Identity Integration as a Protective Factor Against Guilt and Shame for Religious Gay Men

Joel R. Anderson[1,3,4] (ORCiD: 0000-0003-3649-2003)

Emma Kiernan[1] (ORCiD: 0000-0002-9074-3670)

Yasin Koc[2] (ORCiD: 0000-0002-6727-3842)

[1]School of Behavioural and Health Sciences, Australian Catholic University, Australia

[2]Department of Social Psychology, University of Groningen, The Netherlands

[3]Australian Research Centre in Sex, Health, & Society, La Trobe University, Australia

[4]Correspondance:

School of Behavioural and Health Sciences, Australian Catholic University, Melbourne

Campus (St Patrick), Locked Bag 4115, Victoria 3065, Australia; Tel: +61 (0)3 9953 3112;

Fax: +61 (0)3 9953 3205; email: joel.anderson@acu.edu.au

Abstract

Identification with multiple, seemingly incompatible identities has been linked to poor psychological wellbeing outcomes, including shame and guilt. However, the outcome of internalized sexual prejudice (ISP) has received scant attention in identity conflict literature. The current study investigated the identity-conflict management strategy of *identity integration* as a protective factor against ISP in men who identify as both gay and religious. Additionally, this study explored the role of religious comfort and religious conflict in ISP, and whether gay-religious identity integration acts as a moderating variable for these relationships. The results of an online survey of 178 gay Australian men (M_{age} = 29.32 years, SD = 10.46) were analyzed using a hierarchical multiple linear regression analysis. As predicted, greater gay-religious identity integration predicted lower levels of ISP. Unexpectedly, religious comfort was positively related to ISP, and religious conflict was unrelated to ISP. Gay-religious identity integration was found to moderate these effects, demonstrating the protective influence of identity integration and multiple group membership against negative psychological outcomes in religious gay men. This study challenges the assumption that religious and sexual minority identities are dichotomous, emphasizes the benefits of multiple group membership, and may offer a foundation for further inquiry into the influence of gay-religious identity integration.

(Word Count: 203)

The Protective Role of Identity Integration Against Internalized Sexual Prejudice for

Religious Gay Men

Social Identity Theory posits that the membership with multiple social groups affords benefits that foster greater psychological and physical health (Tajfel & Turner, 1979). This is argued to be the result of in-group membership providing individuals with a sense of belonging to their social world, thereby inducing feelings of comfort, meaning, and purpose, which are known to be critical factors of psychological wellbeing (McLeod, 2008; Greenaway et al., 2015; Hinton et al., 2021). This additive effect – known as *the social cure* – has a documented range of protective outcomes. For example, numerous studies have demonstrated that the identification with multiple social groups is related to increased resilience, coping, and wellbeing, as well as reduced depression, anxiety, and psychological distress (e.g., Norris et al., 2008 Worrell et al., 2021). However, the positivity associated with multiple group memberships is contingent on the perception held about these social groups. Specifically, social relationships that 'cure' are those that are neither conflicting or perceived as burdening, but are based on mutual support (Jetten et al., 2012) and are perceived as beneficial, central to one's self concept, and compatible with each other (Iyer et al., 2009).

One combination of social group-based identities that are traditionally perceived as incompatible are religious and sexual minority identities (including gay, lesbian, and bisexual identities). Several religious ideologies vehemently condemn any deviation from heterosexuality, characterizing same-sex sexual acts as unholy, immoral, and sinful (Pietkiewicz & Kolodziejczyk-Shrzypek, 2016). Research unequivocally demonstrates that these beliefs can be internalized by sexual minorities, resulting in *internalized sexual prejudice* (ISP; formally referred to as internalized homophobia, see Herek, 2004) and thus higher rates of depression, self-harm, and demoralization (Herek, 1998). ISP is defined as the process in which negative societal attitudes and beliefs about homosexuality are re-directed

by sexual minority individuals toward themselves (Meyer, 2003). Although also experienced by non-religious sexual minorities, sexual minorities raised in a religious environment are argued to be at an increased risk for ISP and its resulting outcomes (Gibbs & Goldbach, 2015). The major aim of this research is to explore the relationships between religious identity-relevant constructs that are risk factors or protective features against ISP for gay men. Specifically, we examined whether greater gay-religious identity integration protects against ISP. Additionally, we present the findings from a novel exploration into the role religious comfort and religious conflict in ISP, and whether gay-religious identity integration acts as a moderating variable of these relationships

Incompatible Identities: Understanding Identity Conflict and Integration

A body of literature has established the complexities of managing multiple identities. Some identities co-exist easily, however others are perceived as incompatible and leave individuals in a state of 'identity conflict' (Benet-Martinez & Haritatos, 2005). An emerging body of research shows that the marginalized nature of sexual minority identities often necessitates the management of multiple, often conflicting, senses of self (Stevens, 2004). In a land-mark study by Loiacano (1989), qualitative interviews discussed the experiences of identity conflict for Black same-sex attracted men and women in America. The participants described the struggles of integrating their racial and sexual identities, largely because they felt like outsiders in both their (predominantly White) sexual minority communities and their (predominantly heterosexual) Black communities (see also Chan, 1989, 1995).

Research shows that having a sexual minority identity can conflict with a range of social group-based identities including gender (e.g., being gay and male: Koc & Vignoles, 2016, 2018), ethnicity (being a woman of color and lesbian: Parks et al., 2004), and religious identities (e.g., gay-Christian: Anderson & Koc, 2020; gay-Muslim: Koc et al., 2021), and sometimes multiple combinations of these identities (e.g., British Muslim South East Asian

sexual minority men; Mitha et al., 2021). In particular, the combination of religious and sexual minority identities has a documented range of harmful health and wellbeing outcomes (including depression and suicidal ideation, Pietkiewicz et al., 2016), and affective outcomes (including shame and guilt, Anderson & Koc, 2020). Thus, there is an urgent need for research exploring strategies for the management of the perceived incompatibility of conflicting identities.

Rodriguez and Ouellette (2000) have outlined four potential strategies to reduce the incompatibility of conflicting identities. First, individuals can reject their religious identity, perhaps by disaffiliating from their religion ('apostasy'), or altering their beliefs (Yip, 1999). There are a range of consequences to this choice, including the self-exclusion from benefits offered by religious membership (e.g., social relationships, connection to community; Buxant & Saroglou, 2008). Second, individuals can reject their sexual identity, for example by participating in gay conversion practices (Tozer & Hayes, 2004). This strategy can also have damaging consequences as conversion practices are generally acknowledged to be ineffective and lead to feelings of self-shame, unworthiness, and abandonment by God (Jones et al., 2021). Third, individuals can compartmentalize their identities (Baumeister et al., 1985). This involves activating identities in isolation and in accordance with the demands of the social context (Roccas & Brewer, 2002). However, Norcliffe (1990) questions the efficacy of compartmentalize by asserting religious identities as pervasive 'meaning systems' that cannot be inactivated. Accordingly, attempting this strategy is argued to be more threatening than protective in the management of conflicting identities. Lastly, individuals can integrate identities into a single and coherent self-concept. This strategy has been proposed to alleviate identity conflict by establishing a positive identification with each identity (Rodriguez & Ouellette, 2000).

