

Research Paper

## Intersecting Identities and Invisible Struggles: Psycho-Social-Spiritual Challenges Faced by Gay and Lesbian Individuals in Dimapur

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### ABSTRACT

Lesbians and gay individuals have long been marginalized because of their sexual identity, resulting in devaluation in social contexts, stigma, discrimination, and marginalization stemming from structural-violation in societal norms, cultural values, including religious beliefs or ideologies, and individual biases. Experiences of stigma vary widely from micro-aggressions to extreme acts of harm and aggression. Evidence has shown that negative attitudes toward lesbians and gay people are not only present in society at large, but also replicated within healthcare systems of care, where poor-quality care, spiritual care neglect, misplaced anger, or refusals present as services that Lesbian and Gay may receive. These processes of discrimination resulted in psychosocial and spiritual trauma within lesbian and gay individuals which was investigated in this proposed study conducted in Dimapur, Nagaland with participants between the ages of 15 to 60 years and older. Participants for the study were recruited by mixed methods approach which involved initially, interview participants of ten, while quantitative interview participants were 150. Participating qualitative interview participants answered questions on factors that traumatic experiences shaped psycho-social-personal-spiritual well-being. Quantitative study participant data were collected using closed-ended surveys in Google Forms and distributed on social media including Facebook, Instagram and WhatsApp. The results highlight that stigma and discrimination define psycho-social-spiritual well-being. Lesbians were the most resilient on these measures although they also continued to experience stigma as lesbians. Overall, gay participants had the worst combined psycho-social-spiritual outcomes based on the factors identified.

**Keywords:** *Lesbians, Gay, Stigma, Discrimination, Psychosocial trauma, Spiritual trauma and Well-being*

Well-being is complex; it is comprised of multiple dimensions (i.e., physical, mental, emotional, spiritual dimensions), and in some sense is simultaneously shaped by many different elements (i.e., behavior on an individual basis, social interactions, social conditions). Understanding the potential of well-being is crucial to understanding how individuals have lived their lives or taken on challenges, particularly for marginalized individuals such as Lesbians and Gay individuals. The LGBTQIA+ (i.e.,

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Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, other sexual minorities) community continues to encounter societal rejection, discrimination, and stigmatization simply because of their sexual orientation and/or gender identity (Chu, 2017). This societal stigma, which takes many forms, can have severe implications on the psycho-social-spiritual well-being of Lesbian and Gay individuals and affects in discrete and evident ways including their mental and emotional health, spiritual dimensions, and social interactions' in qualitative and quantitative case analyses.

Lesbian and Gay individuals experience discrimination because of homophobia stemming from negative attitudes towards individuals with non-heteronormative sexual orientation (Subhrajit, 2014). Homophobia is born from culture, belief systems and morality leads to social exclusion, violence and harassment which can serve to escalate mental health issues. There is still some acceptance around Lesbian and Gay identities becoming more accepted in many parts of the world. But, social stigma, harassment and discrimination are still commonplace especially in locally socially conservative settings e.g. Dimapur, Nagaland (Patel, 2016). Lesbian and Gay individuals may have two burdens in environments such as these facing social rejection and the internalized stigma attached to their sexual orientation. Social rejection contributes to mental health issues like anxiety, depression and suicidal ideation, especially among youth (Beyond Blue, 2021).

Psycho-social-spiritual well-being is a complicated construct that involves the ability of an individual to manage stress, participate in social relationships, and manage spiritual health, all of which are necessary for life satisfaction (Mishra, 2018). For those individuals who identify as lesbian or gay who are living their day-to-day lives carrying the stigma of social rejection, creating their well-being is an added difficulty. Research has shown that discrimination and societal stigma have significant impact on the psychological distress faced by sexual minority individuals. Those who are marginalized based on their sexual orientation express higher levels of anxiety, depression, and feeling isolated (Roy, 2020). Therefore, the marginalization of Lesbian and Gay individuals is not merely a mental health concern, it is a spiritual neglect issue. Religious beliefs tend to bring support and meaning into many lives, but if one has been socially rejected, a spiritual crisis can ensue, especially in the presence of religious institutions that also stigmatize Lesbian and Gay individuals (Craig, 2003).

In the Indian scenario, especially in Nagaland, Lesbian and Gay members of society face significant obstacles at the intersection of cultural norms, religious beliefs, and political attitudes. Nagaland is primarily Christian, and the tenants of Christianity often stand opposed to the acceptance of sexual minorities. This conflict with faith often results in social exclusion, creating an atmosphere of intolerance, within which Lesbian and Gay individuals are forced to hide, to avoid rejection and violence (Subhrajit, 2014). Lesbian and Gay members of society in Nagaland may suffer from internalized shame, which only adds more weight to the burdens placed on their psycho-social-spiritual well-being. The anticipated distance and exclusion from family and community often results in some degree of anguish, between constrained social coping and social belonging, and increased shame, guilt, and diminished sense of self.

Research into the well-being of sexual minorities in India is still at its infancy, with few studies focusing specifically on the psycho-social-spiritual health of individuals who identify as lesbian and gay (Patel, 2016). Even with increased awareness of the

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psychological consequences of discrimination for Lesbian and Gay people, the social and spiritual dimensions of their well-being has not received as much consideration. The lack of mental health services and discrimination related to stigma within society and community makes the risk of emotional and spiritual distress greater for sexual minorities. Lesbian and gay people experience hostility in education, work settings, and often within their families, all which could play a part in their psycho-social-spiritual difficulties. The situation is more precarious for young people since they are more likely to be bullied in school, be alienated from their families and friends, and have fewer networks of support (Mishra, 2018) who understand them.

While such challenges exist, a growing body of literature indicates the positive resilience of Lesbian and Gay people. Although we know that stigma and discrimination can harm mental health, sexual minorities in Lesbian and Gay communities who find supportive communities and have access to affirming health services based on respect and diversity are more likely to report better health outcomes (Beyond Blue, 2021). In experiencing spirituality, Lesbian and Gay people can promote their well-being through belonging and sense of purpose in life. Nevertheless, for Lesbian and Gay people living in conservative environments, religious acceptance is a major hurdle. For many church members, and with family connections, this would be a major source of stress rather than support (Craig, 2003).

This study investigated the interrelation of the psycho-social-spiritual well-being of gay and lesbian individuals in Dimapur, Nagaland, and the stigma they experience in their sexual orientation. Specifically, this study investigated how experiencing discrimination, social exclusion, and cultural reality affect the mental, social, and spiritual well-being of sexual minorities in Dimapur. Findings from this research developed the knowledge base of mental and spiritual well-being of sexual minorities in Dimapur, where attitudes towards Lesbian and Gay individuals are typically conservative. The research informed how societal attitudes and cultural values provide meaning in their lives, while giving consideration to their religious beliefs. This study also makes explicit the lived-sectarian experiences of the lesbian and gay people of Dimapur, raising awareness about the mental and spiritual difficulties and opportunities that arise in their lives. Through examining lived-experiences the research provides advocacy to develop procedures, developments and resources for their support and well-being.

