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THE EFFECTS OF MACHISMO, MARIANISMO AND MINORITY STRESS ON

MENTAL HEALTH IN THE LATINX LGBTQ+ COMMUNITY

BY

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Abstract

The Latinx LGBTQ+ community has been found to be at a greater risk of negative mental health outcomes. Rates of suicide, depression, anxiety, and other mental health issues disproportionately affect this population, but somehow, it is still grossly underrepresented within current literature and conceptualizations of why this community is at such a high risk for poor mental health outcomes are rare. The present proposed study aims to create a new perspective for the analysis of this relationship by incorporating minority stress theory, intersectionality, and culture-specific dimensions to reflect their effects on mental health. Specifically, machismo and marianismo will be analyzed within this conceptualization to provide meaningful cultural context. The proposed methodology involves a series of self-report measures for minority stress, experiences with machismo and marianismo, and mental health followed by semi-structured interviews where conceptualizations of minority stress, and experiences with machismo and marianismo will be explored and recorded. Participants will be anyone over the age of 18 who identifies as either White and LGBTQ+, Latinx and LGBTQ+, or straight and Latinx (N=60) recruited from internet groups that service these communities. The study will confirm that the Latinx LGBTQ+ community is at greater risk of experiencing machismo and marianismo as well as minority stress. It will also support the mediational model that indicates that machismo and marianismo has a significant impact on minority stress, which then greatly influences mental health within Latinx LGBTQ+ community members. In combining these cultural dimensions with conceptualizations of intersectionality, minority stress, and mental health, the proposed study can reflect the lived experiences of this community in order to better serve them.

Keywords: Minority stress, Intersectionality, Latinx LGBTQ+, Machismo, Marianismo

The Effects of Machismo, Marianismo and Minority Stress on Mental Health in the Latinx

LGBTQ+ Community

As the Latin-American community began to become a prominent facet of the population within the United States, expectations of a unifying label were placed onto them. The first of these terms was' Hispanic', used to refer to anyone from a Spanish-speaking country. After criticisms of the terms' inherent focus on Spain's colonial history in Latin-America, the term 'Latino' became popular. This term referred to anyone from a Latin-American country, but many refused to use it, arguing that it distilled the varied and unique cultures of Latin-America into a monolith (De Onis, 2017; Simon, 2020). As recently as the early 2000s a new word began to gain popularity for identification within this community. 'Latinx' was a term created by queer Latinx community members who chose to oppose the inherent gendering that occurs within the Spanish language (De Onis, 2017; Simon, 2020). While many argue that it is an anglicization of a Spanish word and is hard to pronounce in Spanish, others have chosen to use it as an identifying term, particularly within the Latinx LGBTQ+ community (De Onis, 2017; Simon, 2020).

Being members of an intersectional community composed of more than one marginalized identity, Latinx LGBTQ+ individuals face a variety of difficulties. As racial and ethnic minorities within the general United States population, this community can be subject to explicit and implicit racial bias, microaggressions, and xenophobia. As sexual minorities, this population can also be exposed to homophobia, transphobia, and other manifestations of hate. In addition, the Latinx LGBTQ+ community faces potential homophobia based on cultural values from the general Latinx population as well as racism and fetishization from the general LGBTQ+ community. Despite this potentially heightened exposure to discrimination and violence based on

their identities, as well as the potential for mental health issues as a result of these stressors, these communities are grossly understudied within the current psychological literature (Garcia-Perez, 2020).

       The proposed study is designed with the intention of accurately reflecting the experiences of the Latinx LGBTQ+ community to foster a greater understanding of the negative mental health outcomes that disproportionately affect them. Additionally, the proposed study will provide context into a few factors that might affect Latinx LGBTQ+ mental health. To do so, the cultural norms of machismo and marianismo will be analyzed alongside mental health and identity. The research question that will guide the proposed study is as follows: Are machismo and marianismo factors that underlie the relationship between the Latinx LGBTQ+ community and negative mental health outcomes?

Marginalization

       To reflect the experiences of intersectional marginalized communities like the Latinx LGBTQ+ population, it is essential to gain an understanding of what marginalization is and how it affects these communities. Young (2000) describes marginalization as a form of oppression characterized by the unjust or prejudiced exclusion of a certain group of people from meaningful participation in society. Within the social context of the United States, Black, Latinx, Indigenous, immigrant, LGBTQ+, and disabled communities are among those subject to marginalization. This is not only a theoretical framework, marginalization has significant impacts on the livelihoods of those who are subjected to it (McLaughlin et al., 2010; Mustanski et al., 2010). Findings within the existing literature surrounding marginalized communities and mental health have indicated significant relationships between marginalized status and higher rates of mental disorders such as major depression and posttraumatic stress disorder, as well as a higher

prevalence of lifetime suicidality (Mustanski et al., 2010). Additionally, McLaughlin et al. (2010) examined the role of discrimination in marginalized communities and responses to it. Their study was designed to analyze experiences of discrimination and the prevalence of psychiatric disorders within a variety of marginalized groups. The results of this study showed strong associations between past-year discrimination and psychiatric disorders (McLaughlin et al., 2010). While this research provides significant insight into the ways that marginalization can negatively impact the communities affected by it, the literature fails to reflect the existence of multiple identities, or intersectionality (Parra & Hastings, 2018).

