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**Living in the Crucible: A Qualitative Look at Psychologists'
Perspectives on the Development of Their Intersectional LGB-
Christian Identities**

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Living in the Crucible: A Qualitative Look at Psychologists' Perspectives on the
Development of Their Intersectional LGB-Christian Identities

by

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Presented to the Faculty of the
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Newberg, Oregon

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Their Intersectional LGB-Christian Identities

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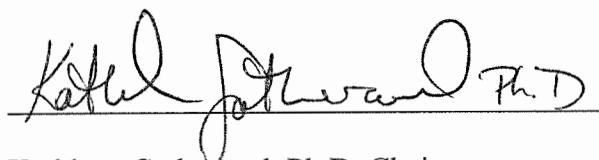
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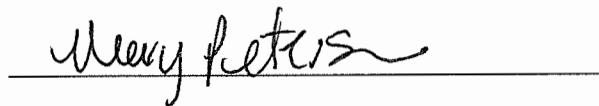
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Abstract

Current research has become increasingly focused on examining the nature of intersectional identities. The intersectional identity of being both LGBT and Christian is difficult to maintain. Both communities are often in conflict, and this can create a great amount of distress. Many individuals who struggle to hold the intersectional identity of being LGBT and Christian choose one identity and drop the other. For this study, I examined the experience of psychologists who are able to hold both identities of being LGBT and Christian. I was interested in discovering resiliency factors, and whether graduate psychological training influenced participants' ability to hold the intersectional identity of being LGBT and Christian. This study includes 7 qualitative interviews with psychologists who identify as both LGB and Christian. Findings indicate that integrating the identities of LGB and Christian is a difficult process that requires perseverance, and different participants handled their intersectional identity differently in regards to their social groups. The implications of these results for doctoral training and Intersectional Identity theory are discussed.

Table of Contents

Approval Page	ii
Abstract	iii
Chapter 1: Introduction	1
Intersectionality	1
Sexual Orientation Identity Development	3
Christian Identity Development	5
Intersection of LGB and Christian Identities	6
Psychological Training	8
Community Based Participatory Research Model	9
Current Study	10
Chapter 2: Method	11
Participants	11
Materials	13
Procedure	13
Data Analysis	13
Chapter 3: Results	14
Social Groups	14
Psychology Community	14
Christian Community	16
LGB Community	21
Family	23
Process of Deconstruction and Reintegration	24

Graduate Training.....	26
Current Congruent Identity.....	28
Chapter 4: Discussion.....	30
Clinical Implications.....	33
Limitations.....	33
Conclusion.....	34
References.....	35
Appendix A Informed Consent for Research Participants.....	40
Appendix B Structured Interview Questions.....	41
Appendix C Curriculum Vitae.....	42

Chapter 1

Introduction

Intersectionality

Intersectionality has become a prominent topic in psychological science and research. Each individual person has an intricate combination of identities attached to them. Hays (1996) deconstructed multicultural identity into 10 distinct identity markers, each of which could contain areas of power and privilege. Some identities have more power and privilege, while others' have less. Because every person has multiple identity markers, their intersectional identity may result in compounded oppression experienced by the individual.

Individuals who have multiple minority identities learn how to manage the layering of these diverse identity markers to create a holistic sense of self, which may be difficult if the identity markers are conflicting and oppositional in nature due to societal and subcultural values. To create a holistic sense of identity, many individuals use identity negotiation to manage their intersectional identities. Some individuals flex the importance of their identity marker, depending on their current context. A 2014 study by Kumar et al. (2014) showed that Arab-descendent male adolescents negotiated their identities by “shift[ing] [the] meaning and salience” of their identities to fit the current social context (p. 36). Being a minority within a majority context influenced the males to emphasize their diverse identity, whereas minority group cohesion decreased in settings/contexts where they were in the majority (Kumar et al., 2014). When identities lead to personal experiences of marginalization, participants

demonstrated “denial, resignation to fate, and reactive coping, including stereotype-confirming behavior” (Kumar et al., 2014, p. 38).

In a 2014 study looking at the experiences of children as they negotiate gender identity and expression, Brinkman et al. observed that children factor in the cost of not fitting to societal standards. In their analysis of the study, the researchers noticed that most students utilized a cost/benefit analysis to determine how much they might challenge gender stereotypes, and engage in authentic gender expression (Brinkman et al., 2014). The majority of students weighed their value of personal congruence against the potential backlash they could experience (Brinkman et al., 2014). These results further demonstrate the significant role that a person’s cultural context has in shaping how they negotiates their identity.

Role strain can also occur when an individual inhabits two roles that are in opposition to each other (Giesler, 2012). Some intersectional identities include oppositional identities that have conflicting roles as identified by society (Giesler, 2012). Related to the current study, the diversity markers of identifying as Christian and LGBT are at odds in terms of their associated social roles. In majority culture, to identify as Christian is related to living a life that fits into a heteronormative role. Likewise, identifying as LGBT is associated with a presumed role of being oppositional to religious institutions. Current studies demonstrate various, sometimes conflicting ways in which individuals manage role strain, which may be influenced by confounding variables of culture and specific identity markers.

In a 2012 study examining how gender role strain was managed by gay fathers, Giesler found that some men rejected traditional roles by creating a new gender role that was congruent with their sexual identity. However, a study conducted by Fields et al. (2015) found that when trying to manage the conflict between traditional masculine expectations and sexual orientation,

black men who have sex with men reported decreased psychological wellbeing leading to increased risk for poor health outcomes. In an attempt to manage the cognitive dissonance created by their gender role strain, the participants downplayed their sexual attractions, and overcompensated by acting in overtly traditional masculine ways (Fields et al., 2015).

Sexual Orientation Identity Development

One diverse identity marker that has become especially salient in today's current political and social climate is sexual orientation. In 1979, Vivienne Cass created a model for LGB identity development, entitled the Homosexual Identity Formation Model, which remains a popular model of LGBT identity development (Kennedy & Oswalt, 2014). Cass (1979) viewed homosexual identity formation as a developmental process that was significantly influenced by one's interaction with the broader social environment. Cass (1979) divided her conceptualization into six stages, moving from an awareness of queerness to the final stage of outward congruence. While frequently referenced, a meta-analysis by Kennedy and Oswalt (2014) conclude that research supporting Cass's model of LGB identity development is mixed. Attitudes toward sexually diverse persons have changed since the 1970's when Cass developed her model (Kennedy & Oswalt, 2014). Today's more accepting culture may influence LGB identity development in different ways (Kennedy & Oswalt, 2014).

In addition to Cass' 1979 model, other models and studies examining LGB identity development have been examined. Most LGB individuals, regardless of when they were born, report traversing LGB identity formation at a younger age, comparable to heterosexual peers (Calzo et al., 2011). Once LGB individuals discover their sexual attraction to members of the same-sex in adolescence, they typically follow the same sequence of events by experimenting and engaging sexually with same-sex partners (Cohen & Savin-Williams, 1996). Self-identifying

as LGB is then followed by the public coming out process. Easy navigation of the LGB identity formation process is associated with more positive psychological benefits, as difficult navigation is correlated with diminished mood (depressive and anxious), behavioral issues, and poor self-esteem (Rosario et al., 2011). Additional theories take a multidimensional and non-linear approach that incorporates the influences of social, cultural, and individual contexts such as intersecting identities (Shapiro et al., 2010). These approaches may be more appropriate for female sexual identity development, as women are more likely to identify with a fluid sexual identity and have relationships with both opposite and same-sex partners (Diamond, 2007).

Identifying with a sexual minority status can lead to significant experiences of oppression and marginalization (Herek, 2015). In a 2002 study (Herek et al., 2002, 450 LGB individuals identified and described 272 crimes that specifically targeted the victims' sexual orientation. Familial support is a protective factor for LGBT individuals, and intolerance from family can result in negative mental health outcomes, such as increased suicidality and depression (Ryan et al., 2010). The experience of external oppression and stigmatization can impact self-stigma and internalized oppression for LGBT individuals, resulting in increased negative mental health outcomes (Herek et al., 2015; Meyer, 1995; Meyer, 2003). *Minority Stress Theory* posits that minority individuals are less likely to thrive in the face of oppression and discrimination (Meyer, 1995; Meyer, 2003). Many mental health providers still exhibit a bias against LGBT patients (Fallin-Bennet, 2015). Managing and accepting one's sexually diverse identity is important for psychological development and growth. Research shows that acceptance and openness lead to improved mental health for LGBT individuals (Riggle et al., 2016). Even the experience of minority stress can lead to positive outcomes through developing coping skills and resilience (Meyer, 2003).

Christian Identity Development

Aspects of development unique to the formation of a Christian identity are undeveloped within the current psychological literature. Theory and research of faith development may provide a foundation that helps understand Christian identity development. The most well-known and referenced theory regarding faith formation is Fowler's *Stages of Faith Development* (1981), which have been reproduced and reinforced by supporting research (Das & Harries, 1996).