To sum up, while the topic of sexual orientation has become more prominent in global discourse, the psycho-social-spiritual health of sexual minorities deserves your attention since it is a significant yet under-researched area specifically in conservative areas like Nagaland. The purpose of this study is to address the gap by investigating how stigma, discrimination, and cultural beliefs affect the well-being of lesbian and gay individuals in Dimapur. The use of qualitative and quantitative methods uncovered challenges and propose ways to support the psycho-social and spiritual well-being of lesbian and gay individuals.

### **METHODOLOGY**

#### ***Research Design***

A research design is a detailed blueprint indicating how you will collect, measure and analyze data. The researcher took a mixed-methodology approach that used both quantitative and qualitative data collection method in developing a more comprehensive understanding of the relationship between gender identity and psycho-social-spiritual wellbeing (Creswell & Plano Clark, 2018 and/or Johnson & Onwuegbuzie, 2004). A quality research design will

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support the use of quality methods which can increase the validity of the findings and contribute to triangulation of datasets.

### ***Area of Study***

The area of study was the Dimapur district, Nagaland based on the population, economic activity, and access to the intended respondents. The Dimapur area is a major service centre in Nagaland therefore the researchers would have more access to those individuals that declare themselves gay and lesbian.

### ***Objective Study***

To understand how being gay or lesbian affects a person's mental, social, and spiritual well-being, especially in the context of stigma, discrimination, and cultural beliefs in Dimapur, Nagaland.

### ***Hypothesis of the Study***

The researcher has used Null Hypothesis which states that there is no relationship between two population parameters, i.e., an independent variable and a dependent variable.

- **H01** There is no significant relationship between gender identity, perceived social support and psycho spiritual well-being.
- **H02** There is no significant difference between gay and lesbian with regard to psychological well-being.
- **H03** There is no significant difference between gay and lesbian with regard to perceived social support.

### ***Research Approach: Mixed Method***

The researcher used a convergent mixed methods research design. This involved bringing together case-study and interview qualitative data with quantitative survey data to provide a more complete assessment of the research problem (Plano Clark & Ivankova, 2016).

### ***Population of the Study***

The study population for this research project was identified as individuals who declared themselves gay or lesbian living in the Dimapur District.

### ***Sampling Design***

#### **a. Sampling Unit**

Participants aged between 15 and 60 years were recruited after obtaining consent and approval from the University Research Ethics Committee (UREC) of Martin Luther Christian University (MLCU), Shillong, Meghalaya

#### **b. Sampling Method**

Snowball sampling was chosen because addressing sexual identity in Dimapur is sensitive. This non-probability sampling method was beneficial in tracking down closeted individuals in the Lesbian and Gay community (Biernacki & Waldorf, 1981).

#### **c. Sample Size**

The study had 150 quantitative participants and 10 qualitative interview participants for a total of 160 participants.

### ***Informed Consent***

All participants gave verbal or written consent prior to participating. They were advised on the purpose of the study, confidentiality of their data, and their right to withdraw at any

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point in the data collection process. All reports of the research will keep participants anonymous.

### *Types and Sources of Data*

#### *a. Primary Data*

Data was collected via a structured questionnaire (Google Forms) and in-depth interviews. Instruments included:

- Lesbian/Gay Internalized Homophobia Scale (Szymanski & Chung, 2001)
- Multidimensional Scale of Perceived Social Support (Zimet et al., 1988)
- Carol Ryff Psychological Wellbeing Scale (Ryff, 1989)
- Spiritual Wellbeing Scale (Ellison, 1983)

#### *b. Secondary Data*

Secondary data were drawn from academic journals, books, and prior research findings on Lesbian and Gay identities and well-being.

### *Data Collection Procedures*

#### *a. Questionnaire*

The questionnaire used a 6-point Likert scale, ranging from “Strongly Agree” to “Strongly Disagree,” with 5 sections covering psychological, social, and spiritual aspects.

#### *b. In-depth Interviews*

Ten semi-structured interviews were conducted in-person. Each interview lasted approximately 60–90 minutes and included open-ended questions designed to elicit responses related to psychological, social, and spiritual wellbeing.

#### *c. Thematic Analysis*

The qualitative data were analyzed through thematic analysis (Braun & Clarke, 2006). Interviews were transcribed, coded manually, and recurring themes were identified to interpret participant experiences. No software was used in the coding process.

### *Data Analysis Techniques*

Quantitative data were analyzed using SPSS software for descriptive statistics and hypothesis testing. Qualitative interview transcripts were reviewed manually to identify common themes that could triangulate with the quantitative findings (Patton, 2014).

## **RESULTS**

**1. Reliability and Validity of Study Variables:** The study variables (Psychological Well-Being, Public Identification as Gay/Lesbian, Personal Feelings about Being Gay/Lesbian, Perceived Social Support, and Spiritual Well-Being) showed high internal consistency (Cronbach’s alpha > 0.88) and strong construct validity (correlation coefficients > 0.94), indicating their reliability and validity for the study.

**2. Normality Test:** The histograms of the key study variables resembled bell-shaped curves, suggesting a normal distribution and supporting the use of parametric tests for analysis.

**3. Relationships Between Study Variables:** Psychological Well-Being showed significant positive associations with Public Identification, Personal Feelings about Being Gay/Lesbian, Perceived Social Support, and Spiritual Well-Being.

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- Public Identification was significantly correlated with Personal Feelings about Being Gay/Lesbian, Perceived Social Support, and Spiritual Well-Being.
- Personal Feelings about Being Gay/Lesbian showed significant relationships with Perceived Social Support and Spiritual Well-Being.
- Perceived Social Support had a strong positive relationship with Spiritual Well-Being.

### **4. Gender Differences in Psychological Well-Being:**

- Lesbians scored significantly higher in all sub-dimensions of Psychological Well-Being (e.g., Autonomy, Environmental Mastery, Positive Relations, etc.) compared to Gays. This difference was statistically significant across all subscales ( $p < 0.001$ ).

### **5. Gender Differences in Study Variables:**

- Lesbians scored significantly higher in all study variables (Psychological Well-Being, Public Identification as Gay/Lesbian, Personal Feelings about Being Gay/Lesbian, Perceived Social Support, and Spiritual Well-Being) compared to Gays ( $p < 0.001$ ).

