RESEARCH ARTICLE

External discrimination and internalized heterosexism as factors associated with intimate partner violence in sex-generic diversity in Mexico and Colombia

Discriminación externa y heterosexismo internalizado como factores asociados a la violencia de pareja en la diversidad sexogenérica en México y Colombia

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Abstract. This research seeks to draw attention to intimate partner violence in sexual diversity in Latin America, specifically in Mexico and Colombia. Its objectives are to examine the extent of this situation, review the experiences of external discrimination and internalized heterosexism, and explore their association with the risks of intimate partner violence for diverse sexual diversity groups. To this end, an online survey was developed in Mexico and Colombia (n=824), collecting data on various types of violence and associated factors. Disparities in the prevalence of violence and discrimination according to sexual orientation and gender identity were identified. While the relevance of internalized heterosexism and external discrimination as risk factors for intimate partner violence is corroborated, significant

Resumen. Esta investigación busca atraer atención hacia la violencia de pareja en la diversidad sexual en América Latina, específicamente en México y Colombia. Sus objetivos son examinar la extensión de esta situación, revisar las experiencias de discriminación externa y heterosexismo internalizado, y explorar su asociación con los riesgos de violencia de pareja para diversos grupos de la diversidad sexual. Para ello se desarrolló una encuesta tipo sondeo en línea en México y Colombia (n=824), recopilando datos sobre diversos tipos de violencia y factores asociados. Se identifican disparidades en la prevalencia de violencia y discriminación según la orientación sexual e identidad de género. Y si bien se corrobora la relevancia del heterosexismo internalizado y la discriminación externa como factores de riesgo de la violencia de

associations are also found with other variables, such as experiences of violence during childhood. Limitations of the study are noted and the importance of understanding the specific experiences of sexual diversity in order to effectively address intimate partner violence in the region is highlighted.

Keywords: intimate partner violence, LGBTIQ+, discrimination, internalized heterosexism, risk factors for intimate partner violence.

pareja, también se constatan asociaciones significativas con otras variables, como las experiencias de violencia durante la infancia. Se señalan limitaciones en el estudio y se destaca la importancia de comprender las experiencias específicas de la diversidad sexual para abordar efectivamente la violencia de pareja en la región.

Palabras clave: violencias de pareja, LGBTIQ+, discriminación, heterosexismo internalizado, factores de riesgo para violencia de pareja.

Introduction

Intimate partner violence is a widespread social problem in Latin America. It has profound consequences for the lives of those who experience it, including mental, emotional and physical health problems, traumas and ruptures in family relationships, loss of social support, job instability and financial difficulties. However, little has been done in the region to raise awareness of this type of violence or to address it when it occurs in gender and sexually diverse (GSD) relationships.¹

This research tackles the prevalent neglect of the problem of violence in GSD couples in the Latin American research agenda, by approaching the characteristics, dimensions, and factors associated with this type of violence in two Latin American countries: Mexico and Colombia. Both countries stand out in the region for their relatively abundant data on intimate partner violence or heterosexual intimate partner violence framed within high levels of social violence, but both lack research and literature on intimate partner violence in the GSD population. This situation prompted four Mexican and Colombian researchers to propose a research project focusing on these countries, the results of which are contained in this paper.

The fundamental objectives of this work are threefold: 1) to examine the frequency of intimate partner violence among different GSD groups; 2) to estimate the frequency of experiences of external discrimination and internalized homophobia among survey participants, and to contrast their magnitude across GSD groups; and 3) to explore the role that experiences of external discrimination and internalized homopho-

¹ We use this term by appealing to the notion of diversity to start, in theoretical and methodological terms, from a broad position that thinks of couples and the people who make them up from fluid spheres (see Núñez, 2011).

bia play in exacerbating the risks of experiencing different types of intimate partner violence for different GSD groups.

Background

Until now, very little research has been conducted into the problem of violence in same-sex relationships, or in within relationships in which one or both partners are GSD. This shows a gap in the inclusion of this population within the research agenda of gender studies on sexuality and health, in addition to a lack of understanding and attention to the problem of intimate partner violence between GSD individuals—a situation that is believed to be widespread and carries serious emotional, mental, and physical health consequences for those affected.

To date, studies on intimate partner violence and sexual diversity are more abundant in developed countries and have essentially focused on same-sex couples; they suggest an equal or higher prevalence of intimate violence in GSD couples than in heterosexual couples (Bermea et al., 2018; Browne, 2007; Donovan et al., 2006; Gimenez, 2010; Langenderfer-Magruder et al., 2016; Reuter et al., 2017; Turell et al., 2018). In the Latin American region, studies on violence and sexual diversity are mainly limited to gays and lesbians; to our knowledge, Chile and Puerto Rico are the only countries where studies are not focused exclusively on same-sex couples (Díaz & Núñez, 2015; Gómez Ojeda et al., 2017; Reyes Mena et al., 2005).

External discrimination and internalized homophobia as experiences that mark the lives of the LGBTIQ+ population

General differences between people (such as gender, age, race and ethnicity, nationality, socioeconomic status, educational level) have historically led to actions and reactions in different social spheres that foster inequality among citizens. This results in a differentiated treatment of people, or a group of people, with expressions that devalue and inferiorize them due to the color of their skin, sex, sexuality, etc. (Ferreira Costa, 2021).

In most (if not all) contemporary societies, GSD individuals suffer repeated and constant discrimination throughout their lives, with experiences ranging from microaggressions to more profound and traumatizing experiences (Barrientos et al., 2010; Casey et al., 2019; DeSouza et al., 2017). This social discrimination derives from structural factors that perpetuate a heterocentric social model. In turn, this paradigm is the product of the interplay of androcentrism (a social system that places the male figure

at its the center), of hegemonic gender norms that validate only biological female-female / biological male-male exclusionary generic positions (Connell, 2005), and of heteronormativity, which validates a supposed correspondence and complementarity between sex-gender-desire (Berlant and Warner, 2000; Butler, 2007). Thus, our societies' prevailing heterosexism has been defined as "the ideological system that denies, denigrates, and stigmatizes any non-heterosexual form of behavior, identity, relationship, or community" (Herek, 1990, cited by Igartua et al., 2009).

Individuals with multiple gender, racial, and/or sexual identities (e.g., young, racialized women) may also face additional minority stressors and suffer worse health outcomes compared to those experienced by individuals with a single minority status (Crawford, Allison, Zamboni, & Soto, 2002; Meyer, Dietrich, & Schwartz, 2008).

These social structures impact people belonging to stigmatized groups (such as GSD), based on prejudice and discrimination that lead them to experience higher levels of stress than those suffered by the general population, in a phenomenon known as minority stress (Meyer, 2003). This condition is characterized as unique (particular), chronic, and socially based (Meyer, 2003), and has a profound effect on the lives of these people, affecting their mental and physical health (Bostwick et al., 2014; Meyer, 2003; Reuter et al., 2017), their ability to form healthy and stable interpersonal relationships (Huebner et al., 2004), and their general well-being (Mayer et al., 2014).