Fowler conceptualized faith development into seven stages. In *Stage 0: Primal Faith*, the infant develops a basic sense of comfort with caregivers and the universe, which was highly influenced by Erickson's stage regarding trust vs. mistrust (Parker, 2006). In *Stage 1: Intuitive-Projective Faith*, faith of the child is influenced by stories, and the construct of God is "not unlike Superman or Santa Claus" (Parker, 2006, p. 339). In *Stage 2: Mythical-Literal Faith*, capacity for concrete thinking shapes faith so that God is seen as a "cosmic judge" (Parker, 2006, p. 339) who repays action with consequences. In *Stage 3: Synthetic-Conventional Faith*, individuals follow the conventions of their faith group/tradition, as interpersonal aspects of faith are highly valued (Parker, 2006). In *Stage 4: Individuative-Reflective Faith*, individuals start to internalize their beliefs, and reflect on the personal meaning of their faith, which "may leave one estranged from previously valued faith groups" (Parker, 2006, p. 339). In *Stage 5: Conjunctive Faith*, individuals start to acknowledge the existence of contradictions in their faith, holding the belief that "'God' is seen to include mystery and paradox" (Parker, 2006, p. 339). In Fowler's final stage, *Stage 6: Universalizing Faith*, the individual accepts the value of all faith backgrounds while remaining committed to "values of universal justice and love" (Parker, 2006, p. 339).

While Fowler viewed faith development as a series of tasks in sequence, others suggest faith development is more “additive and integrative” (Clore & Fitzgerald, 2002, p. 106) with each new stage building on and making new meaning out of earlier stages. Faith development is a chiefly cognitive process, even though it appears emotional and behavioral (Clore & Fitzgerald, 2002). Faith development deconstructs previous cognitive structures to then reconstruct and integrate developing cognitions related to faith; creating an “integrat[ed] center of value and meaning” (Clore & Fitzgerald, 2002, p. 98). Many individuals raised in church are handed a particular set of doctrines as practiced by their church during childhood into adolescence, and are tasked with creating an integrated belief system.

Ability to explore faith beliefs beyond the religious doctrine of one’s upbringing is significantly influenced by attachment. In a 2010 study conducted by Hart et al., it was observed that attachment anxiety predicted faith development (according to Fowler’s stages of faith development). Increased attachment anxiety (fear of being abandoned), was correlated with lower levels of faith development (Hart et al., 2010). Individuals with more secure attachment styles who saw themselves “as worthy of love and acceptance” (Hart et al., 2010, p. 126), were able to transcend fundamental belief systems toward higher stages of faith development. The researchers also use this conceptualization to describe religious fundamentalism, explaining the lack of religious belief exploration as the result of insecure attachments, and fear engaging in the uncertainty and disintegration that precludes faith development (Hart et al., 2010).

Intersection of LGB and Christian Identities

Social conflicts between Christian groups and LGBT groups make it difficult to manage the intersectional identity of being an LGB Christian. LGB persons exposed to non-affirming religions often exhibit greater internalized homophobia, but a 2012 study by Barnes and Meyer

also found that exposure did not correlate with increased mental health concerns. Another study found that LGBT individuals in Jewish congregations negotiated their identities in several ways. Some participants found more accepting synagogues, and Jewish LGBT partners so that their identities would not be at odds, and some assimilated by either “passing as Christian or heterosexual” (Faulkner & Hecht, 2011, p. 842) due to fear of social isolation and discrimination. Others “insisted on the integration of their identities, regardless of their experiences with anti-Semitism and negative attitudes toward LGBTQ, did not use closeting as a strategy and actively enacted their identities through their work and choice of community” (Faulkner & Hecht, 2011, p. 842).

Specifically examining the intersection of Christian faith and a lesbian or gay sexual identity, Foster et al. (2015) found the process of integrating faith and sexuality supported resilience in lesbian and gay Christians. Main factors that contributed to successful integration were (a) developing a theology consistent with sexual identity, (b) finding a church community where sexual orientation was affirmed, or (c) remaining in the current church community to help work through differences (Foster et al., 2015). It is also important to note that most of the identity integration occurred during young adulthood, once the individuals left home for college (Foster et al., 2015).

Attachment plays an important role in faith development (Hart et al., 2010). Additionally, family support or rejection plays a significant role in the mental health of LGBT individuals (Ryan et al., 2010). A 2017 study on the experience of LGBT youth in Seventh-Day Adventist families, found over 75% of the 495 LGBT youth experienced anxiety about coming out to their families due to fear of rejection (VanderWaal et al.). When individuals did eventually come out, only 25% received messages of unconditional love and acceptance (VanderWaal et al., 2017).

Young adults who fear being rejection and/or received rejecting messages are more likely to experience stagnation in faith development (Hart et al., 2010), if they do not reject their faith altogether.

This trend extends to the much larger Christian population in the United States. A 2017 Pew Research Center survey found that 65% of white Evangelical Protestants and 33% of Catholics are opposed to same-sex marriage, whose denominations comprise over half (65%) of self-identified Christians in the United States (Pew Research Center, 2018). These statistics reveal that many LGBT individuals have founded fears about how their families may react to their coming out. But if family acceptance is positively correlated with mature faith development, then the majority of LGBT people should be rejecting their faith due to fears of rejection, instead of developing their faith while simultaneously holding their LGBT identity. It is important to examine what additional supportive factors may be influencing the ability to hold both a mature Christian faith and LGBT identity.

Psychological Training

The American Psychological Association has advocated for training programs in Psychology to focus on the development of graduate students' competencies (Rubin et al., 2007). Each student is required to demonstrate proficient competence among an array of areas related to professional and clinical practice (Rubin et al., 2007). Several important areas of competence relate to the personal development of the graduate student, such as competencies of "Reflective Practice," "Self-Assessment," and those related to cultural diversity (Fouad et al., 2009, p. S10–S14). Many of these specific competencies focus on the developing psychologist's "self-knowledge, awareness, and understanding" of their own personal identity, and how that influences their interactions with other people (Fouad et al., 2009, p. S14). To be a competent

clinician who is prepared for clinical practice post-training, Fouad et al. (2009) argue that graduate students must verify an ability to embody personal and professional congruence, an awareness of personal traits and perspectives that influence interpersonal interactions, and an ability to censure personal issues from professional issues. A 2016 survey conducted by Grus et al. suggests that doctorate programs and internship training sites focus less on self-reflective competencies related to personal development, compared to other areas of competence.

A competency model highlights professional identity development as a main goal of graduate training. According to Fowler's stages of faith development, qualities such as one's form of logic, perspective taking, social awareness, and symbolic function all contribute to advanced faith development (Parker, 2009). Each of these qualities is challenged and nurtured during graduate training to produce mature practitioners who have a secure sense of self and worldview. LGB Christian Psychologists can be very influential with peers, as higher education levels correspond to greater activism as LGBT allies (Jones, & Brewster, 2016).

Community Based Participatory Research Model

In researching the experiences of a group, it is important to remember that "individuals belong to larger, socially constructed identities that shape strengths, challenges, and disparities" (Collins et al., 2018, p. 3). Community-Based Participatory Research (CBPR) is a model of research that incorporates community input to help support marginalized communities (Collins et al., 2018). Marginalized communities may be suspicious toward majority culture and traditional research models may seem invasive. CBPR helps to remedy this dynamic by incorporating the voice of the community within the research process so that findings are relevant and beneficial to the growth of the community (Collins et al., 2018).

Due to the marginalization that is experienced by LGBT peoples from heteronormative society (Herek, 2015; Herek et al., 2002), and the further discrimination faced by LGBT-Christians from general Christianity (VanderWaal et al., 2017; Pew Research Center, 2017), those that consider themselves LGBT and Christian can be considered a marginalized community. The needs and safety of the LGBT-Christian community become an essential ethical consideration for research (Collins et al., 2018). To promote equity, this study engages a CBPR approach by including community participants in creating the research question; using community consultants to help determine appropriate research questions that are meaningful to the community.

Current Study

Few studies in the psychological literature examine the intersectionality of LGBT and Christian identities, especially in relation to psychological graduate training. Examining how individuals hold this sometimes contentious intersectional identity can illuminate resiliency factors for diverse intersectional identities. For the current study, I examined how psychologists who identify as LGB and Christian hold these identities together and whether graduate training in psychology influenced how an individual integrates the identities of being LGB and Christian.