### **6. Socio-Demographic Details:**

- 60% of the sample identified as Gay, and 40% identified as Lesbian.
- Most participants (41.3%) were between the ages of 21-25 years.
- A significant portion of participants were unemployed (36.7%) or working in the private sector (36%).
- Educationally, 26.7% were dropouts, 24% had completed school, 16% had completed higher secondary, 23.3% had an undergraduate degree, and 10% had a postgraduate degree.

### **7. Differences in Study Variables by Age:**

- The above 26 years' age group had significantly higher scores in Psychological Well-Being, Public Identification as Gay/Lesbian, Personal Feelings about Being Gay/Lesbian, Perceived Social Support, and Spiritual Well-Being compared to the other age groups ( $p < 0.001$ ).

### **8. Differences in Study Variables by Occupation:**

- No significant differences in Psychological Well-Being, Public Identification, Personal Feelings about Being Gay/Lesbian, Perceived Social Support, or Spiritual Well-Being were found based on participants' occupation ( $p > 0.05$ ).

These findings provide insights into the significant factors contributing to the psycho-social-spiritual well-being of the participants, highlighting the important role of identity, support systems, and age in their well-being.

### ***Emergent Themes and Sub-themes:***

#### **1. Feeling of Low Self-Esteem**

- Difficulty being optimistic about the future.
- Stuck and frustrated in life.

#### **2. Taboo Topic**

- Lack of sermons on LGBTQIA+/homosexual issues in religious settings.

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- Religious stigma surrounding homosexuality.

### **3. Impact on Mental Health**

- Depression due to gender identity challenges.
- Suicidal thoughts and attempts.
- Negative emotions affecting mental well-being.

### **4. Social Stigma**

- Bullying, particularly in school.
- Rejection by society and peers.
- Excessive judgment of their lifestyle.

### **5. Poor Social Support**

- Lack of family support, often due to fear of rejection.
- Limited support from friends, often only from the LGBTQIA+ community.

### **6. Life Has No Meaning**

- Life feels "messed up" and filled with frustration.
- Feeling lost with no clear direction.
- Identity crisis, not knowing where they fit in.

### **7. Spiritually Disconnected**

- Guilt and fear of sin due to homosexual identity leading to spiritual disconnection
- Negative attitude from faith communities, causing discomfort and rejection.

### **8. Preconceived Notions**

- Generalization of LGBTQIA+ community as being influenced by Western culture
- The stereotype that gay and lesbian individuals are attempting to influence others.

### **9. Unsatisfactory Success in Life**

- Difficulty in achieving personal success, including issues like unemployment, dropping out of school, and lack of equal opportunities.

These themes highlight the complex psychological, social, and spiritual challenges faced by gay and lesbian individuals, reflecting struggles with self-esteem, mental health, social acceptance, and a sense of belonging within both their families and faith communities.

## **DISCUSSION**

This study assesses the psychological, social, and spiritual well-being of gay and lesbian people in Dimapur, Nagaland, an area where discussions on sexual identity are still sensitive and often taboo. The findings highlight both the inner resources and external difficulties that the various marginalized group faces.

First, the researchers confirmed the reliability and validity of the study instruments, which means that these instruments were appropriate for measuring well-being in this context. This is significant as most psychological measures are developed within a Western context and do not always represent the experience of sexual minorities in Northeast India. By demonstrating that these measures functioned well, this study lays the groundwork for similar studies in similar contexts.

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The strong relationships between public identification as gay or lesbian, personal acceptance and well-being as gay or lesbian, perceived social support, and spiritual well-being illustrate the inherent relational dynamics between identity and support. The findings of this study align with Meyer's (2003) minority stress theory, indicating that sexual minorities experience unique stressors, which may impact their mental health; social support systems and acceptance of their sexual minority status can mediate negative effects.

In this study, being public about one's identity and feeling well about being gay or lesbian were both strongly associated with improved mental health outcomes. These findings imply the necessity of self-acceptance and authenticity as resiliency sources. Previous work pointed to the same possibility, where depression and anxiety were lower when individuals endorsed their minority identity and had a strong sense of social support (Rostosky et al., 2007). In a socially and religiously conservative area like Dimapur, these findings provide perspective on the emotional courage and labour required to live one's true self.

The findings further indicated that lesbians had higher mean scores and measures than gay men in all domains, including psychological well-being, spiritual well-being, public identity, and social support. This may also be influenced by cultural gender norms as much of what has been learned suggests that women are allowed to express their emotions differently than men while those signs of emotional vulnerability and identity are often suppressed in men due to the demands of masculinity. Because of these gender norms, it may be more difficult for gay men to find support or to wholly embrace their identity (Herek & Garnets, 2007).

Age differences were evident in the participants as well, with participants over 26 years of age having higher levels of well-being in all domains. The findings conform to developmental theories including Erikson (1968) who suggested that people become more true to their identity as they grow older. One may believe that older individuals have been alive longer to develop coping skills, and have had time to seek out affirming communities, and ultimately, reconcile their sexual identity with their spiritual and cultural identities.

Interestingly, occupation did not significantly contribute to any of the study variables. This suggests that employment status alone is not sufficient to deduce psychological and/or spiritual well-being. However, qualitative data indicated that many participants stated that they felt disappointed in either dropping out of school, or not being employed. These setbacks did not bear statistically significance in the quantitative analysis, but they did inform how people constructed their own life satisfaction and sense of success.

The thematic analysis of the interviews identified profound emotional pain, and existential pain. The study participants described feeling low in self-worth and having feelings of confusion, being lost, and hopelessness, particularly when religiosity and/or religious teachings had conflict with their identities. Many participants identified feelings of "spiritually disconnected", because messages from faith communities made it clear that homosexuality was a sin. Experiencing these things lead to rampant feelings of inner conflict, shame, and fear that hindered their capacity to have a spiritual life. This supports past research that religious rejection can do long term harm to gay and lesbians (Rodriguez & Ouellette, 2000; Levy & Reeves 2011).

A recurrent theme was social rejection. Experiences such as bullying at school; lack of familial support, and placement on the outskirts of society, gave participants a deep sense of

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being lonely and isolated. Many participants felt that the only support networks they had were other gay or lesbian people. With a limited social network, these feelings of being isolated were further intensified and emotional burdens deepened. A couple of participants also indicated that some individuals thought of them as "Western", or suggested that they would "influence others". These sentiments did not merely delegate their identities to worthlessness, but seemingly also indicated that responsibility lay with them merely by being their unique selves. Several participants commented on living lives that, now, had no meaning or purpose. They described feelings of frustration, purposelessness, and ultimately of crisis of identity. This echoes existential literature, which highlights meaning and belonging as components of integrative wellbeing. Individuals who self-identify as gay and lesbian may feel emotionally lost and learn helplessness, and perhaps even spiritually adrift, without family, community or religious acceptance.

