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# “I Had Already Reconciled With Being a Slut When I Came out as Bisexual”: Experiences of Binormativity, Prototypicality, and Marginalization Within the Bisexual Community

Flora Oswald<sup>a,b</sup> , Kari A. Walton<sup>c</sup> , Lena Orlova<sup>c</sup> , Julie Ayad<sup>c</sup>, Aidan Hooper<sup>c</sup> and Cory L. Pedersen<sup>c</sup> 

<sup>a</sup>Department of Psychology, Pennsylvania State University, State College, PA, USA; <sup>b</sup>Department of Women’s, Gender, & Sexuality Studies, Pennsylvania State University, State College, PA, USA; <sup>c</sup>Department of Psychology, Kwantlen Polytechnic University, Surrey, Canada

## ABSTRACT

Bisexual people encounter pervasive stigmatization resulting in significant negative health outcomes. To avoid stigmatization, bisexual people may attempt to resist stereotyping by acting in ways counter to common bisexual stereotypes (i.e., rejecting *binormativity*). The current mixed-methods study investigated the effects of binormativity through an online survey ( $N=68$ ,  $M_{age} = 31.56$ ) completed by self-identifying bisexual individuals. Our quantitative findings indicated that conformity to binormative standards predicted feelings of identity illegitimacy, but also predicted lower levels of depression, anxiety, and stress. These findings were supported by qualitative data indicating many participants reported experiencing pressure to act either less or more stereotypically bisexual, and some participants reported experiencing shame or social identity threat due to their engagement in “stereotypically bisexual” behaviors (e.g., promiscuity). Furthermore, participants were generally reluctant to engage with binormative standards by labeling any behaviors as “bad” representations of bisexuality, instead endorsing the notion that all bisexual people are valid. Our quantitative and qualitative data collectively indicate that bisexual people navigate binormativity in their everyday lives and may experience negative identity outcomes related to binormative standards (e.g., identity illegitimacy), yet generally maintain a positive sense of identity and pursue an inclusive definition and community of bisexuality.

## KEYWORDS

Bisexual stereotypes; conformity; mixed-methods; stigmatization; within-group heterogeneity

Bisexual people face significant, pervasive prejudice and negative stereotypes about their behavior (e.g., Brewster & Moradi, 2010; Herek, 2002; Matsick & Rubin, 2018). Salient stereotypes about bisexual people reflect ideas of promiscuity, nonmonogamy, sexual disease, androcentric orientation (i.e., bisexual women are actually straight, and bisexual men are

**CONTACT** Cory L. Pedersen  cory.pedersen@kpu.ca  Department of Psychology, Kwantlen Polytechnic University, Surrey, BC, V3W 2M8, Canada.

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actually gay), and sexual orientation instability (e.g., Brewster & Moradi, 2010; Burke & LaFrance, 2016; Friedman et al., 2014; Zivony & Saguy, 2018). Stigmatization of bisexuality results in significant negative health outcomes for bisexual people, who have pronounced health disparities even relative to lesbian and gay people (e.g., Bostwick, 2012; Dodge et al., 2016; Dyar & London, 2018; Feinstein & Dyar, 2017; Friedman et al., 2014), who may also exhibit bisexual prejudice (e.g., Matsick & Rubin, 2018).

Even within bisexual communities, bisexual people may face stigma in the form of binormativity—that is, one’s degree of conformity to a socially constructed “normative” expression of bisexuality (i.e., one’s *binormativity*; Braida, 2021) may influence stigmatization experiences relative to experiences among bisexual people whose bisexualities align less with these stereotypes (see Braida, 2021; Del Castillo, 2015; Hayfield et al., 2018). Specifically, bisexual people who act in ways counter to common bisexual stereotypes—for example, by demonstrating their commitment to monogamy, their fit with heterosexual people (e.g., by dating different-sex partners), and by enacting low sociosexuality (Braida, 2021; Eisner, 2013; Hayfield et al., 2018)—may be less susceptible to certain forms of bisexual prejudice. Eisner (2013) describes this as the “that’s not true! formula” (p. 40), whereby bisexual people reject stereotypical attributions based on their own binormative behavior, and critiques how this formula demonizes bisexual people whose behavior *does* align with common stereotypes about bisexuality. Braida (2021) further critiques this reification of normative standards of bisexuality for its potential to exclude and demonize people who do not align with that binormative standard (see also Gurevich et al., 2007; Maliepaard, 2017).

There are additional important factors influencing the degree to which individual bisexual people experience certain forms of bisexual stigma. For example, race, gender, and body size are associated with differential experiences of stigma among bisexual people in complex ways (Matsick & Rubin, 2018; Muñoz-Laboy, 2019; Oswald & Matsick, 2021). For example, distance from (White) binormative ideals can result in heightened experiences of invisibility among bisexual people of color (Muñoz-Laboy, 2019), similar to how distance from bisexual prototypicality can result in invisibility among fat bisexual people (Oswald et al., 2021). This invisibility can have both protective factors (e.g., rendering people less likely to experience stereotypical bisexual prejudice) and perpetuate additional harms (e.g., by excluding bisexual people from their communities and other sources of social support, and reinforcing identity illegitimacy (Oswald & Matsick, 2021; Oswald et al., 2021).

In the current study, we examine binormativity—one’s degree of conformity to an socially constructed, “normative” expression of bisexuality—as another important predictor of stigma experiences among bisexual

participants. Specifically, we examine whether one's degree of alignment with common stereotypes about bisexuality predicts differential experiences of belonging in and closeness to the bisexual community, bisexual identity development, experiences of bisexual prejudice, and health and well-being outcomes.

In doing so, we examine a potentially important source of heterogeneity within the bisexual community which could provide insight into differential experiences of marginalization. Heterogeneity among bisexual people is largely uninterrogated, and remains an important direction for ongoing research (see Muñoz-Laboy, 2019; Oswald et al., 2021; Oswald & Matsick, 2021). In the current work, we use a mixed-methods approach to elucidate bisexual people's lived experiences confronting and navigating binormativity, and the implications of these experiences for their bisexual identities, experiences, and their health and well-being. Before describing the methodology of the current study, we review literature on stereotype conformity and rejection among additional marginalized groups, discuss our own positionality as authors and the lived experiences and theoretical frameworks we bring to this project, and ground our theorizing in literature on bisexual prejudice to elucidate how binormativity might restrict and further marginalize people with bisexual identities.

### **Stereotype conformity and within-group marginalization: "good" and "bad" bisexuals**

People with marginalized identities often fear confirming stereotypes about their group membership, especially if the stereotypes are negative, as described by stereotype threat theory (Steele, 1997; Steele & Aronson, 1995). In an attempt to minimize consequences of confirming negative stereotypes, people may engage in counter-stereotypic behavior to distance themselves from the threatened identity and therefore make stereotypes less self-relevant (e.g., Hoyt & Murphy, 2016; Steele et al., 2002). For example, bisexual people appear to distance themselves from negative stereotypes about bisexuality (Hayfield et al., 2018), such as being non-monogamous, yet ascribe many of these stereotypes to heterosexual and gay/lesbian people (Burke & LaFrance, 2016). This distancing strategy can be adaptive for individuals facing stigma but can also accentuate intragroup variability in stereotype alignment (Ellemers, 2001).

This variability can, in turn, produce new social hierarchies among marginalized group members, where those rejecting stereotypes *well* are socially rewarded for being "good" representatives of the group (Gibson, 2022). Conversely, those who conform to stereotypes may experience being labeled as "bad" representatives by other members of the marginalized group. To be clear, the formation of this hierarchy is a result of broader

systems of heterosexist, biphobic, and monosexist cultural forces, not a premeditated, conscious choice of its members. It is an example of an implicit group norm formed in response to a wider psychosocial context which stigmatizes and marginalizes members of the bisexual community. Indeed, binormative standards, along with stereotypes about bisexual people, did not originate within the bisexuality community but within the larger, heterosexual hegemony that defines Western culture (e.g., Eisner, 2013).

In the bisexual community, the binormative standard represents an in-group ideal that ascribes value judgment to particular expressions and presentations of bisexual identity (Eisner, 2013) and is based on degree of alignment to commonly held stereotypes about the group. This ideal professes that a “good” bisexual is a monogamous, low sociosexual, stable, harmless and unthreatening bisexual (i.e., low stereotype alignment; Braida, 2021; Eisner, 2013). In contrast, a bisexual who enjoys threesomes or engaging in non-monogamous relationships would likely be classified as a “bad” bisexual, given high alignment with common stereotypes about bisexual people (see Burke & LaFrance, 2016).