Chapter 2

Method

Participants

Seven participants were identified using a convenience sample acquired through snowball sampling. Initial participants were found through mutual contacts within the George Fox University Graduate School of Clinical Psychology. Subsequent participants were identified through referrals provided by initial participants. Participants did not receive any compensation for their participation. For the purposes of this study, all participants explicitly identified as gay, lesbian, or bisexual, as well as Christian. All participants held a doctorate degree in psychology. Participants' ages ranged from 30 to 60 years, with most participants falling within the 40- to 50-year range. Gender distribution was representative of the psychological field, with three participants identifying as men. Majority of participants identified as white. Due to potential identifiable characteristics within a small population, more specific demographic information was not obtained. Participants who identified as transgender, or other identities of the LGBTQ+ spectrum were not included due to potential confounding variables and the possibility their unique experiences may include other significant areas of conflict (i.e., gender roles, transitioning procedures), which may not be as salient to gay, lesbian, or bisexual individuals. Instead of using the full term of LGBTQ+, I will refer to LGB (lesbian, gay, bisexual) individuals for this study. This study was approved by the Internal Review Board (IRB) at George Fox University, and all participants gave their informed consent to participate in the study

Using a Community Based Participatory Research model, the development of this study included the input of community consultants. Two individuals were consulted to receive their input about the focus of the study. The first consultant was a 29-year-old, Caucasian male who identifies as gay and Christian. He received his Doctorate of Clinical Psychology degree from George Fox University, and currently works in integrated healthcare in the local small city. He experiences issues related to his intersectional identity of being gay and Christian. The second consultant was a 34-year-old, Caucasian female who identifies as lesbian. She does not currently identify as Christian, but comes from a Christian background and now identifies as agnostic. She also received her Doctorate of Clinical Psychology degree from George Fox University. She currently is employed at a university counseling center in the local city, where she works extensively with LGBTQ students.

I am currently a graduate student in the Doctorate in Clinical Psychology program at George Fox University. I identify as a gay man, and also identify as Christian. Raised in a Christian household, my Christian faith is an important aspect of my identity, alongside my sexual orientation. I have experienced the conflict that arises between the identities/groups of Christians and LGBTQ persons. Many close friends and family do not believe that I can hold both identities simultaneously, as is representative of many Christian groups. I have also experienced rejection from LGBTQ persons who reject the idea that I can be a gay person of faith. The intersectional identity of being gay and Christian is a difficult identity for me to hold, and I have encountered many individuals who chose to reject one identity in favor of the other. I think it is important to examine the possible resiliency factors that contribute to one's ability to hold this sometimes contentious intersectional identity.

Materials

Participants were interviewed using a series of 11 questions. A one-hour structured interview was planned for each participant. The questions were developed with feedback from the community consultants who identify as LGB and Christian. The interview structure is presented in Appendix A.

Procedure

Participants were first contacted by faculty member in the Graduate School of Clinical Psychology at George Fox University or other participants in the study as is consistent with snowball sampling. The researcher contacted each prospective participant, and gained consent to participate in the study. The structured interviews were conducted in hour-long appointments. Meeting locations were selected to provide maximum solitude and privacy. Informed consent was collected from each participant, including consent to record the interview. Participants were asked to answer each question as honestly as possible. During the interview, each participant's response was recorded using audio-recording technology. Main points of responses were written in a notebook. Each participant's responses were transcribed verbatim.

Data Analysis

Once several interviews were completed, transcribed responses were analyzed and a code book was developed to categorize and note similar responses and common themes discussed by participants. Six individuals were recruited to help code different transcripts, to create consensus on common themes. A top-down analysis was used to find several common themes.

Chapter 3

Results

Participants discussed several common topics across all of the interviews.

Social Groups

Psychology Community

Participants generally disclosed they had experiences of acceptance for their whole congruent selves from their peers in psychological and professional settings. For many participants, the professional setting created the least amount of conflict between their identities of being LGB and Christian. Even if participants mentioned not being vocal about a particular identity marker at work, most disclosed that they do not actively hide their identity or being either LGB or Christian. One participant described it as such:

The professional piece has probably been the smoothest for me, especially for the gay identity to integrate those. That was what sort of drew me to Psychology. In fact, I knew that I had experience as a client in therapy as I was working out my issues with sexuality. I felt very affirmed in that. I knew that was a core value and part of my ethics. Knowing that as client, knowing a little bit about the field, and deciding to go into grad school and become a clinician, I felt like this will be easy to be out and be gay with Psychology. And it has been. I really, I feel very protected. In some ways, I really think it insulates me from a lot of what other people experience at work still today in terms of discrimination and just micro-aggressions and things like that. People are very careful in grad school,

and in my office, about how we talk about sexual identity. And there's a lot of desire to affirm and understand, then listen and share, so that feels really good. And then, identifying as Christian with my professional identity. I was reflecting, and was like 'yeah, that's not something that I talk about at work very much.' And I think work is pluralistic, and people identify in different ways. And I think that I'm careful... I think in some ways I try to disassociate myself from different parts of the Christian church that I do not share values with. And so, I think that may contribute to why I am maybe quieter about that part of my self. I will talk with people who I sense may have a more understanding of what being Christian means, assuming that that also means that I am a certain kind of Christian.

Another described it this way:

When I'm at work, those close to me at work know all three identities. But otherwise, if there's not a need to know, there's not a need to know. My faith is most important. So I would say, you're going to probably find more people at work that know that I'm a Christian, or at least know that I'm a person of faith, than would know that I'm a sexual minority. But that's not because I'm not, you know, proud of that, or whatever. It's just that that they don't need to know. Like, who cares?

One participant discussed the importance of having more queer clinicians of faith in the field of psychology. When discussing what they would tell a prospective graduate student, this participant said:

Do it, do it, do it. I would just encourage them to do it. Because we need all kinds of psychologists to work with all kinds of people. And it's been kind of interesting, because the last few weeks, I've gotten referrals of people who've looked me up, and they're like,

Hey, I'm Asian and I'm gay. I was like, Yeah, I get it, come on in. I'll see you. So, I think we need all kinds of Christians and LGBTQ+ individuals in the field of psychology.

There's an implicit understanding that comes from these identities. I've had people who've referred to me because they know that I'm Christian, and I can talk around issues of spirituality with their clients. So, I think it's an asset that comes in with the multiple identities.

Christian Community

Participants disclosed many varied perspectives about how they relate to Christian faith communities. Several participants discussed how they eventually found accepting faith communities where they could practice authenticity:

My faith community is a huge place of healing and rest for me. So, we've been going to a small Presbyterian church for about 5 years now. And, umm, it's kind of cool. We went and checked out the church, because we had heard they were pretty gay friendly. The first sermon was the associate pastor, who now has become like a dear person in my life, essentially doing this open apology to the gay community from the church. And, umm, it was a pretty healing experience. And so, we've developed some really great relationships with a lot of people there. And they've celebrated our wedding. And I have a son, and he was baptized there. The church has, absolutely, celebrated us as a family, and appreciated us being there, and appreciate our point of view, which is great. So that's definitely a place of rest.

Another participant described the revelations of finding an affirming church:

Then the question was how to find a church who could accommodate that. And that was a journey and a struggle, umm, for a long time. And I think that the first church that I found

that really I could be both parts of myself was an Episcopal church, this would have been 2008, 2009 when I moved to CITY. Umm, I remember that had a community called ‘glee,’ gay, lesbian, and everyone else. And it was a community that the rector of the church supported. And I remember he had a potluck in his house for that community that felt like, this is affirmed here. Gay people are affirmed here. I can be out while I’m here. And I will be included in the life of the church. I can keep Sunday school, or I can... I’m not a marginalized member of the church. And, so that was kind of a break through. That felt like an exciting thing for me. And to have friends at church that knew me as gay, as well, felt really good.

Being a member of a supportive and affirming congregation, one participant noted the need and desire for more queer Christian individuals in their church:

I still long for more people who... to be in relationship with who share both. I still don’t feel like I have as many people in my life as I would like who hold both of those identities. So I think there’s still sometimes a sense of loneliness. Umm, in our church, there are no other LGBT, it’s a small church, and we’re in a pretty small college town, so CITY has plenty of churches that have lots of LGBTQ people in them. We looked around in TOWN, we just had a harder time finding that. We found a church that felt affirming, but still does not really have other people that are gay.

Multiple participants discussed their relationships with churches and Christian faith communities through a lens of disconnection, hurt and painful experiences. In discussing their religious upbringing, one participant said, “I grew up my whole life with people not accepting me. So, I think I learned to navigate that... I don't like it, but that's how it is... but I don't struggle to be

able to deal with it.” One participant emphasized their spirituality over involvement and connection to a faith community:

Or the belongingness is an arbitrary label of whether I’m an in-group or out-group kind of thing. I think the word perception is a nice one to use there. It’s frustratingly vague, but also kind of accurate. (laughs) I have lots of other communities, like social communities... I don’t have a faith community, but I have a lot of social communities, and then I have my spirituality. So they don’t necessarily, well, they literally don’t overlap. Not right now. At least not in an overt way, and not in a socially labelled way.

