

Intra-Community Discrimination: Examining Social Isolation, Self-Esteem, and Emotional Dysregulation in Bisexual Individuals

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Abstract: Bisexual individuals frequently report discrimination not only from heterosexual populations but also from within the LGBTQIA+ community, with experiences such as identity invalidation, stereotyping, and exclusion contributing to adverse psychosocial outcomes. The present study examined intra-community discrimination faced by bisexual individuals and its relationship with social isolation, self-esteem, and emotional dysregulation, through the lived experiences of participants themselves.

A qualitative research design was employed, utilising semi-structured interviews as the primary method of data collection. Nine self-identified bisexual adults aged 18 years and above were recruited through purposive and snowball sampling via informal networks and online platforms. Data were analysed using Reflexive Thematic Analysis following the six-phase framework outlined by Braun and Clarke (2006, 2022), allowing for the systematic identification of patterns of meaning across the dataset while maintaining sensitivity to participant subjectivity and experiential complexity.

Seven themes were identified: bisexual erasure as a multi-directional harm, intra-community discrimination and the betrayal of expected safety, hypersexualisation and the presumption of boundary flexibility, emotional regulation as a trajectory from engagement to resignation, social isolation as a double outsider experience, self-esteem across internalised doubt and conditional resilience, and the selective disclosure dilemma. Theoretical saturation was reached across all themes within the nine-participant sample. Findings are interpreted through the lens of Meyer's Minority Stress Model (2003), with particular attention to the role of proximal stressors originating within the LGBTQIA+ community itself. The findings contribute to the growing literature on bisexual-specific minority stress and highlight the distinct psychosocial burdens imposed by intra-community discrimination. Implications for clinical practice and for the development of inclusive, bisexual-affirming interventions within LGBTQIA+ spaces are discussed.

Index Terms - Bisexuality, intra-community discrimination, minority stress, social isolation, self-esteem, emotional regulation, reflexive thematic analysis

1. INTRODUCTION

LGBTQ+ populations have historically experienced stigma, discrimination, and social exclusion, all of which are associated with poorer mental health outcomes. Within this broader group, bisexual individuals represent a uniquely marginalized population whose experiences differ from those of other sexual minorities. While substantial research has examined discrimination from heteronormative society, increasing attention is being directed toward intracommunity discrimination, negative attitudes and behaviors directed toward bisexual individuals within LGBTQ+ spaces themselves (Feinstein et al., 2017; Velasco et al., 2024). Bisexuality, defined as attraction to more than one gender, challenges binary understandings of sexual orientation. However, dominant social norms continue to privilege monosexual identities, often resulting in skepticism and invalidation of bisexual identities. This phenomenon, commonly referred to as binegativity, includes beliefs that bisexuality is a phase, confusion, or indecisiveness (Mongelli, 2019; Ross et al., 2018). Importantly, such attitudes are not limited to heterosexual contexts but are also observed within LGBTQ+ communities, where bisexual individuals may be perceived as “not queer enough” or as possessing “heterosexual privilege” (Arriaga et al., 2019).

1.1 Minority Stress and Bisexual Vulnerability

Minority Stress Theory (Meyer, 2003) provides a foundational framework for understanding how stigma and discrimination contribute to psychological distress among sexual minorities. The theory posits that chronic exposure to stressors such as external prejudice, internalized stigma, and identity concealment adversely affects mental health. For bisexual individuals, this stress is compounded by marginalization in both heterosexual and LGBTQ+ contexts, often conceptualized as *double discrimination* (Mongelli, 2019). Empirical evidence suggests that bisexual individuals report higher levels of depression, anxiety, and psychological distress compared to other sexual minority groups, indicating the presence of unique stressors not fully captured by traditional models (Feinstein et al., 2017).