It is necessary to understand that anti-LGBTQ+ discrimination is a mechanism for imposing gender norms. Studies reveal that the way in which people embody masculinity or femininity plays a fundamental role in the discrimination experienced by cis and transgender people. Lehavot and Lambert (2007) note that those who defy both sexual orientation and gender role expectations are more likely to experience prejudice. A survey of bisexuals, lesbians, and homosexual men found that 58% of them had been verbally insulted and 16% had been subjected to physical aggression because of their sexual orientation (Ortiz-Hernández, 2005). Another study conducted in Mexico, with 1,824 participants of the Sexual Diversity Pride March in 2015, found that 88.21% of respondents had experienced discrimination in at least some context (Lozano-Verduzco, 2017). Finally, the National Survey on Discrimination (Enadis, 2022) showed that, 37.3% of GSD people living in Mexico referred to an experience of discrimination in the preceding twelve months, affecting more GSD women (44.6%) than men (30.2%) (INEGI, 2022a).

GSD individuals may address themselves or others with the negative evaluations that predominate in our environments, which may affect the acceptance of their own identities (Hoy-Ellis, 2023). Thus, linked to experiences of external discrimination, there is also frequently the adoption of negative social attitudes towards people with non-heteronormative gender identities and sexual orientations, which has been called internalized homophobia or, alternatively, internalized homonegativity or internalized anti-gay stigma (Herek, 2004).

Internalized homonegativity is not simply a personal response dictated by the characteristics of the people who experience it, or by irrational fears, but responds to broader social factors and expressions of social stigma and prejudice (Berg et al., 2016); it is, therefore, an experience clearly embedded in a social context (Russell and Bohan, 2006). It is important to note that, although the term originally coined by George Weinberg in 1972 is internalized homophobia, in the framework of this paper we use it more broadly, and refer to internalized heterosexism), understanding that not only homosexuals (or lesbians) internalize these negative attitudes towards gender identities or sexual orientations that are detached from heteronormativity.

Moreover, the structural dimensions that oppress sexually diverse people manifest themselves in intersectional ways (Viveros, 2016), and there are individuals who suffer particularly from inequality, such as non-heterosexual, young, and racialized women. Thus, LGBTIQ+ individuals face additional minority stressors and thus experience worse health outcomes compared to those experienced by individuals with a single minority status (Crawford, Allison, Zamboni, & Soto, 2002; Meyer, Dietrich, & Schwartz, 2008).

Both experiences of externalized discrimination and internalized heterosexism have been associated with vulnerabilities and risks to the physical and emotional health of those who experience them (Berg et al., 2016; Martinez et al., 2022; Ortiz-Hernández, 2005; Reisner et al., 2015; Russell et al., 2011). Several studies have documented the higher prevalence of suicidal thoughts among people from the LGBTQ+ community, reporting rates of suicidal ideation and attempts up to seven times higher among these youth compared to heterosexuals (Diamond, 2013, cited by Calvo, 2018). Additionally, significant correlations have been evidenced between internalized heterosexism and symptoms of depression, anxiety (Iguartua et al., 2003; Morrison, 2011, cited by Martínez et al., 2022) and in general subjective distress (Morrison, 2011). The study by Martínez et al. (2022), with a sample of 669 people in Chile self-identified as lesbian, gay, or bisexual, corroborated the association between levels of internalization of sexual stigma with the experience of subjective distress, depression, anxiety and suicidal thoughts and attempts.

In Mexico, a study conducted with 506 lesbian, gay, and bisexual people identified that 40% of them presented some form of internalized heterosexism, that the mean value of the index in this regard was higher among men than among women, and that those with the highest levels presented a higher risk of suicidal ideation, suicide attempts, alcoholism, and mental disorders (Ortiz-Hernández, 2005). Another Mexican study, with a non-probabilistic sample of 1,824 gay men in Mexico City, identified significant differences in community connectedness, depression, alcoholism and sexual risk behaviors depending on the level (low, medium, high) of gay men's internalized heterosexism (Lozano-Verduzco, 2017). Recently, a survey conducted by the National Institute of Statistics and Geography (INEGI) in Mexico, the National Survey on Sexual

and Gender Diversity (Endiseg 2021), estimated that, of those who have had suicidal thoughts, 26% were LGBTI+, compared to a rate of 7.9% of people with normative sexual orientation and gender identity (SOGI); likewise, 14.2% of the LGBTI+ population attempted suicide (versus 4.2% of those with normative SOGI) (INEGI, 2022b).

In the case of Colombia, some research also finds this greater vulnerability among sexually diverse people associated with internalized homophobia. A study conducted with a non-probabilistic sample of 175 young males self-identified as homosexual found that suicidal ideation was twice as high for those who had a high score of internalized heterosexism (Pineda-Roa, 2019).

Previous findings on the prevalence of violence in diverse couples around the world

We propose this study based on evidence indicating that intimate partner violence reaches alarming levels in the two countries in question, Colombia and Mexico (Castro, 2019; Frías, 2017; Profamilia & Ministry of Health and Social Protection, 2017). Young GSD people may also face a particularly high risk of intimate partner violence, insofar as they not only confront specific vulnerabilities due to their young age but also discrimination, low self-esteem, internalized homophobia, stigma, minority stress, and early sexual debut (Hendricks & Testa, 2012; Lewis et al., 2017; Meyer, 2003; White Hughto et al., 2015).

Developed countries have a higher number of studies on intimate partner violence and sexual diversity, but research has also been undertaken in Latin America. They mainly refer to same-sex couples, and suggest an equal or higher prevalence of GSD intimate partner violence than in heterosexual couples (Bermea et al., 2018; Browne, 2007; Donovan et al., 2006; Gimenez, 2010; Langenderfer-Magruder et al., 2016; Reuter et al., 2017; Turell et al., 2018).

In a probability sample of Californian residents, Goldberg and Meyer (2013) found that sexual minorities, particularly bisexual women and gay men, had higher rates of intimate partner violence compared to heterosexual people. Also in the United States, based on probability samples from the National Intimate Partner and Sexual Violence Survey (NISVS) between 2010 and 2012, bisexual women were found to experience more harassment by any perpetrator, as well as intimate partner violence and its spill-over effects, than heterosexual women. Among gay men, although no statistically significant differences were found in the prevalence of intimate partner violence, they reported experiencing greater impacts from such violence compared to heterosexual men (Chen et al., 2020).

Moreover, Anderson (2020) highlighted how prejudice and discrimination faced by transgender people may contribute to higher levels of intimate partner violence

among this population than in LGBT+ cisgender people, based on a racially diverse national sample of 138 cisgender and transgender LGBTQ Americans.