Another participant mentioned a general lack of Christian friendships in their life:

Yeah, the majority of my friends are not Christian. At least in my current circle of friends, that I spend pretty much most of my time with. But there's just a lot of mutual respect about that. They make a few snarky comments here and there about my beliefs, but they don't disrespect my faith.

Several participants discussed how they were not able to be their full authentic selves in church as an LGB individual:

My whole life I went to churches that I liked, but I had to check my orientation at the door, and just kind of always felt that that was the cost of being me. I was just gonna not have to integrate that part of me once I got into the church building, and figure out what I was going to do outside of that.

Multiple participants disclosed how they feel disconnected from the Christian church as a whole, and have a hard time engaging with Christian communities. One participant said, “the Christian aspect is still probably the one I feel the greatest sense of separation. It's becoming more blurred. It's probably the one I'm more inclined to keep it to myself. Unless I really feel confident.”

Another participant disclosed how their disconnection from church is a stark contrast from their past:

There was a time when [church] was my home away from home. That's where I felt I belonged, the most since coming out, which was much, much later. I don't feel that I belong. It's very, it's very difficult to find a place where I do feel like I belong. I attend church, and I'm welcome there. And I even had a conversation with the pastor there. But I don't feel like I belong there in the sense that I used to.

Some disclosed attempts to connect with Christian faith communities, even with difficulty.

Discussing their search to find acceptance in a church community, one participant stated, "There's so many other little factions and sects of Christianity that would not accept me, but Jesus does. So, I kind of don't care." Another participant discussed conversations with church leadership on the congregational openness:

At church, we attended church, we don't know the people well. They smile, they don't really ask questions. We had a talk with the pastor and said, this is who we are, are you comfortable with us being here? And he said yes. But he also told us that there are some [members] of the church that might not be so open, if they knew about us. So, there's some tension there.

One participant described their more detailed problem of finding an affirming and conservative church:

I see myself as a conservative evangelical Christian, who happens to fall in love with women and I married a woman. So, it's challenging to find a community that's like that. Where I can gel in that community in terms of a church congregation. And that's just a challenging combination. If I was a progressive Christian, or if I was an Episcopalian or

an Evangelical Lutheran or something like that, that would not be a problem. There's plenty of open and affirming churches. But I'm not. I'm more of the nondenominational charismatic person. So, finding that community is challenging.

Several participants discussed struggling with their own Christian identity. One participant said:

I guess, in a way the Christian identity... I'd say it's hard to maintain. I consider myself a Christian. And even if no church in town will let me in, I still consider myself a Christian. And I believe most of what they do.

Another participant discussed her doubts:

I struggle with doubt, at times. Because not only has my identity been the Christian identity for so much of my life, but I've been part of the evangelical Christian community. And these days, the evangelical community is very, very anti-gay. And very political, very politically driven. And since I came out, I started see the world differently. In a lot of ways my politics had to change too, and I'm very at odds with a lot of what we see the evangelical community, at least the way it's represented in the media. And so it's more difficult to align myself with them. Even though a lot of our theology is still similar. But still, I hear those voices. And that causes me to doubt at times. Are you sure that you're not living in sin? Are you sure that this is okay? Now, what if you're wrong? What if you got this wrong? And so I wrestle with that, at times. People wrestle with their faith, I wrestle with that part of my faith. It always comes back to me just... I try to do the best I can, with what I've got. And the way I understand it, I try to understand sexual orientation, I try to understand my faith, the Bible, I try to put it together. We do the best we can do. And I feel like God will honor those efforts. But it's difficult because sometimes I doubt.

One participant even discussed the pressure they experience from church communities to reject their LGB identity:

I've heard people say, well, you can't be both. So, choose one. That's like, No, I'm not going to do that. Like, I don't have to be your version of Christian, and I'm sure it's your version of Christian. So, I think that's been my intellectual freedom.

While disconnected from faith communities, some participants just longed for that connection:

The biggest struggle at this point is just finding a congregation to call home. Where I could go on a weekly basis and have a small group Bible study and that sort of thing.

That's what I really want to have.

LGB Community

Participants described a broad range of ways they feel connected with LGBTQ peers and the overall queer community at large. Some described more general attitudes of belonging to the LGBTQ community, regardless of social engagement:

I have a more open and ambiguous sense of connection. Like, I'm kind of an island of a soul. Whether there's a group label or not, I'm like okay. It doesn't resonate strongly. I participate in a lot of activities that are stereotypic, but they make me feel more of me. So a sense of belonging to the gay community, or the queer community would be like, I participate in activities, but I belong because I participate in those social activities. But I belong in my own identity, whether or not I participate.

Another participant described it as such:

I live in a smaller town that doesn't have a very active LGBTQ community. But when I have been places where that opportunity has been there, it has felt good to be around those people. To meet these people, to have conversations with them, and to share the

things that we have in common. Even though we can be very different, there is a sense of belonging there. But at this time, just where I am in life... it's not a big part of my life. I wish it were bigger. If I were somewhere else, that probably would be possible. But it's not right now.

Some participants discussed their relationship with the LGBTQ community in the context of their Christian faith identity:

When I went to grad school I ended up living with a lesbian couple for the first three years, and then a different lesbian couple for the 4th year and they were just very social and connected to community, and I ended up establishing quite a few gay friends. And I feel like because I didn't push [my faith], I didn't really try to hide it... but I didn't really try to diminish it. But I wasn't trying to push anything on anybody, so I've got some pretty atheist gay friends who consider me to be one of their best friends because they just feel I don't push [my faith] on them.

Other participants focused more on discussing the obstacles around belonging and fitting in with their queer peers; especially as it related to the influence of faith and religious affiliation on queer relationships:

The spiritual piece, I do find pressure in the gay community, like that's a really sensitive topic. I find that there's this strong gravitational force to have the same opinion with peers. If it comes up in a stereotypic gay setting, I find there's a lot of social pressure, that I'm stepping into a presumption of agreement... a presumption, that if it comes up, we're already on the same page with someone... like another gay guy. Like if spirituality, Christianity or religion comes up, it's presumed that we have the same belief, even though no one has no idea what the other person believes. And maybe that's the

psychologist side of me observing that dynamic. But it still feels like, like how no one should presume your fashion style, or ethnic style or identity, I definitely feel social pressure, especially in a general way, to have certain opinions about it. Without even saying anything. Like with reading nonverbal, we can see enough to know that they're presuming I'm agreeing with them, that I know what they think. And I feel that pressure more than I do with other topics.

Another participant said:

As a gay person, I find that the presumption is that I'm an atheist... like a hardcore atheist. So I just let that ship float, because I don't care to talk about it anyways. I don't really have the energy to actually unfold my process or my identity in its truest form, in a general setting. And so I feel like the collective pressure is to presume that everyone is a vivid atheist. Plus, no one really wants to talk about it anyways, so... It's kind of like politics, everyone presumes you hate people/love people. It's kind of a similar vibe.

Family

While not directly assessed, multiple participants discussed their relationships with their families. One participant stated, "currently, I think my biggest struggle is still within my family." Multiple participants disclosed that being an LGB Christian has caused distress and tension in their family. Most participants disclosed that holding that tension requires more energy than other areas of their life. One participant described the tension by saying:

I feel like in my personal life, especially with family, there is still a lot of... tension, and I'm still figuring out to navigate those relationships sometimes, and how to have, you know, intimate relationships with people who think my life is inherently sinful. Umm,

it's just a really difficult line to walk. So that's my biggest struggle, is figuring out like how to do that, how to maintain some relationships that really matter to me.

It is important to note that most participants recount conflict between their Christian family members and the participant's LGB identity. One participant discussed it like this:

Due to contention in my family, in my immediate family system, the spirituality and the gay piece is the one that's really contentious. So that takes much more psychological energy to sustain, just from like a stress management standpoint. That's the only thing that came to mind. Like, I don't really feel like, that's not a part of my thought process. I don't feel like I'm trying very hard on anything, like in a good way. I felt like a spent literally decades doing that, And I've come to place where I feel like, pretty good.

Another participant described hesitance to coming out to extended family:

I'm also not out to my dad's family. I don't see them very often. And his brothers and sisters are kind of judging people. So, I don't want to perpetuate any conflict or judgment from my aunts and uncles towards my parents. Because I know that if they were to find out that I'm gay, the question to my mom would be like, "what did you do? How did you make this happen?" Like they would be blaming her... I don't experience any shame for being gay. And I just know that my dad's family is not going to understand it.