1.2 Intracommunity Discrimination and Identity Invalidation

Intracommunity discrimination refers to the marginalization and invalidation of bisexual identities within LGBTQ+ spaces. Unlike external discrimination, these experiences occur in contexts that are typically expected to offer acceptance, thereby intensifying their psychological impact. Research indicates that bisexual individuals frequently encounter stereotypes portraying them as promiscuous, untrustworthy, or indecisive (Velasco et al., 2024). Furthermore, discrimination from both heterosexual and LGBTQ+ communities restricts access to social support and reinforces feelings of exclusion (Arriaga et al., 2019). Such experiences have been linked to adverse psychological outcomes and maladaptive coping patterns (Van et al., 2018).

1.3 Psychological Outcomes: Social Isolation, Self-Esteem, and Emotional Dysregulation

The psychological impact of intracommunity discrimination can be understood through its influence on key psychosocial variables. Social isolation, defined as the subjective experience of loneliness and lack of belongingness, has been consistently associated with minority stress. Elevated levels of minority stress are linked to increased loneliness among sexual minorities, and for bisexual individuals, exclusion from multiple social contexts may intensify this experience (Elmer et al., 2022). Self-esteem, closely tied to identity validation and social acceptance, is also affected by these experiences. Bisexual individuals often report lower identity integration and valence, contributing to reduced self-esteem (Ross et al., 2018). The Rejection–Identification Model further suggests that discrimination undermines self-esteem in the absence of strong group identification (Branscombe et al., 1999), a buffer that may be less accessible to bisexual individuals due to intracommunity exclusion.

Emotional dysregulation represents another key mechanism linking discrimination to mental health outcomes. Experiences of stigma and invalidation are associated with greater difficulty in managing emotional responses (Carter et al., 2017). Additionally, minority stress has been linked to trauma-related emotional difficulties (Keating & Muller, 2020), and meta-analytic evidence suggests that sexual minorities exhibit greater challenges in emotion regulation compared to heterosexual individuals.

Despite growing research in this area, important gaps remain. Much of the existing literature focuses on external discrimination, with comparatively limited attention to intracommunity dynamics. Furthermore, few studies have examined the simultaneous impact of intracommunity discrimination on multiple psychological outcomes. Additionally, the predominance of Western samples limits the cultural applicability of findings.

In response to these gaps, the present study aims to examine whether intracommunity discrimination predicts social isolation, self-esteem, and emotional dysregulation among bisexual individuals, using a qualitative approach to capture the depth and complexity of lived experiences.

2. NEED FOR THE STUDY

Despite growing research on minority stress among sexual minorities, there remains a significant gap in understanding the specific dynamics of intra-community discrimination faced by bisexual individuals in non-Western cultural contexts. Most existing studies focus on discrimination from heterosexual populations, with limited attention to binegativity within LGBTQ+ spaces themselves. Furthermore, the simultaneous impact of such discrimination on an individual's social and emotional well-being has not been adequately explored through qualitative methods that capture the depth of lived experience. This study addresses these gaps by examining the experiences of bisexual individuals in India, contributing to the limited South Asian literature on bisexual-specific minority stress and informing culturally sensitive clinical and community interventions.

3. REVIEW OF LITERATURE

3.1 Theoretical Foundations of Minority Stress

The initial theoretical framework relating to the mental health of sexual minorities is based on Minority Stress Theory (Meyer, 2003). It suggests that individuals from stigmatised social groups face chronic stress due to societal prejudice, discrimination, and internalised stigma. These stressors function on multiple levels, which include external factors (e.g., discrimination), expectations of rejection, identity concealment, and internalised negative beliefs. While Minority Stress Theory has been applied to lesbian and gay populations extensively, it does not fully account for the experiences of bisexual individuals. Bisexuals often face multiple social situations and environments where their identity is either invalidated or misunderstood, creating a compounded stressful experience. This limitation highlights the need to extend minority stress frameworks to include intragroup dynamics, in this case, intracommunity discrimination.

