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“I Am (Oppressed), Therefore I See”: multiple stigmatized identities predict belief in generalized prejudice and intraminority coalition

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ABSTRACT

Integrating lay theory of generalized prejudice (LTGP) and intersectionality frameworks, the present research demonstrated that, across four samples ($N = 7,121$), people with a greater number of stigmatized identities (based on race/ethnicity, gender, and sexual orientation) endorsed LTGP more strongly, perceived greater similarities across marginalized groups, and ultimately indicated stronger support for intraminority coalitions (Studies 1–3) and specifically stronger policy support for low-SES people (Study 3). Notably, multiply stigmatized people (especially those with three stigmatized identities) endorsed LTGP and intraminority coalitions more strongly than did singly stigmatized and non-stigmatized people, who did not significantly differ from each other on these outcomes. Together, these findings highlight the importance of intersectionality in understanding intraminority relations and contribute to coalition-building efforts across oppressed groups.

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Intraminority coalition; lay theories; generalized prejudice; identity; intersectionality

From my membership in all of these groups [women, queer people, Blacks], I have learned that ... among those of us who share the goals of liberation and a workable future for our children, there can be no hierarchies of oppression. I have learned that sexism and heterosexism both arise from the same source as racism. (Audre Lorde, p. 9)

Audre Lorde (1983) – a Black lesbian – once proposed that different types of prejudice originate from the same root and called for people, regardless of their marginalized identities, to ally to abolish all axes of oppression for “a workable future” (p. 9). Such beliefs about oppression and activism derive from Lorde’s identification with all the stigmatized groups she was part of, or essentially from her position as “the ultimate Other” (Collins, 1991, p. 168). Would a person who holds only one (e.g., a cisgender heterosexual Black man) or two of these stigmatized identities (e.g., a cisgender Asian gay man) endorse as strongly the idea that all forms of prejudices share the same origins, and that marginalized people should form coalitions to work toward liberation? Responding to this question, the present research sought to investigate whether holding multiple stigmatized identities would prompt people to believe that prejudices typically co-occur and therefore motivate coalition between stigmatized social groups.

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Intraminority relations

Much research on intraminority relations (i.e., relationships between marginalized social groups) has focused on when such groups form coalitions or derogate across groups (Craig & Richeson, 2012, 2016). A critical factor that nudges one toward coalition rather than derogation is *stigma-based solidarity*, a perception that members of marginalized social groups share a common fate and thus should ally with one another in efforts toward equality (Chaney et al., 2018; Craig & Richeson, 2016; Schmitt et al., 2003; Subašić et al., 2011). This concept is built upon the common ingroup identity model (Gaertner & Dovidio, 2000; Gaertner et al., 1993) such that stigmatized people may categorize members of other oppressed groups as part of a common ingroup and consequently treat them more favorably (Craig & Richeson, 2016). Stigma-based solidarity may be greatest among groups marginalized along the same identity dimension. Indeed, for people of color, experiencing racism mobilizes solidarity with other racially stigmatized groups (Craig & Richeson, 2012) but triggers biases against LGBTQ+ people (Craig & Richeson, 2014). The derogative response that occurs across identity dimensions can be converted to coalition by highlighting parallels in fights for equality (Cortland et al., 2017). Black and Asian Americans who were primed with shared struggles with LGBTQ+ people (i.e., housing and marriage discrimination) perceived greater similarities with LGBTQ+ people and, as a result, reported more positive relationships with LGBTQ+ people. Taken together, the salience, or awareness, of shared experiences with other oppressed groups can facilitate positive intraminority relationships and specifically intraminority coalitions (e.g., Craig & Richeson, 2012, 2016).

In addition to perceiving shared experiences, believing that prejudices toward varied marginalized groups co-occur, or stem from the same or similar perpetrators, is another path toward intraminority coalitions (Chaney & Forbes, 2023). This belief is generally accurate (Duckitt & Sibley, 2007, 2010) and referred to as Lay Theory of Generalized Prejudice (LTGP): a belief that someone who is prejudiced against one marginalized social group is also prejudiced against other marginalized groups (Sanchez et al., 2017, 2018). For example, due to a belief that sexism and racism co-occur in perpetrators and entities, Black men expected racism from a sexist perpetrator (Sanchez et al., 2017) and anticipated fair treatment from a company that had gender diversity awards (Chaney et al., 2016) and gender-inclusive bathrooms (Chaney & Sanchez, 2018), indicating that perhaps they perceived similarities between their lived experiences and those of women and gender-diverse individuals. Rooted in the same LTGP framework, research has found that marginalized people may perceive members of other marginalized groups as holding more favorable attitudes toward them, suggesting that someone who experiences racism is less likely to be sexist than someone who does not (Chaney et al., 2018). Taken together, past research has suggested that LTGP may allow people to discern similar experiences between different oppressed groups due to a perception of a shared root of prejudices toward those groups, which would in turn nurture coalitional attitudes.

Notably, LTGP endorsement has been found to moderate anticipated discrimination from a perpetrator who expresses prejudices toward a similarly stigmatized outgroup (e.g., Chaney et al., 2021a; Sanchez et al., 2018). While such findings demonstrate variability in the belief that prejudices co-occur, research to date has not investigated the antecedents of LTGP endorsement nor the antecedents of perceiving similar experiences

beyond salience manipulations (e.g., Chaney & Forbes, 2023; Cortland et al., 2017). Thus, the present research had two aims: 1) to examine a novel antecedent of LTGP endorsement and intraminority coalitions (holding multiple stigmatized identities) and 2) to integrate intersectionality into research on intraminority relationships.

Intersectionality

Critically, the overwhelming majority of research on intraminority relations has not taken an intersectional perspective. According to the intersectionality framework, oppression cannot be reduced to one primary dimension; rather, different axes of oppression work to shape people's experiences (Collins, 1991; Woodhams et al., 2015). Mirroring these intersecting systems, social identities within each person are mutually constitutive rather than independent (Cole, 2009). Thus, a person's lived experiences can only be understood by simultaneously examining the intersection of various social identities, both marginalized and privileged, rather than examining each identity independently (Crenshaw, 1989). Despite the intersectional nature of marginalized experiences, research on intraminority relationships has predominately focused on only one identity dimension (e.g., women without considering their racial and sexual identities; Black Americans without considering their gender and sexual identities; Craig & Richeson, 2012; Chaney et al., 2021a; c.f. Chaney et al., 2021b; Craig et al., 2012). Indeed, most stigma and intergroup research aims to explain how people discern and respond to *only one* type of prejudice rather than multiple at once (Remedios & Snyder, 2015a). Bringing the intersectional framework into the picture, we propose that the extent to which a person is socially stigmatized, or more concretely the number and intersection of stigmatized identities held by a person, is a potential predictor of LTGP endorsement and intraminority allyship.

Both theoretical and empirical work support the proposed role of holding multiple stigmatized identities in predicting LTGP and coalition. Multiply stigmatized people can experience discrimination for a myriad of reasons; women of color, for example, can experience discrimination due to their race, their gender, the sum of both, or due to simply being women of color (which cannot be fully explained by any of the above; Collins, 1991; Remedios & Snyder, 2015a). In a similar vein, people with a greater number of stigmatized identities experienced a wider range of discrimination and more frequent discrimination (Barnes & Meyer, 2012; Han, 2007; Remedios & Snyder, 2018; Velez et al., 2017). In addition, people with three stigmatized identities (based on gender, race, and class) demonstrated stronger stereotype threat effects in math and work memory performances than those with zero, one, or two stigmatized identities (Tine & Gotlieb, 2013). In higher education settings, those who held more complex intersectional identities (including gender, race, religion, and sexual orientation) were more likely to report having experienced greater bullying before than others (Hollis, 2018). Beyond experiencing more discrimination, people with a greater number of concealable stigmatized identities anticipated greater stigma and ruminated more about their stigmatized identities (Reinka et al., 2020). Finally, while people generally do not adopt highly intersectional lenses (e.g., race-by-gender-by-sexual-orientation) to perceive others in daily lives (Petsko et al., 2022), such intersectional lenses may be more commonly used among multiply stigmatized people as these lenses are necessary for

navigating their own lived experiences (Bowleg, 2013). Because multiply stigmatized people experience more prejudices, are more prone to detecting prejudice and discrimination, and may be more likely to use intersectional lenses as the default, we propose they should be more likely to recognize the co-occurring nature of different types of discrimination, or that is, to endorse LTGP more strongly.