In Latin America, there is little empirical evidence on intimate partner violence in the LGBTIQ+ population, and most of it is based on small samples. In Puerto Rico, Reyes Mena et al. (2005), using a sample of 201 LGBT persons, identified a higher occurrence of physical and psychological violence in lesbian couples, while sexual abuse is more frequent in gay couples. Based on a survey applied to 118 people from the LGBTI community in Santiago, Chile, Díaz and Núñez (2015) observed that 47% of the interviewees had experienced intimate partner violence. However, another study developed in four cities in Chile, with a sample of 268 gay men and 199 lesbian women, found much lower prevalences, with 14.9% of gay men and 20.1% of lesbian women reporting having received intimate partner violence. Additionally, the percentage of those who admitted to having perpetrated such violence was 19% for both groups, and significant differences were identified in reports of psychological violence, which was more prevalent among gay men than among lesbian women study participants (Gómez Ojeda et al., 2017).

Ortega (2014) conducted research based on a survey of 3,172 adult homosexual and bisexual men, of whom 1,475 resided in Spain (46%) and 1,697 in Argentina (54%). The prevalence of victimization in the different expressions of intimate partner violence was always higher in the sample of residents in Argentina than in Spain: psychological violence, 76.87% versus 70%; physical violence, 35.87% versus 26.78%; and sexual violence, 51.23% versus 43.2%, respectively.

In the case of Mexico, based on a small sample of 42 LGBT people in the municipality of San Blas, in Nayarit, it was found that 98% of the participants reported having experienced partner violence and 90% having perpetrated it (López de Loera, 2019). Another study, based on a sample of 210 HIV-positive gay men in Mexico City, found that 83.8% had been subjected to some violent behavior from their partner and 74.3% had perpetrated it; notably, only 29.5% perceived that they had been victims of partner violence, while 22% thought that their partner was the victim of violence (Alderete-Aguilar et al., 2021).

In Colombia, few researchers have addressed this issue, with the exception of Redondo-Pacheco et al. (2021) who carried out a study with 132 young homosexual university students (93 men and 39 women) from the city of Bucaramanga. These authors estimated that 91.7% had experienced some form of intimate partner violence, with psychological and emotional violence being the most predominant. They also found higher percentages in all forms of aggression for gay men, except for psychological violence, which was higher among lesbian women.

Existing evidence on the association between internalized homophobia, external discrimination, and intimate partner violence

Internalized homophobia can shape the conceptualization of an experience of aggression (Finneran and Stephenson, 2014; Jackson et al., 2017). Some authors have posited that this may favor the justification of the aggression received as a form of punishment; some people even consider themselves deserving of aggression or are unable to recognize sexual victimization as aggression (Binion & Gray, 2020).

Carvalho (2006) found that, based on a sample of 581 gay men and lesbian women in the United States, those who experienced internalized homophobia were more likely to report victimization and perpetration of intimate partner violence. However, in subsequent analyses with this sample of lesbian women and gay men, and in clear contradiction with the researchers' expectations, no evidence was found of an association between the internalized homophobia of those who participated and the experience of intimate partner violence, which the authors hypothesize may be due to low internalized homophobia among the sample members (Carvalho et al., 2011).

Another study conducted with a sample of 2,368 gay men, contacted online via Facebook in six countries (United States, Canada, Australia, United Kingdom, South Africa, and Brazil), found that homophobia discrimination, internalized homophobia, and heteronormativity significantly increased the odds of reporting experiences of intimate partner violence in those countries (Finneran et al., 2012).

In their research on minority stress and intimate partner violence among gay and bisexual men, Finneran and Stephenson (2014) found that racism, internalized homophobia, and homophobic discrimination were significantly associated with intimate partner sexual violence. Participants who reported perpetrating physical violence against their partner acknowledged experiencing more discrimination related to their sexual orientation; increased internalized homophobia also increased the likelihood of sexual violence toward their partner. While the findings are based on a large but unrepresentative sample, they do not necessarily mean that minority stress leads to perpetration, but the results suggest that both internalized homophobia and externalized discrimination are risk factors for the perpetration of intimate partner violence.

Two other studies conducted in the United States only with homosexual men show opposite results when differentiating between violence and victimization. Kelley and Robertson (2008, cited by Ortega, 2014), in their study with 100 young homosexual men, found that internalized homophobia is related to victimization, but found no correlation between this and the exercise of intimate partner violence. On the other hand, another study with 186 homosexual men indicates that internalized heterosexism was associated only with the perpetration of partner violence and not with victimization (Bartholomew et al., 2008, cited by Ortega, 2014).

A study conducted with a sample of 272 lesbian and bisexual women in the United States found that internalized homophobia was associated with both perpetration and victimization of physical and sexual violence in the past year; however, lifetime discrimination, discrimination in the past year, and exclusion were not correlated with any of the intimate partner violence variables (Balsam & Szymanski, 2005).

More recently, also in the United States, another study on the health behaviors of bisexual and gay men, with a sample of 549 individuals, found that participants' perceived discrimination was significantly associated with elevated odds ratios of the three forms of partner violence explored (physical, nonphysical coercion, and sexual), with the likelihood of physical violence being the highest (Rustagi, 2023).

To date, very few studies have addressed the associations between externalized discrimination, internalized homophobia, and intimate partner violence in sexual diversity in Latin America. Swan et al. (2019) explored discrimination, victimization, and perpetration of intimate partner violence among LGBT people in Latin America. Based on a small online survey (n=99), they found that both perpetration and victimization of physical assault, psychological assault, and sexual coercion were correlated with experiences of discrimination among participants. In Pernambuco, Brazil, another study, based on only 13 outpatients from an outpatient clinic for LGBT+ people, concluded that intimate partner violence among sexual and gender minorities is more severe due to the various stressors experienced by this population, which in this study included being subjected to LGBTphobia from their partner, lacking a support network, fearing reporting, and distrusting the health and justice systems for LGBTQIA+ people (Oliveira et al., 2023).

The analysis of Ortega (2014), with a sample of 1,697 homosexual and bisexual men living in Argentina, found that, on the internalized heterosexism scale, the group with a high internalized heterosexism had a significantly higher mean number of episodes of physical violence towards their partners than the group with low internalized heterosexism rates. Likewise, when comparing victimization between the two groups, significant differences were found with higher means of psychological, physical, and sexual victimization events in the group with high internalized heterosexism.

Data and methods

Between October 2021 and March 2022, we applied an online survey aimed at the sexually diverse population in both Mexico and Colombia. The survey, which we call *Encuesta de Relaciones en la Pareja de la Diversidad Sexual* (Enrepadisex 2022), was disseminated in multiple media, such as social networks, radio programs, and emails addressed to associations and diversity groups, etc. It is a non-probabilistic convenience sample.

The use of an online survey or poll offers multiple advantages, such as reduced costs and time; additionally, it gives participants privacy and anonymity to facilitate sincerity in responding and to make it easier for researchers to approach groups that are difficult to access or stigmatized (Rocco & Oliari, 2007). However, there are important limitations, such as the difficulty in registering the interest of respondents, the formation of a non-probabilistic and therefore non-representative sample, sampling bias and high non-response rates (Díaz de Rada, 2012).

Therefore, the sample obtained in our online survey does not represent the universe of LGBTQ+ people in Mexico and Colombia who have had and/or have an intimate partner; it is a small fraction of this population group who were aware of the survey and were interested in participating. The findings are limited in this sense, but illustrative of the situations of intimate partner violence of those who participated in this survey.