The Rejection–Identification Model (Branscombe et al., 1999) posits that experiences of discrimination can adversely affect self-esteem unless individuals sustain a strong identification with their social group. However, bisexual individuals often report weaker identification with LGBTQ+ communities due to experiences of exclusion, limiting the protective function of group belonging and increasing vulnerability to psychological distress.

3.2 Emergence of Bisexual-Specific Mental Health Research

Research from the late 2010s began to highlight that bisexual individuals experience disproportionate levels of mental health challenges in comparison to other sexual minorities. (Feinstein et al., 2017) conducted a comprehensive review that

demonstrated that bisexual individuals report elevated levels of depression, anxiety, and substance use. The authors attribute these disparities to unique stressors such as identity invalidation, lack of community support, and experiences of discrimination from both heterosexual and LGBTQ+ individuals.

Similarly, an examination of perceived discrimination among bisexual adults found that instances of stigma were numerous and significantly associated with adverse mental health outcomes, including depressive symptoms (Van et al. 2018). Importantly, the study also highlighted variability in coping mechanisms, suggesting that while some individuals had adaptive strategies such as seeking social support, others engaged in avoidance or suppression, which exacerbated psychological distress. (Ross et al., 2018) further contributed to this idea by examining sexual identity dimensions among bisexual individuals. Their findings indicate that bisexuals report lower levels of identity integration compared to gay and lesbian individuals. This lack of a coherent identity is associated with lower self-esteem and increased vulnerability to mental health difficulties, highlighting the role of identity validation in psychological well-being.

3.3 Double Discrimination and Intragroup Marginalisation

A significant notion emerging in bisexual research is double discrimination, where bisexuals encounter stigma from both heterosexual society and LGBTQ+ communities. This dual marginalisation increases minority stress and leads to elevated psychological distress (Mongelli, 2019).

The Cornell What We Know Project (2019), which looked at more than 300 studies, gives strong evidence that discrimination is linked to bad health outcomes for LGBTQ+ people. This body of work broadly addresses sexual minorities and reinforces the comprehension that discrimination is the primary cause of mental health disparities.

Intracommunity discrimination, also known as binegativity, has been recognised as a particularly significant type of stigma. Bisexuals often face invalidation from both communities, leading to diminished access to social support networks. These experiences might involve doubts regarding the authenticity of bisexual identity, exclusion from communal environments, and stereotyping (Arriaga et al., 2019).

This phenomenon was further investigated, revealing that both external discrimination and intracommunity discrimination significantly predict mental health challenges among bisexual individuals. The study points out that discrimination in LGBTQ+ environments can be especially detrimental, as it undermines ideals of acceptance and inclusion (Velasco et al., 2024).

3.4 Social Isolation and Belongingness

Social isolation is a critical psychosocial outcome associated with minority stress. It is defined not only as physical isolation but as the subjective experience of lacking meaningful social connections and belongingness. For bisexual individuals, social isolation is often associated with their marginalisation across both heterosexual and LGBTQ+ contexts.

Higher levels of minority stress are significantly associated with increased loneliness among sexual minorities (Elmer et al. 2022). The study suggests that discrimination inhibits social relationships and disrupts the formation of supportive networks. For bisexual individuals, this disruption is often worsened by identity invalidation, leading to an experience of “partial belonging” or “in-between status.”

(Van et al. 2018) also noted that discrimination leads to withdrawal from social interactions, further reinforcing isolation. This withdrawal may function as one of the many coping mechanisms, but can ultimately contribute to a cycle of loneliness and reduced social support.

3.5 Self-Esteem and Identity Validation

Self-esteem is a key concept for understanding how discrimination affects people's mental health. It demonstrates how an individual feels about their own worth and is closely linked to how they feel about their identity. Experiences of invalidation can result in internalised stigma, adversely impacting self-esteem.

Bisexuals exhibit diminished identity integration, correlating with decreased self-esteem. The absence of consistent affirmation from both heterosexual and LGBTQ+ communities may result in self-doubt and identity confusion (Ross et al., 2018).