Taken together, these four strategies are relatively under-researched in the literature. However, compared to the first three approaches, recent research suggests that identity integration may provide the most promising psychological wellbeing outcomes (Dehlin et al., 2015; Anderson & Koc, 2020). However, it remains unclear whether gay-religious identity integration specifically protects against ISP. Establishing the relationship between identity integration and ISP is the first major aim of this paper.

Internalized Sexual Prejudice and Religion

Sexual Minority Stress Theory (Meyer, 1995, 2003) posits that merely having a social minority identity exposes the individual to a range of stressors not experienced by their heterosexual counterparts, including issues with identity formation, coming out processes, and living with experiences of stigma and prejudice. Minority stress effects are commonly used to explain the health and wellbeing disparity between heterosexual and sexual minority groups (e.g., an increased likelihood of mood, anxiety, and substance disorders for sexual minorities; Cochran & Mays, 2000). One of the most insidious outcomes of minority stress is ISP. Meyer and Dean (1998) have argued that ISP is particularly problematic since, although it stems from prejudicial social beliefs, it can come to be self-reinforcing and persist without the experience of external discrimination.

One established risk factor for ISP is religion. A recent systematic review of the relationship between religion and ISP revealed that 36 out of 38 studies found religion to be a risk factor for ISP. This result was found across multiple religious denominations, operationalizations of religiosity (e.g., negative religious coping, intrinsic religiosity), and sexualities (BLINDED FOR REVIEW). However, while much rhetoric alludes to religion being incompatible with sexual minority identities, religion has also been shown to protect against ISP (e.g., membership with a sexuality-affirming faith is related to reduced ISP; Lease et al., 2005). The diverse impact of religion is highlighted by Ream and Savin-

Williams (2005) in their assertion: "religion function[s] as a source of resiliency as well as a source of risk" (p. 32). In this paper, we explored the function of religion in the life of religious gay men, with a particular focus on understanding the experience of being simultaneously gay *and* religious through degrees of religious comfort and conflict.

Religious comfort and *religious conflict* are dual constructs that characterize how an individual uses religion to navigate and appraise experiences. These constructs can be conceptualized as religious individual differences measures, and despite empirical evidence that they are sometimes negatively related to each other, theoretically they are independent from each other (Page et al., 2013). Individuals who are high in levels of religious comfort would typically use their trust in God and their religion as a source of strength, meaning, and purpose as they navigate their social world (Kelley & Chan, 2012). Religious comfort is best demonstrated in times of hardship, especially grief, as many people turn to divine entities for a level of consolation that is unattainable in the physical world (Pargment, 1997). For sexual minorities, religion can be used as a source of consolation when facing societal discrimination to seek answers for the meaning of existence and faith (Tan, 2005). In contrast, individuals who are high in levels of religious conflict would typically experience incompatibility between one's religious beliefs and other self-concepts, resulting in feelings of religious discontent and the questioning of God's virtuousness (Chan & Rhodes, 2013).

Religious conflict can arise when religious scripture focuses an individual's attention on their sinfulness and the prospect of God's punishment (e.g., sex before marriage, Exline 2002). For sexual minorities, this can involve the exposure to anti-gay biblical passages (e.g., Leviticus 18:22 denouncing same-sex sexual relations as an "abomination") that invalidate and demoralize their sexuality when coming out (Schuck & Liddle, 2001). For example, a qualitative study by Johnston and Jenkins (2004) found negative messages about

homosexuality that stem from organized religions to be the most repressive force in the coming out process.

Although some studies have established the protective influence of religion for sexual minorities (e.g., Lease et al., 2005), the majority of recent scholarship emphasizes the incongruous link between the two identities. However, outcomes relating to the perception of self (i.e., ISP) have yet to be investigated. Establishing the relationship between religious comfort and religious conflict with ISP is the second major aim of this paper. Exploring the role of identity integration in moderating these relationships is the final aim.

The Current Study

Previously, Anderson and Koc (2020) found that gay-religious identity integration attenuated feelings of identity-based guilt and shame in religious gay men. Here, we extend this research by exploring the relationships between gay-religious identity integration and ISP. Additionally, this study aimed to establish the relationship between experiences of religion during the coming out process, namely religious comfort and religious conflict, and ISP, and whether identity integration acts as a moderator for these relationships. To explore these aims, a survey assessing the experiences of currently or formerly religious gay men was conducted. In this survey, we focused on a series of identity- and religious-relevant variables and how they related to ISP. Based on previous evidence, we formulated the following hypotheses:

- H1: *The integration protection hypothesis* - based on the evidence that that identity integration protects against guilt and shame (Anderson & Koc, 2020), we investigated whether the protection effect extends to ISP. Specifically, we hypothesize that gay-religious identity integration will be negatively related to levels of ISP.

- H2: *The religious comfort and conflict hypothesis* – based on the evidence that sexual minorities turn to religion as a source of comfort when facing societal discrimination

(Tan, 2005), we hypothesize that the (retrospectively accounted for) experience of religious comfort at the time of coming out will be negatively correlated with ISP (H2a). In contrast, based on the evidence that the coming out process is deleteriously affected by the communication of anti-gay messages in religious settings (Johnston & Jenkins, 2004), we hypothesize that the (retrospectively accounted for) experience of religious conflict at the time of coming out will be positively correlated with ISP (H2b).

- H3: *The moderation hypothesis* - Lastly, based on the evidence that identity integration allows access to the benefits of both identities (Jetten et al. 2012), we hypothesize that the integration of gay and religious identities will moderate the proposed associations between religious comfort and ISP (H3a) and religious conflict and ISP (H3b). Specifically, as we are testing the protective role of identity integration, these associations should only be present at low levels of identity integration (and there should be no association between religious comfort or conflict and ISP at high levels of identity integration).

Method

Participants

Participants were recruited through an online crowdsourcing platform (Prolific[TM]), which advertised for religious or previously religious gay Australian men. This online platform is designed specifically to recruit participants for social science surveys and experiments (Palan & Schitter, 2018), which allowed us to target participants based on their sexual identity and nationality or geographic location. Participation was incentivized with AUD$2 (Ethics approval: HREC-2020-79EAP). In total, 220 participants completed the online survey, however 42 were excluded (20 for having never been religious, 11 for failing attention checks, 6 for not consenting, 4 for not identifying as male, and one for not

identifying as attracted to men). The final sample comprised of 178 gay Australian men (M_{age} = 29.32 years, SD = 10.46, range: 18 - 63).[1] An *a priori* power analysis indicated that a sample size of 114 would be required to achieve statistical power for a hierarchical multiple regression analysis (HMRA) with 3 predictors (powered at .80, alpha = .05, f^2 = .10), which suggests that the study has sufficient power (i.e., n = 178 > 114). The demographic data are presented in Table 1.