Moreover, people with multiple stigmatized identities may employ various strategies to manage their multiple stigmatized social identities (Roccas & Brewer, 2002). For example, they may uniquely shift definitions of “ingroup” and “outgroup” such that Black women may categorize other Black women as “double” ingroup members and Black men or White women as “partial” ingroup members (Crisp & Hewstone, 1999; Remedios & Snyder, 2018). While identity salience may shift such boundaries, when emphasis is focused on shared identities, a common-ingroup identity may form, reducing intergroup bias (Crisp et al., 2010). Additionally, high social identity complexity may afford multiply stigmatized people opportunities for drawing commonalities with other groups (Roccas et al., 2008) and is associated with more positive attitudes and greater tolerance of outgroup members (Brewer & Pierce, 2005; Schmid et al., 2009). Considering these characteristics, multiply stigmatized people may be more likely to perceive similarities between different oppressed groups and therefore engage in intraminority coalition than singly- or non-stigmatized people (Craig & Richeson, 2016). Taken together, we propose that people with a greater number of stigmatized identities may be more sensitive to the intersecting nature of prejudices (i.e., high in LTGP), and thus more sensitive to commonalities across oppressed groups and more supportive of intraminority coalitions.

Current research

In light of the increasing call for research on people with intersectional oppressed identities to address the sociopolitical landscape (e.g., Bharat et al., 2021; Corrington et al., 2020) and the growing attention to intraminority coalitions (Craig & Richeson, 2016), the present research includes four online survey-based studies, three cross-sectional and one longitudinal, to investigate the relationship between the number of stigmatized identities a person holds (based on three identity dimensions: race/ethnicity, gender, and sexual orientation) and intraminority coalition. The roles of LTGP endorsement and perceptions of similar experiences across oppressed groups in this relationship were considered. Particularly, it was hypothesized that (1) people with a greater number of stigmatized identities would endorse LTGP and intraminority coalitions more strongly¹; and (2) LTGP endorsement and perceived similarity between oppressed groups would serially mediate the relationship between number of stigmatized identities and intraminority coalition, such that those with a greater number of stigmatized identities would endorse LTGP more strongly, perceive greater similarities across marginalized groups, and ultimately embrace and engage in intraminority coalitions more strongly. All data and materials are available: https://osf.io/9nfa8/?view_only=58221e8ae544892ae955f42166948bf

Studies 1A & 1B

Studies 1a and 1b aimed to investigate the link between number of stigmatized identities and support for intraminority coalitions via LTGP endorsement and perceived similarity across marginalized groups.

Method

Study 1a participants

Throughout four academic semesters (Fall 2017 [30.9%], Spring 2018 [21.8%], Fall 2018 [33.2%], and Spring 2019 [14.1%]), 6,114 undergraduate participants at a large Northeastern U.S. university completed a pre-screen survey at the beginning of the semester with a broad range of measures, including the critical measures below. Measures were completed in a randomized order. Ultimately, participants who did not provide a response to questions regarding gender or sexual identity or who indicated “prefer not to reveal” for sexual orientation were excluded from analyses (following Remedios & Snyder, 2018), leaving an analytic sample of 5,957. Besides 42 participants who were 28 years old or older, participants ranged from 18 to 27 years in age ($M = 18.82$, $SD = 1.20$).² See Table 1 for general demographics.

Following past research (Remedios & Snyder, 2018), the number of stigmatized identities of each participant was tallied, focusing on race/ethnicity (participants of color were categorized as holding a stigmatized racial identity), gender (women, transgender, or gender-diverse participants were categorized as holding a stigmatized gender identity),

Table 1. Demographic summary.

	Study 1a <i>N</i> (%)	Study 1b <i>N</i> (%)	Study 2 <i>N</i> (%)	Study 3 <i>N</i> (%)
Gender				
Cisgender women	3392 (56.9%)	261 (53.6%)	120 (51.9%)	303 (70.8%)
Cisgender men	2535 (42.6%)	226 (46.4%)	101 (43.7%)	118 (27.6%)
Transgender women	1 (0.0%)	-	0 (0.0%)	1 (0.2%)
Transgender men	3 (0.1%)	-	4 (1.7%)	0 (0.0%)
Gender-variant	26 (0.5%)	-	6 (2.6%)	6 (1.3%)
Race/ethnicity				
Asian	2294 (39.5%)	-	43 (18.6%)	93 (21.7%)
White	1919 (32.2%)	252 (51.7%)	102 (44.2%)	237 (55.4%)
Hispanic/Latinx	641 (10.8%)	-	34 (14.7%)	-
Black	418 (7.0%)	235 (48.3%)	36 (15.6%)	51 (11.9%)
Biracial/Multiracial	323 (5.4%)	-	4 (1.7%)	44 (10.3%)
Middle Eastern and North African	246 (4.1%)	-	4 (1.7%)	0 (0.0%)
Native Hawaiian or Pacific Islander	8 (0.1%)	-	3 (1.3%)	2 (0.5%)
American Indian or Alaska Native	2 (0.0%)	-	1 (0.4%)	1 (0.2%)
Not listed	54 (0.9%)	-	4 (1.7%)	0 (0.0%)
Sexual orientation				
Heterosexual	5433 (91.2%)	442 (90.8%)	109 (47.2%)	366 (85.5%)
Lesbian/gay	98 (1.6%)	16 (3.3%)	28 (12.1%)	43 (10.1%)
Bisexual	250 (4.2%)	26 (5.3%)	62 (26.8%)	1 (0.2%)
Queer/pansexual	58 (1.0%)	-	14 (6.1%)	6 (1.4%)
Questioning/not sure	118 (2.0%)	-	10 (4.3%)	-
Asexual	-	-	4 (1.7%)	2 (0.5%)
Not listed/Other	-	3 (0.6%)	4 (1.7%)	10 (2.3%)

For Study 3, participants were asked separately about whether they identified as Latinx/Hispanic: 19.4% of participants identified as Hispanic/Latinx (0.2% unreported).

and sexual orientation (LGBQ+ were categorized as holding a stigmatized sexual orientation). The number of stigmatized identities each person held was summed up and hence ranged from 0 to 3. Of all participants, 792 (13.30%) had zero stigmatized identities, 2605 (43.73%) had one stigmatized identity, 2301 (38.63%) had two stigmatized identities, and 259 (4.34%) had three stigmatized identities. See [Table 2](#) for descriptive statistics by number of stigmatized identities and [Table S4](#) for statistics by specific identity group. Since this was a preexisting convenience dataset, a sensitivity analysis was conducted using G*Power (Faul, 2017) and indicated that our sample of $N = 5,957$ could detect an effect size $d = 0.09$, assuming $\alpha = .05$ and 95% power.

Study 1a procedure and measures

Participants completed the below measures in a random order during a larger pre-screen survey.

Lay theory of generalized prejudice

Participants completed the three-item LTGP Scale (Sanchez et al., 2018; e.g., “When someone holds hateful beliefs against one group of people, they often hold hateful beliefs against other groups of people”; $\alpha = .89$) on a 7-point scale from 1(*Very Untrue*) to 7(*Very True*).

Support for intraminority coalitions

Participants completed a four-item stigma solidarity measure ($\alpha = .86$; adapted from Chaney and Sanchez (2018) and Oppressed Minority Subscale of The Multidimensional Inventory of Black Identity; (Sellers et al., 1997) to report their support for intraminority coalitions. Participants expressed their agreement with statements (e.g., “People from different oppressed groups should band together to pursue equality”) on a scale from 1 (*Strongly Disagree*) to 7(*Strongly Agree*).

Study 1b participants

An *a priori* power analysis for linear regressions, seeking to capture a small effect size ($d = 0.10$) with 95% power, indicated a desired sample size of 348. However, in an effort to ensure a large number of participants with multiple stigmatized identities (i.e., two or three stigmatized identities), we sought to recruit 550 participants from MTurk in exchange for a monetary compensation. Moreover, to limit the variability of race as a marginalized identity (i.e., to avoid missing the nuanced experiences that varied marginalized racial groups face in the crude measure of stigmatized identities), only Black and White participants were recruited.