The Rejection–Identification Model (Branscombe et al., 1999) offers a valuable framework for comprehending these dynamics. This model posits that group identification can mitigate the adverse impacts of discrimination on self-esteem. Nonetheless, for bisexuals, a diminished identification with LGBTQ+ communities may attenuate this protective effect, leading to increased vulnerability.

3.6 Emotional Dysregulation as a Psychological Mechanism

Emotional dysregulation has become a significant mechanism connecting minority stress to mental health outcomes. It is related to challenges in comprehending, regulating, and reacting to emotional experiences in constructive ways. Experiencing

discrimination is linked to greater emotional dysregulation in sexual minorities. This can be associated with increased emotional reactivity, challenges in regulating emotional responses, or dependence on ineffective coping mechanisms (Carter et al., 2017).

The discrimination could worsen trauma-related symptoms, such as emotional dysregulation and attachment insecurity. These results indicate that repeated instances of invalidation may produce combined psychological effects (Keating and Muller, 2020). The anti-bisexual minority stress is linked to behaviours that exhibit emotional dysregulation, like emotional eating and poor body esteem, which provides further evidence of the behavioural consequences of dysregulation (Jhe et al., 2021).

3.7 Recent Advances and Protective Factors

Recent research has begun to explore protective factors that may mitigate the effects of discrimination. (Speciale and Li 2026) found that while anti-bisexual discrimination predicts stress and anxiety, certain factors, such as body esteem and self-acceptance, may serve as individual buffers. Additionally, attention is being given to the role of social support and community inclusion in promoting resilience among bisexual individuals. However, given the prevalence of intracommunity discrimination, access to such uplifting factors may be limited.

4. RESEARCH METHODOLOGY

The present study adopted a qualitative research design to explore the experiences of bisexual individuals, with a focus on intracommunity discrimination and its impact on social isolation, self-esteem, and emotional dysregulation. A qualitative approach was employed to facilitate an in-depth understanding of subjective experiences, identity-related challenges, and emotional processes that are not easily captured through quantitative methods. The study was informed by a phenomenological orientation, emphasizing how individuals interpret and make meaning of their lived experiences.

Data were analysed using Reflexive Thematic Analysis, following the framework proposed by Braun and Clarke (2006, 2022), which allows for the systematic identification, analysis, and interpretation of patterns within qualitative data. Given the interpretive nature of qualitative research, reflexivity was actively maintained throughout the research process. The researcher acknowledges their positionality as someone engaged with psychological inquiry into identity and lived experience, which may influence both data collection and interpretation. Potential biases included pre-existing familiarity with concepts such as minority stress and expectations regarding intracommunity discrimination.

To minimize the influence of these biases, several steps were taken. During data collection, the researcher adopted a **non-directive and open-ended interviewing approach**, allowing participants to guide the narrative rather than imposing assumptions. During analysis, reflexive journaling was used to document emerging interpretations and monitor subjective influence. Additionally, themes were developed through close engagement with the data, ensuring that interpretations were grounded in participant accounts rather than preconceived frameworks.

4.1 Participants

The study included a total of nine participants who identified as bisexual. All participants were 18 years of age or older and voluntarily consented to participate in the study. Participants were required to meet the following inclusion criteria: (a) self-identification as bisexual or plurisexual, (b) age 18 years or above, (c) willingness to participate voluntarily, and (d) prior exposure to LGBTQ+ spaces or communities, either online or offline.

Participants were recruited using purposive and snowball sampling techniques, allowing access to individuals with relevant lived experiences while also facilitating recruitment within a relatively underrepresented population. The sample size was considered appropriate for qualitative inquiry, as the aim of the study was depth rather than generalizability. Consistent with recommendations for thematic analysis, smaller samples allow for detailed, nuanced exploration of participant experiences (Braun & Clarke, 2022). Additionally, theoretical saturation was monitored throughout data collection, with no substantially new codes emerging in later interviews, indicating adequacy of the sample for addressing the research objectives.