Table 1
Demographic data for sexual orientation and religious variables (N = 178)

Variables	N	%
Self-Identified Sexual Orientation		
Gay or bisexual	173	97%
"Mostly straight"	2	1%
"Bicurious"	1	0.6%
"demisexual to pansexual"	1	0.6%
Pansexual	1	0.6%
Religious Status		
Religious at some point	178	100%
No longer religious	119	67%
Currently religious	38	21%
"Unsure"	21	12%
Religious affiliation		
Christianity	74	42%
Catholicism (including Roman Catholicism)	44	25%
Agnostic/Atheist/no religion	22	12%
Church of Jesus Christ of Latter-Day Saints	4	2%
Jehovah's Witness	3	2%
Islam	1	0.6%
Hinduism	1	.6%
"Undecided"	1	.6%

---

[1]. Participants were given the option to identify their sexuality as "gay (or bisexual)" or to provide an in-text description of their sexual orientation. For parsimony, this group will be referred to as "gay men".

Measures

Internalized Sexual Prejudice Scale

The *Internalized Sexual Prejudice Scale* (ISPS; Ciafonni et al., 2020) was used to measure the degree to which negative societal attitudes and beliefs about homosexuality have been internalized. The scale is comprised of 15-items (e.g., 'I sometimes resent my sexual orientation'), and participants endorsed each item on a 7-point Likert-like scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). Higher scores reflect greater ISP. This measure yielded adequate estimates of internal consistency in this sample ($\alpha = .90$).

Religious Comfort and Conflict Scales

Two sub-scales from the *Spiritual and Sexual Identities Questionnaire* (RSSIQ; Page et al., 2013) were used to measure retrospective accounts of the religious beliefs and experiences of gay men during the period in which they were coming out to themselves. The 6- item *comfort* scale assesses one's sense of belonging to a religious community (e.g., 'I used my religious activities to comfort and reassure myself while I was coming out to myself') and the 5-item *conflict* scale assess perceived or actual alienation from God or one's religious community (e.g., 'After I came out to myself, I felt rejected or betrayed by my religion'). Participants endorsed each of the 11 items on five-point Likert-type scales from 1 (*strongly disagree*) to 5 (*strongly agree*). Higher scores reflect greater use of religion as a source of comfort or greater experience of conflict when coming out, respectively. This measure yielded adequate estimates of internal consistency for both the Comfort ($\alpha = .95$) and Conflict ($\alpha = .84$) subscales in this sample.

Gay-Religious Identity Integration Scale

We adapted Huynh's (2009) *Bicultural Identity Integration Scale* to measure the unification of gay and religious identities. Koc and Vignoles (2016) adapted the original scale to include 16 items that measure individual differences in the belief that gay and male

identities could co-exist in harmony. In the current study, we reconceptualized the scale further with two group-based identity categories, gay and religious, and adapted 14 of the items accordingly (e.g., 'I find it easy to reconcile my gay and religious identities'). Participants endorsed each item on five-point Likert scales from 1 (*strongly disagree*) to 5 (*strongly agree*), with higher scores indicating higher levels of gay-religious identity integration. This measure yielded adequate estimates of internal consistency in this sample (α = .85). These (adapted) items are available by contacting the corresponding author.

Procedure

Consenting participants were redirected to the website hosting the survey (http://www.qualtrics.com/). Before completing the questionnaire, participants provided non-identifying demographic information including their age, gender, sexual orientation, and religion. Participants who did not identify as male or as either "gay (or bisexual)" were excluded prior to the beginning of the survey using attention checks. The survey then consisted of a randomized sequence of the measures described above. Upon completion, participants were thanked for their involvement, debriefed, and awarded compensation.

Data Analysis

IBM statistics version 25 was used to analyze data. To determine preliminary evidence for H1 and H2, bivariate, Pearson product-moment correlations between continuous variables were performed. For multivariate analyses, we examined data using a HMRA based on the ordinary least squares method, with ISP as the dependent variable. To test H1, Gay-religious identity integration (II) was entered into Step 1 of the model. To test H2, religious comfort and religious conflict were entered into Step 2. H3 was examined by moderation analyses using PROCESS (Hayes, 2007), with 5,000 bootstrap samples.

Results

Data Screening

A Missing Value Analysis revealed that no variables exceeded Tabachnick and Fidell's (2007) recommended threshold of 5% missing data, so no additional inspections were performed. Pairwise deletion was used to maximize available data for analyses. No potential outliers were identified (i.e., all z-scores: $-3.29 < z > 3.29$ [Field, 2013]), and visual inspections of histograms, scatterplots, and P-P plots revealed no violations of linearity, normality, or homoscedasticity for ISP and gay-religious identity integration. Religious comfort was positively skewed and was corrected using logarithmic transformations, (skew = .042, $skew_{Log10}$ = -0.04, SE_{skew} = 0.18). Religious conflict was negatively skewed and was similarly corrected using logarithmic transformations (skew = -.049, $skew_{Log10}$ = -0.13, SE_{skew} = 0.18).

Descriptive Findings and Correlation Analyses

Descriptive statistics and bivariate correlation findings are presented in Table 2. On average, the sample reported low levels of ISP and religious comfort, and high levels of religious conflict and gay-religious identity integration. In support of H1 and the protective capacity of identity integration, there was a negative association between identity integration and ISP. Against predictions of H2, there was a weak positive association between religious comfort and ISP, and a non-significant association between religious conflict and ISP.

Multivariate Analyses

Assumption testing

Prior to analyses, the remaining assumptions for a HMRA were checked. Mahalanobis' distance (d = 13.63) did not exceeded the critical value $\chi^2(3)$ = 16.27, $p < .001$, and Cooks distance fell within acceptable range (0.10 < 1.00), which suggests the absence of multivariate outliers. The mean centered leverage value was less than the critical value (.08),

Table 2.

Descriptive statistics and correlations for continuous variables (N = 178).

Variable (Measure)	*M*(*SD*)	1	2	3	4	*t*
1. ISP	2.77 (1.07)	(.90)				-15.60**
2. Religious Comfort	2.20 (1.12)	.16*	(.95)			-9.89**
3. Religious Conflict	3.53 (1.08)	.01	-.27**	(.84)		6.38**
4. II	3.96 (.79)	-.20**	.35**	-.62**	(.85)	16.22**

Note. **p <.01, *p <.05. II = Gay-religious identity integration. The descriptive statistics are based on the non-transformed data, for ease of interpretation, but the correlation analyses are based on the transformed variables for the religious comfort and religious conflict variables. Cronbach's α coefficients are presented in parentheses.

and the collinearity statistics (i.e., Tolerance and VIF) of all variables were within accepted

limits, indicating no evidence of multicollinearity. The data also satisfied the assumption of

independent errors (Durbin-Watson value = 2.12), homoscedasticity, and normality of

errors.[2]

Hypothesis testing

The findings of the two-step HMRA are presented in Table 3. Identity integration was

entered in the first stage of the regression, and this negative predictor accounted for a

significant 4.1% of the variance in ISP (Cohen's f^2 = 0.043). In Step 2, religious conflict and

religious comfort scores were added, significantly accounting for a further 4.5% of variance.