Though this division has been theorized in depth (Braida, 2021; Eisner, 2013; Gurevich et al., 2007; Maliepaard, 2017), it has typically been isolated from relevant work on similar processes among other marginalized group members. We review this work in brief here, bridging the notion of binormativity, and of “good” and “bad” bisexual people, with work on similar processes among additional marginalized groups. We want to acknowledge that not *all* behavior and bisexual identity expression is motivated by stereotype threat and binormative standards. For example, a bisexual individual may choose a monogamous relationship and this be an authentic choice, not driven by a need to appear non-stereotypical. Rather, we aim to develop a broader theoretical framework for understanding the process of marginalization through non/conformity with normative group stereotypes, which has been identified as a phenomenon in other marginalized groups.

For example, there is an analogous experience noted among fat people, where “good fatties” (those who are understood to be trying to lose weight and become healthy) will distance themselves from “bad fatties” (those who resist fatphobia and are not trying align with mainstream health ideals; e.g., Gibson, 2022). The “good fatty” represents a way of being fat that aligns with dominant cultural notions of acceptable behavior, embracing a normative standard of fatness which then—mirroring this process among bisexual people—imposes one mode of identity expression and disclaims deviations from this expression. This same rejection of prototypicality and distancing from “bad” stereotypes appears in the femme-phobia literature, where gay men reject gay femininities because these

gendered expressions are “stereotypically gay” and associated with significant stigmatization, while adopting hegemonic, “good” gay masculinities can allow gay men to distance themselves from “bad” (read: feminine) gay men (see Hoskin, 2019, 2020). These examples, though not exhaustive, show that individuals with marginalized identities may feel pressured to suppress an authentic expression of their identity, to avoid being judged as “stereotypical.”

Early social identity theorization suggests that ingroup identification predicts liking of one’s group as a whole and a host of biases toward positive perceptions of one’s ingroup (e.g., Hogg & Hardie, 1992; see also Brown, 2000). However, the pattern we note here reflects a negative ingroup identification: normative standards internalized by members of a marginalized group who attempt to minimize stigma by rejecting negative associations with their group membership (i.e., identity management; see Ellemers, 2001). The strategy of perpetuating normative standards within a group reflects an individual-level identity management strategy for increasing status more so than a group-level strategy (see Van Knippenberg, 1989); that is, as we note above, such a strategy enhances the status of the group only by discarding all group members who do not meet a certain, “good” standard, thereby enhancing the status not of the group itself but of a certain class of individuals within the group. The individual mobility experienced by “good” marginalized group members thus harms, rather than helps, ingroup members improve their social standing (see Ellemers, 2001). “Good” members of marginalized groups may also accentuate the variability within their group—by making a distinction between themselves and “bad” group members—in their striving for acceptance by dominant groups, which can undermine initiatives attempting to improve the well-being of the whole group (see Doosje et al., 1995; Ellemers, 2001; Ellemers & Van Rijswijk, 1997).

### ***Effects of binormativity***

Binormativity perpetuates marginalization among those who do not conform to the normative standard, and may also have negative implications for those who do. Individuals who do meet this standard may experience social mobility (in terms of becoming more acceptable to dominant group members, such as heterosexual people), but may lose connections and unique social support within bisexual communities, and may feel ongoing pressure to act in ways discrepant with their bisexual identification in order to “fit in” with dominant groups, thereby experiencing bisexual erasure (e.g., Bostwick & Hequembourg, 2014; Gurevich et al., 2007; Winston, 2021). Those who do not meet the standard may experience heightened stereotyping and stigmatization associated with bisexuality given

their stereotypicality (Braida, 2021; Eisner, 2013; see also Madon et al., 2006), and consequently, the health disparities associated with this stigmatization (e.g., heightened depressive symptomology, Bostwick, 2012; see also Dodge et al., 2016; Dyar & London, 2018; Feinstein & Dyar, 2017; Friedman et al., 2014). Though both conformity and non-conformity to binormative standards could have negative implications for well-being among bisexual people, we expected this more traditional pathway—with heightened negative stereotype salience—to be more consequential given the predominance of this pathway in existing literature.

We thus believe it important to understand these processes of within-group marginalization among bisexual people and understand how binormativity influences people's sense of belonging in the bisexual community as well as health and well-being outcomes among members of this group. Understanding how these social identity processes influence bisexual people's experiences and identities can contribute to a better understanding of within-group marginalization and could also contribute to improvements for the bisexual community overall.

### ***Research questions and hypotheses***

In this work, we sought to elucidate bisexual people's lived experiences confronting binormativity, and the implications of these experiences for their bisexual identities, experiences, and their health and well-being. We began from the assumption, informed by social identity and identity management theories as well as existing theorizing on bisexuality specifically, that the desire to escape the pervasive stigmatization of bisexuality and the negative resultant health outcomes (see Dodge et al., 2016; Feinstein & Dyar, 2017; Friedman et al., 2014) could lead bisexual communities to adopt binormative standards (Braida, 2021; Eisner, 2013; Gurevich et al., 2007; Maliepaard, 2017). We then sought to examine how bisexual people (a) see themselves aligning with binormative standards; (b) might reinforce these standards themselves by classifying others as “good” or “bad” bisexuals; and (c) might change their behavior to fit with these standards or alternatively attempt to resist these standards. To this end, we utilized open-ended, qualitative approaches to allow bisexual people to elucidate their experiences in their own voices, with less structure and imposition than closed-ended responses might require; open-ended online surveys are excellent methodologies for gaining insight into the experiences of marginalized group members (see also Braun et al., 2020; Oswald et al., 2022). Given the complexity of this phenomena and the potential for widely varied experiences, in addition to the lack of standardized or quantitative measurement models related to binormativity, we believed it best to

gain a relatively deep understanding of bisexual people's experiences with binormativity.

We also used quantitative methods to examine how bisexual people's level of conformity to bisexual stereotypes (i.e., being a "bad bisexual") might be linked to differential outcomes. Here, we relied upon standardization through quantification to make directional claims about the nature of the relationship between binormativity-related marginalization and downstream well-being outcomes. Specifically, we predicted that heightened conformity to bisexual stereotypes would be linked to poorer outcomes among bisexual people given within-community marginalization, including greater perceived bisexual illegitimacy, greater anticipated binegativity, greater internalized binegativity, lower identity affirmation, lower community connectedness and belonging, heightened stigma consciousness, worse overall psychological well-being, and greater perceived stress.

### ***Our positionality***

Our research questions and methodological approach were informed by both the lived experience(s) of the authorship team and our expertise as sexuality researchers. Our research questions were grounded both by existing literature and by our own lived experiences; three of the authors identify as bisexual, including the first author who conceived this research project. We have firsthand experienced marginalization within the bisexual community pertaining to our sex positivity and sexual openness, including that which comes along with doing sexuality research.

We have experienced pressure to conform to certain standards or ideals of bisexual identity and behavior, and had individually problematized binormativity in our own lived experiences before approaching it as a topic of research inquiry. We each identify with different degrees of conformity to binormativity. Some of us identify as aligning much more closely with, and in some ways benefitting from, binormativity, while others feel that they have experienced more marginalization and harm as a result of binormativity. These experiences have also not been stable across time; for example, for some authors they have been dependent on partner gender or current relationship contexts. We do not feel that we as an authorship team have a unified bias against or for any particular *experience* of binormativity—in part given our own diverse relationships to binormative ideals—but we share a desire to abolish hierarchies of power and benefit that derive from heterosexist and monosexist norms and standards, and to improve the well-being of all bisexual people. These experiences and goals guided our conceptualization of the research questions and project.

Our methodological choices were also driven by our own experiences within the bisexual community, and the first authors' feminist orientation



to research. In line with this orientation, we used a mixed-methods approach to allow other bisexual people to give their own voices to our understandings of experiences of binormativity and marginalization within the bisexual community. Qualitative approaches, used in tandem with quantitative analyses, illustrate both how stigma is experienced (qualitative analysis) and the downstream implications of these experiences for objective health outcomes (quantitative analysis). As many of the authors are members of marginalized communities, we believe in the importance of elucidating and reducing the negative impacts of stigma on well-being. However, for the purposes of the current analysis, we committed to upholding perspectives and voices on this issue that might differ from our own (e.g., voices of bisexual participants who describe never experiencing marginalization). To do so, we would explicitly discuss among the qualitative coding team (consisting of all bisexual authors) when reviewing participant responses, checking in about the ways in which our own experiences were similar or different to those of participants—and what features of our positionalities might shape these similarities or differences—in order to bracket our assumptions during the coding process (Lincoln & Guba, 1985).

Additional members of the research team occupy a range of sexual identities, and are actively involved in sexuality research. The authorship team additionally occupies a range of class and educational backgrounds, many of us being first generation university students/graduates, and a range of current educational statuses including undergraduate and post-graduate students, early career researchers, and established faculty. Our team is primarily but not exclusively women, and includes authors who identify as White and as North African. We note these identities and experiences here as they—in tandem with existing literature and theory—inform how we came to develop our research questions, select outcome variables, and develop our hypotheses.