After removing 63 respondents for failing attention checks, the final sample included 252 White and 235 Black U.S. participants ($M_{\text{age}} = 37.77$, $SD = 12.26$; range: 18–75). Based on the same three criteria as Study 1, 109 (22.4%) held zero stigmatized identities, 229 (47.0%) held one stigmatized identity, 135 (27.7%) held two stigmatized identities, and 14 (2.9%) held three stigmatized identities. See [Tables 1, 2](#), and [S4](#) for demographic information and descriptive statistics.

Table 2. Descriptive statistics.

	LTGP <i>M (SD)</i>	Perceived Similarity <i>M (SD)</i>	Support for Intra-minority Coalitions <i>M (SD)</i>	Twainbow Donation <i>M (SD)</i>	Policy Support <i>M (SD)</i>
Study 1a	0 Stigmatized Identities	3.95 (1.00)	-	4.54 (1.03)	-
	1 Stigmatized Identity	4.02 (1.00)	-	4.77 (1.10)	-
	2 Stigmatized Identities	4.18 (0.98)	-	4.96 (1.14)	-
Study 1b	3 Stigmatized Identities	4.42 (0.88)	-	5.42 (1.09)	-
	0 Stigmatized Identities	4.62 (1.46)	4.62 (1.22)	4.95 (0.11)	-
	1 Stigmatized Identity	4.68 (1.70)	4.83 (1.17)	5.17 (0.08)	-
Study 2	2 Stigmatized Identities	5.25 (1.34)	4.89 (1.05)	5.43 (0.10)	-
	3 Stigmatized Identities	5.02 (1.24)	4.95 (1.36)	5.28 (0.31)	-
	0 Stigmatized Identities	4.86 (1.33)	4.42 (1.28)	4.76 (1.26)	60.79 (49.31)
Study 3	1 Stigmatized Identity	5.18 (1.08)	4.40 (1.19)	4.93 (1.26)	53.22 (33.78)
	2 Stigmatized Identities	5.33 (1.19)	4.80 (1.06)	5.51 (0.89)	66.43 (26.54)
	3 Stigmatized Identities	5.77 (0.93)	4.90 (1.16)	5.79 (0.87)	68.37 (27.38)
Multiple Stigmatized Identities	0 Stigmatized Identities	3.57 (0.80)	4.52 (1.02)	5.01 (0.88)	-
	1 Stigmatized Identity	3.73 (0.85)	4.57 (0.90)	4.98 (0.90)	4.49 (1.48)
		3.90 (0.80)	4.65 (0.90)	5.28 (0.88)	5.16 (1.33)
					5.64 (1.09)

Study 1b procedure and measures

After providing demographic information, participants completed the Study 1a LTGP scale ($\alpha = .94$) and two measures of perceived similarity between oppressed groups and support for intraminority coalitions in a randomized order before being debriefed and compensated.³

Perceived similar experiences across oppressed groups

To measure perceived similarity across oppressed groups, participants indicated their agreement with four items ($\alpha = .80$; adapted from Chaney et al. (2018) and Sellers et al. (1997); e.g., “The discrimination experienced by members of oppressed groups is similar.”) on a scale from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*).

Support for intraminority coalitions

As a measure of attitudes toward intraminority coalition, participants indicated their agreement with five items ($\alpha = .89$; again adapted from Chaney et al. (2018) and Sellers et al. (1997)) on a scale from 1 (*Strongly Disagree*) to 7 (*Strongly Agree*).

Study 1a results

A simple linear regression of number of stigmatized identities on LTGP endorsement indicated that a greater number of stigmatized identities significantly predicted greater LTGP endorsement (see Table 3 for detailed statistics). Similarly, a linear regression of number of stigmatized identities on support for intraminority coalitions showed that a greater number of stigmatized identities predicted stronger endorsement of coalitional efforts across marginalized groups.

To test the hypothesis that LTGP endorsement mediated the effect of stigmatized identity on coalition support, Model 4.1 in PROCESS (version 4; Hayes, 2018) was employed with 5,000 bootstrapped samples. As shown in Figure 1, a greater number of stigmatized identities were associated with greater LTGP endorsement and ultimately greater support for intraminority coalitions.

Table 3. Simple linear regressions with number of stigmatized identities predicting various outcomes.

Outcome	Study	Regression Model			Coefficient		
		<i>F</i>	Adjusted <i>R</i> ²	<i>p</i>	<i>b</i>	<i>SE</i>	<i>p</i>
LTGP	Study 1a	71.81	.012	<.001	.14	0.02	<.001
	Study 1b	10.09	.018	.002	.14	0.09	.002
	Study 2	17.94	.069	<.001	.29	0.07	<.001
	Study 3	9.53	.020	.002	.14	0.05	.002
Perceived Similar Experiences	Study 1b	3.23	.005	.073	-	-	-
	Study 2	7.04	.026	.009	.19	0.07	.009
	Study 3	0.77	-.001	.380	-	-	-
Support for Intraminority Coalitions	Study 1a	156.44	.025	<.001	.24	0.02	<.001
	Study 1b	9.62	.017	.002	.21	0.07	.002
	Study 2	33.85	.125	<.001	.37	0.06	<.001
	Study 3	11.30	.024	<.001	.17	0.05	<.001
Twainbow Donation	Study 2	2.27	.006	.133	-	-	-
Policy Support	Study 3	27.62	.112	<.001	.46	.07	<.001

dfs = (1, 5955), (1, 486), (1, 230), and (1, 426) for Study 1a, Study 1b, Study 2, and Study 3, respectively. Except for Policy Support in Study 3, *dfs* = (2, 420).

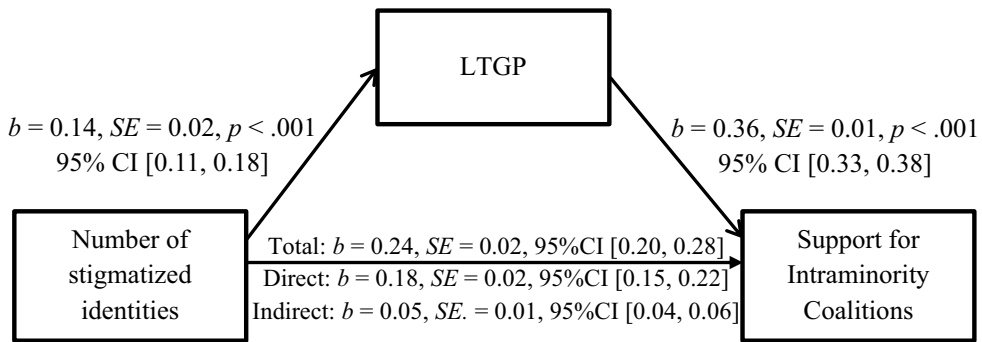


Figure 1. Regression coefficients for the simple mediation model for study 1a.

Study 1b results

As in Study 1a, simple linear regressions revealed that participants with a greater number of stigmatized identities endorsed LTGP more strongly and reported greater support for intraminority coalitions. Yet, number of stigmatized identities did not significantly predict perceived similarities between oppressed groups (see Table 3).