Overall, this combination of variables accounted for 8.5% of the variance in ISP (Cohen's f^2

= 0.093). In this final model, identity integration and religious comfort were unique negative

predictors of ISP (negative and positive predictors, respectively.

---

[2] Assumption tests were analysed based on a combination of step 1 and step 2 of the HMRA.

Table 3.

Hierarchical regression analysis predicting internalized sexual prejudice (N = 177).

Variables	Model 1					Model 2				
	B	*SE B*	*β*	*t*	r_p	*B*	*SE*	*β*	*t*	r_p
II	**-.27**	**.10**	**-.20**	**-2.74****	-.20	**-.46**	**.13**	**-.35**	**-3.64****	**-.26**
R Comfort						**.18**	**.08**	**.19**	**2.42***	**.18**
R Conflict						-.13	.09	-.13	-1.38	.10
F	7.53*					5.36*				
df	1					3				
*df*error	176					174				
R2	.04**					.09**				
*R2*change	-					.05**				

Constants: Step 1 = 3.82 (*SE* = .40); Step 2 = 4.62 (*SE* = .74).

Notes. *$p < .05$. **$p < .001$. Significant findings are presented in boldface.

Moderation analyses

Moderation analyses were conducted to test H3. To explore these effects, simple slopes were examined at low ($M – 1SD$), moderate (M), and high ($M + 1SD$) levels of identity integration. Appropriate variables were centered to avoid issues with collinearity.
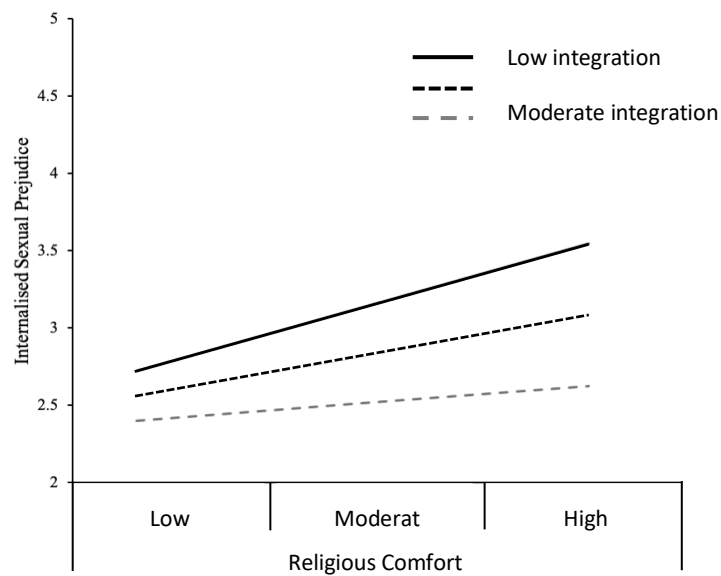
Religious Comfort and Internalized Sexual Prejudice

Figure 1 depicts the significant, moderating effect of identity integration on the relationship between religious comfort and ISP, $F(3,174) = 6.34$, $p < .001$, $R^2 = .10$. The positive relationship was most influential when identity integration levels were low ($b = .36$ $SE_b = .11$, $p = .001$) compared to moderate ($b = .22$, $SE_b = .08$, $p = .005$). When identity integration levels were high, the relationship did not exist ($b = .07$, $SE_b = .09$, $p = .415$). Taken together, this provides evidence that identity integration is protective against ISP

(supporting H1) and, counter-intuitively, that having *high* levels of religious comfort is a risk factor for ISP (albeit only at moderate or low levels of integration).

Figure 1

Moderating Effects of Identity Integration on the Relationship Between Religious Comfort and Internalized Sexual Prejudice.

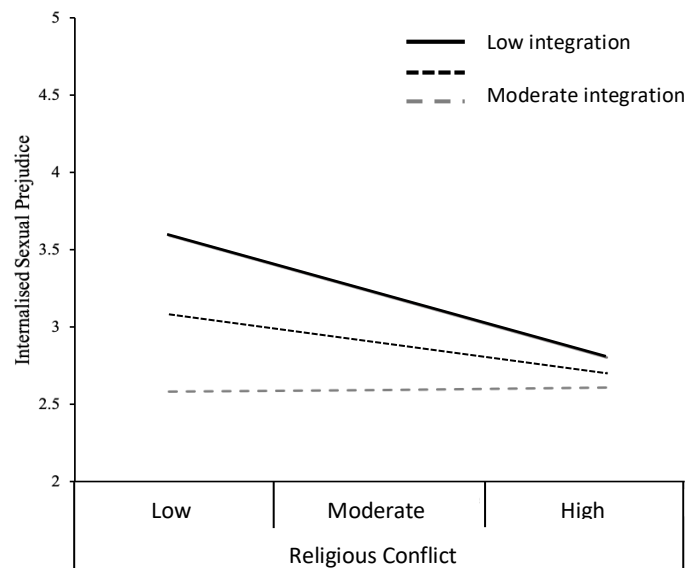*Note.* Significant slopes are in black.

Religious Conflict and Internalized Sexual Prejudice

Figure 2 depicts the significant, moderating effect of identity integration on the relationship between religious conflict and ISP, significant $F(3,174) = 6.78$, $p < .001$, $R^2 = .11$. The negative relationship was most influential when identity integration levels were low ($b = -.40$ $SE_b = .12$, $p = .001$) compared to moderate ($b = -.19$, $SE_b = .09$, $p = .035$. When identity integration levels were high, the relationship did not exist ($b = .02$, $SE_b = .10$, $p = .881$). This again provides evidence that identity integration is protective against ISP and,

counter-intuitively, that having *low* levels of religious conflict is a risk factor for ISP (albeit only at moderate or low levels of integration).

Figure 2

Moderating Effects of Identity Integration on the Relationship Between Religious Conflict and Internalized Sexual Prejudice

Note. Significant slopes are in black.

Discussion

This study aimed to explore the relationship between gay-religious identity integration and ISP in a sample of Australian gay men. Additionally, we explored the role of religious experiences, namely religious comfort and religious conflict, in explaining ISP, and examined whether gay-religious identity integration moderates these relationships. While the integration protection hypothesis (H1) received unequivocal support, the religious comfort and conflict hypotheses (H2) were not supported. Specifically, at the bivariate level, religious conflict was unrelated to ISP, and religious comfort was (conversely to our predictions) positively correlated with ISP. Despite these unexpected bivariate relationships, the moderation hypotheses (H3) were supported to a degree, in that identity integration was a

protective factor against ISP. Specifically, participants with high levels of identity integration consistently had the lowest ISP scores, regardless of the bivariate relationship shared with either religious conflict or religious comfort. Interestingly, and also against our predictions, a negative relationship emerged between experiences of religious conflict with ISO, but only for participants with low levels of identity integration.