The survey was aimed at people who met the following criteria: *a)* were 18 years of age or older; *b)* identified themselves as GSD; *c)* lived in Mexico or Colombia (regardless of their original nationality); and *d)* currently had, or have had within the past two years, at least one intimate partner relationship.

Sample characteristics

Despite the various strategies employed for the dissemination of the survey, we only reached a sample with complete data for 922 people. Upon further analysis, we detected that some participants (98 cases) were not genuinely GSD (cis men and women who declared themselves to be heterosexual), so we removed them from the study. In the end, we obtained a sample of 824 people.

Table 1 summarizes the main sociodemographic characteristics of participants in the survey. In general, the sample is mostly composed of inhabitants of Mexico (74%), under 45 years of age (91%), with a very high level of education (88% with a bachelor's degree or higher), neither non-indigenous nor Afro-descendants, and who were mainly working and/or studying.

Dependent variables

For the review of factors associated with the risk of intimate partner violence, we identified four types of violence: emotional, financial, physical, and sexual. The questions used to collect the experiences of violence are taken from the Straus scale (1979), to which we made some adaptations to include certain specific situations that may affect people of diversity, such as threatening them with revealing their gender

Table 1Sociodemographic characteristics of the sample of survey participants

Variable	%	Variable	%
Country (n=824)		Educational level (n=824)	
Colombia	26.09	High school or lower	11.89
Mexico	73.91	Bachelor's degree	51.58
Sex (n=817)		Postgraduate	36.53
Man	45.41	Marital status (n= 824)	
Woman	35.37	Single	55.34
Non-binary / queer / fluid / other	19.22	United	31.55
Age (n=824)		Married	10.07
18-25	24.27	Separated	2.06
26-35	45.15	Divorced	0.85
36-45	21.48	Widowed	0.12
46-55	7.65	Partner status (n=824)	
56 and over	1.46	Does not have and has never had a partner	10.68
Indigenous status (n=824)		Currently has a partner	67.96
No	92.96	Had a partner (previous 2 years)	21.36
Yes	4.25	Main activity in the past week (n=824	
I do not know	2.79	Study	13.23
Afro-descendant (n=824)		Work	53.76
No	92.96	Studying and working	20.63
Yes	5.10	Another	12.38
I do not know	1.94		

Sosurce: Calculations by authors based on Enrepadisex, 2022.

identity or sexual orientation to others; we also asked the questions using inclusive language. The base question is: "In the past 12 months (if you currently have a partner, or ever if you refer to a previous partner) has it happened that, not playfully but angrily...," with a list of 31 situations referring to the four types of violence, for which they could answer: a) never, b) sometimes, or c) often. From the set of questions for each type of violence, we estimated dichotomous indicators, which take the value of 1 when the answer to any of the questions was "sometimes" or "often," and a value of 0 was assigned when the answers to all the questions were "never."

Independent variables

a) Discrimination index

To measure experiences of external discrimination, we use the Heterosexist Harassment, Rejection and Discrimination Scale (HHRDS), originally developed by Szymanski (2006) to measure the discrimination experiences of lesbian women, which was later adapted and widely used to account for sexual orientation discrimination against various GSD groups. This scale presents a set of experiences of discrimination in relation to which people must refer to the frequency with which each of them has occurred (never, sometimes, often, corresponding to scores from 1 to 3): 1) I have been excluded from an organization (e.g., a religious group, a sports team, etc.) because I am LGBTIQ+. 2) A health professional has pressured me to receive services that are unnecessary or unrelated to the topic of the consultation because I am LGBTIQ+. 3) I have been denied services by a health professional because I am LGBTIQ+. 4) I have been denied entry to public establishments, such as restaurants, shopping malls or nightclubs, because I am LGBTIQ+. 5) I have been denied accommodation or been mistreated by others in lodging spaces because I am LGBTIQ+. 6) I have received poor service at a business because I am LGBTIQ+. 7) I am forced to consider my LGBTIQ+ identity when thinking about participating in any political party or movement. 8) I have been treated unfairly by supervisors or teachers because I am LGBTIQ+. Subsequently, the values obtained in the different responses were aggregated into an additive discrimination index, whose values can vary between 6 and 24 points.

b) Internalized heterosexism index

The scale to measure internalized homophobia (internalized heterosexism) was originally conceived to measure gay men's negative attitudes toward themselves and other gay men. To account for the internalized heterosexism of survey participants we employed the seven-item internalized stigma scale with seven items employed by Outland (2016). The scale used includes seven statements against which participants indicate their level of agreement or disagreement with a five-point Likert scale (strongly disagree, disagree, neither disagree nor agree, agree, agree, and strongly agree): 1) If I were offered the opportunity to be someone who is not LGBT, I would accept the opportunity. 2) I wish I were not LGBT. 3) I feel that being LGBT is a personal flaw in me. 4) I feel that being LGBT must have been a mistake of fate/nature/God, etc. 5) I wonder why I am not "normal" like others. 6) I envy people who are not LGBT. 7) I have tried to stop being LGBT. Thus, the internalized heterosexism scale has a range of values between 7 and 35 points.

Other independent variables

a) Childhood sexual abuse

Another independent variable incorporated in the analysis is sexual abuse before the age of 15. Numerous investigations have documented a higher risk of victimization and perpetration of intimate partner violence in people who have experienced physical and sexual abuse during childhood (Barrios et al., 2015; Classen et al., 2005; Schuster & Tomaszewska, 2021); this type of victimization is more frequent for LGBT+ people than for heterosexual people (Balsam et al., 2005; Corliss et al., 2002; Mims & Waddell, 2021). The indicator we used is based on the question: Before the age of 15 years, did you ever suffer any kind of sexual abuse (unwanted touching, fondling or touching, forced sex, penetration of any kind, etc.)? The possible answers were "yes," "no," "I don't know / I don't remember," and "I prefer not to answer."

b) Emotional and physical violence in childhood

The survey also included questions about the experiences of violence, both emotional and physical, to which the participants had been subjected before the age of 15, perpetrated by the people with whom they lived: Did the people with whom you lived before the age of 15 insult, offend, or make fun of you, and were you beaten by the people with whom you lived before the age of 15? The possible answers were: "occasionally," "often" and "I was not beaten," from which we estimated a dichotomous indicator (occasionally or often= 1; I was not beaten= 0).

In addition to these variables, in the bivariate regression tests we included other characteristics and conditions of the survey participants that the literature on intimate partner violence has identified as being associated with its occurrence, such as age, country of residence, duration of the union, whether the relationship with the partner is emotionally exclusive, and whether the union is sexually exclusive.

Results and analysis

According to the information reported by the survey participants, 44% of the sample was composed of homosexual men, followed by lesbian women (19%) and bisexual people (18.5%). In terms of gender identity, most of the sample was composed of cis people (43% men and 32% women) (see Table 2).