Intersectionality

Rooted in Black feminist writing, intersectionality is conceptualized as the particular lived experiences of subjugation that people who belong to multiple minority groups are exposed to (Crenshaw, 1989). Within the current literature, researchers have applied the concept of intersectionality to produce detailed and multifaceted findings that provide more insight into the communities being examined. By analyzing stressors associated with multiple identities, Anhalt et al. (2020) were able to draw relationships between these stressors —Latinx discrimination, LGBT discrimination, and internalized homonegativity— and depressive symptoms as well as a decline in self-esteem. Additional research employing an intersectional framework has also indicated that people from multiple marginalized communities develop distinct coping strategies that reflect the discrimination and negative messages that are often directed at them from either or both of their identities (Schmitz et al., 2019). These findings emphasize the importance of this framework in the accurate portrayal of intersectional communities like the Latinx LGBTQ+ community, which is at risk of negative mental health outcomes (Anhalt et al., 2020).

Latinx LGBTQ+ Community

      Empirical analysis on the varied experiences of LGBTQ+ people of color is scarce and much of the existing research, while promising, fails to acknowledge the challenges faced by individuals who identify with intersecting marginalized identities. Bridges et al. (2003) looked at the different forms of discrimination and stigmatization lesbians of color face as members of more than one marginalized community. Anecdotal evidence from Latina lesbians reflected experiences of discrimination from both within as well as outside their communities (Bridges et al., 2003). Latina lesbians' existence lies in opposition to a majority of the culturally held beliefs that underlie the Latinx community. In this community, women are assigned the roles of caregivers who are subservient to their husbands (Bridges et al., 2003). By definition, lesbians within the Latinx community cannot conform to these norms. As a result, they might face discrimination from their families and the general Latinx community. Additionally, as racial and ethnic minorities within the LGBTQ+ community, Latina lesbians face the possibility of experiencing racism and fetishization (Bridges et al., 2003). Moreover, research has indicated that racial minorities who identify as members of the LGBTQ+ community had an increased risk of suicide attempts in their youth (O'Donnell et al., 2011). Ethnic and racial minority groups have been shown to have lower lifetime risks of mental disorders and suicide than LGBTQ+ groups, which makes the findings of this study particularly alarming. Additional findings indicated that individuals who identified as both an ethnic/racial minority and LGBTQ+ were faced with elevated risk for suicide attempts, even if symptomology for depression and substance abuse was absent (O'Donnell et al., 2011). Continuing with a culturally informed intersectional framework, the proposed study will also analyze specific cultural dimensions that characterize the lived experiences of the Latinx community, namely, machismo and marianismo.

Machismo & Marianismo

As researchers begin to explore the origins of the relationship between having multiple marginalized identities and negative mental health, it is essential to understand the mechanisms that underlie the lived experiences of the members of these communities. While there is not a single definition, machismo is generally accepted to be a traditional gender role found within Latinx communities that defines masculinity as tough, aggressive, controlling, and womanizing (Arciniega et al, 2008). It is most often represented as a system of honor, tied to status and reputation, that men are expected to follow (Terrazas-Carrillo et al., 2019). This involves using whatever means necessary to maintain their honor and their control of their partners and family members, including violence (Terrazas-Carrillo et al., 2019). Marianismo, on the other hand, is the expectation placed on women within the Latinx community to fit into their submissive feminine role. Femininity within the Latinx community is expected to reflect characteristics such as virtue, humility, spirituality, self-sacrifice, and nonsexuality (Rondon, 2003). This concept is rooted in representations of the Virgin Mary, who has been described to exist with a greater moral and spiritual strength than her male counterparts, and who also adapted to her role as subservient to the men in her life (Rondon, 2003). Conceptualizations of what this cultural dimension means to individuals within the Latinx LGBTQ+ community have been found to vary greatly (Estrada et al., 2011). Within Estrada et al.,'s (2011) study, participants described their preconceptions of machismo to be hypermasculine, violent, unemotional, and domineering. When asked about how they understand it, most of their sample of Mexican American gay men, described machismo to be nurturing, respectful, and culturally important.

Arciniega et al. (2008) describe the historical conceptualization of these particular cultural norms. In addition to the commonly accepted negative aspects of this cultural dimension

such as violent behavior in men and the subordination of women, the researchers explored the

positive characteristics of machismo. They argued that past research that focused on the negative

dimensions of machismo are misrepresenting the reality of the Latinx community. By analyzing

this culturally significant dimension from a different perspective, Arciniega et al. were able to

create a new definition for machismo. They found two branches of machismo, traditional

machismo, and a new domain, caballerismo. Traditional machismo was described by the authors

to represent the aggressive, sexist, chauvinistic, hypermasculine, and sex-role dominant

dimension. Caballerismo, a term coined by Arciniega et al. was said to represent the nurturing,

family-centered, chivalrous, and emotionally connected aspects of machismo. Machismo has

been found to predict a variety of negative outcomes, with one of the most relevant being the

adoption of explicit homophobia (Hirai et al., 2018). Research that surveyed Latinx college

students found machismo to be a strong direct predictor of prejudice toward homosexuals (Hirai

et al., 2018). These results describe a direct link between these traditional gender role beliefs and

views on the LGBTQ+ community. In the literature that surveyed Latinx youth and young

adults, researchers found that strong identification with machismo was associated with a

heightened likelihood of committing sexual and physical dating violence against their partners

(Rondon, 2003; Terrazas-Carrillo, 2019).

