: LGBTIQ Individuals' Experiences of Perceived Support Received whilst Coming Out." MA diss., University of Malta. https://www.um.edu.mt/library/oar//handle/123456789/39996.
- Fasoli, F., M. Dragojevic, and T. Rakić. 2023. "When Voice Signals Nationality and Sexual Orientation: Speakers' Self-Perceptions and Perceived Stigmatization." *Psychology of Language and Communication* 27 (1): 59–83. https://doi.org/10.1111/bjso.12442.
- Flores, A., D. Strode, and D. P. Haider-Markel. 2025. "Political Psychology and the Study of LGBTQI+ Groups, Politics, and Policy: Existing Research and Future Directions." *Political Psychology* 46 (s1): 213–249. https://doi.org/10.1111/pops.12989.
- Ghio, A., B. Malsch, and N. McGuigan. 2025. "LGBTQI+ Professional Accountants and the Consequences of Stigmatization: An Identity Work Perspective." *Contemporary Accounting Research* 42 (1): 360–390. https://doi.org/10.1111/1911-3846.13006.
- Gilligan, P., and S. Akhtar. 2006. "Cultural Barriers to the Disclosure of Child Sexual Abuse in Asian Communities: Listening to What Women Say." *British Journal of Social Work* 36 (8): 1361–1377. https://doi.org/10.1093/bjsw/bch309.

- Gillani, B., D. M. Prince, M. Ray-Novak, G. Feerasta, D. Jones, L. J. Mintz, and S. E. Moore. 2024. "Mapping the Dynamic Complexity of Sexual and Gender Minority Healthcare Disparities: A Systems Thinking Approach." *Healthcare* 12 (4): 424. https://doi.org/10.3390/healthcare12040424.
- Goodyear, T., D. J. Kinitz, E. Dromer, D. Gesink, O. Ferlatte, R. Knight, and T. Salway. 2022. "They Want You to Kill Your Inner Queer But Somehow Leave the Human Alive': Delineating the Impacts of Sexual Orientation and Gender Identity and Expression Change Efforts." *The Journal of Sex Research* 59 (5): 599–609. https://doi.org/10.1080/00224499.2021.1910616.
- Gul, P., S. E. Cross, and A. K. Uskul. 2021. "Implications of Culture of Honor Theory and Research for Practitioners and Prevention Researchers." *American Psychologist* 76 (3): 502–515. https://doi.org/10.1037/amp0000653.
- Gusha, H. 2021. "Religiosity and Sexual Shame among LGBTQ+ Folks: Sexuality and Mental Health Outcomes." MA diss., California State University. https://www.proquest.com/openview/523c97973fa203edc3db1edfd123128a/1?pq-origsite=gscholar&cbl=18750&diss=y.
- Hall, W. J., H. C. Dawes, and N. Plocek. 2021. "Sexual Orientation Identity Development Milestones among Lesbian, Gay, Bisexual, and Queer People: A Systematic Review and Meta-Analysis." *Frontiers in Psychology* 12: 753954. https://doi.org/10.3389/fpsyg.2021.753954.
- Huang, Y. T., and R. C. Chan. 2022. "Effects of Sexual Orientation Concealment on Well-Being among Sexual Minorities: How and When Does Concealment Hurt?" *Journal of Counseling Psychology* 69 (5): 630–641. https://doi.org/10.1037/cou0000623.
- Jaspal, R., B. Lopes, and G. M. Breakwell. 2023. "Minority Stressors, Protective Factors and Mental Health Outcomes in Lesbian, Gay and Bisexual People in the UK." *Current Psychology* 42 (28): 24918–24934. https://doi.org/10.1007/s12144-022-03631-9.
- Joubert, L. 2023. "Lesbianism: Deconstructing the Christian Church and Social Hierarchies in South Africa." *Acta Theologica* Sup36: 202–223. https://doi.org/10.38140/at.vi.7029.
- Kamen, C., J. M. Jabson, K. M. Mustian, and U. Boehmer. 2017. "Minority Stress, Psychosocial Resources, and Psychological Distress among Sexual Minority Breast Cancer Survivors." *Health Psychology* 36 (6): 529–537.