## **Method**

### ***Participants***

Self-identified bisexual individuals, aged 16 years or older, were recruited *via* several channels including the research participant pool of a large Western Canadian university, online platforms (Reddit, Twitter, Facebook, and Instagram), and psychology/sexology research recruitment sites. The initial sample comprised 87 participants. We elected to halt data collection at this point for feasibility of qualitative analysis; this sample is large relative to traditional guidelines for CQR-M (Spangler et al., 2012) and represented a balancing point between the needs of our qualitative and quantitative analyses (i.e., an a-priori  $g^*$ power analysis indicating  $N=58$

to detect small [.10–.30] effects with  $\alpha = .05$  and power = .80; see Cohen, 1988; Field, 2013). Of this sample, 17 participants were removed due to unanswered open-end questions; an additional two were removed due to nonsensical answers. Thus, our final sample consisted of 68 bisexual individuals. Table 1 summarizes participant demographics.

### Measures

All measures, including open-ended prompts, are reported in full in the supplemental materials. Means and standard deviations for all quantitative measures are presented in Table 2.

### Demographics

Participants completed a 7-item questionnaire regarding their sexual orientation (to ascertain participant eligibility), sex, gender, age, ethnicity, relationship status, and highest level of completed education.

### Stereotype inventory screener

Participants responded to a 19-item questionnaire which was adapted from existing measures of bisexual stereotyping including the Bisexualities:

**Table 1.** Distribution of participant demographic characteristics.

	Participants <i>N</i> = 68
Age	<i>M</i> = 31.56 ( <i>SD</i> = 10.23)
Gender identity	
Woman	43 (63.2%)
Man	17 (25.0%)
Non-Binary	8 (11.8%)
Gender/sex	
Cisgender	62 (91.2%)
Transgender	6 (8.8%)
Ethnicity	
African/Black	1 (1.5%)
White	57 (83.8%)
East Asian	2 (2.9%)
Hispanic/Latinx	1 (1.5%)
Indigenous/Aboriginal	2 (2.9%)
Multiethnic/Specify	5 (7.4%)
Relationship status	
Single	18 (26.5%)
Casually dating	4 (5.9%)
Non-married committed	25 (36.8%)
Married/civil union	18 (26.5%)
Separated/divorced	3 (4.4%)
Education	
Some high school	2 (2.9%)
High school diploma	4 (5.9%)
Some college/university	20 (29.4%)
Completed undergraduate	22 (32.4%)
Vocational degree/certificate	8 (11.8%)
Postgraduate studies	12 (17.6%)

**Table 2.** Descriptive statistics of dependent variable measures ( $N=68$ ).

	Mean	<i>SD</i>	Minimum	Maximum
Stereotype inventory	2.21	.56	1.11	3.37
Bisexual illegitimacy	1.28	.52	1.00	3.50
Anticipated binegativity	4.24	1.22	1.20	7.00
Internalized binegativity	2.10	1.11	1.00	5.40
Identity affirmation	5.48	1.20	2.17	7.00
Inclusion of other in self	3.73	1.76	1.00	7.00
Community connectedness	2.92	.74	1.00	4.00
DASS	1.98	.57	1.00	3.43
Perceived stress	2.98	.60	1.64	4.36

Note. Some participants did not respond to all dependent variable items. Missing data was not replaced for any variable. Higher averaged scores indicated greater endorsement of all dependent variables.

Indiana Attitudes Scale (Friedman et al., 2014), the Adapted Anti-Bisexual Experiences Scale (Brewster & Moradi, 2010; see also Oswald & Matsick, 2020; Matsick & Rubin, 2018), and other stereotype inventories (e.g., Zivony & Saguy, 2018) and is hypothesized as a single-factor measure of common stereotypes about bisexual people. All items were adapted so that participants were responding with regard to their own fit with each stereotype; for example, items included “I would have sex with just about anyone” and “My bisexual identity might just be a phase.” We used this measure to assess the degree to which participants perceived themselves as aligning with common stereotypes about bisexuality. Responses were recorded on a 5-point scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*), where higher averaged scores indicated the degree to which participants perceive their behavior as consistent with established stereotypes of bisexuality ( $\alpha = .79$ )

### *Perception of binormativity measure*

We presented participants with a definition of binormativity, which was quoted from Braida (2021):

Binormativity can be defined as “the normalisation of a certain standard of bisexuality against which all other forms of bisexuality are measured”. This phenomenon refers to the strategy, largely adopted by the mainstream bisexual movement, of rejecting the commonest stereotypes of bisexuality with the “that’s not true!” formula”. For example, in response to the stereotype that portrays bisexual people as slutty, promiscuous or inherently unfaithful, the mainstream bisexual movement often highlights bisexual people’s success in maintaining happy, exclusive relationships for a long time, and rejects the equation between bisexuality and sexual promiscuity. While this may absolutely be true for a number of bisexual people, this “defense” of bisexuality also risks imprisoning the image of the bisexual within a standard of the “normal” and “good” bisexual, thereby excluding all the bisexual people who do not fit that standard. (p. 133)

Participants were then asked whether they had been affected by pervasive ideals of binormativity and stereotyping of bisexuals. Responses included “Yes, I have felt this way,” “I am not sure what this question is

asking,” and “No, I have never felt this way.” Those who answered affirmatively (48.5%) were asked to expand on their experience in an open-ended question: “Please explain your experience feeling like this. What did you feel you could not express? Why did you feel this way?”. Those who reported being unsure what the question was asking were presented a rephrased version of the same question (4.4%). Those indicating they had never felt this way were advanced to the next set of open-ended questions (47.1%).

Next, we wanted to obtain data on participants’ own understanding of binormativity. To this end, we included a qualitative open-ended question: “Do you see some bisexual people as being better representation of the bisexual community than others? What would characterize someone who is a good representation versus a bad representation? What traits or behaviors characterize a bad representation of bisexuality?” Participants were encouraged to give detailed and thoughtful answers.

### *Behavioral strategies and perceptions of “good” and “bad” bisexuals*

To see how individuals responded to external and/or internalized ideals of bisexuality, we included open-ended, qualitative questions aimed at identifying behaviors and strategies participants employed to distance themselves from “bad” representations of bisexuality, or alternatively, to align with “good” ideals of bisexuality. These questions were developed iteratively by the research team with primary input from the first author (White bisexual cisgender woman). These questions were grounded in the experiences of the bisexual members of the research team, who had themselves experienced marginalization among bisexual peers and, in group discussions, shared experiences of feeling pressured to enact their bisexual identities within certain normative frameworks. However, these experiences differed among the members of the research team (e.g., among women relative to men), allowing us to structure our questions in ways that might capture a variety of experiences.

Our questions were oriented around understanding how bisexual people (a) see themselves aligning with binormative standards; (b) might reinforce binormative standards themselves by classifying others as “good” or “bad” bisexuals; and (c) might change their behavior to conform with binormative standards. To that end, we asked: “Has your behavior changed over time in terms of how you identify with bisexuality or how you enact your bisexual identity? Have you ever changed your behavior or the way you act to match what you think is a ‘good’ or ‘better’ representation of bisexuality? Have you ever been pressured to change your behavior in this way?” We also asked: “For example, some common stereotypes about bisexual people are that they are very promiscuous and hypersexual and

that they are just experimenting with their identity. How do you feel about other bisexual people who live up to these stereotypes? Do you think they are doing reputational damage to the bisexual community? How inclusive do you think the bisexual community should be of these types of people? How should they be treated?”

We included open-ended, qualitative questions to assess participants' experiences: “Do you think others perceive and treat you as if you are very stereotypically bisexual? Have you ever felt that people treat you differently because you align with some common stereotypes about bisexual people? Have you ever felt excluded from the bisexual community because of these perceptions? How has this impacted you?” Next, participants were asked about behavioral strategies they might employ in response to accepted ideals of bisexuality: “How do you cope with, or resist being treated differently because you align with some stereotypes about bisexuality?”

### ***Bisexual Identity Inventory (BII)***

We included the 24-item BII (Paul et al., 2014) to assess four distinct dimensions of bisexual identity: illegitimacy, anticipated binegativity, internalized binegativity, and identity affirmation. Participants were presented with statements about bisexual identity (e.g., “Being bisexual is a cop out”) and indicated their level of agreement with each statement on a 7-point scale from 1 (*strongly disagree*) to 7 (*strongly agree*). Higher averaged scores indicated greater levels of each respective construct ( $\alpha_{\text{illegitimacy}} = .85$ ;  $\alpha_{\text{anticipated binegativity}} = .67$ ;  $\alpha_{\text{internalized binegativity}} = .76$ ;  $\alpha_{\text{affirmation}} = .90$ ).