Study 1b tested not only the mediation model in Study 1a again but also the hypothesis that LTGP endorsement and perceived similarity between oppressed groups would serially mediate the relationship between number of stigmatized identities and support for intraminority coalitions, using Model 6 of PROCESS Macro version 4.1 (5,000 bootstrapped samples; Hayes, 2018). Replicating the mediation model in Study 1a, number of stigmatized identities was again indirectly associated with support for intraminority coalitions via LTGP endorsement. More important, the serial mediation model was also supported, such that holding a greater number of stigmatized identities was associated with greater LTGP endorsement, which was in turn associated with greater perceptions of similar experiences across marginalized groups, and ultimately stronger support for coalitions between stigmatized groups (see Figure 2).⁴

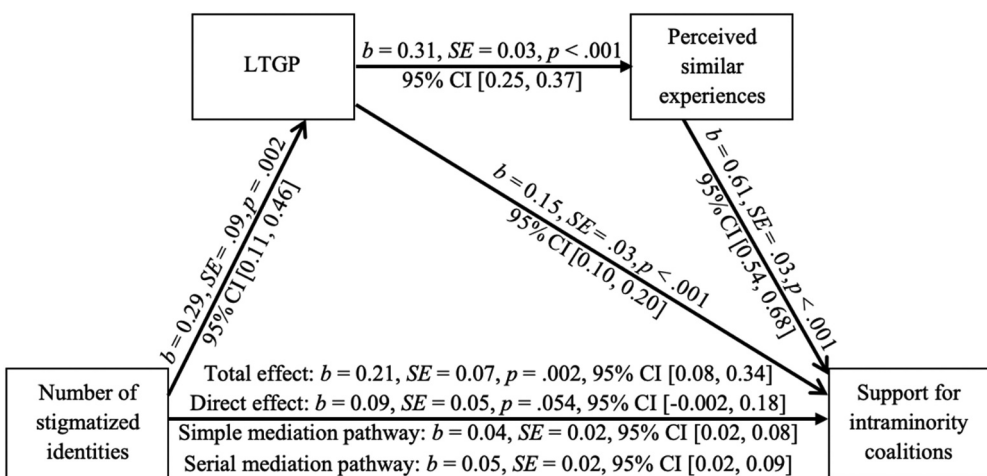


Figure 2. Regression coefficients for the serial mediation model predicting support for intraminority coalitions, study 1b.

Discussion

Studies 1a-1b provided initial evidence that those with a greater number of stigmatized identities endorsed LTGP more strongly and, in turn, demonstrated stronger support for intraminority coalitions (Study 1a).⁵ Further, endorsing LTGP is also associated with support for intraminority coalitions via perceived similar experiences across stigmatized groups (Study 1b). Both samples elucidate the mechanisms through which holding multiple stigmatized identities is linked with support for intraminority coalitions using a large sample of racially diverse college students and an adult community sample. Yet, the percentages of queer women and gender-diverse individuals of color (i.e., those with three stigmatized identities) in both samples were relatively low. Because of this underrepresentation and, more generally, unequal numbers of people in different identity groups, we treated number of stigmatized identities as a continuous variable in Studies 1a-1b, indicating that number of stigmatized identities represents the extent to which a person is stigmatized.⁶ This conceptualization, however, overlooked the potential nuanced differences among different identity groups (e.g., those with zero stigmatized identities versus those with one or two stigmatized identities). As such, Study 2 aimed to intentionally recruit sufficient samples of people with zero, one, two, and three stigmatized identities (along the same identity dimensions) to ensure the strictest test yet of marginalized identities on our outcomes of interest, and to allow for treating number of stigmatized identities as a categorical between-subject factor.

Additionally, the expanded measure of stigma-based solidarity in Study 1b afforded insights into the multifaceted nature of this construct. By showing support for the hypothesized serial mediation model, we demonstrate that the stigma-based solidarity construct that has been used in research on intraminority relations can be split into two distinct constructs: (1) perceptions of similar experiences across different marginalized groups and (2) endorsement of intraminority coalitions. Albeit a high correlation between these two concepts, $r(487) = .70, p < .001$, the present research notes an important distinction: while one relies on perceived similarity that may facilitate a broader common ingroup identity (Gaertner & Dovidio, 2000), the second highlights a desire for intergroup interactions in efforts to equity, moving beyond simple recognition of commonalities to active behavior. Despite this distinction and our argument that the second component of stigma-based solidarity encompasses active behavior, all measures included so far were self-reported beliefs and attitudes. As such, Study 2 sought to utilize a measure more closely related to activism behavior: desired donations.

Study 2

Study 2 aimed to recruit an approximately equal number of people in each identity group (zero to three marginalized identities) and to replicate the relationship between number of stigmatized identities and intraminority coalitions in Study 1. Importantly, Study 2 thus allowed number of stigmatized identities to be conceptualized as a categorical variable, or more specifically, a between-subject factor on outcomes of interest. Doing so afforded the opportunity for a more nuanced examination of how multiply stigmatized people may perceive the co-occurrence of prejudices compared to singly- or non-stigmatized people.

Method

Participants

An *a priori* power analysis was conducted and indicated a desired sample size of 232 participants to detect a medium effect ($d = 0.50$) with 90% power for a four-cell ANOVA. We thus aimed to recruit 70 participants in each of the four identity groups (zero to three stigmatized identities) to account for data quality and exclusions. Ultimately, 278 U.S. participants were recruited from Prolific in exchange for monetary compensation; however, 44 participants who missed any attention checks were excluded, two participants did not report their race/ethnicity, and one participant was not of age to complete the survey, leaving an analytic sample of 231 participants ($M_{\text{age}} = 29.03$, $SD = 10.44$; range: 18–76). The sample was left-leaning ($M = 5.27$, $SD = 1.62$, on a scale from 1-*Very Conservative* to 7-*Very Liberal*). Based on the same three criteria in Study 1, 48 participants (20.7%) had zero stigmatized identities, 49 (21.1%) had one stigmatized identity, 72 (31.0%) had two stigmatized identities, and 63 (27.2%) had three stigmatized identities (see Tables 1, 2, and S4 for demographic information).

Procedure & measures

Participants first provided demographic information and then completed, in a random order, the Study 1 measures of LTGP⁷ ($\alpha = .89$), perceived similar experiences ($\alpha = .78$), and support for intraminority coalitions ($\alpha = .88$). At the end of the survey, participants were informed that the research team would donate \$200 to a nonprofit organization based on participants' preferences and were asked to distribute the money among three organizations: "Black Americans' Rights Organization," "Closing the Gender Pay Gap Group," and "Twainbow – Dedicated to People on Both LGBTQI+ and Autism Spectrums." The amount of money allocated to Twainbow – the only organization that represents a multiply stigmatized group in the selection – was used as a behavioral measure of support for intraminority coalition (see Chaney & Forbes, 2023 for similar dependent measure of coalitional support).⁸

Results

Replicating Study 1, a series of simple linear regressions of number of stigmatized identities on key outcomes revealed that participants with a greater number of stigmatized identities endorsed LTGP more strongly, perceived greater levels of similarity between marginalized groups, and indicated stronger support for intraminority coalitions; however, the simple linear regression of stigmatized identities on behavioral support for coalition (i.e., donation to Twainbow) was not significant (see Table 3). Moreover, the targeted recruitment of Study 2 afforded the opportunity for the planned one-way ANOVA analyses examining number of stigmatized identities (between-subject factor) on outcomes of interest, reported below.

LTGP endorsement

The one-way ANOVA on LTGP endorsement was statistically significant, $F(3,227) = 6.21$, $p < .001$, $\eta_p^2 = .08$. LSD post-hoc analyses (see Table 4) revealed participants with three stigmatized identities reported greater LTGP endorsement than participants with zero, one, or two stigmatized identities. Additionally, those with two stigmatized identities endorsed LTGP more strongly than did those with zero stigmatized identities. No other post-hoc tests revealed significant differences. See Table 2 for descriptive statistics by number of stigmatized identities.

Perceived similar experiences

The ANOVA on perceived similarity was statistically significant, $F(3,227) = 2.73$, $p = .045$, $\eta_p^2 = .04$. Post-hoc tests (see Tables 2 and 4) indicated that those with three stigmatized identities perceived greater similarities than did those with one or zero stigmatized identities. No other significant differences emerged.

Support for intraminority coalitions

Similarly, the ANOVA for support for intraminority coalitions was also significant, $F(3,227) = 13.10$, $p < .001$, $\eta_p^2 = .13$. Particularly, the only *non-significant* differences were the differences (1) between participants with zero and one stigmatized identity and (2) between participants with two and three stigmatized identities (see Tables 2 and 4). As such, participants with multiple stigmatized identities (two, three) indicated greater support for intraminority coalitions than participants with zero or one.

Intraminority donation

The ANOVA on donation to Twainbow was not significant, $F(3,227) = 1.82$, $p = .144$, $\eta_p^2 = .02$.