Machismo is not an isolated cultural phenomenon. Machismo is enacted alongside

marianismo, which is an individual cultural dimension imposed upon women that defines their

roles within the Latinx community. Women within this culture are expected to be submissive to

men, virtuous, humble, virginal, nurturing, and willing to withstand sacrifices and suffering on

behalf of her family (Castillo et al., 2010). While these are mainly negative expectations, women

who ascribe to marianismo are also expected to be strong, capable, and proactive (Castillo et al.,

2010). The type of womanhood defined by marianismo imposes a level of powerlessness and complacency on women, while also placing a great load of physical and emotional responsibility (Castillo et al., 2010; Terrazas-Carrillo et al., 2019). Past research analyzing marianismo and its impact on those who ascribe to it have shown associations between this cultural norm and negative cognitive-emotional factors as well as poor psychological well-being (Nuñez et al., 2016). Strong identification with marianismo has also been associated with a higher prevalence of domestic violence and gender violence as both are byproducts of the sense of subjugation that is assigned to women within the Latinx community (Rondon, 2003). Machismo and marianismo provide significant context for understanding the Latinx LGBTQ+ community. Due to the nature of both of these constructs, individuals who identify as both Latinx and LGBTQ+ are met with rejection, denial, and sometimes even violence (Hirai et al., 2018). The form of masculinity that is expected of men within Latinx populations as a result of machismo does not allow for many defining features of the LGBTQ+ community. The same can be said for marianismo, which emphasizes submission to male partners, expectations of motherhood, and suppressed sexuality. Many of these elements are actively challenged by LGBTQ+ individuals in this community, sometimes at the expense of their well-being (Schmitz et al., 2019). Moving forward with attempts to understand the mental health risks that the Latinx LGBTQ+ community face, minority stress can serve as a productive theoretical framework.

Minority Stress

Based on the conceptualization of stress that has been prevalent within recent literature, minority stress theory posits that individuals from stigmatized communities are exposed to more stress due to their marginalized position within society (Meyer, 2003). Meyer (2003) describes a variety of essential facets that comprise this theoretical framework. The processes that factor into

the increased level of stress that marginalized populations are subjected to are chronic and acute

external stressful events, expectations of these stressful events, the hypervigilance that arises

from this expectation, and the internalization of negative societal attitudes (Meyer, 2003).

Minority stress is described to be the result of stressors that are specific to the community itself

and cause a variety of negative mental and physical health outcomes in these communities

(Meyer, 2015). An additional aspect of minority stress is resilience, which describes the

community wide and individual coping skills that are employed in order to overcome some of

the damage that might result from discrimination. Researchers have found that different

communities have their own coping strategies, such as social support and providing resources for

minimizing stress due to instances of prejudice (Kuper et al., 2014; Meyer, 2015; Zea et al.,

1999). This is reflective of the way that each marginalized community is exposed to group-

specific stressors.

      The application of minority stress theory alongside intersectionality has yielded a variety

of important findings. By attending to the intersections of race and sexuality through the

theoretical framework of minority stress, Noyola et al. (2020) were able to gain valuable

information about the ways in which the Latinx LGBTQ+ community experiences and copes

with discrimination. Findings from Noyola et al.'s study showed that Latinx LGBTQ+

individuals experienced ambivalence from their families around their sexuality; alongside this,

participants also reported that marianismo and machismo were among the cultural factors that

contributed to the experiences that they had with their families and Latinx communities

surrounding their sexuality. Other research (McConnell et al., 2018) compared the experiences of

minority stress across different racial/ethnic groups and sexual orientations. Findings from their

study showed that experiences of perceived stigma tied to the participants' LGBTQ+ identity

were about the same across racial/ethnic differences, but LGBTQ+ identifying individuals who were also racial/ethnic minorities experienced higher levels of stigma tied to their racial/ethnic identity (McConnell et al., 2018).

Within the Latinx LGBTQ+ community, minority stress is not solely influenced by the general United States society; instead, it is influenced by the norms that exist within their communities as well. The expectations placed upon every member of these intersectional communities contribute to the ways in which they experience discrimination and from who this discrimination comes from. Machismo and marianismo are only the beginning of a variety of norms that the LGBTQ+ Latinx population is expected to uphold, and when their identity lies in opposition with these norms, the resulting stress and experiences of this community manifest within their mental health.