### ***Inclusion of other in the self scale***

We included a measure of interpersonal closeness, adapted from the Inclusion of Other in the Self (Aron et al., 1992), to gauge how close the participants feel to the bisexual community. They were presented with seven pictorial representations of closeness, ranging from complete exclusion of self in the bisexual community, to increasing levels of inclusion. Participants chose the image that best represented how they feel, with higher scores indicating greater closeness and connectedness.

### ***Community connectedness measure***

We included an 8-item measure of community connectedness (e.g., “I feel I am a part of the bisexual community”), adapted from Frost and Meyer (2012) to measure the level of connectedness participants feel with the bisexual community. Participants ranked their agreement to each statement on a 4-point scale from 1 (*disagree strongly*) to 4 (*agree strongly*), with higher averaged scores indicative of greater community connectedness ( $\alpha = .93$ ).

### ***Depression, Anxiety, Stress Scales (DASS21)***

We included a 21-item measure of participants' emotional well-being, spanning dimensions of depression, anxiety, and stress (Lovibond & Lovibond, 1995). For each statement (e.g., "I find it hard to wind down"), participants indicated on a 4-point scale whether the statement applied to them, ranging from 0 (*not at all*) to 3 (*most of the time*). Higher averaged scores indicated less adaptive well-being and greater levels of depression, anxiety, and stress ( $\alpha = .92$ ).

### ***Stigma consciousness questionnaire***

Participants answered a 4-item measure gauging their level of awareness of bisexual stereotypes, adapted from the general Stigma Consciousness Questionnaire (Pinel, 1999) to suit our study (see also Bostwick, 2012). Example items included: "Stereotypes about bisexual people affect me," and "I worry that my behaviors will be viewed as stereotypically bisexual." Responses were recorded on a 5-point scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). Given poor reliability ( $\alpha = .49$ ), this measure was excluded from subsequent analyses.

### ***Perceived Stress Scale (PSS)***

We included a 14-item measure of participants' level of perceived stress, obtained from Cohen et al. (1983). Participants reported on the frequency with which they experience events attributed as stressful (e.g., "In the last month, how often have you been upset because of something that happened unexpectedly?"). Responses were recorded on a 5-point scale ranging from 0 (*never*) to 4 (*very often*), where higher scores indicated greater perceived stress over the last month ( $\alpha = .85$ ).

### ***Procedure***

After receiving approval from a Canadian university Research Ethics Board, we recruited eligible participants to a 20-min, anonymous online survey via Qualtrics. The study was presented as an examination of bisexual people's experiences. Upon entering the survey, participants first completed a consent form, followed by a demographic questionnaire. Participants who indicated their sexual orientation as anything other than bisexual were automatically directed to the end of the survey. Participants completed each of the following measures in the indicated sequence: the stereotype inventory screener, the perception of binormativity measure, and the behavioral strategies and perceptions of "good" and "bad" bisexuals measure. Participants completed the remaining survey scales in randomized order. At the end of the survey, participants were given a debrief form outlining

the study purposes. Qualifying university student participants received partial course credit for participation; community participants were not compensated. Given the online nature of the study, the researchers did not directly interact with participants nor with their data until data collection was completed. Data was collected in June 2022; the procedure was self-paced with an average completion time of 1.74 h (median = .44 h).

## Results

### Quantitative analyses

We used quantitative methods to examine how bisexual people's level of conformity to bisexual stereotypes might be linked to differential outcomes. To this end, we conducted several separate regression analyses to examine the predictive influence of stereotypicality on the outcome variables of perceived bisexual illegitimacy, anticipated binegativity, internalized binegativity, identity affirmation, community connectedness and belonging, overall psychological well-being, and perceived stress. Table 3 reports the results of all regression analyses.

#### Multiple regression analyses—bisexual identity

Our first set of regression analyses explored the contribution of bisexual stereotypicality to constructs of bisexual identity, individually examining the four subscales of the Bisexual Identity Inventory. First, we examined whether greater alignment with common stereotypes of bisexuality predicted greater perceived bisexual illegitimacy. The model was significant and our hypothesis supported, with bisexual stereotypicality accounting for 14% of the variance in perceptions of bisexual illegitimacy,  $F(1, 41) = 6.48$ ,  $p = .015$ . The statistically significant positive beta coefficient (.37)

**Table 3.** Summary of stereotypicality in predicting dependent variables; separate regression analyses.

	$\beta$	$t$	95% Confidence interval estimates	
			Lower	Upper
Bisexual identity				
Bisexual illegitimacy	.369	2.54*	.068	.595
Anticipated binegativity	−0.039	−0.250	−0.750	.584
Internalized binegativity	.274	1.824	−0.056	1.11
Identity affirmation	−0.121	−0.782	−0.907	.401
Community connectedness & belonging				
Inclusion of other in self	−0.110	−0.689	−1.38	.678
Community connectedness	−0.263	−1.70	−0.728	.063
Health outcomes				
DASS	−0.330	−2.26*	−0.631	−0.036
Perceived stress	−0.308	−2.10*	−0.624	−0.012

Note. \* $p \leq .05$ , \*\* $p \leq .01$ .

indicated that greater endorsement of bisexual stereotypicality predicted heightened perceptions of bisexuality as an illegitimate identity.

Our next regression explored the contribution of bisexual stereotypicality to anticipated binegativity. This hypothesis was not supported,  $F(1, 41) = .063$ ,  $p = .804$ . Further, bisexual stereotypicality did not predict internalized binegativity,  $F(1, 41) = 3.33$ ,  $p = .075$ , or identity affirmation,  $F(1, 41) = .611$ ,  $p = .439$ .

#### **Multiple regression analyses—community connectedness and belonging**

Our next set of regression analyses explored the contribution of bisexual stereotypicality to community connectedness and belonging. Our hypotheses were not supported; bisexual stereotypicality did not predict either interpersonal closeness (i.e., inclusion of other in self) to the bisexual community,  $F(1, 39) = .474$ ,  $p = .495$ , nor community connectedness,  $F(1, 39) = 2.90$ ,  $p = .097$ .

#### **Multiple regression analyses—health outcomes**

Our final set of analyses explored the contribution of increased bisexual stereotypicality to worse health outcomes, including depression, anxiety, and perceived stress. First, we interrogated whether greater alignment with common stereotypes of bisexuality predicted greater perceived depression and anxiety. The model was statistically significant, with bisexual stereotypicality accounting for 11% of the variance,  $F(1, 42) = 5.13$ ,  $p = .029$ . However, the significant negative beta coefficient ( $-0.33$ ) indicated a direction of effect opposite to our hypothesis; greater alignment with common stereotypes of bisexuality predicted *less* depression and anxiety.

Next, we explored whether alignment with stereotypes of bisexuality predicted increased stress. The model was statistically significant, with bisexual stereotypicality accounting for 10% of the variance in perceived stress,  $F(1, 42) = 4.40$ ,  $p = .042$ . However, the statistically significant beta coefficient ( $-0.31$ ) indicated a direction of effect opposite to our hypothesis; greater alignment with common stereotypes of bisexuality predicted *lower* perceived stress.

#### **Qualitative analyses**

Our quantitative findings suggested statistical relationships between stereotypicality and experiences of bisexual identity, as well as related health outcomes. Next, we used a qualitative approach to develop greater depth in our understanding of how binormativity shapes bisexual peoples' experiences of their bisexual identities. Specifically, we sought to develop our understanding of how bisexual people (a) see themselves aligning with



binormative standards; (b) might reinforce binormative standards themselves by classifying others as “good” or “bad” bisexuals; and (c) might change their behavior to conform to binormative standards or alternatively attempt to resist them.

To that end, we used a consensual qualitative research—modified approach (CQR-M; Spangler et al., 2012) to analyze our qualitative data. CQR-M is used to analyze large samples of relatively brief, simple qualitative data (Spangler et al., 2012) and was therefore suitable for analyzing responses to our open-ended, online survey questions. CQR-M is data-driven; researchers derive codes from the data rather than imposing a predetermined structure (Spangler et al., 2012). We coded responses to all open-ended questions together in order to elucidate themes across responses.

Two authors coded the data, and the first author acted as a mediator in discussions; all three members of the research team involved in the coding process identify as bisexual, and multiple gender identities and career stages were represented in the coding team. Following the process described by Spangler et al. (2012), coders read through participant responses independently to develop domains, and then met together with the first author to develop a complete set of coding categories. Coders developed memos and took notes during this initial coding process, which were later shared with the first author and, at times, with the other coders during consensus-building. We developed a spreadsheet to track the responses of each participant and identify the presence and absence of each code in each response. This allowed us to calculate response frequency for each code (i.e., how many times each code was represented in the data). Interrater reliability was high (93.05%), and all discrepancies were resolved through discussion until consensus was reached among the coding team; CQR-M prioritizes consensus-building as a method for reducing ambiguity in the brief and decontextualized data characteristic of this analytic approach (Spangler et al., 2012).