Table 2Distribution of the sample according to sexual orientation and reported gender identity

Sexual orientation		Gender identity	
(n=818)	%	(n=823)	%
Homosexual / gay	44.38	Cis woman	32.20
Lesbian	19.07	Cis man	43.13
Bisexual	18.46	Trans woman	2.79
Asexual	3.06	Trans man	1.58
Pansexual	11.74	Non-binary person	6.32
Straight	1.22	Queer	4.13
Another	1.10	Gender fluid	4.13
I prefer not to answer	0.98	I am not sure	2.31
		I prefer not to answer	1.22
		Another	2.19
Total	100.00	Total	100.00

Source: Calculations by authors based on Enrepadisex, 2022.

Level of internalized heterosexism

The mean values of internalized heterosexism among the survey participants, differentiating according to sexual orientation and gender identity, were the first results to be analyzed. To facilitate comparisons of this indicator among the different subgroups (and subsequently with the indicator external discrimination), we standardized the values of the internalized heterosexism index (originally with a range of values between 7 and 35), with values between 0 and 1. In general, for the entire sample we obtained a mean value of 0.32 for this index, which suggests that there is a low level of internalized heterosexism in the sample (see Table 3). The data seem to suggest that people who prefer not to answer questions about their sexual orientation and those who are unsure of their identity, together with trans men, constitute the groups with the highest index of internalized heterosexism, although we cannot establish the statistical significance of these differences for groups with very small sample sizes (n<50) (see Table 3).

According to the results of the analysis of variance (ANOVA), when using the Bonferroni test to determine the significance of the difference between the different subgroups, it is found that these disparities are not significant, except for the one between lesbian women (\bar{x} =0.30) and people who prefer not to answer about their

Table 3Mean values of internalized heterosexism by sexual orientation and gender identity of the sample

	n	Internalized heterosexism index
Sexual orientation		
Homosexual	363	0.32
Lesbian	156	0.30
Bisexual	151	0.34
Asexual	25	0.36
Pansexual	96	0.33
Straight	10	0.35
Another	9	0.36
Prefer not to answer	8	0.44
Gender identity		
Cis woman	265	0.31
Cis man	355	0.33
Trans woman	23	0.36
Trans man	13	0.42
Non-binary person	52	0.30
Queer	34	0.29
Gender fluid	34	0.33
Not sure	19	0.42
Another	18	0.31
Prefer not to answer	10	0.41
Total		0.32

Source: Calculations by authors based on Enrepadisex, 2022.

sexual orientation (0.44), which is marginally significant (p<0.10) (table not included, available upon request). On the other hand, when reviewing the different means of the internalized heterosexism index according to gender identity, it is observed that, although most of the differences are not significant, there is a significant dissimilarity (p<0.05) between the index of cis women (\bar{x} =0.32) and that of people who are unsure of their gender identity (0.42), and marginally significant differences (p<0.10) between those unsure of their identity and non-binary people (\bar{x} =0.30), as well as

between those unsure of their identity and queer people (0.29) (table not included, available upon request).

Level of external discrimination experienced

Using the external discrimination index (EDI) standardized with values between 0 and 1, we observe that experiences of external discrimination reach an overall mean value of 0.46, which represents an intermediate level of discrimination (see Table 4). The

Table 4Average values of external discrimination index, by sexual orientation and gender identity of the sample

,		, ,
	n	Internalized heterosexism index
Sexual orientation		
Homosexual	363	0.46
Lesbian	156	0.48
Bisexual	151	0.43
Asexual	25	0.50
Pansexual	96	0.47
Straight	10	0.50
Another	9	0.58
Prefer not to answer	8	0.54
Gender identity		
Cis woman	265	0.49
Cis man	355	0.45
Trans woman	23	0.53
Trans man	13	0.53
Non-binary person	52	0.51
Queer	34	0.52
Gender fluid	34	0.49
Not sure	19	0.44
Another	18	0.43
Prefer not to answer	10	0.48
Total	823	0.46

Bonferroni test allows us to identify significant differences in discrimination experiences between lesbian women (0.48) and bisexual people (0.43); between homosexuals (0.46) and people with other orientations (0.58); and between bisexuals (0.43) and those with other orientations (0.58). Also, the difference in discrimination between bisexuals and pansexuals (0.47) is marginally significant (p<0.10). In summary, people who reported having another sexual orientation have the highest level of experiences of external discrimination (table not included, available upon request).

Additionally, if we compare the experiences of discrimination according to gender identity, trans women and trans men have the highest mean values of external discrimination; however, given the very small sample size of trans men, significant differences are only found between the value of discrimination of trans women (0.53) and cis women (0.49), and between trans women and cis men (0.45). A significantly higher level of discrimination is also corroborated for non-binary people (0.51) with respect to cis women and cis men; and similarly significant differences are confirmed between the level of discrimination of queer people (0.52) and cis women, and between queer people and cis men (table not included, available upon request).

Prevalence of intimate partner violence by sexual orientation and gender identity

The questions posed in the questionnaire on violence refer to violence suffered and perpetrated at some time by the current (or last) partner. As can be seen in Table 5, which summarizes the prevalences for the entire sample of sexual diversity participants, the most widespread violence is emotional violence, followed by financial violence (in terms of violence suffered) and physical violence (in terms of the four types of violence perpetrated). Sexual violence is the least frequent type of violence but suffered by one out of every five participants in the survey.

Table 5Prevalence of intimate partner violence suffered and perpetrated by persons in the sample

Type of violence	Suffered	Perpetrated
Emotional	62.76	54.91
Financial	26.94	16.36
Physical	23.84	19.04
Sexual	19.54	13.12

With the intention of distinguishing the prevalence of intimate partner violence among the different GSD groups, we estimated prevalence according to sexual orientation and gender identity (see Table 6). It is important to keep in mind that some of these subgroups have a very small sample size, so the values obtained should be interpreted with great caution.

Comparing the prevalence of intimate partner violence received in the different diversity groups according to sexual orientation (top and left side of Table 6), some data stand out. Heterosexual people (referring here to women and trans men) report

Table 6Prevalence of intimate partner violence suffered and perpetrated, by sexual orientation and gender identity