- Kulkarni, M. 2022. "Hiding But Hoping to Be Found: Workplace Disclosure Dilemmas of Individuals with Hidden Disabilities." *Equality, Diversity, and Inclusion: An International Journal* 41 (3): 491–507. https://doi.org/10.1108/EDI-06-2020-0146.
- Lampe, N. M., and T. McKay. 2025. "Associations of Faith Community Rejection with Social Support and Health Outcomes among LGBTQ+ Older Adults." *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences* 80 (5): gbaf009. https://doi.org/10.1093/geronb/gbaf009.

- LaSala, M. C. 2010. Coming Out, Coming Home: Helping Families Adjust to a Gay or Lesbian Child. New York: Columbia University Press.
- Lau, O. 2024. "Invitation to Be Queer: Exploring the Intersectional Coming Out Experiences of East Asian American, Gay, Cisgender Men." MA diss., Alliant International University.
- Lefevor, G. T., C. Etengoff, E. B. Davis, S. J. Skidmore, E. M. Rodriguez, J. S. McGraw, and S. S. Rostosky. 2023. "Religion/Spirituality, Stress, and Resilience among Sexual and Gender Minorities: The Religious/Spiritual Stress and Resilience Model." *Perspectives on Psychological Science* 18 (6): 1537–1561. https://doi.org/10.1177/17456916231179137.
- Lekwauwa, R., M. C. Funaro, and B. Doolittle. 2023. "Systematic Review: The Relationship between Religion, Spirituality and Mental Health in Adolescents Who Identify as Transgender." *Journal of Gay and Lesbian Mental Health* 27 (4): 421–438. https://doi.org/10.1080/19359705.2022.2107592.
- Libiran, T. J. D., R. L. C. Cepeda, C. K. M. Ramos, J. C. O. Alano, and M. J. S. Guballa. 2024. "Understanding the Challenges Faced by Filipino LGBTQ+ Individuals with Strong Religious Ties." *International Journal of Research and Innovation in Social Science* 8 (1): 2520–2547. https://doi.org/10.47772/IJRISS.2024.801186.
- Maji, S., and D. Rajeev. 2025. "They Kill Us Mentally': Exploring Microaggression towards LGBTQIA+ Employees in Indian Workplaces." *Equality, Diversity, and Inclusion: An International Journal* 44 (5): 645–673. https://doi.org/10.1108/EDI-03-2024-0107.
- Mallon, G. P., J. C. Paul, and M. L. López. 2022. "Protecting LGBTQ+ Children and Youth."
 In *Handbook of Child Maltreatment*, Child Maltreatment, Vol. 14, 575–591, edited by R. D. Krugman and J. E. Korbin. Cham: Springer International Publishing. https://doi.org/10.1007/978-3-030-82479-2_29.
- McGuire, W., M. Short, and K. Martin. 2019. "Whosoever Will May Come: Challenging Homonormativity through Radical Inclusivity in an LGBTIQ2S+ Faith Community." *Critical Social Work* 20 (1): 28–44. https://doi.org/10.22329/csw.v20i1.5959.
- Meyer, I. H. 2013. "Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence." *Psychology Bulletin* 129 (5): 674–697. https://doi.org/10.1037/0033-2909.129.5.674.
- Mirabella, M., C. Mazzuca, C. De Livio, B. Di Giannantonio, F. Rosati, M. M. Lorusso, V. Lingiardi, A. M. Borghi, and G. Giovanardi. 2024. "The Role of Language in Nonbinary Identity Construction: Gender Words Matter." *Psychology of Sexual Orientation and Gender Diversity*. https://doi.org/10.1037/sgd0000729.
- Mizielińska, J., and D. Uryga. 2024. "On the Queer Road. Parents' Reactions and Strategies in Response to Their LGBTQI Children's Coming Out." *Children and Youth Services Review* 163: 107756. https://doi.org/10.1016/j.childyouth.2024.107756.