### **Codes**

We identified 10 domains and 19 categories which best describe the data. Table 4 presents all domains and categories, along with definitions of each category, exemplary participant quotations, and each category’s relative degree of endorsement in participant responses. Percentages in parentheses throughout the findings section indicate the proportion of the sample which was coded as representing each category. The CQR-M guidelines suggest that any category with endorsement greater than one percent should be retained if it offers a unique piece of information (Spangler et al., 2012). In the present data, category endorsement ranged from 2.9% to 27.9%. It is important to note that, while the prevalence of each domain

**Table 4.** Frequency and definitions of coding categories.

Domain	Category label	Definition	Example	% of responses
Lack of acceptance	Lack of acceptance	Bisexual people feel or experience a lack of acceptance/ stigma from other people or communities.	"I have felt excluded of the LGBTQ+ community, especially by queer people and women who do not believe in bisexuality or for whom the mention of bisexuality brings up bad memories and make them feel defensive"	15.1
Identity Invalidity	Other-doubt	Experiencing others questioning the validity of their identity, perceiving that others doubt their identity	Explaining how my bisexuality works for me to other people is more often shut down by other queer folks who've told me I'm not bisexual but gay"	8.3
Identity Invalidity	Self-doubt	Feeling self-doubt about identifying as bisexual (e.g., not feeling 'gay enough' to be bi, lacking same sex experience)	"I feel like I am not the typical bisexual since I have been in a long term committed hetero relationship and I am not seen as "experienced"... Sometimes it makes me doubt my feelings"	2.6
Social Pressure	Pressure to act less stereotypical	Felt pressured, expected by others/society to act less stereotypically bisexual	"I have felt like i can't explore the more promiscuous side of myself when it comes to things like threesomes etc. because I don't want to come across or appear like I'm trying to come across as stereotypically bisexual"	10.6
Social Pressure	No pressure	Has not personally felt pressure to act a certain way with regard to bisexual identity	"I've never been pressured to act a certain way"	6.1
Social Pressure	Pressure to act more stereotypical	Felt pressured, expected by others/society to act more stereotypically bisexual	"I have felt pressured to get into same sex relationships to prove my bisexuality"	5.4
Identity Acceptance	Embracing identity internally	Accepting and becoming comfortable with identifying as bisexual	"As I've gotten older, I've become more comfortable with my sexuality and embraced it more"	5.4
Identity Acceptance	Embracing identity externally	Becoming comfortable with being open about bisexual identity, behaving bisexually	"I enjoy identifying as Queer as the years have gone on and I'm more open and prideful about it"	4.5

*(Continued)*

**Table 4.** Continued.

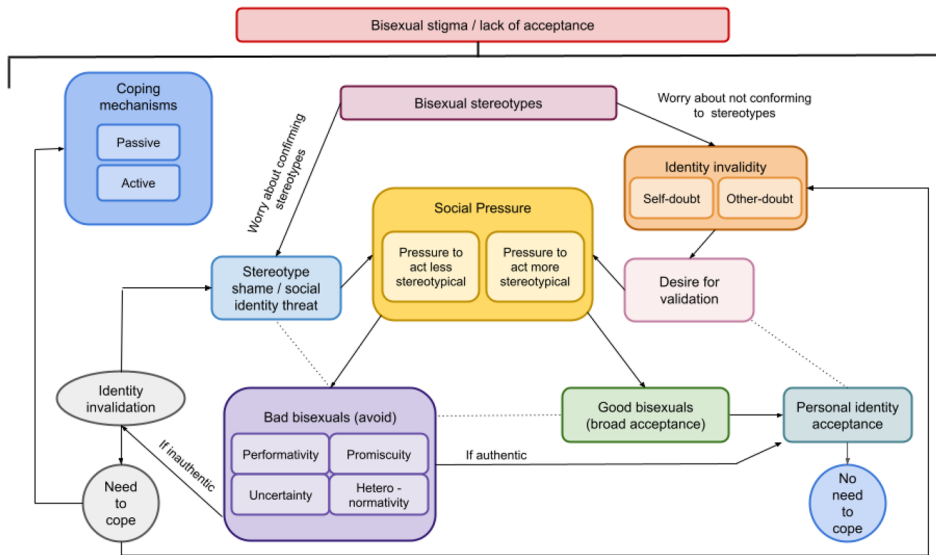
Domain	Category label	Definition	Example	% of responses
"Good" bisexuals	Acceptance of anything	All representation is good representation, bisexual behavior should not be policed	"I think the bi community needs to inclusive for all bi people even the ones that have cheated and like three ways"	27.9
"Bad" bisexuals	Performativity	Bad bisexuals engage in same sex performativity, are inauthentic, are disingenuously experimenting	"A bad representation is a hyper-sexualized hot woman that makes out with other women just to please their male partners or male audiences"	5.1
"Bad" bisexuals	Identity uncertainty	Bad bisexuals live up to stereotypes by being uncertain of their identity	"The only one I would ever criticize for being a bad reputation is myself, because I haven't fully landed in my bi identity yet and struggle a bit with imposter syndrome"	4.2
"Bad" bisexuals	Promiscuity	Bad bisexuals live up to stereotypes by being promiscuous, hypersexual, committing infidelity, being polyamorous	"A flirtatious and promiscuous bisexual could characterize a 'bad' bisexual"	3.8
"Bad" bisexuals	Heteronormative	Bad bisexuals are heterosexual passing, prefer the opposite sex, and/or lack same sex experience	"I think my choice to marry someone who presents as male, and to be monogamous, signals to others that I am a 'bad bisexual/ queer person' or am hetero"	2.9
Stereotype shame/ social identity threat	Stereotype shame/ social identity threat	Feeling ashamed or wanting to avoid enacting stereotypes	I've had to be someone I'm not for my entire life & it's always based on either sparing someone else's feelings or to avoid their preconceived notions of bisexuality"	7.4
Sexualized expectations	Sexualized expectations	External individuals' beliefs about what bisexual people will enjoy (e.g., threesomes, unicorns, polyamory)	"I have many friends who are single and bi and are often the brunt of people asking for threesomes and therefore are not taken seriously on dating apps"	9.6
Coping mechanisms	Passive coping mechanisms	Acknowledges bisexual stigma but did not actively do something to cope	"I tend to ignore it because it mostly happens in cyberspace so I can tune it out of my real life"	8.7
Coping mechanisms	Active coping mechanisms	Actively did something to cope with bisexual stigma	"It's taken me a lot of therapy to cope"	4.2

*(Continued)*

**Table 4.** Continued.

Domain	Category label	Definition	Example	% of responses
Coping mechanisms	No need to cope	No need to cope; not experiencing something that would require coping	"I don't have any experience with this, my inner circle is very supportive"	4.2

Note. The items are ordered by domain; within domain, items are ordered by prevalence. More than one coding category could be identified in a response. % of responses reflects the number of participant responses corresponding with each category.



**Figure 1.** Diagram illustrating qualitative coding scheme.

Note: Figure depicts connections between qualitative codes identified in the research; how various processes of binormativity operate together. Rectangular shapes represent domains, while smaller shapes inside of larger shapes represent categories within those domains. The domain titled 'no need to cope' was matched with the 'coping mechanisms' domain, as it is a category within this domain (depicted elsewhere in the diagram to support clarity in flow).

and category are reported, the most meaningful themes are not necessarily the most frequently endorsed. Considering this, caution should be taken while interpreting the findings so that prevalence is not equated with importance.

To guide interpretation of our coding schematic as a cohesive whole, we developed a diagram of the coding scheme which illustrates how various processes of binormativity connect and operate together (see Figure 1).

**Findings**

**Bisexual stigma and lack of acceptance.** The first of the ten identified domains captured an overarching theme surrounding *stigma and lack of acceptance*

felt or experienced by bisexual individuals (15.7%). This included reports of stigma from family, friends, partners, or peers, as well as from broader communities regarding participants' bisexual identity. Common mentions included rejection and judgment from current and prospective romantic or sexual partners. For example, a 24-year-old White woman shared, "I have had men say they won't date me because I'm bisexual. That hurts," and a 32-year-old White woman who stated, "I felt like if I was honest [with my partner] about my sexuality, it would become a deal breaker." Others called out stigma within the queer community itself. A 30-year-old White man stated, "I think that members of the LGBT community are the most critical. The ones that judge me are usually members of my own community." Also mentioned was a lack of acceptance from society as a whole, for example, a 37-year-old White woman shared, "Growing up, it was wrong to be bisexual so I hid it for most of my life." This theme around bisexual stigma was found to overlay and shape many of the experiences described by participants, captured in additional domains.