All these findings suggest an imperative to provide gay and lesbian inclusiveness-oriented mental health services which are attuned to the special difficulties faced by gay and lesbian people in conservative, religious, and tribal cultures. Counsellors, social workers, and teachers need to be trained in cultural competence and Lesbian and Gay sensitivity. Religious organizations also have a role to play and need to be encouraged to become more benevolent and inclusiveness-oriented and embrace inclusivity that validates individuals and not condemns them.

In addition, schools need to introduce anti-bullying programs and inclusive education to lower stigma from an early stage. Local and national policies need to ensure sexual minorities are not discriminated against in education, work, health care and religious places. This research underscores the nuanced experience of being lesbian or gay in Dimapur, Nagaland. Although there were some individuals who demonstrated resilience through self-acceptance and spiritual development, there are many who continue to experience emotional pain, social stigma, and spiritual conflict. Peer, community, and faith-based support is very important in facilitating people to excel. These discoveries necessitate humane interventions, inclusive policies, and ongoing research so that all individuals based on their sexual orientation are able to live healthy, mentally sound, and spiritually grounded lives.

### CONCLUSION

Sexual identity plays a key role in shaping emotional, social, and spiritual well-being. Being open and accepting of one's identity strengthens mental health. Support from others helps individuals feel more connected and valued. Lesbians tend to cope better than gay men in this context. Older individuals show more emotional strength and balance. Religious rejection creates deep spiritual pain. Lack of social acceptance leads to isolation and distress. Cultural and community attitudes shape how identity is lived. Building inclusive spaces helps people feel seen, safe, and supported.

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### **Conflict of Interest**

The author declares no conflict of interest related to the publication of this research.

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## APPENDIX A: RELIABILITY AND VALIDITY OF THE STUDY VARIABLES

**Table: 1: Reliability & Validity values for the study Variables.**

S.No	STUDY VARIABLES	NO. of Items	Minimum Score	Maximum Score	Alpha Reliability	Validity
1	<b>ADIM PWB: Psychological Well Being Score</b>	18	18	108	<b>0.892</b>	<b>0.944</b>
2	<b>BD1 Public Identification as Gay / Lesbian Score</b>	15	15	90	<b>0.887</b>	<b>0.941</b>
3	<b>BD2 Personal Feelings about being Gay / Lesbian Score</b>	8	8	48	<b>0.901</b>	<b>0.949</b>
4	<b>CDIM Perceived Social Support Score</b>	9	9	54	<b>0.899</b>	<b>0.948</b>
5	<b>DDIM Spiritual Well-Being Score</b>	10	10	54	<b>0.904</b>	<b>0.951</b>

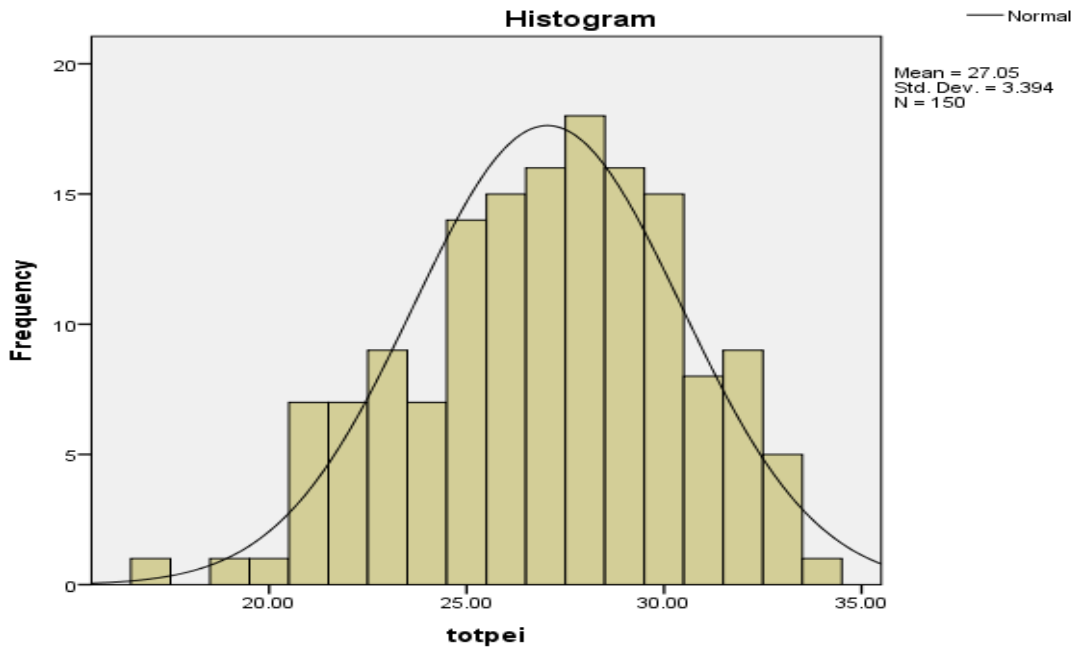
This table presents the reliability (Cronbach's Alpha) and validity coefficients for the study variables. The reliability scores range from 0.887 to 0.904, indicating good internal

# Intersecting Identities and Invisible Struggles: Psycho-Social-Spiritual Challenges Faced by Gay and Lesbian Individuals in Dimapur