Hypotheses

The proposed study will involve interviews and self-report measures for variables like experiences with machismo and marianismo, minority stress, and mental health. Comparisons would then be made across different populations, namely, the Latinx LGBTQ+, heterosexual Latinx, and White LGBTQ+ communities. A variety of hypotheses will be proposed in order to be able to draw the relationship between the Latinx LGBTQ+ community, minority stress, machismo, marianismo, and mental health. It is hypothesized that the Latinx LGBTQ+ community will experience more minority stress than White LGBTQ+ identifying people and heterosexual Latinx people. In addition to this relationship, it is also hypothesized that Latinx LGBTQ+ participants would report more negative experiences with machismo and marianismo compared to White LGBTQ+ participants and heterosexual Latinx participants. The third hypothesis employs a mediation model, in which experiences with machismo and marianismo

will have a significant relationship with minority stress, and minority stress would have a significant correlation with mental health within the LGBTQ+ Latinx community.

Proposed Method

Participants

Participants will be anyone over the age of 18 who identifies as either White and LGBTQ+, Latinx and heterosexual, or Latinx and LGBTQ+. The target population is Latinx LGBTQ+ individuals, but their responses will be compared to responses from heterosexual Latinx and White LGBTQ+ participants. Modeled after Cao et al. (2017), a large effect size is anticipated from studies involving minority stress. In order to achieve a large effect size for this study, the sample size should consist of 63 participants (Cohen, 1992); to account for any incomplete responses or missing data, researchers should aim for about 65-70 participants. The sample is expected to consist of approximately 20 participants from each demographic, that is, White LGBTQ+, Latinx LGBTQ+ and heterosexual Latinx.

Recruitment will be conducted mainly online through posts in Facebook groups that cater to Latinx populations, LGBTQ+ populations and the Latinx and LGBTQ+ community, requirements for racial/ethnic identity and sexual orientation will be made clear. Along with this, snowballing will be used to bring in community members who were not reached by the posts. Specifically, participants will be asked to tell their friends and community members about the study and encourage them to participate. No compensation will be offered in order to avoid coercion.

Materials

Minority Stress

Minority stress will be measured using a composite of two scales alongside an interview. The first will be the LGBT People of Color Microagressions Scale (Balsam et al., 2011). This scale, consisting of 18 items, is meant to assess the microaggressions experienced by marginalized individuals. The subscales that will be used within the proposed study will assess racism in LGBT communities, heterosexism in racial/ethnic minority communities, and racism in dating and close relationships. Items describe experiences such as "Having to educate White LGBT people about race issues" and "Feeling misunderstood by people in your racial/ethnic community" (Balsam et al., 2011). Responses on each item are to be rated on a 5-point Likert scale (0- *Did not happen/not applicable to me*, 4- *It happened, and it bothered me EXTREMELY*). Scoring will result in a composite score where the higher the average, the more minority stress the individual will have experienced. The overall α of this version of the measure was found to be .92, which indicates strong reliability (Balsam et al., 2011). Along with this, the scales that will be used were also found to have strong internal validity (Balsam et al., 2011). Construct validity, established using correlations with measures of psychological distress, was also found to be within adequate levels to establish validity (Balsam et al., 2011).

The second scale will be the Minority Stress Scale which was developed to measure a variety of stressors associated with sexual orientation stigma (Norcini Pala et al., 2017). This measure consists of 43 items, of which 18 will be used in this study. Items will be modified in order to reflect the experiences of heterosexual participants. The items will describe situations or feelings that fall in line with minority stress. Participants will rate them on a 5-point Likert scale (0-*Strongly disagree,* 4-*Strongly agree*) as well as dichotomous scales. Sample items are as

follows: "I have been discriminated against" and "I expect to be discriminated against by my

family" (Norcini Pala et al., 2017). This scale uses an 8-factor model, but not all of the sub-

scales will be used within the proposed study. Those that will be used are Enacted Stigma,

Expectations of Discrimination, and Expectations of Discrimination from family members.

Overall scores will be used, with a higher score indicating higher levels of minority stress.

Correlations with the Perceived Stress Questionnaire helped establish the convergent validity of

the measure and assessments of the factors indicated good internal reliability, with an ordinal $\alpha >$

.81 (Norcini Pala et al., 2017). Scores on these scales will be combined in averages to compose a

composite score for statistical analysis.

Along with their responses to these measures, participants will also be interviewed about

their perspectives on this construct. This semi-structured interview will not contain many

questions in an effort to allow space for the participant to speak about their experiences freely.

The maximum number of questions for each interview will be 3. These questions are intended to

gain a more in depth look at the experiences of this community and how they relate to their peers

as well as their experiences with their communities as they pertain to sexuality and racial/ethnic

background. The questions are as follows: Do you think you experience more stress or distress

because of your identity? Why or why not? What kinds of experiences do you think are unique to

you and those who identify the same way you do? When you were answering the questions, was

there a particular situation or experience that you think reflected what was being asked? If so,

could you expand on it? The intention for including these questions is to gain a more holistic

perspective on responses to the surveys. In particular, the first question, asking whether or not

the participant thought they experienced more stress due to their identity was included in an

attempt to understand if the participant has any perception on the amount of minority stress they

were experiencing and if it was accurate in comparison to their scores on the measures. The

second question is included in order to understand participants' perceptions of their status as

marginalized individuals and the experiences that they think are representative of this. The last

question is included in order to allow for the participants to expand on memories that might have

arisen due to the nature of the items of the scales, mental health resources will be provided in

order to address any distress as a result of the subject material. Researchers will organize the

qualitative data collected based on themes that are identified within the interviews. All three

questions have been designed to augment the responses already gained through the scales in a

format that allows space for the participant to reflect their experiences by their own terms and

with their own language.