- Moreira, A., E. Navaia, and C. Ribau. 2024. "Innovation Capabilities and Their Dimensions: A Systematic Literature Review." *International Journal of Innovation Studies* 8 (3): 313–333. https://doi.org/10.1016/j.ijis.2024.07.001.
- Palm, S., and L. Gaum. 2021. "Engaging Human Sexuality: Creating Safe Spaces for LGBTIQ+ and Straight Believers in South Africa." *Theologia in Loco* 3 (2): 205–230. https://doi.org/10.55935/thilo.v3i2.229.
- Rand, J. J., M. S. Paceley, J. N. Fish, and S. O. Anderson. 2021. "LGBTQ+ Inclusion and Support: An Analysis of Challenges and Opportunities within 4-H." *Journal of Youth Development: Bridging Research and Practice* 16 (4): 26–51. https://doi.org/10.5195/jyd.2021.1072.
- Rees, S. N., M. Crowe, and S. Harris. 2021. "The Lesbian, Gay, Bisexual, and Transgender Communities' Mental Health Care Needs and Experiences of Mental Health Services: An Integrative Review of Qualitative Studies." *Journal of Psychiatric and Mental Health Nursing* 28 (4): 578–589. https://doi.org/10.1111/jpm.12720.
- Robinson, B. G. 2015. *Struggling in Good Faith: LGBTQI Inclusion from 13 American Religious Perspectives*. Windsor: Skylight Paths Publishing.
- Rodriguez, L. G. 2024. "Examining the Impact of Workplace Diversity, Equity, and Inclusion Programs on Marginalized Groups: A Focus on LGBTQIA Employees." PhD diss., University of the Incarnate Word. https://athenaeum.uiw.edu/cgi/viewcontent.cgi?article=1509&context=uiw_etds.
- Rodriguez, D. G. 2025. "LGBTIQ+ Asylum and Religion: Individual Faith, Community Belonging, and Divine Advocacy." *Journal of Gender Studies* 1–18. https://doi.org/10.1080/09589236.2025.2473928.
- Roe, R. 2024. "Bridges and Barriers: Lesbian, Gay, and Bisexual Emerging Adults' Views on Integrating Their Sexual and Religious Identities." PhD diss., Liberty University. https://digitalcommons.liberty.edu/doctoral/5506/.
- Roum, K. 2025. "Religious Identity, Sexual Identity, and Internalized Homophobia in Adults Who Have Deidentified from Christianity." PhD diss., Walden University. https://scholarworks.waldenu.edu/cgi/viewcontent.cgi?article=18627&context=dissertation s.
- Russell, K. 2021. "The Use of Social Media in Identity Development for LGBTQI+ Individuals and the Factors That Shape Young People's Attitudes toward the Transgender Population." PhD diss., University of Southampton. https://eprints.soton.ac.uk/471254/.
- Scheer, J. R., A. Martin-Storey, and L. Baams. 2020. "Help-Seeking Barriers among Sexual and Gender Minority Individuals Who Experience Intimate Partner Violence Victimization." In *Intimate Partner Violence and the LGBT+ Community: Understanding Power Dynamics*, edited by B. Russell, 139–158. Cham: Springer. https://doi.org/10.1007/978-3-030-44762-5_8.

- Schultz, T. R., R. Zoucha, and L. K. Sekula. 2022. "The Intersection between Youth Who Identify as LGBTQ+ and Emergency Care for Suicidality: An Integrative Review." *Journal of Pediatric Nursing* 63: e82–e94. https://doi.org/10.1016/j.pedn.2021.10.008.
- Schwartzman, E., and R. Neel. 2025. "Sexual Orientation Disclosure and Strategic Navigation of Interpersonal Invisibility." *Personality and Social Psychology Bulletin*. https://doi.org/10.1177/01461672241313269.
- Sichel, J. 2024. "Exploring the Lived Experience Experiences of Coming Out as Transgender." PhD diss., Canterbury Christ Church University. https://repository.canterbury.ac.uk/item/991x1/exploring-the-lived-experience-experiences-of-coming-out-as-transgender.