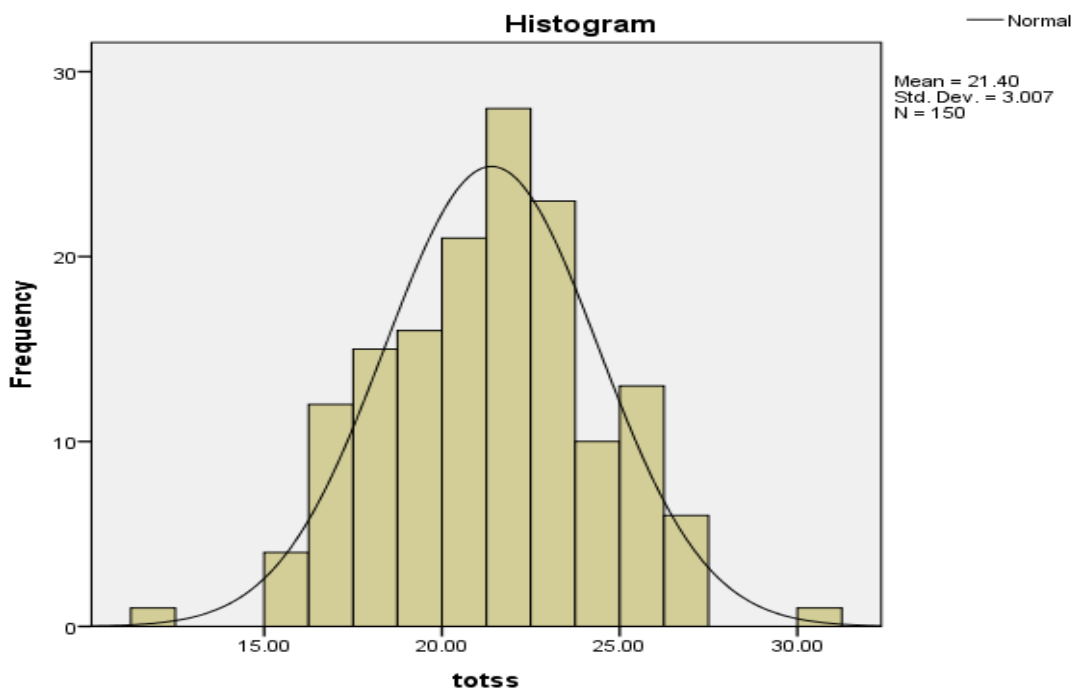
consistency for all measures. The validity scores for each variable are very high, ranging from 0.941 to 0.951, confirming the strong construct validity of the instruments used in this study. These values suggest that the variables reliably and accurately measure the intended constructs.