4.2 Data Collection Method

Data were collected using a semi-structured interview schedule designed to explore participants' experiences across multiple domains relevant to the study. These domains included (a) intracommunity discrimination and identity invalidation, (b) social isolation and belongingness, (c) emotional experiences and regulation, (d) self-perception and self-esteem, and (e) domestic and interpersonal experiences.

The interview schedule comprised open-ended questions, allowing participants to articulate their experiences in their own words. Probing questions were used where necessary to elicit further clarification and depth, while maintaining flexibility in the interview process.

4.3 Procedure

Participants were recruited through informal networks and online platforms, including social media and community-based connections. Prior to participation, all individuals were provided with an informed consent form outlining the purpose of the study, procedures involved, confidentiality measures, and their rights, including the right to withdraw at any time. Interviews were conducted in a safe and confidential setting, either online or in person, based on participant preference. Each interview lasted approximately 30 to 45 minutes. With participants' consent, interviews were audio-recorded to ensure accuracy of data.

4.4 Data Analysis

The qualitative data obtained from the semi-structured interviews were analysed using Reflexive Thematic Analysis as outlined by Braun and Clarke (2006, 2022). This approach was selected for its flexibility in identifying, analysing, and reporting patterns of meaning across qualitative datasets, and for its compatibility with the interpretivist epistemological position underlying the present study. Analysis proceeded through six phases.

In the first phase, the researcher familiarised themselves with the data through repeated reading of all nine interview transcripts, noting initial impressions and areas of relevance to the study's constructs.

In the second phase, initial codes were generated systematically across the entire dataset, capturing both semantic content and latent meaning.

In the third phase, codes were sorted and clustered into candidate themes, guided by both the deductive constructs of the study — emotional regulation, social isolation, and self-esteem — and inductively emerging patterns not anticipated by the interview structure.

In the fourth and fifth phases, themes were reviewed, refined, and defined to ensure internal coherence and clear differentiation from one another.

In the sixth phase, final themes were named, and a written analysis was produced, with illustrative participant extracts selected to anchor each theme and subtheme.

To assess the adequacy of the sample, theoretical saturation was monitored across successive transcripts by tracking the emergence of new codes. Saturation was operationalised as the point at which no substantively new codes were generated from incoming data.

All seven themes identified in the analysis reached theoretical saturation within the nine-participant sample, with the earliest themes saturating by the fifth participant and the final themes saturating by the seventh, with participants eight and nine providing confirmatory data only.

Table 1: saturation map

THEME	P1	P2	P3	P4	P5	P6	P7	P8	P9	STATUS
T1. Bisexual Erasure						-				Saturated
T2. Intracommunity Discrimination							-			Saturated
T3. Hypersexualisation							-			Saturated
T4. Emotional Regulation Arc							-			Saturated
T5. Social Isolation/ Double Outsider						-				Saturated
T6. Self Esteem: Doubt & Resilience							-			Saturated
T7. Selective Disclosure Dilemma					-					Saturated

All participant names were replaced with alphanumeric codes (P1 through P9) to ensure anonymity. Interviews conducted partially in Hindi were translated and coded in English to maintain consistency across the dataset. Reflexivity was maintained throughout the analytical process, with the researcher actively acknowledging their own positionality in relation to the subject matter.

5. RESULTS AND DISCUSSION

The present study sought to examine whether intra-community discrimination predicts social isolation, self-esteem, and emotional dysregulation in bisexual individuals, employing a qualitative design that took reflexive thematic analysis of semi-structured interviews. The findings of the study converge to support an affirmative answer to this research question, while simultaneously revealing a more nuanced picture than the research question alone anticipates. Discrimination against bisexual individuals does not stem exclusively from heteronormative society — it operates with particular force from within LGBTQ+ spaces themselves, and it is precisely this intracommunity dimension that appears most consequential for the psychological factors under investigation.