Mediation analyses

We used the same PROCESS model as in Study 1b to examine our hypothesized serial mediation models. Consistent with Study 1b, people with a greater number of stigmatized identities showed greater LTGP endorsement, which was in turn associated with greater perceived similarities between marginalized groups, and ultimately greater support for intraminority coalitions, $b = 0.54$, $SE = .05$, $p < .001$, 95% CI [0.45, 0.63]. Again, the indirect effect of number of stigmatized identities on coalition serially via LTGP endorsement and perceived similarity was statistically significant, $b = 0.04$, $SE = 0.02$, 95% CI [0.01, 0.09]. In addition, LTGP was also positively associated with support for intraminority coalitions, $b = 0.15$, $SE = 0.05$, $p = .003$, 95% CI [0.05, 0.24]; hence, in line with Studies 1a-1b, number of stigmatized identities was indirectly associated with coalitional attitudes via LTGP endorsement, $b = 0.04$, $SE = 0.02$, 95% CI [0.01, 0.09]. Last, the direct effect of stigmatized identities on support for intraminority coalitions remained significant, $b = 0.23$, $SE = 0.05$, $p < .001$, 95% CI [0.13, 0.33].

Table 4. Post-hoc analyses of the number of stigmatized identities on key outcomes, study 2.

Comparison of identity group	LTGP			Perceived Similarity			Support for Intra-minority Coalitions		
	SE	p	95% CI	SE	p	95% CI	SE	p	95% CI
0 versus 1	0.23	.162	-0.78, 0.13	0.24	.937	-0.45, 0.48	0.22	.435	-0.59, 0.26
0 versus 2	0.21	.028	-0.88, -0.05	0.22	.080	-0.81, 0.05	0.20	<.001	-1.14, -0.36
0 versus 3	0.22	<.001	-1.34, -0.48	0.22	.033	-0.92, -0.04	0.20	<.001	-1.44, -0.64
1 versus 2	0.21	.492	-0.56, 0.27	0.22	.064	-0.83, 0.02	0.20	.003	-0.97, -0.19
1 versus 3	0.22	.007	-1.01, -0.16	0.22	.026	-0.94, -0.06	0.20	<.001	-1.26, -0.47
2 versus 3	0.19	.025	-0.83, -0.06	0.20	.636	-0.49, 0.30	0.18	.119	-0.65, 0.07

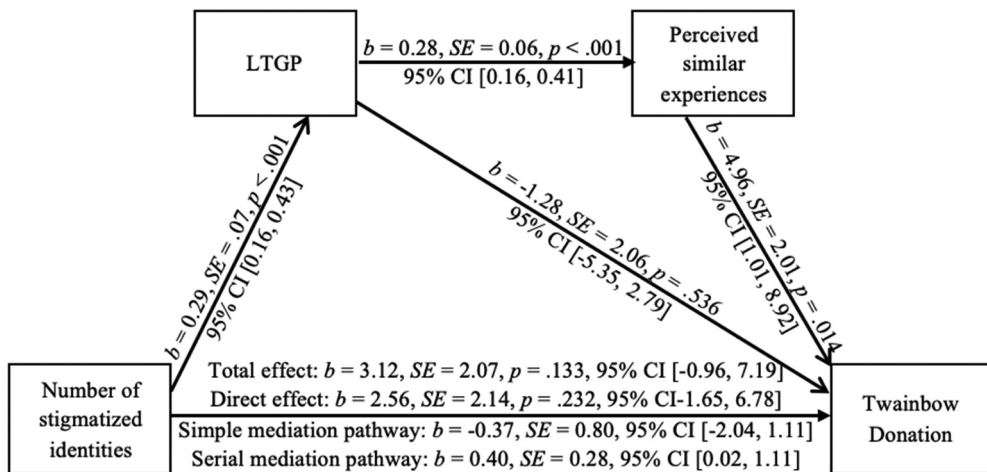


Figure 3. Regression coefficients for the serial mediation model predicting donation to twainbow, study 2.

Though the linear regression examining the effect of number of stigmatized identities on Twainbow donations was not significant, results were trending in the hypothesized direction; thus, we proceeded with the planned serial mediation analysis. The same mediation model as above was conducted with Twainbow donations replacing self-report coalitional support and revealed a significant indirect effect of number of stigmatized identities participants held on Twainbow donation via LTGP and perceived similar experiences (see Figure 3). Unlike the previous set of analyses, however, the direct effect of number of stigmatized identities on Twainbow donation and the indirect effect via LTGP endorsement were no longer significant.

Discussion

Replicating Studies 1a-1b, people with a greater number of stigmatized identities endorsed LTGP more strongly, perceived greater similarities across oppressed groups, and ultimately reported greater support for intraminority coalitions. Additionally, in Study 2, holding multiple stigmatized identities was associated with not only greater self-reported but also greater *behavioral* support for intraminority coalition (donation to Twainbow). Note that while the number of stigmatized identities was not directly associated with coalitional donations, stigmatized identities indirectly influenced Twainbow donations through increasing beliefs in LTGP and perceptions of similarities across oppressed groups.

In addition, the diverse sample in Study 2 allowed for a more careful examination of how multiple stigmatized identities shape LTGP and stigma-based solidarity. Specifically, people with three or two stigmatized identities reported more support for intraminority coalition than did people with one or no stigmatized identities. Mirroring these patterns (with the exception of the difference between those with two versus one stigmatized identities), multiply stigmatized endorsed LTGP more strongly than those with one and

those with zero stigmatized identities, who did not differ from each other. These findings suggest that holding multiple stigmatized identities (two or more) may make people particularly sensitive to the ways in which prejudices co-occur and intersect (LTGP endorsement), and hence support intraminority coalitions more strongly. In contrast, those holding only one stigmatized identity, or none, may be less aware of the intersecting and overlapping nature of prejudices, and hence are less supportive of coalitions.

All three studies thus far, however, were cross-sectional, limiting our ability to determine causality between number of stigmatized identities, LTGP endorsements, and coalitional outcomes. Further, while the donation measure was an attempt to capture a behavioral component of support for intraminority coalitions, donating to Twainbow may be more of a measure of support for intraminority coalitions for straight people of color compared to queer people of color (because queer participants of color may find Twainbow more personally relevant). Similarly, among non-Black participants, donating to “Black Americans’ Rights Organization” – a single-minoritized-group organization – may already represent behavioral support for intraminority coalitions. This complexity may partly explain the lack of direct effect of number of stigmatized identities on Twainbow donation.

Study 3

Aiming to determine the potential causal effects of number of stigmatized identities as well as LTGP endorsement on perceived similarities and intraminority coalitions, Study 3 used a longitudinal design with two time points, such that participants completed a measure of LTGP at an earlier time point than our downstream measures of stigma-based solidarity and intraminority coalition. In addition, Study 3 sought to further examine the differences between those with multiple (two or three) stigmatized identities, those with one stigmatized identity, and those with none. Finally, since oppression is conceptualized on three axes of race/ethnicity, sexual orientation, and gender in the present research, we assessed behavioral coalitions specifically through endorsement of policies that benefit those marginalized on another identity dimension: social class (while accounting for participants’ own social class).

Method

Participants

We decided ahead of time that we would recruit as many participants as possible between 15 November and 7 December 2022 (until the Fall 2022 participant pool closed). A total of 443 undergraduate students at a U.S. Northeastern University were recruited to complete a brief survey in exchange for research credits. We matched data from this survey (Time 2) with the prescreen data at the same university that were completed approximately 9–12 weeks prior (Time 1); however, 15 of the recruited participants at Time 2 survey did not fully complete four critical measures (race/ethnicity, gender, sexual orientation, and LTGP) in the prescreen survey, leaving the analytic sample of $N = 428$ ($M_{\text{age}} = 18.92$, $SD = 1.04$, range = 18–26). See [Table 1](#) for details on race/ethnicity, gender, and sexual orientation.

Overall, participants were leaning liberal ($M = 4.76$, $SD = 1.52$ on a scale from 1 – *Very conservative* to 7 – *Very liberal*) and relatively moderate on the socioeconomic scale, responding to the question: “Where do you believe you (and your family) fit on the below scale of socioeconomic status?” ($M = 3.58$, $SD = 1.13$ on a scale from 1 – *High SES* to 7 – *Low SES*). A sensitivity analysis, using G*Power (Faul, 2017), indicated that a sample of $N = 428$ could detect a small effect $d = 0.30$, assuming $\alpha = .05$ and 80% power.