## Appendix A: Test for Normality

**Figure 1: Histogram Representing Normal Distribution for Study Variables**

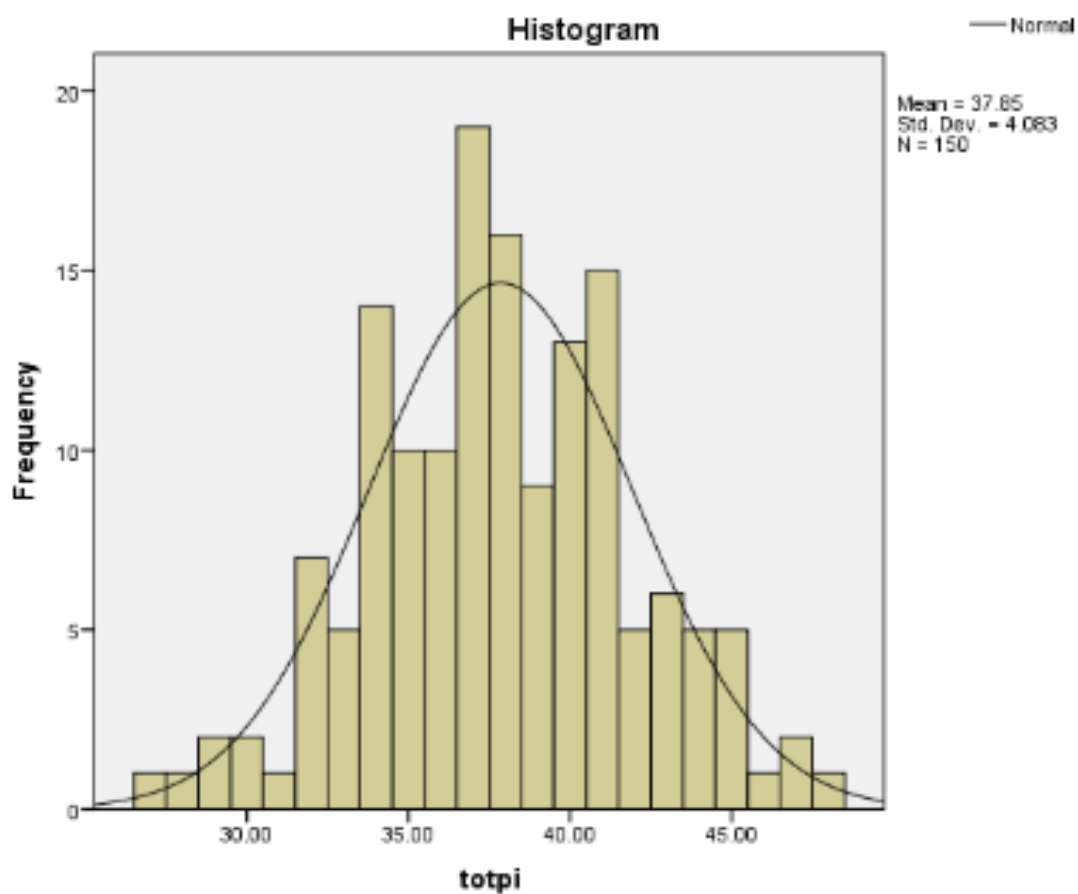


Personal identification of gay and lesbian Perceived social support

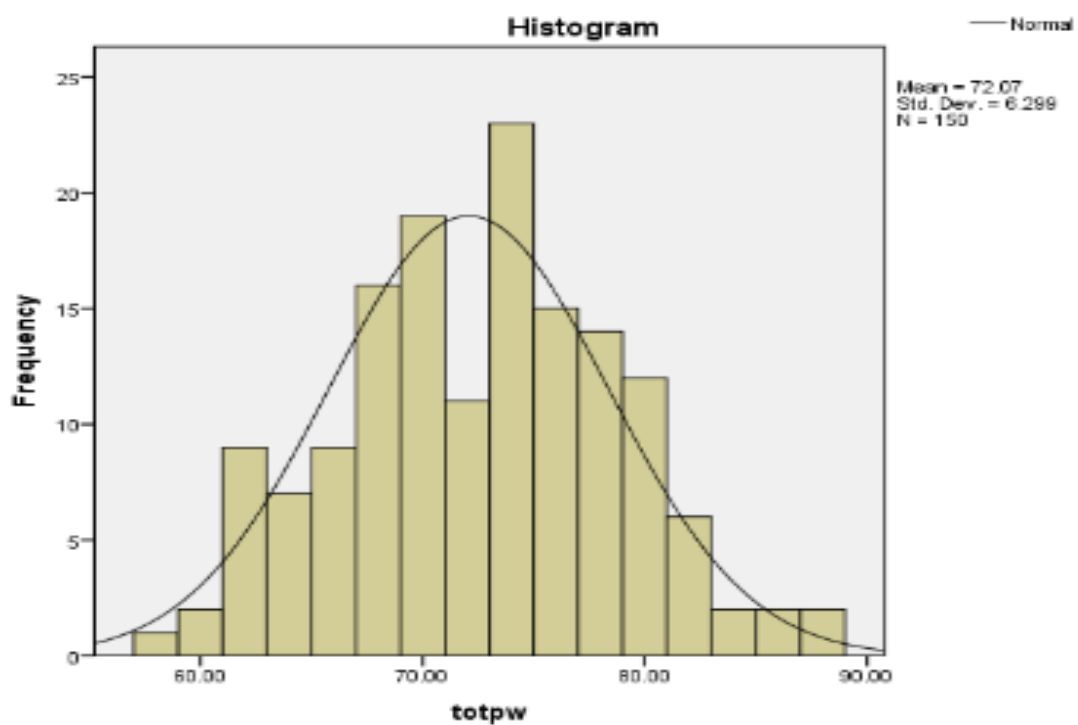


Perceived social support

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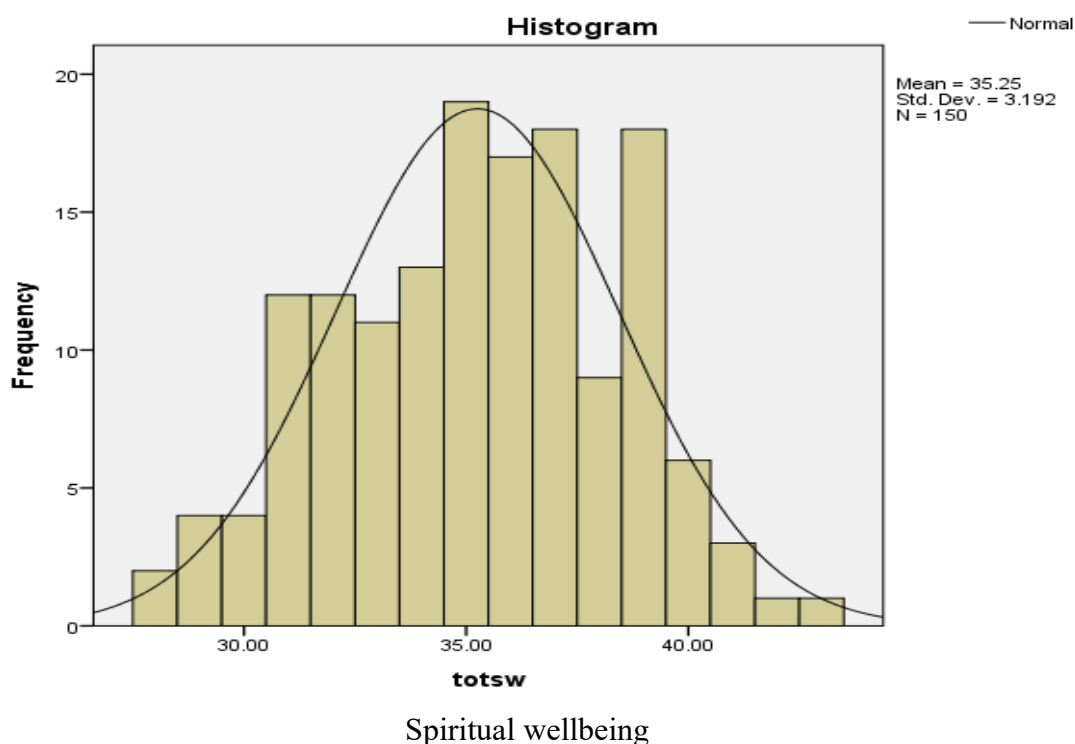


Psychological wellbeing



Public identification of gay or lesbian

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**APPENDIX B: RELIABILITY AND VALIDITY OF THE STUDY VARIABLES**

*Table: 1: Reliability & Validity values for the study Variables.*

Sl.no	STUDY VARIABLES	NO. of Items	Minimum Score	Maximum Score	Alpha Reliability	Validity
1	<b>ADIM PWB: Psychological Well Being Score</b>	18	18	108	<b>0.892</b>	<b>0.944</b>
2	<b>BD1 Public Identification as Gay / Lesbian Score</b>	15	15	90	<b>0.887</b>	<b>0.941</b>
3	<b>BD2 Personal Feelings about being Gay / Lesbian Score</b>	8	8	48	<b>0.901</b>	<b>0.949</b>
4	<b>CDIM Perceived Social Support Score</b>	9	9	54	<b>0.899</b>	<b>0.948</b>
5	<b>DDIM Spiritual Well-Being Score</b>	10	10	54	<b>0.904</b>	<b>0.951</b>

This table 1 presents the reliability (Cronbach's Alpha) and validity coefficients for the study variables. The reliability scores range from 0.887 to 0.904, indicating good internal

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consistency for all measures. The validity scores for each variable are very high, ranging from 0.941 to 0.951, confirming the strong construct validity of the instruments used in this study. These values suggest that the variables reliably and accurately measure the intended constructs.

**APPENDIX C: CORRELATION BETWEEN STUDY VARIABLES**

*Table 2: Karl Pearson's Correlation Values for the Study Variables*

	<b>1.Psychological Well Being Score</b>	<b>2.Public Identification as Gay / Lesbian Score</b>	<b>3.Personal Feelings about being Gay / Lesbian Score</b>	<b>4.Perceived Social Support Score</b>	<b>5.Spiritual Well-Being Score</b>
<b>ADIM PWB:</b>					
<b>Psychological Well Being Score BD1</b>	1.0				
<b>Public Identification as Gay / Lesbian Score BD2</b>	0.258(**)	1.0			
<b>Personal Feelings about being Gay / Lesbian Score CDIM</b>	0.332(**)	0.506(**)	1.0		
<b>Perceived Social Support Score DDIM</b>	0.260(**)	0.643(**)	0.493(**)	1.0	
<b>Spiritual Well-Being Score</b>	0.324(**)	0.743(**)	0.755(**)	0.788(**)	1.0

**\*\* Correlation is significant at the 0.01 level (1-tailed). (p<.01, Sig)**

Table 2 presents the Pearson correlation coefficients between the study variables. All correlations are significant at the 0.01 level, indicating strong relationships between psychological well-being, public identification, personal feelings, perceived social support, and spiritual well-being. Notably, the highest correlation is between "Personal Feelings about Being Gay/Lesbian" and "Spiritual Well-Being" (0.755), indicating a substantial connection between individuals' internal acceptance and their spiritual well-being.