Revisiting the Major Findings

Religious-Gay Identity Integration

As anticipated, identity integration was associated with lower levels of ISP. This corroborates previous findings in suggesting that the integration of traditionally conflicting identities is a protective factor. Now, we can add internalized sexual prejudice to the list of factors for which there is evidence that identity integration is protective against, including negative emotions (Anderson & Koc, 2020) and negative psychological health outcomes (Foster et al., 2015, Rosario et al., 2006). This may be due to individuals no longer facing a dissonance in their self-concept, and in lieu, experiencing a unified, complex, and comprehensive view of the self that allows for both religious and gay identities (Rodriguez & Ouellette, 2000), although this claim is speculative, and our data do not address this possibility. Moreover, integration allows for the holding of multiple identities, providing access to the additive protective effects posited by the social cure hypothesis (Haslam et al., 2012; Hinton et al., 2021).

Religious Comfort and Conflict

The hypothesis that religious comfort would negatively correlate with ISP (H2a) was not supported. Specifically, religious comfort was associated with higher levels of ISP. This finding was unexpected as the literature broadly depicts a positive relationship between religious comfort and beneficial psychosocial outcomes, including higher subjective wellbeing and social connectedness (Kelley & Chan, 2012). An explanation for these results

may be that the initial experience of religious comfort when coming out affords a sense of acceptance by the individual's religion, which may not match how the individual will be received by the members or leaders of their religious community. For instance, exposure to seemingly affirming messages from religious groups may conceal underlying intentions of encouraging suppression of same-sex attraction or change to a heterosexual identity (Jones et al., 2021; Pietkiewicz & Kolodziejczyk-Skrzypek, 2016). Therefore, initial feelings of comfort may endorse the continuation of religious engagement and extend an individual's subjection to teachings with undertones of sexual prejudice (i.e., the union of marriage being between a man and a woman) which in turn can result in increased ISP over time. Secondly, in taking comfort from religions when coming out, it is likely that sexual minorities already internalize negative religious messages pertaining to their sexuality. This may include messages such as "love the sinner, hate the sin" whereby the concept of homosexuality is accepted, but same-sex sexual acts are not (Mak & Tsang, 2008). Upon internalization of this message, instances of same-sex attraction and intimacy may activate the idea of 'sinning', stimulating feelings of shame and the development of ISP.

The hypothesis that ISP would positively correlate with accounts of religious conflict (H2b) was also not supported. In contradiction to previous findings (e.g., Gibbs & Goldbach, 2015), religious conflict and ISP were found to be unrelated. These results may be explained by experiences of religious conflict motivating a reappraisal of religious beliefs, participation, or connection after coming out. Specifically, individuals may apply religious coping strategies to reduce the perceived incompatibility between their beliefs and sexual identity (Jaspal & Cinnirella, 2010; Schuck & Liddle, 2001), such as a reduction in religious involvement (Barret & Barzan, 1996), the joining of alternative, more affirmative religious groups (Thumma, 1991), and reappraising God with benevolent human qualities (i.e., loving, caring). In applying these coping strategies, sexual minorities are reported to feel more

accepted by their faith (Jaspal & Cinnirella, 2010), which may reduce the influence of religious conflict on ISP.

Another potential explanation is that sexual minorities have sought alternative hermeneutics of biblical texts after experiencing conflict when coming out. This allows individuals to develop a more personal connection with their religion, perhaps using fewer literal interpretations of scripture (Pietkiewicz & Kolodziejczyk-Skrzypek, 2016). In particular, sexual minorities may adopt Quest-like religious orientations, as this approach considers religious beliefs as flexible and adaptable (Tozer & Hayes, 2004). Quest is defined as a "search for truth" whereby individuals challenge their religious beliefs and anticipate them to evolve over time. Quest has been found to be negatively related to prejudicial or intolerant attitudes and directly related to positive attitudes towards sexual minorities (McFarland, 1989). Moreover, Konik and Stewart (2004) found sexual minorities who are forced to analyze their identity in a variety of social milieus reported higher levels of identity achievement (i.e., feeling satisfied in the commitment to an identity after questioning it). Therefore, the exploration of various religious interpretations due to religious conflict may help sexual minorities find endorsement within their religious beliefs, diminishing the impact of initial experiences of religious conflict on ISP.

Interaction Effects

Identity integration significantly moderated the relationships between religious comfort and ISP (H3a) and religious conflict and ISP (H3b), thus supporting the moderation hypothesis. At higher degrees of identity integration, levels of ISP remained low, irrespective of the degree of religious conflict and comfort. This indicates that the effects of one's religious experience, whether conflicting or comforting, can be attenuated by greater identity integration. In addition, the harmful relationship between experiences of religious comfort and ISP disappeared at high levels of identity integration, This presents substantial evidence

for the value of assimilating supposedly incompatible identities to protect against identity conflict, which in turn has the potential to protect against damaging mental health outcomes (Scroggs et al., 2018), and the social advantages of belonging to multiple groups (McLeod, 2008). Interestingly, the unexpected protective relationship between experiences of religious conflict and *less* ISP emerged for participants with low levels of integration. This finding contradicts assumptions (and evidence, Anderson et al., 2020; Herek, 2004) in the literature that a negative - or at least complicated - coming out process is linked to poorer outcomes for sexual minority individuals. Indeed, these findings suggest the opposite. Although speculative, it's plausible that complicated experiences when coming out (such as experiences of religious conflict) mean the individual engages with a wider range or more effective coping strategies, which subsequently are protective against longer-term ISP. Although this is an interesting possibility, it remains an untested hypothesis.

Limitations and Future Directions

This study had multiple limitations. First, participants were asked if they identify as "gay (or bisexual)" and were not provided the option to specify. These participants were consequently clustered into a single group. Albeit this ensured the exclusion of heterosexual participants, it disallowed the investigation into the distinct experiences of gay and bisexual participants. Second, it was problematic that any bisexual men in the sample, in addition to the participants who identified as bicurious, pansexual, demisexual or "mostly straight" were asked to respond to ISP items that specifically targeted gay individuals (e.g., "gay men are overly promiscuous"). These issues impact the internal validity of the study. Third, the largest religious group was Christianity, followed by Catholicism, and the Church of Jesus Christ of Latter-day Saints. Therefore, the findings of this study may have limited generalizability for gay men who identify with other religions, such as Hinduism, Buddhism, and Islam, due to the dissimilarity between the belief systems. Fourth, we asked people to describe their

relationship with religion (past and present) with an open-ended question, which provided us with complex data that did not allow us to easily code (and thus we were unable to report portions of the sample that were currently vs previously religious). Finally, this study was conducted online, with participants recruited through a crowdsourcing platform. Thus, this study might be impacted by the standard suite of sampling bias associated with this method (see Zhang et al., 2017 for a discussion of measurement invariance and data collection mode effects), and the generalizability of these findings should be considered.

Considering this study's endorsement for the protective capacity of identity integration in religious gay men, future investigations could continue to explore individual factors relating to identity integration. For instance, this study could be replicated with the option for participants to specify their sexual orientation as either gay or bisexual. This would allow for an investigation into the differences in ISP experienced by religious gay and bisexual men. Research in this area is critical as bisexuals are reported to have markedly poorer mental health than their gay, lesbian, or heterosexual counterparts, for causes that are largely unknown (Taylor, 2018). A replicating study would reveal whether differences in ISP as a result of religious experiences are contributing to this disparity. Moreover, it would establish whether identity integration influences the ISP of gay and bisexual men in dissimilar ways.