***Bisexual stereotypes.*** Bisexual stereotypes are born from and shaped by the broader social stigma that surrounds bisexuality. The second domain—bisexual stereotypes (12.5%)—contained responses describing others' stereotypical beliefs about bisexual people, often centered around bisexual individuals' sexuality (e.g., what they enjoy in a sexual context). Responses described various assumptions that others make about bisexual people, for example, that they will be promiscuous, enjoy threesomes and group sex, or engage in polyamory. A 45-year-old White woman reported, "I have learned to be wary of unicorn hunters [i.e., different-sex couples seeking a third (often bisexual) person to engage with them sexually] and to avoid them. [...] I have met so many men that see my queer sexuality, my sex with [wo]men, as being 'for them'." Moreover, a 35-year-old White woman shared, "I've had partners tell me I have a higher sex drive because I'm bisexual. I've had 'friends' who have said I've been promiscuous because I'm attracted to multiple genders." Others mentioned stereotypes related to infidelity. For example, a 30-year-old White man shared, "I find that people often assume I'll cheat or that I'm open to having an open relationship." Stereotypes about bisexuals create and reinforce expectations about how bisexual people will act. These expectations may lead some bisexuals to concern about confirming bisexual stereotypes or, on in contrast, may be concerned about not living up to these stereotyped expectations.

***Stereotype shame/social identity threat.*** Participants who described feeling ashamed of and/or wanting to avoid enacting bisexual stereotypes comprised the third domain (7.4%). For example, a 25-year-old White woman shared, "Because I'm kinky and experimental and enjoy sex with lots of different

partners, it kinda feels like I'm ruining other bisexuals' reputation in the eyes of the public." Moreover, a 43-year-old Black man reported, "Being overly sexual—I did not feel like I could \*not\* express this, rather [I] felt somewhat ashamed to feel or express this because it fit with a potentially damaging stereotype."

**Identity invalidity.** On the other hand, the fourth domain, identity invalidity (11.2%), contained responses from those who felt they did not meet social expectations about what a bisexual person should be. Responses in this domain comprised two categories: other-doubt (8.3%) and self-doubt (2.9%). Other-doubt included mentions of others doubting the validity of one's bisexual identity (e.g., "When I have dated lesbian women, I have been told that I am 'actually gay' and when I have dated straight men, I have been told I am 'actually straight'" (36-year old White woman)). Self-doubt included mentions of participants having doubted the validity of their own bisexual identity, often due to concerns about a lack of same-sex experience or not having enough same sex attraction to be justified in identifying as bisexual (e.g., "It feels like being an imposter or that I'm not legit bisexual because I don't have much experience with the same sex" (34-year old White woman)).

**Desire for validation.** Bisexual individuals who feel their identity is perceived, by others and/or themselves, as invalid may experience a desire for validation. This fifth domain (3.5%) contained responses describing wanting validation from and/or connectedness with the bisexual (and broader LGBTQ) community, or a desire to 'fit in.' For example, a 36-year-old White woman described, "Both myself and my husband are bisexual. I often feel uncomfortable in queer spaces due to my hetero-passing privilege. This means that I am often unable to celebrate my queerness with my husband as we don't feel welcome together in spaces that would allow for this." Similarly, a 16-year-old White woman shared, "People have treated me poorly before because I am a bisexual woman dating a cis-man. [...] This has made me feel at times that my sexuality is not seen as valid, sometimes even within my own community, and I have struggled with that in the past."

**Social pressure.** Whether bisexual individuals are experiencing stereotype shame or identity invalidity, a common consequence is a felt sense of social pressure to act differently in order to avoid undesirable stigma/judgment. The sixth domain encompassed experiences with *social pressure* (22.1%), either from individuals or from broader society. This domain contained three categories: *pressure to act less stereotypical* (10.6%), *pressure to act more stereotypical* (5.4%), and *no pressure* (6.1%), the latter of which included those who did not feel pressure to act a certain way with regard to their bisexuality. Those who felt pressure to act *less stereotypical* often described

feeling as though they should avoid aligning with common bisexual stereotypes—such as enjoying threesomes or being promiscuous—or avoid showing their same sex attraction (i.e., demonstrating their queerness). For example, a 31-year-old White woman described, “I could not express attraction to my own gender while in a committed relationship because it was something that my partner took as meaning that I would cheat on them.” On the other hand, those who felt pressure to act *more* stereotypical often mentioned feeling as though they should have more same sex experiences or show more same sex attraction in order to prove their bisexuality or validate their membership in the queer community (e.g., “In order to not feel less bisexual, I used to date girls that I wasn’t totally attracted to” (27-year old Hispanic woman); “I have felt pressured to get into same sex relationships to prove my bisexuality” (18-year old White woman).

***Good bisexuals & bad bisexuals.*** Capturing participants’ perceptions of what it means to be a ‘good’ or ‘bad’ bisexual, two additional domains were identified: Good bisexuals (27.9%) and bad bisexuals (16%). The good bisexuals domain included reference to general acceptance for all representations or expressions of bisexuality (e.g., “I don’t care if people conform to bisexual stereotypes or not. They should do whatever they find works for them” (24-year-old White woman)), indicating that all bisexuals are good bisexuals. In contrast, the bad bisexuals domain included descriptions of what constitutes a bad bisexual, across four categories: performativity (5.1%) (e.g., “The bisexual people (women especially) who sexualize themselves with other women for the sake of entertaining men [are bad representations of bisexuality]” (18-year old White woman); identity uncertainty (4.2%) (e.g., “Good representation is someone who knows they are bisexual and it’s not “a phase” (37-year old White woman); promiscuity (3.8%) (e.g., “A flirtatious and promiscuous bisexual could characterize a ‘bad’ bisexual” (18-year old White woman); and heteronormativity (2.9%) (e.g., “Although logically I know this is not true, I find myself dismissing bisexual people who primarily seek partners of the different sex” (24-year-old White woman). Bisexuals who express a broad acceptance for all representations of the bisexual community may also extend that acceptance to themselves as members of the community. Moreover, those who acknowledge ‘bad’ bisexual representation—but who do not align with these stereotypes and behaviors—may also experience self-acceptance regarding their bisexual identity.

***Personal identity acceptance.*** The ninth domain represents a theme of personal identity acceptance (9.9%), including reference to bisexual individuals having internally (5.4%) embraced their bisexual identity (e.g., “As I have gotten older, I have accepted the fact and actually like the fact that I am

bisexual” (32-year old White woman), as well as having externally (4.5%) embraced it (i.e., being open with others/the public about their bisexual identity) (e.g., “I’ve become more open about my bisexuality in hopes to help others feel comfortable in their sexual identity” (38-year old White woman). Responses in this domain represent both bisexual individuals who do and do not align with bisexual stereotypes, with the key factor being their mental acceptance of themselves as bisexual people.

**Coping mechanisms.** While some bisexuals have a lesser need to cope with social stigma (e.g., because they don’t often experience it), others (such as those who authentically align with bisexual stereotypes) may experience a need to cope with the stigma that they face. The tenth and final domain—*coping mechanisms* (17.1%)—encompassed how bisexual individuals cope with stigma. This domain comprised three categories: *passive coping mechanisms* (8.7%), *active coping mechanisms* (4.2%), and *no need to cope* (4.2%), the latter of which included those who expressed no need to cope with stigma surrounding their bisexuality (e.g., because they had not experienced something they felt required coping). Responses in the *passive coping mechanisms* category acknowledge experiences with bisexual stigma, but adopt a distancing attitude and do not describe taking (re)active or direct action to cope (see also Nadal et al., 2011). These individuals may have reported ignoring, mentally dismissing/rejecting, or accepting the prejudice/stigma to passively cope. For example, a 24-year-old White woman shared, “I embrace it! If people think I’m a slut for liking sex with both genders, that’s their problem and not mine” and a 19-year-old, White, non-binary participant reported, “I choose to ignore [the prejudice/stigma] even though this may not be the smartest and healthiest coping mechanism.” Responses in the *active coping mechanisms* category included mentions of acting to cope with stigma. These responses described behaviors such as verbally addressing people who perpetuate bisexual stigma, enforcing personal boundaries, or seeking therapy (e.g., “I try to have those difficult or awkward conversations when the topic comes up to clarify. That is how I resist being treated differently for matching a [bisexual] stereotype.” (31 year-year old White woman); “I tend to call out people outside of the bisexual community for believing in and perpetuating such harmful stereotypes.” (19-year old White man)).

## Discussion

With a sample of bisexual individuals ( $N=68$ ), we sought to elucidate bisexual people’s lived experiences surrounding binormativity, and the implications of these experiences for their bisexual identities, experiences, and their health and well-being. We were specifically interested in



understanding how bisexual people navigate and engage with binormative standards. To understand this complex phenomenon, we conducted a mixed-method investigation, utilizing both qualitative and quantitative approaches to inform our understanding, allowing us to make statistical claims about the relationship of conformity to bisexual stereotypes to certain outcomes among bisexual people, and to understand experiences of binormativity in greater depth through qualitative accounts of these experiences among bisexual people.