Process of Deconstruction and Reintegration

Several participants discussed their process of deconstructing their identity in order to build a more authentic self. One participant emphasized the importance for deconstruction, and said it was important to, "[not] be scared of feeling like your worldview is shattering. I learned that it's hard to re-do a house if you don't demolition something. You can't just keep adding layers to the floor and expect yourself to live congruently." All participants reported being raised

in non-affirming environments. One participant described the non-affirming doctrines they had to deconstruct:

I grew up believing that homosexuality was a sin. That's what I was taught in my church, and that's what I believed. Being a gay person was never an option. You had to choose to be gay, you were not born gay. Since I was a Christian, and I believe that I couldn't be born gay, I didn't want to choose to be gay. That was never an option. So when I felt same-sex attraction to other people, I didn't understand the way I was feeling or thinking. I came up with other explanations, it's puberty, it's temptation to test. But it was never you're gay, you're having homosexual thoughts and feelings, it's a normal part of who you are. I always had another explanation for it. And so I grew up telling myself that it was some kind of aberration, it was a phase that would go away. But I never really faced it until I was 36 years old. This is after I graduated from grad school.

Many participants described experiencing conflict between their Christian and LGB identities:

For a period of 10 or more years, between early adolescence and when I came out at 21, umm, those felt very in conflict with each other. Those two identities, so the gay identity and the Christian identity did not seem to fit for me. The Christian identity was, umm, the one that I could more easily embrace, umm, and the out-about with umm, everyone in my life. And they gay identity was much more locked and hidden. It felt like something that I needed to hide and try to overcome. And so, I tried to deny that part of my identity for most of that time. Umm, and then when I did come out, when I was 21, 2005, I was looking at how to reconcile the Christian and the gay parts of myself. I had started that process earlier more internally, knowing that it was important to me to be able to maintain my faith as I came out. And that those two things were not mutually exclusive.

While many participants recounted a decrease in their struggle, some participants indicated that they still struggle with holding and maintaining an identity marker:

Back when I wasn't really accepting that I was gay and Christian... that was a big time of struggle, asking God why... why am I this way? The doesn't seemed like anything I'm able to change, so why? So, there have been periods of those wrestling sessions too. Now I don't wrestle with my sexual orientation anymore. So, it's just more in the realm of faith that I still face struggles.

Graduate Training

Many participants discussed how they were positively impacted by their graduate psychological training in their ability to hold both identities of being LGB and Christian. Several participants discussed how their graduate program created a baseline for integrating their identities. One participant reported, “the program was quite an essential bridge, and healing ground, and development ground, of my sexuality and feeling safe in a spiritually-infused setting like school or churches.” Several participants mentioned the personal change they experienced through their graduate training, such as when this participant disclosed:

I think that graduate training sort of grew, developed a set of values in me about integrating, integration as psychologically healthy, and congruence as psychologically healthy, authenticity. So, some of those values that really kind of hit home for me in graduate school as they're important for me, as therapists to be congruent and authentic. As important to sort of look for and encourage in clients to be those things. To invite those things in the way I am as a therapist, to allow all the parts of self to come into the room. I think as I have leaned into those values more, that has made it easier to do that personally, to reconcile part of myself that don't always fit, and to invest in parts that

have meaning for me, even if they do take more time to maintain. So, I think probably yes, in that way, in the sense of grad school cultivating the value of integration, continuity, authenticity in myself, and then trying to live that out.

For one participant, the exposure to differing worldviews and perspectives created lasting change:

In graduate school, I was exposed to some different ways of thinking about sexuality, about sexual orientation. Yet I went to a Christian graduate school. And I was probably a lot more conservative than the school, or the professors, or the students in the school.

And later said:

[Graduate school] helped me with that multicultural perspective and understanding people who are different. Understanding that that idea of white privilege and racism... that class was very helpful, because it kind of opened my eyes in ways that hadn't, I hadn't had that experience before. Then later, after I came out, and I became somebody who was very different. And I found myself kind of on the fringes of society, it seemed. I was able to empathize with those other communities in ways that I hadn't before. And a lot of the stuff that we had talked about in graduate school, now made a whole heck of a lot of sense. And actually explained some of what I was experiencing too.

Other participants were impacted by the empirical and academic aspects of their graduate training, such as this participant's perspective of working with their advisor:

Yes, I worked with Dr. X, and he's done a lot of research on same sex attracted Christians and whatnot. And it was super helpful to be introduced to nuances and ways of thinking about being gay and Christian before I came to an awareness. So it's like, I have the clinical knowledge before I was able to plug in my emotional and spiritual and relational

experiences. And I was like, oh hey, here's this framework that's super awesome to work from.

Current Congruent Identity

Some participants talked more explicitly about their integrated identity of being an LGB Christian psychologist. One participant described the difficulty of maintaining their integrated intersectional identity:

The way that I see it, it takes a lot more faith for me to be a gay Christian, than it would for me to be a straight Christian or a gay atheist. You know, my whole life I've been told this story, this narrative, that gay people go to Hell. That those two are incongruent with one another. And so, kind of living that truth of being both takes a lot of faith. Not only in God, but in myself. I think holding these two identities together takes constant faith. It takes constant work. Because those messages are still in the back of my head, no matter what I do.

And later, discussed how their identities intersect currently:

So, I think the longer that I am just comfortable in myself and work towards being a more integrated human, the less salient, each of those identities on their own, become. They just become parts of me as a whole person. I don't really feel like I'm having to navigate those a whole lot, because they're just me.

Another participant mentioned how their congruent intersectional identity is communicated to other people:

I would say internally I'm out with all three... pretty much everywhere else I'm out about all three. You know, there's some setting where I talk less about my faith. Umm, and I guess in some ways it's interesting to think about the professional setting as one of those,

partly working for a secular institution. And umm, I think people know that I go to church and that I identify as Christian. I think there are a few... Dr. X included, who I've talked about it a little more. I'm certainly not in the closet about it. I also don't talk about it as much as some other parts of my life.

Congruence for one participant, meant placing less focus specific identity markers:

Let's just live and let live. I presume you're diverse and complex, so if you need to talk about something, let's do it. And that's fine and beautiful and needed. Otherwise, I just assume we're all trying to live a good life and help each other.

Chapter 4

Discussion

Numerous common themes and topics emerged in the interviews with participants. While many themes emerged regarding the helpful and vital pieces for the flourishing of LGB Christians, many of the accounts discussed the experience of navigating the choppy waters where the oceans of faith and sexuality meet. Each participant described a unique personal journey of identity development, with many common themes. In holding the intersectional identity of LGB and Christian, congruence looked different for each individual. Some participants emphasized different identity markers due to context and social situation, consistent with previous findings (Kumar et al., 2014). Like previous studies on the intersectionality of faith and sexuality (Faulkner & Hecht, 2011), many participants found more accepting churches, and several actively and vocally live an openly-authentic life as an LGB individual and a Christian. Due to concerns for safety, one participant in this study was unable to be vocally out as LGB, and had to take precautions by assimilating in hopes to not be questioned as LGB. Some participants factored in potential backlash in determining how their intersectional identity translated to social engagement (Brinkman et al., 2014).

Results helped show that maintaining an LGB and Christian identity requires leaning into the hard. In managing role strain, most participants found flexibility with one identity to find congruence and integrate their identities, similar to the 2012 findings of Giesler. Contrary to previous findings (Fields et al., 2015), no participants indicated the need to overcompensate, but

this study may differ in the impact of ethno-racial cultural differences. Most participants also leaned into the hard by maintaining relationships with people who disagree with their identity. Consistent with common conceptions of LGBTQ experiences and the research, participants often discussed difficulty in familial relationships (VanderWaal et al., 2017). But instead of experiencing stagnation in faith development (Hart et al., 2010), these participants continued to seek, learn, and grow in their faith; potentially due to the influence of more secure attachments styles among the participants interviewed. While decreased family and social supports may have contributed to negative mental health outcomes consistent with the literature (Ryan et al., 2010; Rosario et al., 2011), most participant's stories continued toward positive mental health outcomes once supports were found, which is consistent with past findings (Riggle et al., 2016).

Participants also highlighted the difficult process of deconstruction and re-integration in identity development. Participants commonly described identity deconstruction as a time of questioning, uncertainty, and insecurity. Concerning faith development, identity congruence was consistent with Fowler's (1981) developmental faith stages three through six. Participants described internalizing their faith and understanding the complexity and contradictions of faith (stages four and five) when they started to integrate their faith and sexual orientation. Several participants demonstrated current higher levels of faith development, as they expressed committing to a Christian affiliation, despite the value they see in other faiths (stage 6). While identity development can be abstract and unsettling, participants described the beauty of leaning into the difficult. One participant distinguished the faith it takes to be an LGB Christian, as compared to being an LGB Atheist or heterosexual Christian. They described leaning into and relying more on their faith in God in a real, authentic way. Many participant's ability to lean into

this difficult process may be related to more secure attachment styles, related to the Divine (Hart et al., 2010).