Machismo and Marianismo

Machismo and marianismo will be operationalized using two measures as well as

responses obtained through interviews. The first measure will be the Machismo Scale developed

by Arciniega et al. (2008), which includes 20 items. This scale is designed to measure the extent

to which the participant agrees with traditional ideals that reflect machismo. This scale is

composed of two subscales, one to assess the level to which an individual identifies with

Traditional Machismo, and another to assess alignment with Caballerismo. Statements that

reflect aspects of machismo are presented as prompts. Within the proposed study, items will be

modified in order to reflect lived experiences instead of the extent to which a participant believes

in these features. For instance "In a family, a father's wish is law" will be modified to "In my

family, my father's wish was law", "It would be shameful for a man to cry in front of his

children" will be modified to "I have been ashamed to cry in front of my family", and "The

family is more important than the individual" will be modified to "In my experience, the family

is more important than the individual" (Arciniega et al., 2008). Each item is to be responded to

using a 7-point Likert response scale (1-*very strongly disagree*, 7- *very strongly agree*). Scores

will be determined by creating an average of responses the higher the number, the more an

individual has been exposed to these beliefs. The internal consistency of the measure, calculated

using the Traditional Machismo and Caballerismo factors of the scale, were found to be strong

with results of .84 and .71 (Arciniega et al., 2008).

Marianismo, the second factor of this construct will be measured using the Marianismo

Beliefs scale (Castillo et al., 2010). This scale is intended to reflect the extent to which an

individual aligns themselves with the beliefs of traditional marianismo. It contains 24 items,

composed of five different subscales, Family Pillar, Virtuous and Chaste, Subordinate to Others,

Silencing Self to Maintain Harmony, and Spiritual Pillar. Each reflects a widely held expectation

placed upon women in this culture. These items will also be modified in order to reflect lived

experiences instead of alignment with beliefs. Items such as "Satisfy her partner's sexual needs

without argument" will be modified to "Women in my family are expected to be able to satisfy

their partner's needs without argument", "Keep the family unified" will be modified to "Women

in my family are expected to keep the family unified", and "Be pure" will be modified to

"Women in my family are expected to be pure" (Castillo et al., 2010). The items are rated using

a 4-point scale (1-*strongly disagree*, 4-*strongly agree*). Scores for this scale will be an average of

responses to all of the items, the higher the score, the more the individual has experienced

marianismo. Positive correlations were found between this scale and another scale that measured

cultural constructs (Castillo et al., 2010). Discriminant validity was also established using

measures for behavioral acculturation as measured by the Anglo Orientation Scale.

As is the case with machismo, marianismo will also be assessed using an interview

format. Machismo and marianismo are still relatively new within the psychological field. Most

measures that are intended to reflect these ideals were developed using a heteronormative sample

that does not take into consideration the contributions of the LGBTQ+ Latinx community in the

conceptualization of this cultural factor. Interviews will be semi-structured, and exploratory in

nature. Prompts will ask about participants' responses to the measures, as well as any

experiences that might not have been included in the measures. For instance, How would you

describe machismo or marianismo to someone who has never heard of it? Do you think you fit

within the ideals of machismo or marianismo? These questions will prompt discussions about

participants' perceptions of their own masculinity or femininity as well as their experiences with

this cultural factor and what it means to them. Researchers will organize the data collected

according to identified themes. These questions are more exploratory and intended to supplement

responses to the scales as well as expanding the knowledge that exists surrounding machismo

and marianismo by adding perspectives from an underrepresented population.

Mental Health

Within the scope of the proposed study, mental health will be operationalized as an

average between two scales. The first scale will be the Generalized Anxiety Disorder Scale-7

(Spitzer et al., 2006). This measure is intended to identify potential cases of this disorder as well

as assess the severity of the symptoms. It is composed of seven items that reflect actual

diagnostic criteria from the Diagnostic and Statistical Manual of Mental Disorders (DSM)

(American Psychiatric Association, 2013). Participants are asked about the frequency of certain

symptoms during the previous two weeks, and their responses are rated on a four point scale (0-

not at all, 3-*nearly every day*). Sample items are "trouble relaxing" and "feeling nervous,

anxious, or on edge" (Spitzer et al., 2006). The total score on the scale is simply the sum of all of the responses, a score of 10 or higher would suggest that the individual exhibits symptoms consistent with moderate to severe anxiety. Internal consistency was found to be very strong ($\alpha = 0.92$) (Spitzer et al., 2006). The scale also showed strong correlations with two different anxiety scales, the Beck Anxiety Inventory (r=0.72) and the anxiety subscale of the Symptom Checklist-90 (r=0.74) (Spitzer et al., 2006).