5.1 Intra-Community Discrimination as a Proximal Stressor

The qualitative findings are most productively situated within Meyer's Minority Stress Model (2003), which distinguishes between distal stressors and proximal stressors, which are internalized and identity-specific, arising from within the individual's own community of identification.

The present data suggest that for bisexual individuals, intracommunity discrimination functions as a particularly potent proximal stressor, precisely because it occurs in spaces that are expected to provide refuge from distal discrimination. As P8 said, being told they possessed "straight privilege" or were "not fully queer" in a queer space produced a specific form of alienation that discrimination from heterosexual individuals did not — the betrayal of anticipated safety. This is consistent with Meyer's assertion that proximal stressors, by virtue of their internalized nature and their disruption of identity-affirming community belonging, carry a disproportionate psychological weight in spite of their frequency.

Theme 2 of the thematic analysis — intracommunity discrimination — mapped directly onto this theoretical distinction. Participants described skepticism from same-gender partners about their capacity for monogamy, pressure to conform to either a fully lesbian or fully heterosexual identity, and, in three cases (P2, P3, P4), experiences of abuse or coercion within queer relationships. This last finding is particularly significant, as it represents a form of harm that existing bisexual-specific measurement instruments, including the Anti-Bisexual Experiences Scale used in the present study, may not fully capture. Future iterations of this research may benefit from supplementary measurement of intracommunity intimate partner dynamics.

5.2 Social Isolation: The Double Outsider Position

A distinctive structural explanation of social isolation that goes beyond mere exclusion was generated by the thematic analysis. Participants reported a continual state of partial belonging in both heteronormative and LGBTQ+ spaces, which Theme 5 refers to as the double outsider position, rather than being completely rejected by either. This experience structure is better captured by P4's use of the phrase "apna dhar ka na mahta" (one who is not totally at home even in their own home) than the concept of social isolation alone would imply. P2's description of their own room as the sole place where they did not have to "diminish their energy" to avoid upsetting others is the most notable representation of this viewpoint.

This finding is conceptual because it suggests that the social isolation experienced by bisexual individuals is fundamentally different from that caused by simple exclusion. Bisexual people are not isolated because they are categorically rejected; rather, they are isolated because the partial acceptance they obtain in each setting depends on the management or suppression of parts of their identities, which makes it structurally impossible for them to engage in real social participation.

The behavioural adaptation that participants described in response to this condition (Theme 7, the selective disclosure dilemma) further compounds social isolation. Of the nine individuals, eight were not completely out to their close relatives, and a number of them reported making carefully considered choices about who to disclose to in any particular social setting.

5.3 Self-Esteem: From Internalised Doubt to Conditional Resilience

The relationship between intracommunity discrimination and self-esteem in the present data is neither linear nor uniformly negative, and this complexity is theoretically important. Theme 6 identified two distinct self-esteem trajectories across participants: one characterised by internalised doubt and self-questioning (most evident in P3 and P4), and one characterised by conditional resilience and even self-expansion through identity exploration (most evident in P1, P7, and P9). Meyer's model anticipates this variability through the construct of coping resources and community connectedness — individuals with access to validating relationships and affirming identity communities are buffered against the self-esteem consequences of minority stress, while those without such resources are more vulnerable.

The moderating role of family acceptance is visible in the present data. P7, who reported the most openly supportive parental response of any participant, also demonstrated the most integrated and positive self-concept, describing their bisexual identity as having produced a sense of balance between masculine and feminine aspects of self. This stands in instructive contrast to P3 and P4, for whom family non-disclosure or hostile family environments coincided with significantly greater self-doubt and identity fragmentation. While the present sample is insufficient to make causal claims about this relationship, it suggests that family acceptance may function as a protective factor that moderates the self-esteem impact of intracommunity discrimination — a finding with direct implications for clinical intervention and worthy of systematic investigation in future research.