Further research could also explore the differences in identity integration between genders. Research suggests considerable gender differences in sexual minority religious experiences (e.g. religion being protective for male but not female sexual minorities; Rosario et al., 2006). So far, the experiences of identity integration are assumed to be equal for male and female participants (Dahl & Galliher, 2009). However, additional research is required to reaffirm this finding as well as understand the experiences of sexual minorities who do not identify with binary labels (e.g., non-binary, genderfluid, transgender, gender diverse, etc),

since this demographic group are known to have particularly tenuous relationships with religion (Campbell et al., 2019).

Future research could also explore the strategies that have been found to supplement identity integration. According to Pietkiewicz and Kolodziejczyk-Skrzypek (2016), reducing religious involvement, adopting alternate scriptural interpretations, joining of more affirmative religious groups, having a sense of completeness and self-acceptance (i.e. viewing their sexuality as a purposeful decision by God), and amassing a broader knowledge of religious scripture, are argued to function both independently and simultaneously with each other. Therefore, extended analyses could identify the circumstances in which sexual minorities utilize these strategies, which strategies are most effective when used in conjunction, and the personal factors that drive the adoption of each strategy to best achieve gay-religious identity integration. Finally, in this paper we have used identity integration as a moderator variable, but it is equally plausible that it might be an outcome variable, or a predictor variable. Indeed, it is worth highlighting that all the variables included in this paper could be theoretically related to each other in other ways than those used in this paper (e.g., ISP could theoretically predict experiences of sexual conflict, etc.). The exact nature of identity integration is a debate yet to be resolved by the literature, and warrants continued attention.

Implications

These results have important implications. In particular, the knowledge that supposedly conflicting identities can effectively coexist may provide comfort for sexual minorities who are coming out and attempting to harmonize the two identities, as well as for gay men who wish to establish or manage a religious identity. These findings demonstrate that identity integration is not only achievable, but advantageous to psychosocial wellbeing,

and therefore may reduce the pressure to adopt potentially damaging coping strategies, such as identity rejection or compartmentalization.

Secondly, this study holds important theoretical implications. Specifically, these findings emphasize the utility of identity integration as an effective identity management strategy, thereby contributing to the evidence that the integration of supposedly incompatible identities can successfully protect against the harmful psychological wellbeing outcomes associated with identity conflict (Scroggs et al., 2018). Moreover, these findings highlight the benefit of multiple group membership as posited by the social cure hypothesis (Jetten et al., 2012) and contribute to the growing body of evidence that denounces identity-rejecting strategies (e.g., conversion therapies) by indicating that they have the potential to exacerbate the negative outcomes related to religious and sexual identity conflict (see Jones et al., 2021).

Concluding Remarks

To assert homosexuality as a viable and acceptable identity, sexual minorities must negotiate societal norms concerning relationships, intimacy, and behaviour in a heterosexist culture (Koc, 2021; Lewis et al., 2003). The literature tells us that the intrapsychic conflict between same-sex attraction and traditional religious doctrines puts sexual minorities at a heightened risk for negative outcomes (Anderson et al., 2020; Herek, 2004). However, this study suggests the opposite, and argues that experiences of religious conflict are unrelated to ISP, perhaps through an engagement in coping strategies that minimize the internalization of prejudicial attitudes in the long term. Additionally, religious comfort was demonstrated to exacerbate ISP. This was rationalized by religious comfort enabling a maintenance of religious commitment and therefore an extended exposure to, and internalization of prejudicial teachings. Gay-religious identity integration was found to moderate these effects, suggesting that greater identity integration is related to lower ISP, regardless of the degree of religious comfort and conflict. This has been interpreted as evidence for the protective benefit

of identity integration and belonging to multiple, positively perceived groups against the damaging psychosocial outcomes of identity conflict.

References

Anderson, J. R., & Koc, Y. (2020). Identity integration as a protective factor against guilt and

   shame for religious gay men. *The Journal of Sex Research*, *57*(8), 1059–1068.

   https://doi.org/10.1080/00224499.2020.1767026

Barret, R., & Barzan, R. (1996). Spiritual experiences of gay men and lesbians. *Counselling*

   and Values, *41*(1), 4–15. https://doi.org/10.1002/j.2161-007X.1996.tb00858.x

Baumeister, R. F., Shapiro, J. P., & Tice, D. M. (1985). Two kinds of identity crisis. *Journal*

   of Personality, *53*(3), 407–424. https://doi.org/10.1111/j.1467-6494.1985.tb00373.x

Beagan, B. L., & Hattie, B. (2015). Religion, spirituality, and LGBTQ identity integration.

   Journal of LGBT Issues in Counseling, *9*(2), 92–117.

   https://doi.org/10.1080/15538605.2015.1029204

Benet-Martinez, V., & Haritatos, J. (2005). Bicultural identity integration (BII): Components

   and psychosocial antecedents. *Journal of Personality*, *73*(4), 1015–1050.

   https://doi.org/10.1111/j.1467-6494.2005.00337.x

Bourn, J. R., Frantell, K. A., & Miles, J. R. (2018). Internalized heterosexism, religious

   coping, and psychache in LGB young adults who identify as religious. *Psychology of*

   Sexual Orientation and Gender Diversity, 5(3), 303-312.

   https://doi.org/10.1037/sgd0000274

Buxant, C., & Saroglou, V. (2008). Joining and leaving a new religious movement: A study of

   ex-members' mental health. *Mental Health, Religion & Culture*, *11*(3), 251–271.

   https://doi.org/10.1080/13674670701247528

Chan, C. S. (1989). Issues of identity development among Asian-American lesbians and gay

   men. *Journal of Counseling & Development*, *68*(1), 16–20.

   https://doi.org/10.1002/j.1556-6676.1989.tb02485.x

Chan, C. S. (1995). Issues of sexual identity in an ethnic minority: The case of Chinese American lesbians, gay men, and bisexual people. In A. R. D'Augelli & C. J. Patterson (Eds.), *Lesbian, gay, and bisexual identities over the lifespan: Psychological perspectives.* (pp. 87–101). Oxford University Press. https://doi.org/10.1093/9780195082319.003.0004

Chan, C. S., & Rhodes, J. E. (2013). Religious coping, posttraumatic stress, psychological distress, and posttraumatic growth among female survivors four years after Hurricane Katrina. *Journal of Traumatic Stress*, *26*(2), 257–265. https://doi.org/10.1002/jts.21801

Ciaffoni, S., Koc, Y., Monreal, D. C., González, R., Roblain, A., Hanioti, M,. & Anderson, J. R. (2020). Reconceptualizing internalised sexual prejudice: Self- vs. ingroup-related prejudice has different antecedents and consequences for identity, sexuality, and well-being for gay men [Paper Presentation]. European Congress of Social Psychology, Krakow, Poland.