The second scale to be used to represent mental health is the Patient Health Questionnaire-9 (Kroenke, et al., 2001). This scale is intended to serve as a diagnostic instrument for depression. The 9-item questionnaire includes diagnostic criteria taken from the DSM (American Psychiatric Association, 2013) and assesses the frequency of the symptoms, should the participant experience them. Sample items are "Little interest or pleasure in doing things" and "Feeling tired or having little energy". Each item is responded to on a four point scale (0-*not at all*, 3-*nearly every day*). The scale has been found to have adequate criterion validity, calculated using an independent structured mental health professional interview (Kroenke, et al., 2001). Internal reliability was very strong, with a Cronbach's α of 0.89 (Kroenke, et al., 2001).

Procedure

The study will be run in the lab, although alternative forms of communication and data collection could be employed should the pandemic continue to interfere with in-person meetings. The study will begin with obtaining informed consent from participants. After consent is acquired, participants will complete a survey that would collect their demographic information such as sexual orientation and racial/ethnic identity. Following this, they will complete the minority stress scales and machismo and marianismo scales. Subsequently, participants will be asked to join a researcher in an interview, where their answers will be recorded using an audio

device. Once the interview is concluded, participants will then complete the mental health

measures.

Ethics

Research has indicated that the Latinx LGBTQ+ community has experienced more

negative mental health outcomes (McLaughlin et al., 2010; O'Donnell et al., 2011; Parra, et al.,

2018). The proposed study could provide essential context on what factors lead to the

development of this relationship. The participants likely would not directly benefit from the

study, but the results of the study could indirectly benefit them in their relationships with and

their understanding of their communities. Along with this, studies that can accurately identify the

root of the issues that affect the Latinx LGBTQ+ community can inform interventions, as well as

activism and advocacy for this community. The proposed study could also augment the current

knowledge surrounding the population of interest. By taking intersectional approaches, as well as

including a culture-specific dimension like machismo and marianismo to look at the prevalence

of minority stress within this community, the proposed study could provide important

frameworks for future studies. In drawing a connection between cultural dimensions and the

risks that these communities face, the proposed study would be one of the first to consider the

dimension of machismo and marianismo in relation to minority stress within this community.

In order to acquire genuine and meaningful data from participants, researchers will

clarify that participation is completely voluntary. Participants will be informed of the potential

risks, the subject of the study, and their ability to opt-out at any point in the study. Financial

compensation will not be offered, and no authority will be employed in the process of

recruitment. Therefore, participation will not be coercive. Additionally, the proposed study is

expected to be within the limits of minimal risk, as it does not involve deception or any protected

or vulnerable populations. Due to the nature of the study, the subjects touched upon within it might lead to a negative reaction from participants. Participants will be asked about their sexual orientation, experiences of discrimination, and their mental health. Each of these subjects could cause discomfort for the participant. The proposed study is designed with the intention of accurately reflecting the experiences of these communities in order to better serve them, this cannot be done without insight from community members. Participants will be informed of the potential for emotional and psychological distress. Mental health resources such as Monsour Counseling and Psychological Services will be provided should the participant experience any distress. Outside of these potential risks, the proposed study should be within the levels of minimal risk. To combat any risk that might arise due to the collection of sensitive information, data collected would be confidential. Due to the fact that participants will be interviewed and audio recordings will be collected, anonymous data collection is not possible. In an effort to maintain confidentiality, all data will be associated with assigned numbers. Personally identifiable information will be removed, and participants will be informed of the confidential nature of the study. In order to protect the data, contact lists, recruitment records, audio recordings, and any other documents that may contain identifiable information will be destroyed as soon as they are not necessary for the proposed study. Additionally, all data that will be collected will be stored in a password-protected file with very limited access. The proposed study will be conducted in a manner that poses the least amount of risk for the participants, despite the possible risk of psychological or emotional distress, which can be mitigated with the provision of mental health resources, this study does not pose very much risk to the participants and can yield valuable contributions to the field.

Predicted Results

A 1-way analysis of variance (ANOVA) will be conducted in order to determine if the Latinx LGBTQ+ community experiences more minority stress than their White LGBTQ+ and heterosexual Latinx counterparts. Composite scores on the two minority stress measures will be the dependent variable for this test and they will be compared across three groups, Latinx LGBTQ+ participants, heterosexual Latinx participants, and White LGBTQ+ participants. It is expected that levels of minority stress will vary depending on the identities of the participant. An a priori contrast analysis will indicate that those who identify as Latinx LGBTQ+ will have significantly higher levels of minority stress than heterosexual Latinx individuals and White LGBTQ+ individuals. Results will also show that heterosexual Latinx individuals have higher levels of minority stress than the White LGBTQ+ groups, as is shown in Figure 1.