P4's description of feeling "cut down to crumbs, like biteable pieces, so that it's easier for the other person" is analytically significant here because it suggests a specific self-esteem mechanism — not simply lowered self-worth, but an active self-reduction process driven by the anticipation of others' discomfort with one's full identity. This is consistent with Rosenberg's (1965) conceptualisation of self-esteem as embedded in social reflection — when the reflected appraisals available to an individual are consistently partial, conditional, or distorted, the self-concept contracts toward what is socially legible rather than what is authentic.

5.4 Emotional Dysregulation: The Arc from Engagement to Resignation

Theme 4 documented a recognisable developmental arc across participants: early responses to invalidation involved active attempts at education and engagement, which overtime gave way to progressive emotional disengagement as a regulatory strategy. The convergence of this pattern across P2, P4, P7, and P8 — four participants with notably different personal histories and experiences — suggests this arc is not inconsequential, representing a common adaptive response to chronic invalidation.

This finding is significant because it reframes emotional disengagement not as a stable trait but as an acquired regulatory strategy — one that develops in direct response to the repeated experience of having one's emotional and explanatory labour dismissed. P2's wording is representative: "Before, I would try to make them understand. But these days, I have just given up. It's

not worth my energy and time." The phrase "not worth my energy" appears across multiple participants and points to a specific mechanism — emotional withdrawal as resource conservation in environments that consistently fail to reward engagement. This is consistent with the theorisations of emotional labour in minority populations (Grandey, 2000).

Importantly, the qualitative data also surfaces a positive regulatory strategy: the use of shared community narratives — found through online platforms, blogs, and social media — as a source of normalisation and emotional validation. P4 described reading about other bisexual people's experiences as providing "strength" and "a sense of community." This suggests that for bisexual individuals, parasocial and digitally-mediated community belonging may serve a genuine regulatory function in the absence of in-person community acceptance.

6. CONCLUSION

The present study examined the role of intracommunity discrimination in shaping experiences of social isolation, self-esteem, and emotional dysregulation among bisexual individuals. The findings suggest that intracommunity discrimination may be an important factor associated with these psychological outcomes, highlighting the complexity of bisexual individuals' experiences within both heterosexual and LGBTQ+ contexts. Rather than experiencing discrimination solely from external sources, participants described navigating a sense of partial belonging across multiple social spaces, including those intended to be supportive.

The themes identified through reflexive thematic analysis—bisexual erasure, hypersexualisation, emotional regulation challenges, and selective disclosure—illustrate recurring patterns in how participants interpret and respond to their experiences. While these patterns were observed across participants, they should be understood as contextually situated rather than universally representative. Nonetheless, they offer meaningful insight into the ways intracommunity dynamics may influence identity, interpersonal relationships, and emotional processes.

The study contributes to existing literature by drawing attention to the intracommunity dimension of minority stress, which remains relatively underexplored. However, given the qualitative nature and limited sample size of the study, the findings should be interpreted with caution. Future research involving larger and more diverse samples, as well as longitudinal and mixed-method approaches, may help further clarify these relationships and enhance the generalizability of findings.

7. IMPLICATIONS

The findings of the present study enhance the current literature on minority stress by emphasising the importance of intracommunity discrimination as a significant source of psychological distress among bisexual individuals. The themes of bisexual erasure, hypersexualisation, and the "double outsider" experience highlight the necessity of addressing intragroup stigma within LGBTQ+ spaces. The existence of emotional dysregulation and variations in self-esteem demonstrates the need for identity-affirmative and trauma-informed therapies. The issue of selective disclosure illustrates the complexity of managing identity across many contexts, illustrating the necessity for secure and inclusive environments within LGBTQ+ and wider societal spheres. In general, the study adds to our understanding of bisexual experiences in a more nuanced way and points out areas where more research and community-based interventions are needed.

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