Cochran, S. D., & Mays, V. M. (2000a). Lifetime prevalence of suicide symptoms and affective disorders among men reporting same-sex sexual partners: results from NHANES III. *American Journal of Public Health, 90*(4), 573-578. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1446201/

Dahl, A., & Galliher, R. (2009). LGBQQ young adult experiences of religious and sexual identity integration. *Journal of LGBT Issues in Counseling*, *3*, 92–112. https://doi.org/10.1080/15538600903005268

Dehlin, J. P., Galliher, R. V., Bradshaw, W. S., & Crowell, K. A. (2015). Navigating sexual and religious identity conflict: A Mormon perspective. *Identity: An International Journal of Theory and Research, 15*(1), 1–22. https://doi.org/10.1080/15283488.2014.989440

DeMarco, T. C., & Newheiser, A. K. (2019). When groups do not cure: Group esteem
moderates the social cure effect. *European Journal of Social Psychology, 49*(7), 1421–
1428. https://doi.org/10.1002/ejsp.2594

Exline, J. J. (2002). Stumbling blocks on the religious road: Fractured relationships, nagging
vices, and the inner struggle to believe. *Psychological Inquiry*, *13*(3), 182–189.
https://doi.org/10.1207/S15327965PLI1303_03

Field, A. (2013). *Discovering statistics using IBM SPSS statistics*. Sage.

Foster, K. A., Bowland, S. E., & Vosler, A. N. (2015). All the pain along with all the joy:
spiritual resilience in lesbian and gay Christians. *American Journal of Community
Psychology, 55*(1-2), 191-201. https://doi.org/10.1007/s10464-015-9704-4

Gibbs, J. J., & Goldbach, J. (2015). Religious conflict, sexual Identity, and suicidal
behaviours among LGBT young adults. *Archives of Suicide Research, 19*(4), 472- 488.
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4706071/pdf/nihms748914.pdf

Greenaway, K. H., Haslam, S. A., Cruwys, T., Branscombe, N. R., Ysseldyk, R., & Heldreth,
C. (2015). From "we" to "me": Group identification enhances perceived personal control
with consequences for health and well-being. *Journal of Personality and Social
Psychology*, *109*(1)*, 53-74. https://doi.org/10.1037/pspi0000019

Harrison, M. O., Koenig, H. G., Hays, J. C., Eme-Akwari, A. G., & Pargament, K. I. (2001).
The epidemiology of religious coping: A review of recent literature. *International
Review of Psychiatry*, *13*(2), 86–93. https://doi.org/10.1080/09540260124356

Haslam, C., Jetten, J., & Alexander, S. H. (2012). *The social cure: Identity, health and well-
being*. Psychology Press.

Herek, G. M. (1998). *Stigma and sexual orientation: Understanding prejudice against
lesbians, gay men, and bisexuals.* Sage Publications, Inc.
https://psycnet.apa.org/record/1998-07094-000

Herek, G. M. (2004). Beyond "homophobia": Thinking about sexual prejudice and stigma in the twenty-first century. *Sexuality Research & Social Policy*, *1*(2), 6–24. https://doi.org/10.1525/srsp.2004.1.2.6

Hinton, J. D., de la Piedad Garcia, X., Kaufmann, L. M., Koc, Y., & Anderson, J. R. (2021). A Systematic and Meta-Analytic Review of Identity Centrality among LGBTQ Groups: An Assessment of Psychosocial Correlates. *The Journal of Sex Research*, 1-19. https://doi.org/10.1080/00224499.2021.1967849

Huynh, Q.-L. (2009). *Variations in Biculturalism: Measurement, Validity, Mental and Physical Health Correlates, and Group Differences* [Unpublished dissertation]. University of California, Riverside. https://escholarship.org/uc/item/0369z2bh

Iyer, A., Jetten, J., Tsivrikos, D., Postmes, T., & Haslam, S. A. (2009). The more (and the more compatible) the merrier: Multiple group memberships and identity compatibility as predictors of adjustment after life transitions. *British Journal of Social Psychology, 48*(4), 707–733. https://doi.org/10.1348/014466608X397628

Jaspal, R., & Cinnirella, M. (2010). Coping with potentially incompatible identities: Accounts of religious, ethnic, and sexual identities from British Pakistani men who identify as Muslim and gay. *The British Journal of Social Psychology*, *49*(4), 849–870. https://doi.org/10.1348/014466609X485025

Jetten, J., Haslam, C., & Haslam, A., S. (2012). *The social cure: identity, health and well-being*. Psychology Press.

Johnston, L., & Jenkins, D. (2004). Coming out in mid-adulthood. *Journal of Gay & Lesbian Social Services*, *16*(2), 19–42. https://doi.org/10.1300/J041v16n02_02

Jones, T., Powers, J., Rollander, A. H., Despott, N., Carman, M., Jones, T. W., ... & Bourne, A. (2021). Religious conversion practices and LGBTQA+ youth. *Sexuality Research and Social Policy,* 1-10. https://doi.org/10.1007/s13178-021-00615-5

Kelley, M. M., & Chan, K. T. (2012). Assessing the role of attachment to God, meaning, and

religious coping as mediators in the grief experience. *Death Studies*, *36*(3), 199–227.

https://doi.org/10.1080/07481187.2011.553317

Koc., Y. (2021). Lack of ordinary privileges in a gay men's life: Navigating through

privileged systems. In E. Rodríguez-Dorans & J. Holmes (Eds.), *The everyday lives of*

gay men: Autoethnographies of the ordinary. Routledge.

Koc, Y., & Vignoles, V. L. (2016). Global identification predicts gay–male identity

integration and well-being among Turkish gay men. *British Journal of Social*

Psychology, 55(4), 643–661. http://doi.org./10.1111/bjso.12160

Koc, Y., & Vignoles, V. L. (2018). Global identification helps increase identity integration

among Turkish gay men. *Psychology & Sexuality, 9(*4), 329–342.

https://doi.org/10.1080/19419899.2018.

Koc, Y., Sahin, H., Garner, A., & Anderson, J. (2021). Societal acceptance increases Muslim-

gay identity integration for highly religious individuals… but only when the ingroup

status is stable. *Self and Identity*. Advance online publication.

https://doi.org/10.1080/15298868.2021.1927821

Konik, J., & Stewart, A. (2004). Sexual identity development in the context of compulsory

heterosexuality. *Journal of Personality*, *72*, 815–844. https://doi.org/10.1111/j.0022-

3506.2004.00281.x

Lease, S. H., Horne, S. G., & Noffsinger-Frazier, N. (2005). Affirming faith experiences and

psychological health for Caucasian lesbian, gay, and bisexual individuals. *Journal of*

Counseling Psychology, *52*(3), 378–388. https://doi.org/10.1037/0022-0167.52.3.378

Lewis, R., Derlega, V., Griffin, J., & Krowinski, A. (2003). Stressors for gay men and

lesbians: life stress, gay-related stress, stigma consciousness, and depressive symptoms.