		Violence	Violence					
	Emotional	Financial	Physical	Sexual	Emotional	Financial	Physical	Sexual
Sexual orientation								
Homosexual	65.69	27.45	23.86	22.31	58.22	16.01	16.99	17.65
Lesbian	63.64	34.97	27.97	16.03	57.04	17.48	20.28	10.49
Bisexual	55.73	22.90	18.32	15.23	45.80	15.27	21.37	5.34
Asexual	52.38	14.29	9.52	24.00	33.33	4.76	4.76	4.76
Pansexual	59.76	21.95	30.49	19.79	53.16	20.73	23.17	14.63
Straight	85.71	42.86	0.00	20.00	71.43	28.57	28.57	0.00
Another	62.50	0.00	12.50	22.22	62.50	12.50	12.50	25.00
Prefer not to answer	83.33	16.67	50.00	37.50	83.33	16.67	50.00	33.33
Gender identity								
Cis woman	62.39	30.77	23.08	16.98	55.36	17.09	20.94	8.55
Cis man	62.13	23.59	21.93	21.69	55.52	14.95	17.94	16.94
Trans woman	78.95	21.05	26.32	26.09	70.59	26.32	31.58	15.79
Trans man	63.64	36.36	27.27	15.38	45.45	18.18	45.45	9.09
Non-binary person	63.83	17.02	29.79	17.31	51.06	8.51	14.89	10.64
Queer	71.43	46.43	32.14	17.65	42.86	17.86	14.29	10.71
Gender fluid	50.00	23.33	20.00	17.65	48.28	23.33	6.67	6.67
Not sure	62.50	37.50	43.75	26.32	62.50	12.50	18.75	18.75
Another	69.23	30.77	15.38	22.22	61.54	30.77	15.38	38.46
Prefer not to answer	55.56	22.22	33.33	10.00	55.56	22.22	33.33	0.00

being subjected to the highest levels of emotional violence (85.71%) and financial violence (42.86%), while pansexual people suffer the highest rates of physical violence (30.49%), and reports show that asexual people are subject to the highest prevalence of sexual violence (24%). People who prefer not to answer questions about their sexual orientation also report high prevalence of emotional (83.33%), physical (50%), and sexual (37.50%) violence. And among the subgroups with larger samples, it can be identified that, while homosexual men report the highest levels of emotional (65.69%) and sexual (22.31%) violence, among lesbian women the prevalence of financial (34.97%) and physical (27.97%) violence is higher.

If we now turn our attention to intimate partner violence according to sexual orientation (top right of Table 6), we can clearly observe that heterosexuals stand out with the highest prevalence of emotional (71.43%), financial (28.57%), and physical (28.57%) violence. And again, those who prefer not to declare their sexual orientation stand out with high prevalences of emotional (83.33%), physical (50.00%), and sexual (33.33%) violence. And among the subgroups with larger samples (homosexuals, lesbians, and bisexuals), it stands out that the prevalence of emotional and financial violence for homosexuals and lesbians are quite similar, but there are clearer differences between these two groups in terms of physical violence (higher among lesbians with 20.28%, versus 16.99%) and sexual violence (higher among homosexuals, with 17.65% versus 10.49%). It is also noteworthy, in contrast to findings in other countries (Goldberg, 2013), that bisexual people suffer and perpetrate less violence compared to lesbians and homosexuals.

The review of the prevalence of violence according to gender identity shows that, in terms of violence received (bottom left of Table 6), trans women report suffering very high levels of emotional (78.95%) and sexual (26.09%) violence, while queer people report high prevalence of emotional (71.43%), financial (46.43%), and physical (32.14%) violence. At the same time, people who report "another" gender identity also suffer a very high prevalence of emotional violence (69.23%).

When comparing the violence perpetrated according to gender identity (lower right-hand side of Table 6), the high levels of emotional (70.59%) and financial (26.32%) violence perpetrated by trans women stand out, as well as the physical violence perpetrated by trans men (45.45%). And again, people unsure of their identity, as well as those who prefer not to answer, show high levels of violence; people who are not sure show high levels of emotional (62.50%) and sexual (18.75%) violence; while those who indicated having "another" gender identity report notable levels of violence: emotional (61.54%), financial (30.77%), and sexual (38.46%).

When corroborated by ANOVA (Bonferroni test) the significance of these differences in the prevalence of violence among the different groups of sexual diversity, the results indicate that, in terms of violence suffered, there would be no significant disparities between groups by sexual orientation or gender identity (ANOVA results table

not included, available on request). And regarding the prevalence of violence, we can only confirm statistical significance of sexual violence in the following cases: between homosexuals and bisexual people (17.65% and 5.34%, respectively), and between cis women and people who declared having another gender identity (8.55% and 38.46%, respectively, but this difference is only marginally significant).

Factors associated with the risk of being subjected to physical violence due to sexual orientation and gender identity

Although we have so far been reviewing prevalences of the four types of intimate partner violence (emotional, financial, physical, and sexual), both of violence suffered and perpetrated, for reasons of space we focus in this section only on the factors associated with the risk of suffering physical and sexual violence. We also limit our review to only the four groups with sufficiently large samples (>50) according to sexual orientation, which are: homosexuals, lesbians, bisexuals, and pansexuals. And to three groups defined by gender identity with large samples: cis women, cis men, and non-binary people.

Table 7 presents the results of different bivariate regression models in which we explore the factors significantly associated with the risk of physical violence received for these four groups according to sexual orientation. The values of the odds ratios (OR) corresponding to each variable analyzed and the significance of each are presented. A first notable result is that the internalized heterosexism index, contrary to our expectations and previous findings in other research (Binion & Gray, 2020; Carvalho, 2006), is not significantly associated with the risk of suffering physical violence in the case of any of the four groups examined on the basis of sexual orientation. Moreover, the external discrimination index is only significantly and positively associated with the risk of suffering physical violence in the case of homosexual men, for whom each unit increase in the value of this index elevates the risk of being subject to such violence 38 times (see Table 7).

Additionally, it can be observed that for homosexuals the risk of physical violence is significantly associated with the experience of violence witnessed in childhood, increasing the odds ratio 1.97 times; experiences of emotional violence followed by physical violence in childhood are also associated with increases in the risk of physical partner violence (2.4 times and 1.7 times, respectively); similarly, experiences of sexual violence before the age of 15 years double the risk of physical violence. Finally, having a sexually exclusive relationship reduces the risk of homosexuals being subject to physical violence by 46% (Table 7).

In the case of the other groups, only a few factors significantly associated with the risk of physical violence are identified, which is undoubtedly related to the small sam-

Table 7Factors associated with the risk of suffering physical violence, by sexual orientation

	Homosexual		Les	Lesbian		Bisexual		Pansexual	
Variable	Odds ratio	Signifi- cance	Odds ratio	Signifi- cance	Odds ratio	Signifi- cance	Odds ratio	Signifi- cance	
Lives in Mexico (vs. Colombia)	1.3069	ns	0.5976	ns	5.9529	†	1.1973	ns	
Age (cont.)	0.9973	ns	1.0007	ns	1.0278	ns	1.0139	ns	
Educational level									
High school or lower	1.3368	ns	1.7014	ns	1.6111	ns	4.0000	†	
Bachelor's degree (ref. cat.)	1		1		1		1		
Master's degree or PhD.	1.1131	ns	0.8596	ns	1.0450	ns	1.6000	ns	
Violence frequently witnessed	1.9781	*	0.6497	ns	1.2188	ns	3.5556	*	
Frequent emotional violence during childhood	2.4169	*	2.4202	ns	0.9490	ns	2.8824	†	
Physical violence in childhood	1.6966	†	1.1269	ns	1.5960	ns	1.0147	ns	
Sexual abuse before 15 years of age	1.9917	*	0.5818	ns	1.0631	ns	1.7235	ns	
Emotionally exclusive relationship	1.2107	ns	0.7791	ns	0.9444	ns	0.9184	ns	
Sexually exclusive relationship	0.5453	*	0.8370	ns	1.1311	ns	0.9429	ns	
Duration of union (months)	1.0017	ns	1.0058	†	1.0094	*	1.0070	ns	
External discrimination index	38.0791	**	2.1167	ns	0.2830	ns	1.6551	ns	
Internalized heterosexism index	2.2718	ns	5.1600	ns	5.6812	ns	0.0521	ns	

^{*} p<=0.05; **p<0.01; *** p<=0.001.