### ***Binormativity as a predictor of differential outcomes***

We quantitatively examined whether people's self-reported alignment with bisexual stereotypes (i.e., degree of binormativity) predicted distinct outcomes, hypothesizing that heightened conformity to bisexual stereotypes would be linked to poorer outcomes including greater perceived bisexual illegitimacy, greater anticipated binegativity, greater internalized binegativity, lower identity affirmation, lower community connectedness and belonging, worse overall psychological well-being, and greater perceived stress. Our quantitative analyses indicated that alignment with bisexual stereotypes did predict heightened feelings of bisexual illegitimacy, but contrary to our hypotheses, was associated with decreased perceived stress and increased psychological well-being. Other hypotheses were not supported. These findings suggest a complex relationship between conforming to bisexual stereotypes and overall well-being, and highlight the importance of a dynamic and multifaceted approach in understanding the interplay between bisexual identity, community and binormativity.

The relationship between higher conformity to bisexual stereotypes and decreased perceived stress may insinuate a possible use of adaptive strategies employed by bisexual individuals to enhance their emotional resilience. Conforming to binormative standards may be rooted in an individual's desire for belonging and a predictable environment through the adherence of societal norms (Ufkes et al., 2012). Those who do not conform and face stigma, may be required to develop coping strategies to navigate potentially challenging situations. Indeed, our qualitative findings support this reasoning, providing insight into these coping processes.

Specifically, our qualitative analyses revealed bisexual individuals' use of various coping mechanisms to manage felt stigma or stereotypes related to their bisexual identity. In particular, participants most frequently reported engaging passive, nonconfrontational coping strategies, including ignoring or brushing off experiences of prejudice. Passive coping strategies have been highlighted in previous research on sexual minority experiences of microaggressions (e.g., Nadal et al., 2011) and similar nonconfrontational coping has been noted as a method of self-preservation among bisexual

women specifically (e.g., Serpe et al., 2020). It is possible that such passive coping methods are frequently employed by bisexual people given their unique positionality as a minority within a minority, rendering active coping—particularly active resistance to prejudice—as particularly taxing when this resistance may need to address multiple communities (e.g., heterosexual and lesbian/gay people; see Craney et al., 2018).

Various studies modeling the need for a sense of belonging among bisexual populations show that belonging in the bisexual community predicts lower depressive symptoms among bisexual women (see Gonzalez et al., 2021; McInnis et al., 2022; McLaren & Castillo, 2021). Thus, there may be an impetus to conform to binormative standards to secure acceptance and belonging. Serving as a protective mechanism, conforming to binormativity may effectively reduce perceived stress that is associated with potential instances of rejection, stigmatization, microaggressions, and other negative social interactions experienced by bisexual individuals both within the bisexual community (intra-group), as well as between broader LGBTQ communities and other social groups (inter-group) (Gonzalez et al., 2021; McInnis et al., 2022; McLaren & Castillo, 2021).

Alternatively, our quantitative findings that greater conformity to bisexual stereotypes is related to decreased stress and increased psychosocial well-being may indicate the presence of experiences of stigmatization for bisexual individuals who align with binormative standards—for example, in their choice of a relationship partner. It is well-documented that the experiences of bisexual identity relate to partner gender (Arriaga & Parent, 2019; Dyar et al., 2014; Sarno et al., 2020). Bisexual men in other-gender relationships report higher levels of interpersonal hostility from both heterosexual and gay/lesbian communities than if they are in a relationship with the same gender (Sarno et al., 2020). Similarly, bisexual women in same-gender relationships experience lower levels of rejection and exclusion by lesbian/gay individuals than those in other-gender relationships (Dyar et al., 2014). Given that community and belonging bolsters well-being, it is possible that bisexual individuals who partner with the other gender, for whom this is an authentic choice, experience unique barriers to finding belonging in the greater queer community. Moreover, they may also experience barriers to relationship satisfaction inside their mixed-gender, monogamous relationships, where some bisexuals may face greater feelings of insecurity from their partner as a result of their bisexual orientation and bi-negative stereotypes about identity stability (Armstrong & Reissing, 2014). Collectively, those that align with binormativity *via* salient expressions of their identity (such as partner choice) may experience unique sources of stress and bi-erasure.

However, it's important that the discourse around binormativity also challenges the equation between binormative conformity and identity

erasure, that the experience of bisexuality is not completely defined by forces of stigma. In this vein, Reinhart's research (2001) found that the majority of bisexual women in heterosexual relationships were satisfied with their relationship, challenging the narrative that conformity to binormativity necessarily results in worse mental health outcomes and identity erasure. Further, Hartman-Linck (2014) reported that bisexual women in heterosexual, monogamous relationships implemented specific strategies to engage with their bisexual identities, including participating in scholarship about bisexuality, exploring sexual fantasies with their partner, and ensuring their home is a bisexual-friendly space. Bisexual women in this context may feel more empowered, in that they experience greater agency over how they choose to display their identity, to whom, and how it is interpreted by others (Hartman-Linck, 2014). For instance, maintaining bisexual visibility may be an important aspect of parenting—of creating an environment where children feel safe exploring their own gender and sexual identities. Indeed, bisexual parents tend to facilitate open and non-stigmatizing conversations about bisexual identity with their children and have greater empathy, due to their heightened experience of rejection by straight and queer communities (Haus, 2023). Higher levels of empathy may help explain our qualitative findings that participants generally resisted perpetuating binormative standards.

Binormativity is not necessarily the result of explicit, intentional decisions and is shaped by a convergence of personal and societal influences and contextual factors (Sowden et al., 2018; Ufkes et al., 2012). An intersectional framework is instrumental in elucidating this complexity, as it sheds light on how various social identities—such as gender, race, and socioeconomic status—intersect to influence an individual's inclination and ability to conform or diverge from societal norms (Feinstein et al., 2022; Sowden et al., 2018). These overlapping identities create a complex web of expectations and norms that subtly dictate what is considered "conforming" behavior, and what is not, in any given context. Further complicating this dynamic is the interaction between self-authorship and external constraints, such as systemic discrimination and access to resources (McInnis et al., 2022), which can limit the ability to express oneself authentically, whether it be implicitly or explicitly (Bostwick & Hequembourg, 2014; Feinstein et al., 2022; Garnets & Kimmel, 2003). Importantly, personal identity is fluid, leading to a continuously evolving interplay between conforming and non-conforming behaviors (Sowden et al., 2018).

This does not undermine concerns surrounding the potential effects of conformity to binormative standards on the erasure of one's bisexual identity across various dimensions. Our findings illustrate that bisexual people indeed feel pressure to conform to certain expressions of bisexuality, including pressure to align with stereotypical behavior to prove their

sexuality and pressure to orient away from stereotypical behavior to resist stigma. Conforming to binormative standards may necessitate suppressing or downplaying certain aspects of one's bisexual identity that do not align with societal expectations (McInnis et al., 2022). In cases where this is true—where individuals feel that the expression of their bisexual identity is stifled or constrained by external forces—abandonment of authenticity could lead to emotional distress and a sense of internal conflict (McInnis et al., 2022). Suppressing certain feelings, attractions, or expressions to fit into perceived norms can lead to feelings of shame, guilt, and emotional isolation (McInnis et al., 2022). While conformity to bisexual stereotypes was shown in our quantitative results to have a positive effect on perceived stress, it is essential to consider that these potential gains might come at the cost of suppressing aspects of one's authentic identity.

### ***Reinforcement of binormative standards***

In qualitative responses, bisexual participants reported both pressures to conform to binormative standards or to conform to bisexual stereotypes, as well as some who reported no pressure to engage with bisexual stereotypes; this complexity of compounding social pressures among bisexual people has been noted in prior work (Braida, 2021; Eisner, 2013). Similarly, participants reported experiences both of identity acceptance and of identity invalidity. These bidirectional relationships could explain some of our null quantitative findings, as our statistical tests did not account for these complexities; our qualitative responses provide greater depth of insight into these complex relationships.

Generally, participants were aware of salient bisexual stereotypes, but were reluctant to label any bisexual behaviors or representations negatively, mirroring past work (see Oswald & Matsick, 2020). Many participants did not shy away from embracing stereotypical behaviors and maintained a neutral or positive internal identity. However, some participants identified certain behaviors that they perceived as being “bad” bisexual behaviors, including bisexual performativity, identity uncertainty, promiscuity, and heteronormativity. In line with prior research (e.g., Oswald & Matsick, 2020), some participants suggested that these behaviors can lead to negative perceptions of the bisexual community as a whole; overall, however, participants—even those who noted these potential reputational damages—were reluctant to prescribe behavior or judge others for their engagement in stereotypical behaviors. Furthermore, some participants reported internalizing these notions, experiencing stereotype threat and shame when considering how their own behaviors aligned with bisexual stereotypes and might therefore be perceived negatively by other bisexual people. This theme of stereotype shame illustrates the harmful effects of binormative

standards on individual bisexual people (see also Braida, 2021; Gurevich et al., 2007; Maliepaard, 2017) and is bolstered by our quantitative finding that greater conformity to bisexual stereotypes among bisexual people predicted increased identity illegitimacy.