Journal of Social and Clinical Psychology, *22*, 716–729.

https://doi.org/10.1521/jscp.22.6.716.22932

Lira de la Rosa, E. N. (2018). Examining the intersections of gay identity, ethnic identity, and

spirituality and their relationship with psychological distress and internalized

heterosexism. *Theses and Dissertations*. https://dc.uwm.edu/etd/1660

Loiacano, D. K. (1989). Gay identity issues among Black Americans: Racism, homophobia,

and the need for validation. *Journal of Counseling & Development*, *68*(1), 21–25.

https://doi.org/10.1002/j.1556-6676.1989.tb02486.x

Mak, H. K., & Tsang, J.-A. (2008). Separating the 'sinner' from the 'sin': Religious

orientation and prejudiced behaviour toward sexual orientation and promiscuous sex.

Journal for the Scientific Study of Religion, *47*(3), 379–392.

https://doi.org/10.1111/j.1468-5906.2008.00416.x

Mitha, K., Ali, S., & Koc, Y. (2021). Challenges to identity integration amongst sexual

minority British Muslim South Asian men. *Journal of Community & Applied Social

Psychology*. Advance online publication. https://doi.org/10.1002/casp.2527

McFarland, S. G. (1989). Religious orientations and the targets of discrimination. *Journal for

the Scientific Study of Religion*, *28*(3), 324–336. https://doi.org/10.2307/1386743

McLeod, S. (2008). *Social identity theory*. Simply Psychology.

Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of Health and

Social Behavior*, *36*(1), 38–56.

Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual

populations: Conceptual issues and research evidence. *Psychological Bulletin*, *129*(5),

674–697. https://doi.org/10.1037/0033-2909.129.5.674

Meyer, I. H., & Dean, L. (1998). Internalized homophobia, intimacy, and sexual behavior

among gay and bisexual men. In *Stigma and sexual orientation: Understanding*

prejudice against lesbians, gay men, and bisexuals (pp. 160–186). Sage Publications, Inc. https://doi.org/10.4135/9781452243818.n8

Norcliffe, D. (1999). *Islam: Faith and practice*. Sussex Academic Press.

Norris, F. H., Stevens, S. P., Pfefferbaum, B., Wyche, K. F., & Pfefferbaum, R. L. (2008). Community resilience as a metaphor, theory, set of capacities, and strategy for disaster readiness. *American Journal of Community Psychology*, *41*(1), 127–150. https://doi.org/10.1007/s10464-007-9156-6

Page, M. J. L., Lindahl, K. M., & Malik, N. M. (2013). The role of religion and stress in sexual identity and mental health among LGB youth. *Journal of Research on Adolescence*, *23*(4). https://doi.org/10.1111/jora.12025

Palan, S., & Schitter, C. (2018). Prolific. ac—A subject pool for online experiments. *Journal of Behavioral and Experimental Finance*, *17*, 22-27. https://doi.org/10.1016/j.jbef.2017.12.004

Pargament, K. I. (1997). *The psychology of religion and coping: Theory, research, practice*. Guilford Press.

Parks, C. A., Hughes, T. L., & Matthews, A. K. (2004). Race/ethnicity and sexual orientation: Intersecting identities. *Cultural Diversity and Ethnic Minority Psychology*, *10*(3), 241–254. https://doi.org/10.1037/1099-9809.10.3.241

Pietkiewicz, I. J., & Kołodziejczyk-Skrzypek, M. (2016). Living in sin? How gay Catholics manage their conflicting sexual and religious identities. *Archives of Sexual Behavior*, *45*(6), 1573–1585. https://doi.org/10.1007/s10508-016-0752-0

Ream, G. L., & Savin-Williams, R. C. (2005). Reconciling Christianity and positive non-heterosexual identity in adolescence, with implications for psychological well-being. *Journal of Gay & Lesbian Issues in Education*, *2*(3), 19–36. https://doi.org/10.1300/J367v02n03_03

Roccas, S., & Brewer, M. B. (2002). Social identity complexity. *Personality and Social Psychology Review*, 6(2), 88–106. https://doi.org/10.1207/S15327957PSPR0602_01

Rodriguez, E. M., & Ouellette, S. C. (2000). Gay and lesbian Christians: Homosexual and religious identity integration in the members and participants of a gay-positive church. *Journal for the Scientific Study of Religion, 39*(3), 333–347. https://doi.org/10.1111/0021-8294.00028

Rosario, M., Schrimshaw, E. W., Hunter, J., & Braun, L. (2006). Sexual identity development among gay, lesbian, and bisexual youths: Consistency and change over time. *Journal of Sex Research*, 43(1), 46–58. https://doi.org/10.1080/00224490609552298

Schuck, K. D., & Liddle, B. J. (2001). Religious conflicts experienced by lesbian, gay, and bisexual individuals. *Journal of Gay & Lesbian Psychotherapy*, 5(2), 63–82. https://doi.org/10.1300/J236v05n02_07

Scroggs, B., Miller, J. M., & Stanfield, M. H. (2018). Identity development and integration of religious identities in gender and sexual minority emerging adults. *Journal for the Scientific Study of Religion*, 57(3), 604–615. https://doi.org/10.1111/jssr.12538

Stevens, R. A. Jr. (2004). Understanding gay identity development within the college environment. *Journal of College Student Development*, 45(2), 185–206. https://doi.org/10.1353/csd.2004.0028

Tabachnick, B. G., Fidell, L. S., & Ullman, J. B. (2007). *Using multivariate statistics* (Vol. 5). Pearson Boston, MA.

Tajfel, H., & Turner, J. C. (1979). An integrative theory of intergroup conflict. In W. G. Austin & S. Worchel (Eds.), *The social psychology of intergroup relations* (pp. 33–47). Brooks/Cole.

Tan, P. P. (2005). The importance of spirituality among gay and lesbian individuals. *Journal of Homosexuality*, 49(2), 135–144. https://doi.org/10.1300/J082v49n02_08

Taylor, J. (2018). Bisexual mental health: A call to action. *Issues in Mental Health Nursing*, *39*(1), 83–92. https://doi.org/10.1080/01612840.2017.1391904

The jamovi project (2021). jamovi (Version 1.6) [Computer Software]. Retrieved from https://www.jamovi.org

Thumma, S. (1991). Negotiating a religious identity: The case of the gay evangelical. *Sociology of Religion*, *52*(4), 333–347. https://doi.org/10.2307/3710850

Tozer, E. E. & Hayes, J. A. (2004). Why do individuals seek conversion therapy?: The role of religiosity, internalized homonegativity, and identity development. *The Counselling Psychologist*, *32*(5), 716-740. http://doi.org/10.1177/0011000004267563

Worrell, S., Waling, A., Anderson, J., Fairchild, J., Lyons, A., Pepping, C., & Bourne, A. (2021). Lean on Me: Exploring Suicide Prevention and Mental Health-Related Peer Support in Melbourne's LGBTQ Communities.

Yip, A. K. (1999). The politics of counter-rejection: Gay Christians and the church. *Journal of Homosexuality, 37*(2), 47–63. https://doi.org/10. 1300/J082v37n02_03

Zinnbauer, B. J., & Pargament, K. I. (2005). Religiousness and spirituality. In *Handbook of the psychology of religion and spirituality* (pp. 21–42). The Guilford Press.

BLINDED FOR REVIEW (2021). The relationship between religion and internalised prejudice in sexual minorities: A Systematic Review. *The Journal of Sex Research, Manuscript under Review.*