**APPENDIX D: DIFFERENCES BETWEEN GAY AND LESBIAN INDIVIDUALS REGARDING PSYCHOLOGICAL WELL-BEING**

*Table 3: Mean, SD, and Independent Sample ‘t’ Test Values for the Factors of Psychological Well-Being Based on Gender Identity*

Sl. no	FACTORS OF PWB	N	MEAN	SD	't' VAL UE (df = 148)	SIG
	<b>AD1 PWB1: Autonomy</b>					<b>p&lt;.001</b>
<b>1</b>	1 Gay	90	61.14	10.94	<b>5.77</b>	<b>Sig</b>
	2 Lesbian	60	72.06	11.61		
	<b>AD2 PWB2: Environ Mastery</b>					<b>p&lt;.001</b>
<b>2</b>	1 Gay	90	59.79	11.68	<b>5.18</b>	<b>Sig</b>
	2 Lesbian	60	69.09	10.12		
	<b>AD3 PWB3: Personal Growth</b>					<b>p&lt;.001</b>
<b>3</b>	1 Gay	90	60.84	10.89	<b>5.06</b>	<b>Sig</b>
	2 Lesbian	60	71.03	12.81		
	<b>AD4 PWB4: Positive Relations</b>					<b>p&lt;.001</b>
<b>4</b>	1 Gay	90	59.70	10.80	<b>7.53</b>	<b>Sig</b>
	2 Lesbian	60	72.96	10.40		
	<b>AD5 PWB5: Purpose In Life</b>					<b>p&lt;.001</b>
<b>5</b>	1 Gay	90	57.07	10.63	<b>6.65</b>	<b>Sig</b>
	2 Lesbian	60	69.29	11.27		
	<b>AD6 PWB6: Self-Acceptance</b>					<b>p&lt;.001</b>
<b>6</b>	1 Gay	90	58.07	10.63	<b>7.20</b>	<b>Sig</b>
	2 Lesbian	60	71.29	11.27		
	<b>ADIM PWB: Psychological Well Being Score</b>					<b>p&lt;.001</b>
<b>7</b>	1 Gay	90	60.27	10.31	<b>6.77</b>	<b>Sig</b>
	2 Lesbian	60	72.28	10.87		
	Total	150	65.27	13.49		

Table 3: Mean, SD, and Independent Sample ‘t’ Test Values for the Factors of Psychological Well-Being based on Gender Identity. This table compares psychological well-being factors between gay and lesbian individuals. The results show significant differences across all psychological well-being factors, with lesbians reporting higher levels of well-being in areas such as autonomy, environmental mastery, and self-acceptance. These findings suggest that lesbian individuals, in this sample, experience better psychological well-being compared to their gay counterparts.

**APPENDIX E: DIFFERENCE BETWEEN GAY AND LESBIAN WITH REGARD TO STUDY VARIABLES**

*Table 4: Means, Standard Deviations, and Independent Sample t-Test Values for Study Variables Based on Gender Identity (Gay vs. Lesbian)*

(N = 150; Gay = 90, Lesbian = 60)

Sl. no	FACTORS	N	MEAN	SD	't' VA LU E (df = 148)	SI G
	<b>ADIM Score</b>		<b>Psychological</b>	<b>Well Being</b>		
<b>1</b>	1 Gay	90	60.27	10.31	<b>6.77</b>	<b>p&lt;.001 Sig</b>
	2 Lesbian	60	72.28	10.87		
	Total	150	65.27	13.49		
	<b>BD1 Public Identification as Gay / Lesbian Score</b>					
<b>2</b>	1 Gay	90	60.46	10.41	<b>6.86</b>	<b>p&lt;.001 Sig</b>
	2 Lesbian	60	72.46	10.54		
	Total	150	67.86	17.82		
	<b>BD2 Personal Feelings about being Gay / Lesbian Score</b>					
<b>3</b>	1 Gay	90	60.42	10.60	<b>5.77</b>	<b>p&lt;.001 Sig</b>
	2 Lesbian	60	71.03	11.30		
	Total	150	66.86	18.83		
	<b>CDIM Perceived Social Support Score</b>					
<b>4</b>	1 Gay	90	60.56	10.84	<b>5.13</b>	<b>p&lt;.001 Sig</b>
	2 Lesbian	60	70.00	11.17		
	Total	150	66.14	17.92		
	<b>DDIM Spiritual Well-Being Score</b>					
<b>5</b>	1 Gay	90	59.18	10.40	<b>6.81</b>	<b>p&lt;.001 Sig</b>
	2 Lesbian	60	71.30	10.87		
	Total	150	61.22	11.55		

The table 4 shows significant differences across all study variables, with lesbian participants scoring higher in psychological well-being, public identification, personal feelings, social support, and spiritual well-being. These results, significant at  $p < .001$ , suggest that lesbians in the Dimapur sample experience higher psycho-social-spiritual well-being than gay individuals.

**APPENDIX F: DEMOGRAPHIC DETAILS OF THE RESPONDENTS**

*Table 5: Distribution of the Samples Based on Selected Socio-Demographic Factors*

Sl.no	FACTORS	N (150)	PERCENTAGE
	<b>Gender identity</b>		
1	1 Gay	90	60.0
	2 Lesbian	60	40.0
	<b>Age</b>		
2	1 (Below 20)	52	34.7
	2 (21 to 25)	62	41.3
	3 (Above 26)	36	24.0
	<b>Occupation</b>		
3	1 Private Sector	54	36.0
	2 Public Sector	15	10.0
	3 Student	26	17.3
	4 Un Employed	55	36.7
	<b>Educational Qualification</b>		
4	1 Drop Outs	40	26.7
	2 School	36	24.0
	3 H.SC	24	16.0
	4 U.G	35	23.3
	5 P.G	15	10.0

**Source: Field Data**

This table 5 provides the demographic breakdown of the participants in the study. The sample is predominantly composed of gay individuals (60%) compared to lesbians (40%). The age group of 21 to 25 years is the largest, comprising 41.3% of the sample. The majority of respondents are either employed in the private sector or unemployed, with a significant proportion (26.7%) being high school dropouts. These demographic factors may influence the study's results, particularly in terms of social and economic support systems.

**APPENDIX G: DIFFERENCES IN PSYCHOLOGICAL WELL-BEING, PUBLIC IDENTIFICATION AS GAY/LESBIAN, PERSONAL IDENTIFICATION ABOUT BEING GAY/LESBIAN, PERCEIVED SOCIAL SUPPORT, AND SPIRITUAL WELL-BEING WITH REGARD TO AGE**

*Table 6: Mean, SD, and One-Way ANOVA Values for the Study Variables Based on Age*