Consistent with the findings of (Foster et al., 2015), participants consistently demonstrated developing resilience as a product of integrating their Christian and LGB identities. Resilience was significantly impacted by social support. All participants found accepting supports in psychological community, which was contrary to previous findings on provider bias against LGBTQ peoples (Fallin-Bennet, 2015). However, most participants disclosed a particular lack of LGB Christian supports, and desired more friends with similar identities. Additionally, graduate training was vital for many in laying the foundation for identity deconstruction and re-integration. Doctorate programs helped to normalize the process of identity development, as well as instill values of authenticity and congruence, consistent with professional training competencies (Fouad et al., 2009; Rubin et al., 2007). Even if programs tend to focus less on self-reflective training competencies (Grus et al., 2016), individuals with conflicting intersectional identities may be pulled to invest more time on personal development throughout their training.

In considering social environment, participant responses illuminated the ability to thrive in the absence of oppression. Finding affirming communities bolstered participant's abilities to live authentically as out LGB-Christian persons. However, one participant in particular was not able to thrive as much due to social pressures and concerns. Their experience is consistent with *Minority Stress Theory*, which states that individuals with marginalized identities have a diminished ability to thrive in the face of oppression (Meyer, 1995; Meyer, 2003). Participants who found affirming communities and theology likely helped negate the influence of oppression and stigmatization, in order to decrease the negative health outcomes of internalized homophobia

and stigmatization, via *Minority Stress Theory* (Meyer, 1995; Meyer, 2003). Even though participants mentioned needing to dismantle internalized homophobia, they did not indicate significant mental distress, especially currently (Barnes & Meyer, 2012).

Clinical Implications

Because of the seemingly conflictual nature between Christianity and the LGBTQ community, clinicians and academics may be inclined to regard the holding of an LGBTQ and Christian intersectional identity as ripe with incongruence and cognitive dissonance. Clinicians and academics unfamiliar with experiences of LGBTQ Christians may also be overly mindful of the negative mental health outcomes in the literature regarding faith and queer identity, and conceptualize the treatment as a need to alleviate the stress and tension an LGBTQ Christian experiences. This study demonstrates that LGB Christians do not need to be rescued from their experience. With support and spaces for process, LGB Christians can find deep meaning in their intersectional identity and move beyond the prescribed negative mental health outcomes.

Limitations

The results of this study contain several limitations. This study includes a small sample size due to the uncommon nature of the intersectional experience of being LGB and Christian among psychologists. This limitation demonstrates the isolated nature of being an LGB Christian. Among the seven participants interviewed, six graduated from designated faith-based doctorate programs, and four of those participants graduated from the same doctorate program. These limitations may impact the results found due to common social environments among the participants and common values within the training programs.

Conclusion

Identifying as a sexual minority of faith is no easy journey. Holding both the identities of LGB and Christian is not made easy by a particular supportive factor, but instead requires a willingness to lean into the crucible, the messiness, the unknown of it all. This difficulty and challenge does not automatically translate into negative outcomes regarding health and wellness, but can lead to a unique place of deep meaning and congruence for the individual.

References

- Barnes, D. M., & Meyer, I. H. (2012). Religious affiliation, internalized homophobia, and mental health in lesbians, gay men, and bisexuals. *American Journal of Orthopsychiatry*, 82 (6), 505-515. doi:10.1111/j.1939-0025.2012.01185.x
- Brinkman, B. G., Raberstein, M. L., Rosén, L. A., & Zimmerman, T. S. (2014). Children's gender identity development: The dynamic negotiation process between conformity and authenticity. *Youth and Society*, 46 (6), 835-852. doi:10.1177/0044118X12455025
- Calzo, J. P., Antonucci, T. C., Mays, V. M., & Cochran, S. D. (2011). Retrospective recall of sexual orientation identity development among gay, lesbian, and bisexual adults. *Developmental Psychology*, 47 (6), 1658-1673. doi:10.1037/a0025508
- Cass, V. C. (1979). Homosexual identity development: A theoretical model. *Journal of Homosexuality*, 4 (3), 219-235.
- Clore, V., & Fitzgerald, J. (2002). Intentional faith: An alternative view of faith development. *Journal of Adult Development*, 9 (2), 97-107.
- Cohen, K. M., & Savin-Williams, R. C. (1996). Developmental perspectives on coming out to self and others. In R. C. Savin-Williams & K. M. Cohen (Eds.), *The lives of lesbians, gays, and bisexuals: Children to adults* (pp. 113-151). Orlando, FL: Harcourt Brace.
- Collins, S. E., Clifasefi, S. L., Stanton, J., The LEAP Advisory Board, Straits, K. J., Gil-Kashiwabara, E., Espinoza, P. R., Nicasio, A. V., Andrasik, M. P., Hawes, S. M., Miller, K. A., Nelson, L. A., Orfaly, V. E., Duran, B. M., & Wallerstein, N. (2018). Community-based participatory research (cbpr): Towards equitable involvement of community in psychology research. *American Psychologist*, 1, 1-15. doi:10.1037/amp0000167

Das, A., & Harries, B. (1996). Validating fowler's theory of faith development with college students. *Psychological Reports, 78*, 675-679.

Diamond, L. M. (2007). A dynamical systems approach to the development and expression of female same-sex sexuality. *Perspectives on Psychological Science, 2*, 142-161.
doi:10.1111/j.1745-6916.2007.00034.x

Fallin-Bennett, K. (2015). Implicit bias against sexual minorities in medicine: Cycles of professional influence and the role of the hidden curriculum. *Academic Medicine, 90* (5), 549-552. doi:10.1097/ACM.0000000000000662

Faulkner, S. L., & Hecht, M. L. (2011). The negotiation of closetable identities: A narrative analysis of lesbian, gay, bisexual, transgendered queer jewish identity. *Journal of Social and Personal Relationships, 28* (6), 829-847. doi:10.1177/0265407510391338

Fields, E. L., Bogart, L. M., Smith, K. C., Malebranche, D. J., Ellen, J., & Schuster, M. A. (2015). "I always felt I had to prove my manhood": Homosexuality, masculinity, gender role strain, and hiv risk among young black men who have sex with men. *American Journal of Public Health, 105* (1), 122-131. doi:10.2105/AJPH.2013.301866

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*, 191-201. doi:10.1007/s10464-015-9704-4

Fouad, N. A., Grus, C. L., Hatcher, R. L., Kaslow, N. J., Hutchings, P. S., Madson, M. B., Collins, Jr., F. L., & Crossman, R. E. (2009). Competency benchmarks: A model for understanding and measuring competence in professional psychology across training levels. *Training and Education in Professional Psychology, 3* (4), S5-S26.
doi:10.1037/a0015832

- Fowler, J. W. (1981). *Stages of faith development: The psychology of human development and the quest for meaning*. San Francisco, CA: Harper & Row.
- Giesler, M. (2012). Gay fathers' negotiation of gender role strain: A qualitative inquiry. *Fathering, 10* (2), 119-139. doi:10.3149/fth.1002.119
- Grus, C. L., Falender, C., Fouad, N. A., & Lavelle, A. K. (2016). Culture of competence: A survey of implementation of competence-based education and assessment. *Training and Education in Professional Psychology, 10* (4), 198-205. doi:10.1037/tep0000126
- Hart, J. T., Limke, A., & Budd, P. R. (2010). Attachment and faith development. *Journal of Psychology and Theology, 38* (2), 122-128. doi:0091/6471/410-730
- Hays, P. A. (1996). Addressing the complexities of culture and gender in counseling. *Journal of Counseling & Development, 74*, 332-338. doi:10.1002/j.1556-6676.1996.tb01876.x
- Herek, G. M. (2015). Beyond "homophobia": Thinking more clearly about stigma, prejudice, and sexual orientation. *American Journal of Orthopsychiatry, 85* (5), S29-S37.
doi:10.1037/ort0000092
- Herek, G. M., Cogan, J. C., & Gillis, J. R. (2002). Victim experiences in hate crimes based on sexual orientation. *Journal of Social Issues, 58* (2), 319-339. <http://web.a.ebscohost.com/ehost/pdfviewer/pdfviewer?vid=23&sid=c3925647-eac6-4e76-8f8d-c7100226f934%40sessionmgr4008>
- Herek, G. M., Gillis, J. R., & Cogan, J.C. (2015). Internalized stigma among sexual minority adults: Insights from a social psychological perspective. *Stigma and Health, 1* (S), 18-34.
doi:10.1037/2376-6972.1.S.18