### ***Binormative attitudes and behaviors***

Overall, participants showed familiarity with the notion of binormativity, with a number of participants feeling pressured to change how their behavior interacts with bisexual stereotypes, but generally did not themselves endorse binormative standards of behavior. The reluctance of our participants to use stereotypical behavior as a driving force for defining a “good” or “bad” member of their community and a general reluctance to engage with binormative standards could explain why increased conformity to bisexual stereotypes did not predict decreased community connectedness in our quantitative analysis. Systemic factors often perpetuate binormative standards that are inherently exclusionary and are largely set by dominant groups (Bostwick & Hequembourg, 2014; Dodge et al., 2016; Friedman et al., 2014). It stands to reason that our participants, who may themselves be subject to such marginalizing forces, would not endorse these binormative standards; instead, our qualitative findings suggest that this reluctance may serve as an adaptive response to heterosexist oppression.

Furthermore, this general acceptance of all expressions of bisexuality may in part explain why conformity to bisexual stereotypes seemed to have a protective effect on bisexual individuals’ mental health and well-being, as was indicated by our quantitative findings; this may suggest that the acceptance of stereotypicality is a catalyst to sustaining the participants’ sense of belonging within the bisexual community. Those who align more closely with stereotypes about bisexuality do not seem to lose out on connections within the bisexual community, and may paradoxically also feel more connected to other communities beyond their bisexual communities. That is, although bisexual people are generally stereotyped negatively (e.g., Dodge et al., 2016; Friedman et al., 2014), those who align more closely with bisexual stereotypes may perceive themselves as more prototypical of superordinate identities (e.g., as queer) and thus could potentially experience increased positive belonging in the broader LGBTQ+ community (see Ufkes et al., 2012), creating a protective effect against systemic oppression.

### ***Limitations and future directions***

Some limitations of the present work should be considered. In the current work, we focus on bisexuality as a single axis of identity; however,

we acknowledge that people's experiences of bisexuality shape and are shaped by additional social identities and oppressions and privileges relating to these identities (e.g., Bowleg, 2013; Oswald et al., 2022). For example, sexual minority individuals from racialized backgrounds experience heightened levels of prejudice compared to their White counterparts (Bostwick & Hequembourg, 2014; Garnets & Kimmel, 2003; Han, 2007). The intersecting struggles of being both non-heterosexual and nonwhite can lead to heightened feelings of invisibility, erasure, and cultural alienation (McInnis et al., 2022). Addressing specific challenges faced by BIPOC bisexual individuals within the context of binormativity, it is essential to consider the nuanced forms of discrimination they experience and to stress the urgent need for inclusive strategies that acknowledge the complexities of their identities. Similarly, the societal expectations that surround both gender and sexuality are exacerbated for bisexual people who also identify as transgender or non-binary (e.g., Feinstein et al., 2022), who may encounter obstacles in expressing their sexual orientation within the confines of binormative frameworks, which typically assume binary gender identities (McInnis et al., 2022). Future research should aim to examine binormativity through a more holistic intersectional lens.

Furthermore, we did not collect data on outness in the current work, though this was likely an important variable to control for. Multiple participants expressed how they were closeted about being bisexual to most, if not all people they frequently interact with, which would likely shape people's experiences of binormativity and bisexual stigma. Future research should thus include outness in examinations of experiences of binormativity. Generally, research on bisexuality and binormativity should broadly aim to be more inclusive of people with diverse experiences of their bisexual identities, and to examine how this heterogeneity influences the experiences of bisexual people.

### ***Practice & advocacy implications***

The current work underscores the importance of elucidating the dynamics of bisexual individuals' experiences within the framework of binormativity, offering insights that contribute to both academic discourse and real-world interventions. These findings hold practical implications for mental health practitioners, counselors, and support organizations working with bisexual individuals. For example, clinicians and counselors working with bisexual populations should be aware of and acknowledge binormativity, and may use affirmative psychotherapy tools (Hinrichs & Donaldson, 2017) to help bisexual individuals accept and experience the legitimacy of their bisexual identities when navigating binormativity. This may include clinicians'

explicit articulation of understandings of binormativity as well as affirming verbalized experiences by the patient of navigating binormativity or identity illegitimacy, particularly in relation to how these experiences shape stress and mental health (Hinrichs & Donaldson, 2017). Patients may not have specific frameworks to discuss experiences of binormativity, and introducing or defining this concept with clinicians may provide an important lens for patients to articulate certain aspects of their bisexual experiences.

Our research additionally emphasizes the importance of advocacy efforts that challenge and dismantle binormativity within both bisexual communities and society at large. Advocacy initiatives should encourage uncedented definitions of bisexuality that celebrate the diversity in which individuals experience their identities, regardless of their alignment with binormativity (see Feinstein et al., 2021). Moreover, advocacy should focus on raising awareness of the intersections of bisexuality with other marginalized identities, such as race and gender, to ensure that support systems and resources are sensitive to the unique experiences of the individual and the diversity of their background. Activists should also ultimately work to dismantle binormativity, along with the broader systems of racism, monosexism, sexism, and heterosexism which, among others, perpetuate binormativity. The dismantling of binormativity is likely to align with other abolitionist efforts to disrupt current hierarchical systems of power which marginalize those whose identities and experiences do not align with contemporary neoliberal ideals (e.g., Davis et al., 2022).

## Conclusion

In an online, mixed-methods survey with bisexual participants ( $N=68$ ), we found that increasing alignment with stereotypes about bisexuality predicted heightened feelings of bisexual illegitimacy, yet was also associated with decreased perceived stress and increased psychological well-being. Many participants reported experiencing pressure to act either less or more stereotypically bisexual, and some participants reported experiencing shame or social identity threat due to their engagement in “stereotypically bisexual” behaviors (e.g., promiscuity). Participants were generally reluctant to engage with binormative standards by labeling any behaviors as “bad” representations of bisexuality, instead endorsing the notion that all bisexual people are valid. However, certain behaviors including promiscuity, performativity, and heteronormativity were critiqued as unfavorable representations of bisexuality. Taken together, our findings indicate that bisexual people navigate binormativity in their everyday lives and may consequently experience negative identity outcomes, yet generally maintain a positive sense of identity and pursue an inclusive definition and community of bisexuality.

## Disclosure statement

No potential conflict of interest was reported by the author(s).

## Notes on contributors

**Flora Oswald** graduated from the University of the Fraser Valley in 2018 with an honors degree in Psychology and a minor in Sociology. In 2020, she earned her M.S. in Psychology & Women's, Gender, and Sexuality Studies from Penn State and is currently completing a dual title PhD. Flora has received awards for her outstanding academics as well as for her support and advocacy for the LGBTQ+ community. Flora is a feminist psychologist, and her research interests relate primarily to stereotyping, stigma, and person perception.

**Kari A. Walton** completed her BA honors degree with a major in Psychology and a minor in Counseling Psychology at Kwantlen Polytechnic University in 2020. Her honors thesis investigated heterosexual men's motivations for engaging in a form of street harassment known as 'catcalling' and won the 2020 Canadian Psychological Association award of Academic Excellence. Kari is currently applying for graduate study.

**Lena Orlova** holds a BSc in Applied Psychology (with Distinction) from Kwantlen Polytechnic University. Lena's research interests include stigma, human sexuality, and multidisciplinary approaches to mental health. She is particularly interested in systemic changes that break the cycle of institutional and cultural trauma

**Julie Ayad** is an undergraduate student at Kwantlen Polytechnic University completing her Bachelors of Arts in Psychology with a minor in Counseling. Julie is passionate about attachment theory, culture and intersectionality, and close relationships. She is hoping to pursue a career as a Clinical Psychologist with a special interest in close relationships.

**Aidan Hooper** completed his BSc honors degree in Applied Psychology from Kwantlen Polytechnic University in 2022. Aidan has a strong interest in research involving cognitive and clinical psychology and how gender and/or sexuality influences person perception.

**Cory L. Pedersen** earned her Ph.D. in Developmental Psychology from the University of British Columbia in 2004 and is a full-time Faculty member and Director of the Observations and Research in Gender and Sexuality Matters Lab in the Department of Psychology at Kwantlen Polytechnic University.

## ORCID

Flora Oswald  <http://orcid.org/0000-0003-1491-1860>

Kari A. Walton  <http://orcid.org/0000-0002-5133-556X>

Lena Orlova  <http://orcid.org/0000-0002-2404-4687>

Cory L. Pedersen  <http://orcid.org/0000-0002-9769-3207>

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