Sl.no	FACTORS	N	MEAN	SD	F RATIO (df =2, 147)	SIG
<b>ADIM PWB: Psychological Well Being Score</b>						
<b>1</b>	1 (Below 20)	52	60.33	10.40	<b>6.954</b>	<b>p&lt;.001 Sig</b>
	2 (21 to 25)	62	65.42	11.68		
	3 (Above 26)	36	71.77	10.65		
	Total	150	65.27	13.49		
<b>BD1 Public Identification as Gay / Lesbian Score</b>						
<b>2</b>	1 (Below 20)	52	60.56	10.18	<b>8.509</b>	<b>p&lt;.001 Sig</b>
	2 (21 to 25)	62	66.61	11.41		
	3 (Above 26)	36	76.72	10.58		
	Total	150	67.86	17.82		
<b>BD2 Personal Feelings about being Gay / Lesbian Score</b>						
<b>3</b>	1 (Below 20)	52	61.72	11.73	<b>10.026</b>	<b>p&lt;.001 Sig</b>
	2 (21 to 25)	62	65.01	10.87		
	3 (Above 26)	36	73.36	12.35		
	Total	150	66.86	18.83		
<b>CDIM Perceived Social Support Score</b>						
<b>4</b>	1 (Below 20)	52	60.59	10.04	<b>11.474</b>	<b>p&lt;.001 Sig</b>
	2 (21 to 25)	62	64.07	12.28		
	3 (Above 26)	36	74.75	10.71		
	Total	150	66.14	17.92		
<b>DDIM Spiritual Well-Being Score</b>						
<b>5</b>	1 (Below 20)	52	60.59	11.05	<b>7.964</b>	<b>p&lt;.001 Sig</b>
	2 (21 to 25)	62	65.72	10.11		
	3 (Above 26)	36	72.58	10.57		
	Total	150	61.22	11.55		

Table 6: This table shows how psychological well-being, public identification, personal feelings about being gay/lesbian, perceived social support, and spiritual well-being differ across different age groups. The results indicate significant differences across all variables, with older age groups (above 26) generally reporting higher scores, particularly in public identification and spiritual well-being. These findings suggest that age might be a factor influencing how individuals navigate their sexual identity and related well-being.

**APPENDIX G: DIFFERENCES BASED ON OCCUPATION**

*Table 7: Mean, SD, and One-Way ANOVA Values for the Study Variables Based on Occupation*

Sl.no	FACTORS	N	MEAN	SD	F RATIO (df =3, 146)	SIG
<b>ADIM PWB: Psychological Well Being Score</b>						
1	1 Private Sector	54	64.09	13.25	0.779	p<.507 Not Sig
	2 Public Sector	15	64.96	16.31		
	3 Student	26	68.89	12.18		
	4 Un Employed	55	64.81	13.57		
	Total	150	65.27	13.49		
<b>BD1 Public Identification as Gay / Lesbian Score</b>						
2	1 Private Sector	54	65.64	19.65	0.941	p<.422 Not Sig
	2 Public Sector	15	74.23	19.06		
	3 Student	26	68.81	13.25		
	4 Un Employed	55	67.86	17.46		
	Total	150	67.86	17.82		
<b>BD2 Personal Feelings about being Gay / Lesbian Score</b>						
3	1 Private Sector	54	66.03	17.18	0.209	p<.890 Not Sig
	2 Public Sector	15	65.33	18.15		
	3 Student	26	69.29	18.65		
	4 Un Employed	55	66.95	20.93		
	Total	150	66.86	18.83		
<b>CDIM Perceived Social Support Score</b>						
4	1 Private Sector	54	64.64	15.32	0.830	p<.480 Not Sig
	2 Public Sector	15	69.22	19.92		
	3 Student	26	62.87	20.22		
	4 Un Employed	55	68.31	18.67		
	Total	150	66.14	17.92		
<b>DDIM Spiritual Well-Being Score</b>						
5	1 Private Sector	54	60.93	12.32	0.438	p<.720 Not Sig
	2 Public Sector	15	64.36	11.90		
	3 Student	26	60.25	10.76		
	4 Un Employed	55	61.12	11.21		
	Total	150	61.22	11.55		

Table 7 presents the comparison of study variables across different occupations. The results show no significant differences between occupation categories in terms of psychological well-being, public identification, or spiritual well-being, implying that occupation does not have a significant impact on these variables in this sample. However, there are slight variations in perceived social support and personal feelings about being gay/lesbian across occupations, which might be attributed to different social and work environments.

**APPENDIX H: DIFFERENCES BASED ON EDUCATIONAL QUALIFICATION**

*Table 8: Mean, SD, and One-Way ANOVA Values for the Study Variables Based on Educational Qualification*

Sl.no	FACTORS	N	MEAN	SD	F RATIO (df =4, 145)	SIG
<b>ADIM PWB: Psychological Well Being Score</b>						
<b>1</b>	1 Drop Outs	40	51.73	10.04	<b>6.917</b>	<b>p&lt;.001 Sig</b>
	2 School	36	60.76	11.26		
	3 H.SC	24	64.82	10.81		
	4 U.G	35	69.97	12.89		
	5 P.G	15	72.54	10.67		
	Total	150	65.27	13.49		
<b>BD1 Public Identification as Gay / Lesbian Score</b>						
<b>2</b>	1 Drop Outs	40	52.56	10.99	<b>12.907</b>	<b>p&lt;.001 Sig</b>
	2 School	36	60.38	11.89		
	3 H.SC	24	63.98	10.58		
	4 U.G	35	69.45	11.54		
	5 P.G	15	72.50	10.47		
	Total	150	67.86	17.82		
<b>BD2 Personal Feelings about being Gay / Lesbian Score</b>						
<b>3</b>	1 Drop Outs	40	57.58	10.06	<b>9.120</b>	<b>p&lt;.001 Sig</b>
	2 School	36	60.42	11.15		
	3 H.SC	24	63.81	10.73		
	4 U.G	35	67.55	12.50		
	5 P.G	15	72.55	12.00		
	Total	150	66.86	18.83		
<b>CDIM Perceived Social Support Score</b>						
<b>4</b>	1 Drop Outs	40	57.79	10.29	<b>10.761</b>	<b>p&lt;.001 Sig</b>
	2 School	36	60.81	10.69		
	3 H.SC	24	65.07	12.99		
	4 U.G	35	68.07	11.10		
	5 P.G	15	71.72	10.63		
	Total	150	66.14	17.92		
<b>DDIM Spiritual Well-Being Score</b>						
<b>5</b>	1 Drop Outs	40	56.00	10.84	<b>8.110</b>	<b>p&lt;.001 Sig</b>
	2 School	36	60.03	10.73		
	3 H.SC	24	65.12	11.20		
	4 U.G	35	68.12	10.75		
	5 P.G	15	71.24	10.41		
	Total	150	61.22	11.55		

Table 8 compares study variables based on the educational qualification of respondents. Significant differences are observed in all variables, with higher levels of education

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correlating with better psychological well-being, public identification, and spiritual well-being. Individuals with postgraduate qualifications report the highest scores across all variables, suggesting that higher education may provide better resources and coping mechanisms for navigating the challenges associated with sexual identity and overall well-being.