Figure 1

Expected levels of minority stress across sexual orientation and racial/ethnic identity
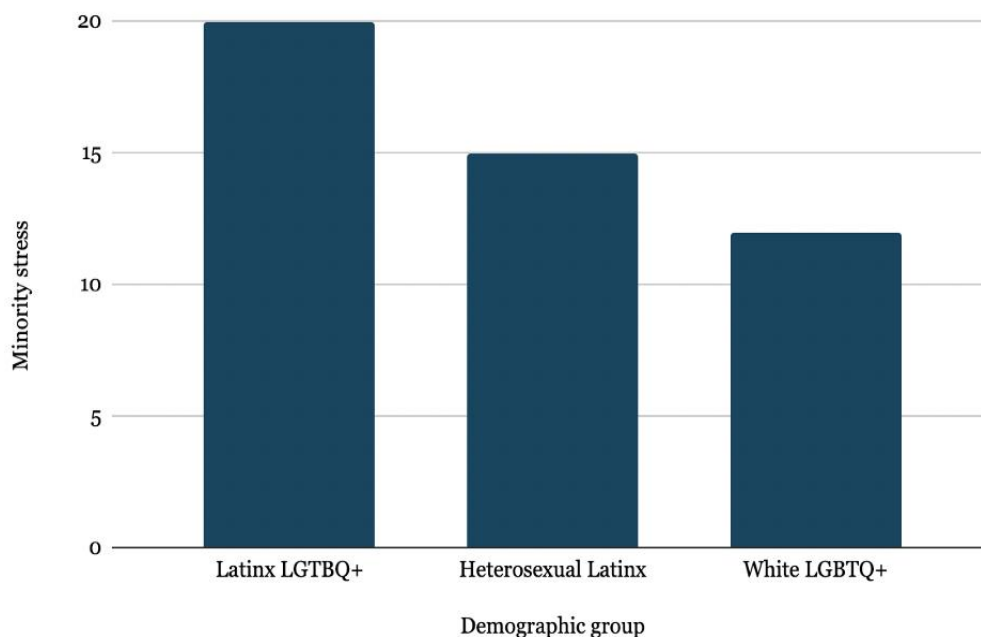
These predictions reflect the current literature which has identified LGBTQ+ communities of color to have higher prevalences of enduring and coping with minority stress (Kuper et al., 2014; McConnell et al., 2018) than their White and heterosexual counterparts. Minority stress describes the chronic stress that an individual is subjected to as a result of their identification with a marginalized group. It can then be concluded that individuals who identify with more than one marginalized group will experience more minority stress as a result of their intersecting identities.

An additional 1-way ANOVA will be conducted in order to evaluate differences in experiences with machismo and marianismo across three groups. Results are anticipated to indicate that the three groups of Latinx LGBTQ+ participants, White LGBTQ+ participants, and heterosexual Latinx participants will report significantly different scores for experiences with machismo and marianismo. An a priori contrast analysis will indicate that the Latinx LGBTQ+ group will report more experiences with machismo and marianismo than the White LGBTQ+ and the heterosexual Latinx groups. Results will also demonstrate that the heterosexual Latinx group will indicate more experiences with machismo and marianismo than the White LGBTQ+ group. As has been previously described, machismo and marianismo are unique cultural dimensions that characterize the experiences of every member of the Latinx community regardless of gender identification or sexual orientation (Nuñez et al., 2016; Rondon, 2003; Terrazas-Carrillo et al., 2019). Due to the norms that are perpetuated by machismo and marianismo, Latinx LGBTQ+ identifying individuals are more likely to be met with negative reactions to their identity from their families. This is because the expectations of women to be childbearers and subordinant to their husbands, as an example, cannot be perpetuated within a homosexual relationship. The same can be said for men, the expectations that are placed on

them, such as having and maintaining power over his wife is not possible within homosexual

relationships. The Latinx LGBTQ+ community is then met with opposition as they do not

conform to these norms or live up to the expectations that are placed on them. This is a

phenomenon that is not experienced by those who are not LGBTQ+ identifying within the Latinx

community or those in the LGBTQ+ community who are not Latinx (Arciniega et al., 2008;

Hirai et al., 2018).

Figure 2

Mediational model for minority stress, machismo and marianismo, and mental health
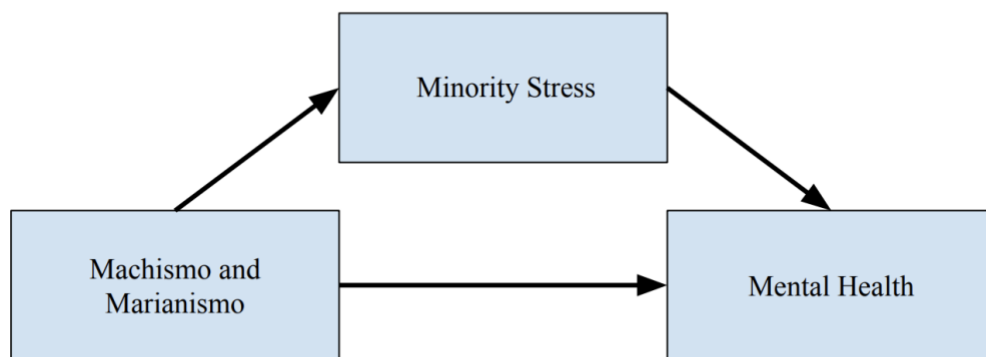
In addition to these findings, it is expected that experiences with machismo and

marianismo will have a significant impact on minority stress, which in turn will have a

significant relationship with mental health among LGBTQ+ identifying Latinx participants, as is

shown in Figure 2. Literature that looks at the intersections of race and sexuality with minority

stress as a theoretical framework is limited, but a few studies (Estrada et al., 2011; Noyola et al.,

2020) have indicated that certain cultural factors contribute to the well-being of this community.