- Sileo, K. M., A. Baldwin, T. A. Huynh, A. Olfers, J. Woo, S. L. Greene, G. L. Casillas, and B. S. Taylor. 2022. "Assessing LGBTQ+ Stigma among Healthcare Professionals: An Application of the Health Stigma and Discrimination Framework in a Qualitative, Community-Based Participatory Research Study." *Journal of Health Psychology* 27 (9): 2181–2196. https://doi.org/10.1177/13591053211027652.
- Sonke Gender Justice. 2024. "Building Trust with Traditional Leaders to Promote LGBTQI+ Rights in Lesotho." 28 June. Accessed April 5, 2025. https://genderjustice.org.za/building-trust-with-traditional-leaders-to-promote-lgbtqi-rights-in-lesotho/.
- Strumpf, B. M. 2024. "Internalized Homophobia Masking as Depression in Gay Men: Clinical Assessment and Treatment Guidelines." MA diss., Pacifica Graduate Institute.
- Tinner, L., D. Holman, S. Ejegi-Memeh, and A. A. Laverty. 2023. "Use of Intersectionality Theory in Interventional Health Research in High-Income Countries: A Scoping Review." *International Journal of Environmental Research and Public Health* 20 (14): 6370. https://doi.org/10.3390/ijerph20146370.
- Tuthill, Z. O., and M. E. Hill. 2024. "Shouldering the Double Burden of Homophobia and Racism Alone: Challenges to Seeking Social Support and Finding Community among Sexual Minorities of Color." *Sociological Focus* 57 (4): 563–583. https://doi.org/10.1080/00380237.2024.2393248.
- Van Droogenbroeck, F., and B. Spruyt. 2021. "Social Pressure for Religious Conformity and Anti-Gay Sentiment among Muslim and Christian Youth." In *Civic Learning for Alienated, Disaffected, and Disadvantaged Students*, edited by X. Kuang, J. Zhu, and K. J. Kennedy, 87–108. London: Routledge. https://doi.org/10.4324/9781003142478-6.
- Venkataraman, N. 2025. Sociology of Gender: Comprehensive Guide. Delhi: Educohack Press.

- Westwood, S. 2022. "Religious-Based Negative Attitudes towards LGBTQ People among Healthcare, Social Care and Social Work Students and Professionals: A Review of the International Literature." *Health and Social Care in the Community* 30 (5): e1449–e1470. https://doi.org/10.1111/hsc.13812.
- Whipple, A. 2024. "The Relationship between Parental Political Intensity and Gay Individuals' Mental Health, and the Moderation of Parental Age." PhD diss., Walden University. https://scholarworks.waldenu.edu/dissertations/16454/.
- White, J., M. J. Sepúlveda, and C. J. Patterson, eds. 2021. *Understanding the Well-Being of LGBTOI+ Populations*. Washington, DC: National Academies Press.
- Wilchins, R. 2019. Gender Norms and Intersectionality: Connecting Race, Class, and Gender. London: Rowman and Littlefield.
- Wootton, A. R., K. R. Soled, J. A. Puckett, J. J. Garrett-Walker, A. Perry Hill, K. Delucio, and C. B. Veldhuis. 2024. "Community (Dis)Connectedness and Identity among LGBTQIA+ People during the COVID-19 Pandemic: A Qualitative Cross-Sectional and Longitudinal Trajectory Study." *Psychology and Sexuality* 15 (2): 170–192. https://doi.org/10.1080/19419899.2023.2241868.
- Xin, Y., C. M. Schwarting, M. R. Wasef, and A. K. Davis. 2023. "Exploring the Intersectionality of Stigma and Substance Use Help-Seeking Behaviours among Lesbian, Gay, Bisexual, Transgender, Queer, Questioning or Otherwise Gender or Sexuality Minority (LGBTQ+) Individuals in the United States: A Scoping Review." *Global Public Health* 18 (1): 2277854. https://doi.org/10.1080/17441692.2023.2277854.