- Jones, K. N., & Brewster, M. E. (2016). From awareness to action: Examining predictors of lesbian, gay, bisexual, and transgender (lgbt) activism for heterosexual people. *American Journal of Orthopsychiatry*, 1-10. doi:10.1037/ort0000219
- Kennedy, D. A., & Oswalt, S. B. (2014). Is Cass's model of homosexual identity formation relevant to today's society? *American Journal of Sexuality Education*, 9, 229-246. doi:10.1080/15546128.2014.900465
- Kumar, R., Warnke, J. H., & Karabenick, S. A. (2014). Arab-American male identity negotiations: Caught in the crossroads of ethnicity, religion, nationality and current contexts. *Social Identities*, 20 (1), 22-41. doi:10.1080/13504630.2013.864464
- Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of Health and Social Behavior*, 36, 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. doi:10.1037/0033-2909.129.5.674
- Parker, S. (2006). Measuring faith development. *Journal of Psychology and Theology*, 34 (4), 337-348.
- Parker, S. (2009). Faith development theory as a context for supervision of spiritual and religious issues. *Counselor Education & Supervision*, 49, 39-53.
- Pew Research Center (2018). *Religious landscape study* [fact sheet]. <http://www.pewforum.org/religious-landscape-study/>
- Pew Research Center (2017). *Changing attitudes on gay marriage* [fact sheet]. <http://www.pewforum.org/fact-sheet/changing-attitudes-on-gay-marriage/>

- Riggle, E. D., Rostosky, S. S., Black, W.W., & Rosenkrantz, D. E. (2016). Outness, concealment, and authenticity: Associations with lgb individuals' psychological distress and well-being. *Psychology of Sexual Orientation and Gender Diversity*, 1-9. doi:10.1037/sgd0000202
- Rosario, M., Schrimshaw, E. W., & Hunter, J. (2011). Different patterns of sexual identity development over time: Implications for the psychological adjustment of lesbian, gay, and bisexual youths. *Journal of Sex Research*, 48 (1), 3-15. doi:10.1080/00224490903331067
- Rubin, N. J., Bebeau, M., Leigh, I. W., Lichtenberg, J. W., Nelson, P. D., Portnoy, S., Smith, I L., & Kaslow, N. J. (2007). The competency movement within psychology: An historical perspective. *Professional Psychology: Research and Practice*, 38 (5), 452-462. doi:10.1037/0735-7028.38.5.452
- Ryan, C., Russell, S. T., Huebner, D., Diaz, R., & Sanchez, J. (2010). Family acceptance in adolescence and the health of lgbt young adults. *Journal of Child and Adolescent Psychiatric Nursing*, 23 (4), 205-213. doi:10.1111/j.1744-6171.2010.00246.x
- Shapiro, D. N., Rios, D., & Stewart, A. J. (2010). Conceptualizing lesbian sexual identity development: Narrative accounts of socializing structures and individual decisions and actions. *Feminism & Psychology*, 20 (4), 491-510. doi:10.1177/0959353509358441
- VanderWaal, C. J., Sedlacek, D., & Lane, L. (2017). The impact of family rejection or acceptance among lgbt+ millennials in the Seventh-Day Adventist Church. *Social Work & Christianity*, 44 (1), 72-95.

Appendix A

Informed Consent for Research Participants

Thank you for your interest in participating in this research study. This study is designed to investigate the experience of psychologists who identify as Christian and LGB. We are especially interested in examining how participants hold this intersectional identity, and how graduate psychological training influences intersectional identity development. For this study, you will be asked a series of questions. The interview should last about an hour. You are free to withdraw from this study at any time, up until the moment that you walk out of the door after your interview. If you withdraw, your responses will be discarded and not used for final data analysis.

Participation in this study has few foreseeable risks. Discussing emotional topics may cause some negative emotions and distress, and in extreme cases feelings of depression and anxiety. If you feel at risk after participating in this study, please contact the National Suicide Prevention Lifeline at (1-800-273-8255). Discussing your experience may provide added meaning and feelings of happiness.

All responses and data collected will be kept confidential. All responses will only be seen by the research team and faculty advisor. Data will be analyzed in aggregate, and no individual scores will be reported. Responses will be kept for 7 years, and then disposed of so that no one will see your responses. Data may be requested by other researchers, in which case your identifying information will be removed before they are given the data. Confidentiality may be broken if you disclose an intent to harm yourself or other people, or disclose abuse to children, elderly, or individuals with disabilities.

If you have any questions, you can contact the main researcher (Colby Hampton) at champton16@georgefox.edu, or Kathleen Gathercoal (faculty advisor) at kgathercoal@georgefox.edu.

I, _____, consent to participate in this study. I have read the above description, and understand the potential benefits and harm of participating in this study.

signature

date

Appendix B

Structured Interview Questions

1. Demographic questions
 - a. Spiritual well-being question (scale 1-10) how important is your faith to you?
 - b. How often do you attend church?
 - c. Denomination?
 - d. Are you a clinician or academic in Psychology?
 - e. Professional interests?
 - f. Relationship status?
 - g. Which terms do you use to describe your sexuality?
2. When did you go to graduate school?
3. When did you identify yourself as Christian? In graduate school, before, after?
 - a. What is your perception of belonging to the Christian community?
4. When did you identify as LGBT? In graduate school, before, after?
 - a. What is your perception of belonging to the LGBT community?
5. What is your perception of belonging to the professional community?
6. Are you “out” with all 3 identities? Are there certain contexts where you are not open about an identity marker? (better) How do you navigate that?
 - a. How do you navigate all 3 identities in their various contexts? Moving between contexts? Has it changed over time?
 - b. How do you tolerate other people who don’t hold both your identities?
7. Are there any of these identities which you have to work harder to maintain?
8. Did graduate training effect how you can hold the identities of LGBT and Christian together?
9. What struggles do you still face today as an LGBT Christian? Where do you find a place of rest?
10. What is one bit of advice you would give to an LGBT Christian who wants to enter graduate school for psychology?
11. How many people do you know that also share these 3 identity markers?
 - a. Contact information?

Appendix C

Curriculum Vitae

Colby Hampton

Education

PsyD	George Fox University, Clinical Psychology Newberg, Oregon	Exp: April, 2021
MA	George Fox University, Clinical Psychology Newberg, Oregon	May, 2018
	Masters Clinical Mental Health Counseling Regent University Virginia Beach, Virginia Attended August, 2014 – March, 2016	
BS	Kutztown University, Psychology Kutztown, Pennsylvania <i>Magna Cum Laude, 3.70 GPA</i>	May, 2014

Clinical Experience

Pre-Doctoral Psychology Intern	August, 2020 – July, 2021
Counseling & Wellness Center University of Florida Gainesville, Florida	
Concentration: LGBTQ Issues	
<i>Expected Direct Intervention Hours: 500</i>	
<ul style="list-style-type: none"> • Conducted individual teletherapy with 12-14 clients each week. • Co-led LGB Empowerment group via teletherapy for Fall semester. • Conducted ADHD assessment using MMPI-2 and IVA-2. • Provided weekly on-call services to support UF community. • Assessed student needs in weekly triage appointments. • Served as member on LGBTQ Committee and participated in weekly meetings. • Collaborated with LGBTQ+ Affairs office and Gator Wesley student group to organize outreach programming on LGBTQ faith. • Created outreach programming using drag persona, "Sandi Perls." 	

- Consulted with University Counselling Service at University of the West Indies in Mona, Jamaica to provide consultation and outreach services.

Supervisor – Geoff Lee, PhD (Spring, Summer 2021), Alvin Lawrence, PhD (Fall 2020)

Training Director – Natasha Maynard-Pemba, PhD

Practicum Behavioral Health Consultant

June, 2019 – June, 2020

Providence Medical Group – North Portland

Portland, Oregon

Direct Intervention Hours: 172

- Conducted individual therapy with 6-10 clients each week.
- Provide warm hand-offs with medical providers and patients.
- Consulted with medical providers on supporting patient care.
- Coordinated with Transgender Healthcare team to support improvements to Trans health.
- Compiled LGBTQ resource list for clinic.
- Conducted ADHD evaluations to inform Primary Care Physicians on prescribing.

Supervisor – Nathan Engle, PsyD

Practicum Counselor

September, 2018 – June, 2019

Counseling and Psychological Services

Oregon State University

Corvallis, Oregon

Direct Intervention Hours: 185

- Conducted individual therapy with 4-10 clients each week.
- Reviewed Counseling Center Assessment of Psychological Symptoms (CCAPS) with each individual client.
- Conducted intake interviews with clients.
- Provided on-call, triage appointments with new student clients and students in crisis.
- Co-lead a support group for transgender and gender non-binary students.
- Worked with a diverse population (i.e., LGBTQ, international student, military veteran)

Supervisors – Stephanie Shippen, PsyD; Heather Webster-Henry, MA LMFT; Alexandra Reveles, MS

Therapist

July, 2018 – October, 2018

Cedar Hills Hospital

Portland, Oregon

- Facilitate group therapy session (6 – 20 members) focusing on chemical dependency and severe and persistent mental illness.
- Created treatment plans for chemical dependency and severe and persistent mental illness.
- Conducted clinical intake interviews with patients.