Using the same three identity dimensions as in Studies 1–2, the sample comprised 67 (15.7%) individuals with zero stigmatized identities, 138 (32.2%) with one stigmatized identity, 190 (44.4%) with two stigmatized identities, and 33 (7.7%) with three stigmatized identities. See Table S4 for more specific identity group breakdown.

Procedure & measures

At Time 1, as part of the large prescreen survey in the beginning of Fall 2022, participants provided their demographic information (including race/ethnicity, gender, and sexual orientation) and completed a LTGP scale similar to Studies 1–2 but with only 2 items (“When someone is prejudiced against one group of people, they are prejudiced against many other groups of people”; “When someone holds hateful beliefs about one group of people, they often hold hateful beliefs about other groups of people”; $r = .73$).

At Time 2 (approximately 9–12 weeks after Time 1; $M = 67.09$ days, $SD = 6.36$), participants completed an online survey with the same measures of perceived similar experiences ($\alpha = .67$) and support for intraminority coalitions ($\alpha = .83$) as in Studies 1–2. Then, participants reported the extent which they supported three policies that benefit low-SES people (e.g., “Increase minimum wages across all states”; “Boost efforts to bridge income differences”; “Increase tax for wealthy people and use that to improve the living conditions of poor Americans”; $\alpha = .76$) using a scale from 1 (*Not at all*) to 7 (*Very much*).

Results

Extending Studies 1–2, simple linear regressions of number of stigmatized identities (Time 1) on various outcomes indicated that people with a greater number of stigmatized identities (Time 1) endorsed LTGP more strongly (Time 1), showed greater support for intraminority coalitions (Time 2), and supported pro-low-SES policies more strongly (Time 2; controlling for participant SES). Unlike in Study 1b and Study 2, number of stigmatized identities (Time 1) did not predict perceived similar experiences (Time 2). See Table 3 for detailed statistics.

Due to (1) the low number of those with three stigmatized identities ($n = 33$), (2) the similar pattern of effects shown among participants with three and two stigmatized identities in Study 2, and (3) the central goal of the present research being investigating the differences between multiply stigmatized individuals and other groups, we collapsed participants with two and three stigmatized identities as one group: multiply stigmatized individuals ($n = 211$) for the one-way ANOVAs below.

LTGP endorsement

The 3-cell one-way ANOVA (multiply stigmatized (2 or 3), singly stigmatized, non-stigmatized) on LTGP endorsement was statistically significant, $F(2, 425) = 4.85, p = .008, \eta_p^2 = .02$. LSD post-hoc tests revealed that, as predicted and consistent with Study 2, multiply stigmatized people endorsed LTGP more strongly than both singly stigmatized ($SE = .09, p = .049, 95\% \text{ CI } [0.01, 0.35]$) and non-stigmatized people ($SE = .11, p = .004, 95\% \text{ CI } [0.10, 0.55]$), between which there was no significant difference ($SE = .12, p = .208, 95\% \text{ CI } [-0.39, 0.09]$). See Table 2 for descriptive statistics by number of stigmatized identities.

Perceived similar experiences

Unlike Study 2, the one-way ANOVA on perceived similarity was not statistically significant, $F(2, 425) = 0.64, p = .528, \eta_p^2 = .003$. There were no significant differences between multiply stigmatized people, singly stigmatized people, and non-stigmatized people.

Support for intraminority coalitions

However, replicating Study 2, the one-way ANOVA on support for intraminority coalitions was significant, $F(2, 425) = 5.91, p = .003, \eta_p^2 = .03$. LSD post-hoc tests showed that, mirroring the patterns on LTGP endorsement, multiply stigmatized people supported intraminority coalitions more strongly than both singly stigmatized ($SE = .10, p = .002, 95\% \text{ CI } [0.12, 0.49]$) and non-stigmatized people ($SE = .12, p = .030, 95\% \text{ CI } [0.02, 0.51]$), between which there was no significant difference ($SE = .13, p = .772, 95\% \text{ CI } [-0.22, 0.30]$).

Policy support for low-SES people

The ANCOVA on support for policies that benefit low-SES people, controlling for participant SES, was statistically significant, $F(4, 423) = 13.95, p < .001, \eta_p^2 = .08$. As anticipated, multiply stigmatized people showed greater support for such policies than both singly- and non-stigmatized; $SE = .18, p < .001, 95\% \text{ CI } [0.71, 1.41]$; $SE = .13, p < .001, 95\% \text{ CI } [0.19, 0.72]$, respectively. Singly stigmatized individuals also indicated greater support than did non-stigmatized individuals, $SE = .19, p < .001, 95\% \text{ CI } [0.24, 0.97]$.

Mediation analyses

We employed the same serial mediation model in PROCESS Macro as in Studies 1–2 to evaluate the indirect effects of number of stigmatized identities on our two coalitional outcomes (intraminority coalition and policy support for low-SES people) via LTGP endorsement and perceived similar experiences. Replicating Studies 1–2, a greater number of stigmatized identities (Time 1) predicted greater LTGP endorsement (T1; $b = 0.14, SE = .05, p = .002, 95\% \text{ CI } [0.05, 0.24]$). This heightened endorsement of LTGP in turn predicted greater perceived similarities between oppressed groups (Time 2; $b = 0.14, SE = .05, p = .009, 95\% \text{ CI } [0.03, 0.25]$), which ultimately predicted greater support for intraminority coalitions (Time 2; $b = 0.49, SE = .04, p < .001, 95\% \text{ CI } [0.41, 0.56]$); note that, as in Studies 1–2, LTGP endorsement also positively predicted intraminority coalitions directly ($b =$

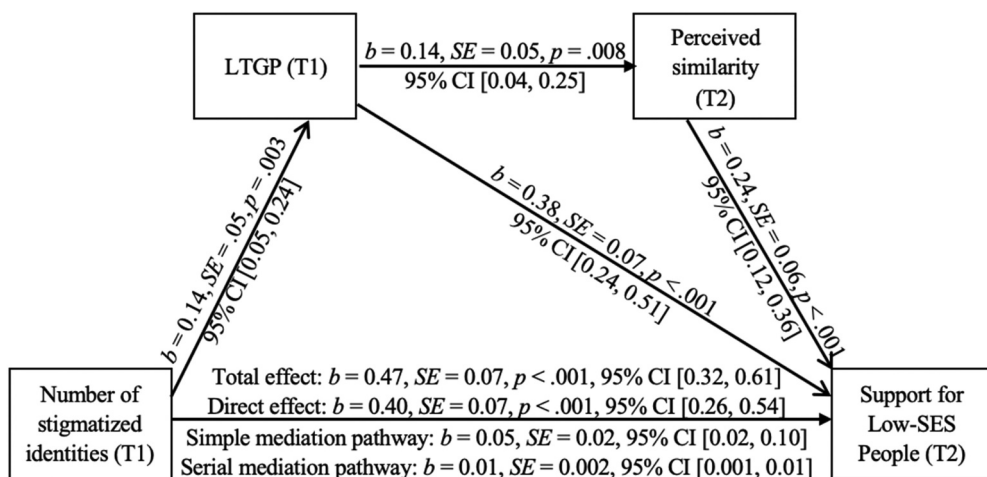


Figure 4. Regression coefficients for the serial mediation model predicting support for low-SES people, study 3.

0.16, $SE = .04, p < .001, 95\% CI [0.07, 0.25]$). Taken together, the indirect effect of number of stigmatized identities on support for intraminority coalitions serially via LTGP and perceived similarity was statistically significant, $b = 0.01, SE = .01, 95\% CI [0.001, 0.02]$. The indirect effect via only LTGP endorsement was also significant, $b = 0.02, SE = .01, 95\% CI [0.01, 0.04]$. Finally, the direct effect of number of stigmatized identities on support for intraminority coalitions remained significant, $b = 0.12, SE = .04, p = .004, 95\% CI [0.04, 0.21]$.