Source: Calculations by authors based on Enrepadisex, 2022.

ple size. In the case of lesbian women, only duration of union is marginally associated with the risk of physical violence (OR=1.006). For bisexuals, living in Mexico (compared to Colombia) increases (marginally) the risk of physical violence by almost six times; experiences of emotional violence in childhood increase this risk by 3.22 times, and duration of union (each additional month) increases it by 1%. For pansexuals, having a high school education or less, compared to a bachelor's degree, increases the odds ratio of being subject to physical violence fourfold; also having witnessed violence in childhood increases their risk of physical violence by 3.6 times, and being subject to frequent emotional violence during childhood increases it by 2.9 times.

In Table 8 we analyze the factors associated with the risk of physical violence according to gender identity, and it can be seen that in these three groups the internal-

[†] p<=0.10; ns= not significant.

Table 8Factors associated with the risk of suffering physical violence, by gender identity

	Cis women		Cis	men	Non-binary		
	Odds	Signifi-	Odds	Signifi-	Odds	Signifi-	
Variable	ratio	cance	ratio	cance	ratio	cance	
Lives in Mexico (vs. Colombia)	0.7857	ns	1.5392	ns	2.8889	ns	
Age (cont.)	1.0194	ns	1.0029	ns	1.0275	ns	
Educational level							
High school or lower	1.7811	ns	1.2989	ns	2.2222	ns	
Bachelor's degree (ref. cat.)	1		1		1		
Master's degree or PhD.	1.1224	ns	1.1574	ns	0.6061	ns	
Violence frequently witnessed	1.1837	ns	1.8133	ns	3.1250	†	
Frequent emotional violence during childhood	2.1791	†	2.2609	*	3.7143	†	
Physical violence in childhood	1.4872	ns	1.8958	*	2.0833	ns	
Sexual abuse before 15 years of age	1.1512	ns	1.7845	†	0.4094	ns	
Emotionally exclusive relationship	0.7568	ns	0.8797	ns	2.7018	ns	
Sexually exclusive relationship	1.1797	ns	0.4815	**	1.2000	ns	
Duration of union (months)	1.0055	*	1.0021	ns	1.0221	*	
External discrimination index	11.1157	†	30.1438	**	0.5994	ns	
Internalized heterosexism index	1.3264	ns	2.2009	ns	0.0423	ns	

^{*} p<=0.05; **p<0.01; *** p<=0.001.

Source: Calculations by authors based on Enrepadisex, 2022.

ized heterosexism index does not show significant associations with the risk of physical violence. In contrast, the externalized discrimination index does show significant associations in two of the groups, increasing the risk of physical violence for cis women 11.11 times for each unit growth of the index, and multiplying this risk 30 times for each unit increase in the case of cis men.

Additionally, for cis women the risk of physical violence increases 2.18 times when they are subject to continuous emotional violence during childhood, and very slightly (OR=1.006) for each additional month of union duration. For cis men both continued emotional violence in childhood and physical violence in childhood significantly increase the risk of physical partner violence (2.25 and 1.90 times, respectively); in addition, sexual abuse before the age of 15 has a marginal association, increasing the risk

[†] p<=0.10; ns= not significant.

1.78 times; and being in a sexually exclusive relationship reduces the possibility of physical violence by 52%. Finally, in the case of non-binary individuals, experiences of witnessed violence in childhood and those of emotional violence followed in childhood are marginally associated with the risk of physical violence, increasing it 3.7 times and 2 times, respectively.

Factors associated with risk of sexual violence based on orientation and gender identity

An examination of the results of the estimated bivariate regression models is carried out to identify the factors associated with the risk of receiving intimate partner sexual violence. Table 9 shows them for the four groups by sexual orientation. The first result

Table 9Factors associated with the risk of sexual violence, by sexual orientation

	Homos	Homosexual		Lesbian		Bisexual		Pansexual	
		Signifi-		Signifi-		Signifi-		Signifi-	
Variable	OR	cance	OR	cance	OR	cance	OR	cance	
Lives in Mexico (vs. Colombia)	0.8232	ns	1.1373	ns	2.8069	ns	1.2687	ns	
Age (cont.)	0.9794	ns	1.0194	ns	1.0275	ns	1.0165	ns	
Educational level									
High school or lower	1.4705	ns	0.9130	ns	2.4333	ns	3.3016	+	
Bachelor's degree (ref. cat.)	1		1		1		1		
Master's degree or PhD.	0.9906	ns	1.0500	ns	2.5094	†	1.9259	ns	
Violence frequently witnessed	1.3682	ns	2.3316	+	0.9611	ns	2.4111	ns	
Frequent emotional violence during childhood	1.6039	ns	2.3048	ns	2.4573	ns	1.1022	ns	
Physical violence in childhood	1.2500	ns	1.8611	ns	1.4279	ns	0.8307	ns	
Sexual abuse before 15 years of age	1.7387	*	1.1341	ns	3.0749	*	0.7000	ns	
Emotionally exclusive relationship	0.7838	ns	0.4337	†	0.6261	ns	1.5000	ns	
Sexually exclusive relationship	0.5560	*	0.2924	**	1.0502	ns	1.1278	ns	
Duration of union (months)	0.9967	ns	1.0037	ns	1.0046	ns	1.0067	ns	
External discrimination index	9.4265	*	7.4050	ns	16.3830	ns	0.9591	ns	
Internalized heterosexism index	29.9766	***	12.7403	ns	10.7957	ns	0.0109	+	

^{*} p<=0.05; **p<0.01; *** p<=0.001

 $[\]dagger$ p<=0.10; ns= not significant.

to be highlighted is that the internalized heterosexism index shows a significant association to the risk of intimate partner sexual violence, increasing said risk for homosexuals (rising almost 30 times for each unit increase in the index), while for pansexuals the risk of sexual violence decreases (marginal association) by approximately 1% for each increase in the index. On the other hand, the external discrimination index is significantly associated, increasing the risk of sexual violence only in the case of homosexuals, for whom it increases 9.4 times for each unit increase in this index (see Table 9).

Also, for homosexuals, sexual abuse before the age of 15 significantly increases the risk of sexual violence 1.7 times, while being in a sexually exclusive relationship reduces it to 44%. In the case of lesbians, having witnessed violence in childhood significantly increases the risk of sexual violence 2.33 times and, on the contrary, being in an emotionally and sexually exclusive relationship significantly reduces the risk of sexual violence, by 57% and 71%, respectively. In the bisexual group, having a master's or doctoral level of education, compared to having a bachelor's degree, increases the risk of sexual violence 2.5 times; and also, the experience of sexual abuse before the age of 15 years shows a significant association with the risk of sexual violence. For pansexuals, an educational level of high school or less, compared to a bachelor's degree, increases the odds ratio of receiving sexual violence by 3.3 times (Table 9).