In an effort to expand this perspective, machismo and marianismo are being analyzed within this

mediational model and they are anticipated to contribute to the effects of minority stress in the mental health of Latinx LGBTQ+ individuals. This is because this population might already be experiencing high levels of minority stress and could further be subject to homophobia as a manifestation of machismo and marianismo which can contribute to the mental health of these individuals. In order to accurately represent this mediation, Baron and Kenny's (1986) mediational model will be employed.

The first step in testing this mediational model is to establish a relationship between the initial predictor and the dependent variable. Within the proposed study, a strong correlation is expected to be found between experiences with machismo and marianismo and mental health. As reports of negative experiences with machismo and marianismo increase, mental health scores will rise, indicating more severe symptomatology. The second step in testing this model is to establish relationships between each individual pair of variables. A simple correlation statistical test will be conducted in order to establish these relationships. A positive correlation is anticipated between the variables of machismo and marianismo and minority stress, indicating that levels of minority stress will increase as more negative experiences of machismo and marianismo are reported. Machismo and marianismo operate as oppressive systems within Latinx culture, representing experiences with this cultural dimension can also reflect the levels of minority stress that are exhibited by those in the Latinx LGBTQ+ community. Continuing with the second step of this mediational model, a relationship will also be found between minority stress and mental health. As levels of minority stress increase, mental health will go into a decline (and scores on the mental health measures within the proposed study would increase). The relationship between minority stress and mental health is a well-studied area that has shown that those who report experiencing more minority stress are more likely to also struggle with

mental health (McLaughlin et al., 2010; O'Donnell et al., 2011; Parra, et al., 2018). To proceed with the third step of Baron & Kenny's (1986) mediational model, a multiple regression will be conducted, with machismo and marianismo and minority stress as predictors of mental health outcomes. Machismo and marianismo are expected to have a diminished impact on mental health, while minority stress is anticipated to continue to have a significant impact on mental health. This would indicate that this cultural dimension has a significant impact on minority stress which then predicts outcomes in mental health. This prediction has been made with support from studies that have suggested relationships between multiple minority communities and poor mental health outcomes (Estrada et al., 2011; Noyola et al., 2020).

Discussion

The proposed study will examine the origins of negative mental health outcomes within the Latinx, LGBTQ+ community. In particular, the proposed study includes minority stress and machismo and marianismo as predictors for negative mental health outcomes. The results of the proposed study are expected to indicate that Latinx LGBTQ+ individuals experience more minority stress and have more negative experiences with machismo and marianismo than their White LGBTQ+ and heterosexual Latinx counterparts. These results are predicted to suggest that machismo and marianismo have a significant impact on minority stress, which then has an impact on the mental health of Latinx LGBTQ+ individuals. As has been previously established, this community is at greater risk of a variety of negative mental health outcomes, and the intention of the proposed study is to establish machismo and marianismo as well as minority stress as factors involved in this relationship.

   Limitations of this study include that it is anticipated to occur in person. This means that

researchers can influence the ways in which participants respond to the interview questions and

the survey questions. The study occurring in person also implies that participants be within close

proximity of the lab, this means that there will be a geographic limitation on the participants in

the study which might influence the experiences of the participants. Additionally, the sample is

not representative of the entire LGBTQ+ and Latinx community, these communities are not

homogenous and variations that naturally occur within them, such as nationalities or sexualities,

might not be represented within the scope of the study. Responses are also not anonymous, even

though collected data will be kept confidential. Participants might be hesitant to speak freely due

to social desirability or other external factors. The generalizability and application of this study is

also very limited, seeing as the participants might not represent the realities of the actual

populations. While this study was designed to establish a new perspective for the causes of

negative mental health outcomes in Latinx LGBTQ+ populations, it is unable to establish any

causal relationships. Alongside this, the measures for mental health within the proposed study

might not represent the experiences of marginalized groups. The presentation and experiences of

symptoms of mental illness can be greatly affected by the culture within which an individual is

socialized. The proposed study can inform new directions in research related to this community

as a means to combat the negative mental health outcomes that this community faces. Future

research can attempt to establish a causal relationship between cultural factors like machismo

and marianismo and poor mental health outcomes for this population. Researchers can also

develop more culturally informed measures that might represent the experiences that

communities of color have with mental illness. Additionally, research can test potentially

effective interventions, such as educational seminars, therapeutic methodologies, or other forms

of interventions that can mitigate some of the effects of cultural factors on the mental health of those in intersecting marginalized communities. New directions for exploration include other cultural factors, such as the widespread nature of Catholicism within the Latinx community which can also influence the levels of minority stress experienced by Latinx LGBTQ+ individuals. Other cultural factors can greatly influence this population, and they deserve analysis within the context of the well-being of this community.

Mental health, as well as the factors that contribute to it, has recently been the focus of a wide variety of research. As is the case with most other aspects of society, psychological research is neglecting marginalized groups such as Latinx LGBTQ+ individuals, and these communities suffer as a consequence. The proposed study was created to bridge this gap in literature, but there is still so much that the psychological world does not understand about this community and other marginalized communities. In a world that is increasingly violent towards those who lie outside of the norm, understanding the needs of these communities and cultivating the resources that are conducive to their well-being are necessary acts of revolution.

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