Results also supported the hypothesized serial mediation model with policy support for low-SES people as the outcome. Specifically, as shown in Figure 4, controlling for participant SES,⁹ those with a greater number of stigmatized identities endorsed LTGP more strongly (Time 1), which predicted greater perceived similar experiences across different oppressed groups (Time 2) and ultimately stronger support for policies that benefit low-SES people (Time 2). Greater endorsement of LTGP at Time 1 also predicted policy support at Time 2, rendering the indirect effect of number of stigmatized identities on support for low-SES people via LTGP endorsement statistically significant. Last, the direct effect of stigmatized identities was also significant, that is, after accounting for the hypothesized mediators and participant SES, those with a greater number of stigmatized identities showed stronger support for pro-low-SES policies.

Discussion

Study 3 replicated Studies 1–2 using longitudinal data, such that those with a greater number of stigmatized identities are more likely to deem prejudices as co-occurring at Time 1, and therefore perceived greater similar experiences between oppressed groups and ultimately supported and personally engaged in intraminority coalitions more at Time 2 (an average of 67 days after Time 1), as shown in their positive attitudes toward the phenomenon itself and their concrete support for policies that uplift a marginalized group different than their own (low-SES people). Notably, Study 3 showed evidence

that number of stigmatized identities and LTGP endorsement can predict allyship for a specific oppressed group that people do not necessarily identify with, going beyond the measure of general support for intraminority coalitions as a phenomenon in Studies 1–2.

We acknowledge that our measure of policy support for low-SES people was not without flaws as participants unavoidably differed on SES. However, it is important to integrate social class into this investigation as it frequently intersects with race, gender, and sexual orientation in understanding marginalization and activism (Crenshaw, 1989; Tine & Gotlieb, 2013).¹⁰ By controlling for participant SES in our analyses and not counting SES in our measure of stigmatized identities, we believe that our results provided strong evidence showing that number of stigmatized identities and LTGP endorsement contribute to stronger allied behavior with fellow oppressed groups. Finally, while the number of queer women and gender-diverse individuals of color in Study 3 was too low to be treated as a separate group, results indeed supported our hypothesis that multiply stigmatized people endorsed LTGP and intraminority allyship more strongly than did singly- and non-stigmatized people.

General discussion

While past research on intraminority relationships has examined when marginalized groups support coalitions, perceive similarities in their experiences, or recognize prejudices as co-occurring, this research has largely considered intraminority relations among people conceptualized as belonging to only one marginalized group (e.g., Chaney & Forbes, 2023; Cortland et al., 2017; Craig & Richeson, 2014). Yet, research on intersectionality has demonstrated that multiply stigmatized individuals may be uniquely aware of the intersections of oppression and supportive of coalitions (e.g., Remedios & Snyder, 2018; Schmid et al., 2009). The present research sought to integrate research on intersectionality and intraminority relationships to understand how holding multiple stigmatized identities might shape perceptions of prejudice as well as support for and engagement in intraminority allyship.

Across four diverse samples ($N = 7,121$), the present research demonstrated that those with a greater number of stigmatized identities more strongly believed that prejudices co-occur, perceived more similarities across marginalized groups, and thus demonstrated greater intraminority allyship, demonstrated via attitudes (Studies 1–3), donation behavior (Study 2), and policy support for a fellow marginalized group (low-SES people). Critically, endorsing LTGP led to greater intraminority allyship (general support and personal engagement) both directly and indirectly via greater perceptions of similar experiences among different stigmatized groups. In Study 2, however, those with a greater number of stigmatized identities only donated more to an intersectional organization called *Twainbow* if they endorsed LTGP more strongly and therefore discerned greater similar experiences among stigmatized groups.

Importantly, the current research conducted both cross-sectional and longitudinal designs to test the proposed mechanisms, hence offering some support for the directionality from stigmatized identities and LTGP endorsement to perceived similarity and intraminority coalitions (see also Chaney & Forbes, 2023). Finally, note that the effects of number of stigmatized identities on these outcomes, as shown in a series of targeted post-hoc analyses of the Study 1a sample (the only sample diverse enough for such

analyses), were *not* simply due to holding a specific marginalized identity, but rather due to the stigmatized nature of their identities in general, or particularly, the number of stigmatized identities being held by a person (see “Testing Specific Stigmatized Identities as Alternative Explanations” in Supplement).

Critically, Studies 2–3 compared people holding varied numbers of stigmatized identities and found that those with multiple stigmatized identities (two or three) reported stronger beliefs in LTGP than did those with zero or one stigmatized identities. The LTGP endorsement seemed distinctively strong among queer women and gender-diverse individuals of color – those with three stigmatized identities (Study 2). Those with one versus zero stigmatized identities generally did not significantly differ in LTGP endorsement. These findings demonstrate how holding multiple stigmatized identities (i.e., two or more) afforded unique insight into the intersection of prejudices and experiences among marginalized groups, resulting in support for coalitions. As such, the present research demonstrates the importance for intraminority research to adopt an intersectional lens to account for the ideologies stemming from experiences of multiple prejudices.

Given the patterns on LTGP endorsement, it is unsurprising that multiply stigmatized people showed greater support for and personal engagement in intraminority coalitions than others. Singly versus non-stigmatized individuals, again, did not differ; the only exception was that singly stigmatized people showed greater support for pro-low-SES policies than did non-stigmatized people; however, again, singly stigmatized people showed less support than did multiply stigmatized people (Study 3). These findings provide a nuanced understanding of the type of allyship that people of different numbers of stigmatized identities support and personally engage in. By going beyond past research (Chaney & Forbes, 2023) to measure actual personal allied behavior with a specific marginalized group that one does not necessarily identify with (rather than general behavioral support for intraminority coalitions), Study 3 helps shed light on the different allyship tendencies between multiply versus singly stigmatized people. Given that past research has demonstrated that singly stigmatized individuals (e.g., straight White women) only support coalitions that include themselves (but not coalitions in which they are not relevant; Chaney & Forbes, 2023), we propose that while multiply stigmatized individuals appear to be willing to ally with other marginalized groups, including those that are not personally relevant, singly stigmatized individuals may be more prone to form allied relationships when they or their ingroup could personally benefit from such an allyship. Future research examining ways to make precarious allyship among singly stigmatized groups more sustainable will be worthwhile.

Lay theory of generalized prejudice

The present study is the first to investigate an antecedent of LTGP endorsement: number of stigmatized identities. Holding multiple stigmatized identities exerted a notable impact on endorsement of the belief that prejudices co-occur. The unique intersecting marginalized identities among multiply stigmatized individuals may expose them to various types of discrimination that may facilitate questioning the prejudiced motive behind each discriminatory act (e.g., whether it is due to their race/gender/sexual identity, a combination of these factors, or to simply being a queer woman of color; Collins, 1991; Remedios & Snyder, 2015a; Remedios et al., 2012). That is, experiencing the unique

intersectional stereotypes associated with being, for example, a queer woman of color may expose the overlapping nature of sexism, racism, and heterosexism. At the same time, constantly defying the intersecting norms of maleness, Whiteness, and heterosexuality in the U.S. society (Collins, 1991), multiply stigmatized people may be more vigilant to the oppressed experiences of other marginalized groups, which may afford greater insights into the commonality of perpetrators and experiences of discrimination. Multiply stigmatized people may also have this greater awareness of diverse oppressed experiences because they are more likely to have a variety of marginalized people (especially those multiply stigmatized) in their social circles. Together, these factors may work to help multiply stigmatized people recognize the generalized nature of prejudices. Despite a clear relationship between number of stigmatized identities and LTGP endorsement in the present research, the above-mentioned processes were not directly tested; hence, future research that goes beyond the present simple measure of adding up stigmatized identities and takes into account the discussed mechanisms is required to understand causes of strong LTGP endorsement.