To conclude, we explore the results of the bivariate regressions for sexual violence by gender identity, summarized in Table 10. With respect to the two central independent variables, we observe that internalized heterosexism is significantly associated with the risk of sexual violence toward cis men, increasing this risk 18.4 times, and for non-binary people it increases it 1.15 times. The external discrimination variable is only significantly associated with the risk of sexual violence for cis men, increasing the risk 8.3 times (Table 10).

For cis women, four variables show significant associations with the risk of sexual violence: educational level is significantly linked to the risk of sexual violence, but interestingly, both having a high school degree or less and having a master's or doctorate degree increase this risk (2.7 times and 1.9 times, respectively, compared to cis women with a bachelor's degree); in addition, experiences of emotional violence during childhood increase this risk 2.7 times, and experiences of sexual violence before the age of 15 increase the odds ratio two times. For cis men, these same two variables are significantly associated with the risk of sexual violence: having experienced consecutive emotional violence in childhood, which increases it 1.9 times, and sexual abuse before age 15, which increases it 1.7 times. Two other factors show a negative association, reducing the risk of sexual violence for cis men: length of union, which decreases the risk by approximately 1% for each additional month of union, and being in a sexually exclusive relationship, which reduces it by 44% (Table 10).

Table 10Factors associated with the risk of receiving sexual violence, by gender identity

	Cis woman		Cis	man	Non-binary		
Variable	OR	Signifi- cance	OR	Signifi- cance	OR	Signifi- cance	
Lives in Mexico (vs. Colombia)	1.2809	ns	0.8656	ns	1.5556	ns	
Age (cont.)	1.0046	ns	0.9848	ns	0.9959	ns	
Educational level							
High school or lower	2.7339	*	1.6770	ns	0.8667	ns	
Bachelor's degree (ref. cat.)	1		1		1		
Master's degree or PhD.	1.8640	+	1.0286	ns	0.7222	ns	
Violence frequently witnessed	1.8281	ns	1.5759	ns	0.2589	ns	
Frequent emotional violence during childhood	2.7075	*	1.9841	†	0.5918	ns	
Physical violence in childhood	1.4204	ns	1.4123	ns	0.2963	ns	
Sexual abuse before 15 years of age	2.0131	*	1.7006	+	0.4348	ns	
Emotionally exclusive relationship	0.7677	ns	0.6008	ns	0.6500	ns	
Sexually exclusive relationship	0.6620	ns	0.5625	*	0.5000	ns	
Duration of union (months)	1.0039	ns	0.9956	+	1.0056	ns	
External discrimination index	6.5239	ns	8.2912	+	0.3946	ns	
Internalized heterosexism index	5.4634	ns	18.3697	**	1.1500	t	

^{*} p<=0.05; **p<0.01; *** p<=0.001.

Source: Calculations by authors based on Enrepadisex, 2022.

Conclusions

One of the initial findings of this research is that, although internalized heterosexism is present among participants in the sample, its level appears low; the mean value of this index is 0.32 (once standardized with values between 0 and 1) for the participants in the survey, which could be described as a medium-low value. This is probably linked to the survey participants' very high educational attainment, which may facilitate the reinterpretation of heterocentric gender mandates. Further analysis is needed to understand the dynamics for people with lower levels of education.

[†] p<=0.10; ns= not significant.

There are also differences in the values of this indicator among the various groups: trans men, those unsure of their identity, and people who prefer not to answer questions about their sexual orientation or gender identity, all show the highest values of internalized heterosexism. Meanwhile, lesbians, queer people, and non-binary respondents had the lowest levels. But we cannot confirm the statistical significance of all these differences given the small sample sizes of participants with any of these sexual orientations and gender identities.

As another finding, experiences of external discrimination seem to be more prevalent than internalized heterosexism among those analyzed, with a mean value of 0.46 for the entire sample, which is higher than the mean of 0.33 in the standardized index of internalized heterosexism. However, the data suggest that this discrimination is not experienced to the same extent by all GSD persons, and that such experiences are more frequent among those who declared having "another" sexual orientation, those who prefer not to declare their sexual orientation, and trans women and men. It is less frequent for bisexual people and cis men. Some of these disparities are statistically significant, but again the small sizes of some groups prevent us from corroborating this in all cases.

When comparing the association between these two indicators of discrimination against sexual diversity (internalized heterosexism index and external discrimination index) and the risk of being subjected to physical violence and intimate partner sexual violence in the experiences of the participants in this survey, it is found that external discrimination shows more associations with the risk of physical violence (at a significant level for homosexuals, cis women and cis men) than internalized heterosexism, which does not show any significant connection to the risk of physical violence. However, internalized heterosexism presents more associations with the risk of sexual violence (significant associations in the case of homosexuals, pansexuals, cisgender men, and non-binary people), while external discrimination is only significantly associated with the risk for homosexuals and cis men being subjected to such violence.

All these data suggest that both the magnitude of the two types of discrimination explored and their association with the risks of being subjected to physical violence and intimate partner violence vary across sexual diversity groups. Nevertheless, their role as factors increasing vulnerability to intimate partner violence is found across the board. For the individuals in this sample, the influence of external discrimination and internalized heterosexism could be described as being particularly clear for homosexual men, for whom each unit increase in the index of external discrimination elevates the risk of physical violence 38-fold and exacerbates the risk of sexual violence 9-fold; while unit increases in the index of internalized heterosexism elevates the risk of sexual violence 30-fold.

Experiences of intimate partner violence, both suffered and perpetrated, are quite widespread among the people of sexual diversity who participated in this survey. But

there are important differences within these groups. Among the survey participants, some clearly appear to be more vulnerable to certain types of intimate partner violence; for example, transgender women report being subjected to, and perpetrating, high levels of emotional and sexual violence. The different prevalences of violence suggest the importance of further research that, far from assuming that all people of sexual diversity are equally exposed to the risk of intimate partner violence, explores the particularities and heterogeneity of the experiences of its members.

An important limitation of this study is its basis on the results of an online survey that is not representative of the sexually diverse population in Mexico and Colombia. Additionally, the sample size of participants reached is rather small (n=824), which makes it difficult for us to establish with certainty the differences observed in the experiences of discrimination and violence among the different GSD groups. Nevertheless, we believe that exploring the prevalence of internalized heterosexism, external discrimination, and different types of intimate partner violence for all the groups identified in this research is an important contribution that allows us to illustrate the different conditions and experiences of GSD individuals, and signals the importance of exploring separately, for each specific group, the particular conditions that characterize their lives and violate their well-being.

Intimate partner violence in the LGBTQ+ population clearly requires further research and understanding. An important challenge for future studies will be to include and make visible minority groups, such as indigenous people and Afro-descendants, among others, incorporating an intersectional approach that reveals the multiple heterogeneities present in the issue of GSD intimate partner violence. Another area of work will be to develop surveys with random and representative samples of this population.

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