- Attended to patients for crisis intervention.
- Administered risk assessments with patients prior to discharge.

Practicum I

July, 2017 – July, 2018

Cedar Hills Hospital

Portland, Oregon

Direct Intervention Hours: 269

- Facilitate group therapy sessions (6 – 20 members) focusing on chemical dependency and severe and persistent mental illness.
- Created treatment plans for chemical dependency and severe and persistent mental illness.
- Conducted clinical intake interviews with patients.
- Attended to patients for crisis intervention.
- Administered risk assessments with patients prior to discharge.

Supervisor – Jory Smith, PsyD**Pre-Practicum**

January, 2016 – April, 2016

George Fox University

Newberg, Oregon

Direct Intervention Hours: 20

- Conducted clinical intake and MMSE with 2 simulated undergraduate students.
- Administered ORS and SRS assessments.
- Attended clients, utilizing Rogerian Person-Centered skills.
- Documented client records in an electronic medical record.

Supervisor – Samuel Smith, MA***Clinical Director – Glenna Andrews, PhD***

Consultation

Faithfully LGBTQ

February - March, 2019

Newberg Emerging Friends Church

Newberg, Oregon

- Presented three seminars to a newly-affirming Quaker church, focusing on how they can better empathize with and welcome queer people.
- Provided lecture on queer history in the United States.
- Provided psychoeducation on research regarding the social, psychological, and spiritual experiences of queer people groups.
- Facilitated a time of interpersonal process to examine barriers to engaging with queer individuals.

Guest Speaker

November 13, 2018

LGBTQ History

PFLAG Newberg
Newberg, Oregon

- Co-presented on LGBTQ history over the past century to support education with a newly-formed chapter of PFLAG.

Supervision and Teaching Experience

Teaching Assistant, Professor – Glenna Andrews, PhD June, 2019 – May, 2020
Clinical Foundations
George Fox University
Newberg, Oregon

- Provide group supervision to 5 students on a weekly basis.
- Reviewed clinical skill-training videos, and provided feedback.
- Graded professional papers and clinical writing, and provided feedback.
- Worked with students individually to develop foundational therapeutic skills.

Guest Lecturer, Professor – Kelly Chang, PhD February 8, 2019
General Psychology – Lecture on Classical Conditioning
George Fox University
Newberg, Oregon

- Lectured on Classical Conditioning to 3 sections of the General Psychology course.

Teaching Assistant, Professor – Winston Seegobin, PsyD January, 2019 – May, 2019
Multicultural Psychotherapy
George Fox University
Newberg, Oregon

- Taught class on ADDRESSING model and intersectional identities.
- Supported students as they process multicultural aspects of therapy.
- Assisted with grading student papers.
- Managed pre and post-test assessments on student attitudes toward multicultural therapy.

Teaching Assistant, Professor – Kris Kays, PsyD August, 2018 – December, 2018
Advanced Counseling Skills
George Fox University
Newberg, Oregon

- Supervised a group of 3 students for a clinical team.
- Grade and provide feedback to students for simulated-therapy videos.
- Mentor students on professional development.
- Assist with teaching load, and role-play clinical therapy skills in vivo.

Research Experience

Dissertation Preliminary Defense: October 24, 2018
 Living in the Crucible: A Qualitative Look at Psychologists' Perspectives on the
 Development of Their Intersectional LGB-Christian Identities
Advisor – Kathleen Gathercoal, PhD

Peer-Reviewed Poster Presentations at Professional Conferences

Hampton, C., Neff, M., Shim, P., Peterson, M., & Gathercoal, K. (August 2018). Alumni satisfaction on ancillary lgbt diversity training improvements in a faith-based psyd program. Presented at the annual meeting of the American Psychological Association, San Francisco, CA.

Committee Membership/Leadership

Graduate Student Task Force Member September, 2019 – February, 2020
The Board of Educational Affairs Task Force to Develop a Background Document for Psychologists on Title IX Exemptions for Faith-Based Educational Institutions
 American Psychological Association
 Washington, DC

- Attend monthly conference calls with Task Force members.
- Voice graduate student perspective, and advocate for student needs.

President May, 2019 – May, 2020
Cohort Representative May, 2018 – May, 2019
 Graduate School of Clinical Psychology Student Council
 George Fox University
 Newberg, Oregon

- Advocate for and voice student concerns within the program.
- Problem-solving issues that are brought to the student council's attention.
- Coordinate and help organize annual Spring Banquet.
- Organize and supervise Student Interest Groups.

Clinical Advisory Committee Member February, 2019 – May, 2020
 George Fox University
 Newberg, Oregon

- Consult with Director of Clinical Training on didactic topics and speakers.
- Coordinate in finding speakers for colloquium and grand rounds.

- Review and utilize student feedback on didactic presentations.

Student Interest Group Leader

August, 2017 – July, 2019

Gender and Sexual Identity Student Interest Group
George Fox University
Newberg, Oregon

- Organize group discussions for PsyD students around sexual identity and gender diversity
- Coordinate and host casual mixers for LGBTQ students in the doctorate program.

First Year Representative

September, 2016 – July, 2017

Graduate Department of Clinical Psychology Admissions Committee
George Fox University

- Reviewed applications for the 2017 cohort, and made decisions on whether to interview the applicant or not.
- Consulted with other committee members on whether to interview applicants.
- Interacted with and observed applicants on interview day.
- Co-interviewed several applicants with a faculty member.
- Collaborated with committee members to determine which applicants would be admitted to the clinical psychology doctoral program.

Honors and Awards**Letter of Commendation**

May, 2019

George Fox University
Newberg, OR

Member

2014 - present

Psi Chi National Honor Society

Dean's List, Kutztown University

- Fall, 2010
- Fall, 2013

Professional Training**Clinical Team**

George Fox University
Newberg, Oregon

- Presented 3 humanistic case conceptualizations each year.
- Examined multicultural aspects of cases presented to the team.

- Collaborated with other group members over case conceptualizations of other individuals.
- Consulted with the clinical team on possible treatment approaches.

Supervisor – Joel Gregor, PsyD August, 2019 – May, 2020
Supervisor – Mary Peterson, PhD ABPP August, 2018 – May, 2019
Supervisor – Paul Stoltzfus, PsyD August, 2017 – May, 2018
Supervisor – Kristina Kays, PsyD August, 2016 – May, 2017

Leadership Training September 27, 2017
 Deborah Dunn, PhD
 George Fox University

Other Professional Trainings and Workshops

Inter-Cultural Communication

Cheryl Forster, PsyD
 George Fox University
 October 16, 2019

Promoting Forgiveness

Everett Worthington, PhD
 George Fox University
 September 25, 2019

Foundations of Relationships Therapy – The Gottman Model

Douglas Marlow, PhD
 George Fox University
 March 20, 2019

Opportunities in Forensic Psychology

Diomaris Safi, PsyD and Alex Milkey, PsyD
 George Fox University
 February 13, 2019

Old Pain in New Brains

Scott Pengelly, PhD
 George Fox University
 October 10, 2018

Spiritual Formation and the Life of a Psychologist: Looking Closer at Soul-Care

Lisa Graham McMinn, PhD and Mark McMinn, PhD
 George Fox University

September 26, 2018

Integration and Ekklesia

Mike Vogel, PsyD
George Fox University
March 14, 2018

History and Application of Interpersonal Psychotherapy

Carlos Taloyo, PsyD
George Fox University
February 14, 2018

TeleHealth

Jeff Sordahl, PsyD
George Fox University
November 8, 2017

Using Community Based Participatory Research (CBPR) to Promote Mental Health in American Indian/Alaska Native (AI/AN) Children, Youth and Families

Eleanor Gil-Kashiwabara, PsyD
George Fox University
October 11, 2017

Difficult Dialogue

Winston Seegobin, PsyD, Mary Peterson, PhD, ABPP, Mark McMinn, PhD, ABPP and
Glena Andrews, PhD
George Fox University
March 22, 2017

Domestic Violence: A Coordinated Community Response

Patricia Warford, PsyD
George Fox University
March 1, 2017

Native Self Actualization: Its Assessment and Application in Therapy

Sydney Brown, PsyD
George Fox University
February 8, 2017

When Divorce Hits the Family: Helping Parents and Children Navigate

Wendy Bourg, PhD
George Fox University
November 9, 2016

Gestalt Therapy Training

Benjamin Keyes, PhD & George Jefferson, PhD
Renaissance Church, Virginia Beach, VA
February 2015

Professional Affiliations

American Psychological Association

August, 2016 - present

Student Affiliate

- **Division 44 student member**
- **Division 38 student member**
- **APAGS member**

Oregon Psychological Association

July, 2017 – July, 2018

Student Associate