Notably, the present research suggests that those with one and zero stigmatized identities did not significantly differ in LTGP endorsement, and were both *less* sensitive to the co-occurring nature of prejudices and *less* supportive of intraminority coalition than multiply stigmatized people. This limited recognition of the generalized nature of prejudices may be because singly stigmatized individuals focus on the identity dimension on which they are personally stigmatized and give less attention to the oppressed experiences of other stigmatized groups (Craig et al., 2012). Indeed, people who hold a privileged identity perceive less discrimination against those marginalized on that identity dimension than do the marginalized groups (e.g., Horowitz et al., 2019, 2020; Research Center, 2013). Relatedly, the support that singly stigmatized people (e.g., predominantly straight White women, people of color) extend to other marginalized groups is inconsistent because it relies on external factors, such as reminders of common disadvantage (e.g., Cortland et al., 2017; Craig & Richeson, 2012, 2014). As a result, those with one or zero stigmatized identities show limited support for LTGP and hence are not motivated to ally with other marginalized groups.

While past research contended that LTGP facilitated intraminority coalitions because of awareness of shared perpetrators (Chaney & Forbes, 2023), other research contended that intraminority coalitions were facilitated by perceived similarity in experiences of marginalized groups (e.g., Cortland et al., 2017). The present research examined, for the first time, beliefs about perpetrators (LTGP) and beliefs about marginalized groups (perceived similarity) as two constructs that predict intraminority coalitions in a serial pathway. That is, while number of stigmatized identities did not predict perceived similarity of experiences, LTGP did. These findings suggest that awareness of shared perpetrators may be crucial to facilitating awareness of shared experiences; the causality, however, needs to be investigated experimentally in the future. Regardless, the present findings elucidate the implications of believing in the generalized nature of prejudices and emphasize its critical role in shaping beliefs and behaviors pertinent to social justice issues. Translating these findings to real-world activism, educating people about the co-occurring nature of prejudices and the struggle overlaps between different oppressed groups could be a promising first step to encourage intraminority allyship.

Our results, consistent with past research (Chaney & Forbes, 2023), portray singly stigmatized individuals as precarious allies for marginalized groups with whom they do not personally identify with. That said, singly and non-stigmatized individuals have the potential to be effective allies when trained to detect prejudice and act (e.g., Hennes et al., 2018; Pietri et al., 2017). Indeed, people with zero or one stigmatized identity across race, gender, and sexual orientation comprise a significant portion of the U.S. population, and thus identifying strategies to promote their recognition of the co-occurrence of prejudices (e.g., classes on intersectionality and critical race theory) may be critical for advancing allyship. On the contrary, multiply stigmatized individuals may be ideal actors to connect various social justice movements (e.g., struggles against racism, sexism, homophobia), which is a prerequisite for radical activism that ensures liberation for all oppressed peoples. The present findings demonstrating the discrepancies between singly (or non) versus multiply stigmatized people highlight the importance of identifying mechanisms connecting stigmatized identities and LTGP endorsement. Indeed, future work that identifies more concretely why multiply stigmatized people endorse LTGP more strongly than others will be pivotal in designing interventions to increase awareness of the intersecting nature of prejudice and coalitional efforts among all individuals regardless of their identities.

Intersectionality

By simultaneously considering different social identities to relate number of stigmatized identities to beliefs about prejudices and intraminority coalition, the present research demonstrates the instrumental role of intersectionality in understanding the nuances in the lived experiences of different stigmatized populations. Theoretically, the current research offers a novel mechanism between multiple stigmatized identities and intraminority coalition: LTGP and perceived similarity. More broadly, the current research makes a novel contribution by advancing conversations about the costs (Hollis, 2018; Seng et al., 2012; Tine & Gotlieb, 2013) and benefits (Brewer & Pierce, 2005; Roccas et al., 2008) of holding multiple stigmatized identities into the context of activism. While past studies have studied dually and/or singly stigmatized people and suggested that stigmatized identities may be linked with activism (Swank & Fahs, 2013; White, 2006), the present research demonstrates for the first time the support for this link using specifically intraminority coalition and uniquely with those with three stigmatized identities (queer women and gender-diverse individuals of color). Across four samples, multiply stigmatized people were particularly aware of the co-occurrence of prejudices and strongly supportive of intraminority coalitions. These findings suggest that intersecting systems of oppression do more than push people down and create health issues (e.g., Hollis, 2018; Seng et al., 2012; Remedios & Snyder, 2018); they endow multiply stigmatized people with the power to stand up against social injustices. The present findings highlight the importance of a strength-based approach when examining the experiences of multiply minoritized persons, which is particularly necessary given the overwhelming research on this topic has taken a deficit-focused approach, focusing on negative experiences such as discrimination and invisibilization.

In the current research, an emphasis was placed on the number of stigmatized identities. We used a crude measure of stigmatization that is commonly used in

intersectionality work (e.g., Remedios & Snyder, 2018; Seng et al., 2012) to argue that the extent to which people are stigmatized has an impact on their beliefs about prejudice and intraminority coalitions. Although this method provides a clean, quantitative way to conceptualize stigmatization, we acknowledge certain limitations of this conceptualization. The present study cannot determine whether the observed effects of holding multiple stigmatized identities were due to additive effects or intersectional effects (Bowleg, 2008); future qualitative work on those with two versus one stigmatized identities can address this question. Similarly, questions about the potential differential weight of each social identity in varying contexts need further investigation. In addition, this method assumes homogeneity among people with the same number of stigmatized identities. For example, for queer men of color and White queer women (i.e., those with two stigmatized identities), different racial and gender identities can have a distinctive impact on various outcomes (e.g., Swank & Fahs, 2013; Velez et al., 2017), which may include beliefs about prejudice and coalition.

Relatedly, we also conceptualize stigmatization based on three identity dimensions that are commonly examined in intersectional research: race/ethnicity, gender, and sexual orientation. However, to fully embrace intersectionality, other dimensions such as social class, age, and disability should be integrated in future research (Corrington et al., 2020; Petsko et al., 2022; Remedios and Snyder, 2015b). Finally, while Study 3 provided some directional support for the roles of number of stigmatized identities and LTGP endorsement on intraminority coalitions, the current research did not rule out the idea that intraminority coalitions nurture LTGP endorsement as well. Future research should evaluate this reverse relationship and use experimental designs to examine the impact of stigmatized identities on LTGP and intraminority coalitions. Though it is not feasible to manipulate number of stigmatized identities, researchers can direct multiply stigmatized people's focus on one or multiple stigmatized identities and evaluate its downstream consequences.

Conclusion

Going beyond the consideration of only one stigmatized identity in previous work (Chaney & Forbes, 2023; Craig & Richeson, 2012, 2014), the present research for the first time integrates intersectionality into research on intraminority relations to advance the understandings of what predicts intraminority coalitions. Across four studies, multiply stigmatized people are especially inclined to recognize the intersecting nature and shared experiences of prejudice and therefore support coalitions across oppressed groups and personally ally with a marginalized group they do not necessarily identify with; further investigation of such individuals would thus inform coalition-building efforts on the ground.

Notes

1. According to a pilot study conducted on data from the 2021 General Social Survey (GSS; Smith et al., 2021) – a nationally representative dataset, people with a greater number of stigmatized identities (based on the same three identity dimensions in the manuscript) demonstrated greater support for policies that benefit low-SES people, supporting the

hypothesis that people with a greater number of stigmatized identities are more likely to engage in intraminority coalitions (see Supplement for full report).

2. Age was asked in a multiple choice format in which participants could indicate exact ages for 18–27 or choose the item “28 or older.”
3. Also included were SDO scale (Ho et al., 2015) and participation in Black and women’s rights organizations. Results reported in the Supplement.
4. An alternative model with LTGP and similarity in parallel showed that, consistent with the main findings, number of stigmatized identities was positively linked with only LTGP endorsement, but not perceived similarity (though both mediators were linked with support for intraminority coalitions; see Supplement for full report).
5. See Supplement for analyses ruling out specific stigmatized identities as confounds.
6. Post-hoc ANOVAs indicated that with the exception of the difference in LTGP between those with zero and one stigmatized identities, each increase in number of stigmatized identities was associated with a significant increase in LTGP endorsement and support for intraminority coalitions (see Supplement for full analyses).
7. The measure was responded on a *Strongly Disagree-Strong Agree* instead of *Very Untrue-Very True* scale.
8. None of the participants were on the autism spectrum.
9. The model was robust without participant SES as the covariate.
10. Recall that our pilot study also showed that those with greater stigmatized identities showed greater support for pro-low-SES-people policies.

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