

# How does legalisation of same-sex marriage affect stigma against lesbians across different age cohorts in Taiwan

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**Abstract.** Structural stigma assumes a central role in shaping both individual and interpersonal processes of stigma, while also contributing to health disparities. The recognition of the right to marry serves as a critical benchmark for evaluating a society's commitment to eliminating this structural stigma that affects marginalized groups. The legal sanctioning of same-sex marriage can serve as a protective macro-environmental factor with substantial implications for the psychological well-being and health of same-sex couples. Previous research has predominantly explored how LGBTQ+ individuals make sense of the legalization of same-sex marriage, but it has generally neglected to examine variations across different age cohorts. Also, discussions regarding the impact of same-sex marriage legalization in non-Western contexts remain conspicuously underdeveloped. The present study seeks to bridge these gaps by centering its investigation on Taiwan as the research site and exploring the influence of same-sex marriage legalization on the stigma experienced by lesbians of marriageable age.

**Keywords:** stigma, legalisation, marriage, lesbian, resilience, well-beings

## 1. Introduction

While the acknowledgment of the pervasive experience of stigma and oppression endured by LGBTQ+ communities worldwide constitutes an inherent premise within queer academic discourse, it is imperative to underscore its critical role in comprehending the paramount significance of a supportive and inclusive institutional milieu in the well-being of this marginalized demographic. The contemporary conceptualization of stigma, as delineated by Herek (2009), encompasses "the negative regard, inferior status, and relative powerlessness that society collectively accords to people who possess a particular characteristic or belong to a particular group or category." The perpetuation of stigma, according to this definition, engenders the experience of stigma among individuals and groups that are socially stigmatized. Link and Phelan (2001) delineate the multifaceted nature of stigma, existing on individual, interpersonal, and structural levels. Individual-level stigma pertains to the internalization of psychological processes within individuals, while interpersonal stigma pertains to the interactions between the stigmatizing entities and the targeted groups. Hatzenbuehler and Link (2014) elaborate on the notion of structural stigma, defining it as the "societal-level conditions, cultural norms, and institutional policies that constrain the opportunities, resources, and well-being of the stigmatized." Expanding upon Hatzenbuehler's work in 2016, structural stigma is shown to yield substantial consequences for the targeted groups. These repercussions include an increased likelihood of concealing one's sexual orientation or HIV/AIDS status, elevated rates of self-stigmatization and perceived discrimination, and its interaction with individual-level stigma predicting substance use, such as tobacco and alcohol consumption. Hatzenbuehler (2016) further highlights the severe health implications stemming from structural stigma. Notably, disparities in psychiatric morbidity related to sexual orientation are more pronounced in societies with heightened levels of structural stigma. Drawing upon data from the General Social Survey spanning a fourteen-year period, Hatzenbuehler et al. (2009) concluded that LGBTQ+ individuals residing in communities with elevated structural stigma face heightened risks of morbidity, furnishing additional evidence of the severe health implications that structural stigma can engender. It is noteworthy, however, that the majority of these studies have been conducted in Western contexts. There has been relatively limited exploration of structural stigma in non-Western societies, although a handful of scholars have examined the role of state power in shaping conceptions of gender and sexuality in these regions. Furthermore, researchers have delved

into the intersection between structural stigma and other demographic characteristics, including race, gender, and age. As reviewed by Kertzner et al. (2009), lesbian and bisexual women, due to their compounded "multi-jeopardy" status, are more susceptible to psychological distress, underscoring the need for further investigation into the intersectionality inherent to the lesbian identity.

While numerous studies have explored the attitudes of LGBTQ+ individuals toward heterosexual marriage (Oswald, 2000, 2002) and various non-marital forms of same-sex relationships (e.g., Haley-Banez & Garrett, 2002), the inquiry into how LGBTQ+ individuals perceive the legalization of same-sex marriage has been notably understudied until the work of Lannutti (2005). Lannutti conducted an open-ended web-based survey, revealing that the legalization of same-sex marriage should be regarded as a multifaceted cultural and personal phenomenon that serves as a pivotal backdrop for future discussions concerning same-sex relationships. Lannutti (2005) particularly emphasized that, while the LGBTQ+ community contributes to the definition of the meaning of same-sex marriage, the converse is also true; same-sex marriage actively shapes the conception of the LGBTQ+ community. This intricate interplay underscores the pivotal role that legalized marriage assumes in the construction of the LGBTQ+ community's identity. A parallel endeavor to evaluate the attitudes of queer individuals toward the legalization of same-sex marriage was undertaken by Baiocco et al. (2014). Employing regression analysis, the researchers identified several factors that influence one's stance on same-sex marriage, including internalized sexual stigma, disclosure of one's sexual orientation to family, political progressivism, and higher educational attainment. The findings underscore the imperative need for reforming social policies to mitigate the existing disparities experienced by lesbian and gay individuals concerning their pursuit of intimacy and related stressors. Similarly, Riggle et al. (2010) discussed the legal recognition of same-sex relationships, not as a mere buffer against minority stressors or a moderator of stigmatization faced by lesbians and gay men, but as a protective macro-environmental factor with substantial implications for the psychological health and overall well-being of same-sex couples. The legal recognition of same-sex marriage, therefore, assumes paramount significance in addressing structural stigma against the LGBTQ+ community and enhancing the general well-being of its members. Regrettably, once again, attitudes toward the legalization of same-sex marriage and its implications in non-Western contexts have received scant attention. However, the examination of stigma within different societal and cultural milieus is indispensable, as stigma is a highly context-dependent phenomenon (Major & O'Brien, 2005). Contextual elements such as societal-level conditions, cultural norms, and institutional policies that hinder the opportunities, resources, and well-being of stigmatized individuals are recognized as fundamental components of structural stigma (Hatzenbuehler et al., 2009).

In addition to the paucity of attention paid to non-Western regions and cultures, a notable lacuna within existing studies (e.g., Baiocco et al., 2014 and Lannutti, 2005) is the absence of an investigation into generational differences in attitudes toward the legalization of same-sex marriage within the LGBTQ+ community. These studies have predominantly adopted a generalized perspective, treating the queer community as a homogenous entity, thus overlooking the nuanced effects of age as a significant variable leading to divergent experiences among LGBTQ+ individuals. Age, in fact, assumes paramount importance as it can yield contrasting attitudes and experiences within this community. For instance, older Lesbian, Gay, and Bisexual (LGB) adults often find themselves burdened by stereotypes that cast them as lonely, devoid of sexual relationships, or engaged in intergenerational sexual partnerships (Berger & Kelly, 1996; Kooden, 2000). Ageism compounds the disadvantages faced by older LGB individuals, especially when intersecting with other stigmatized attributes, such as ethnicity (David & Knight, 2008). On the other hand, younger LGB individuals are more likely to encounter anti-gay verbal harassment, primarily due to limited access to safe community venues (Huebner, Rebchook, & Kegeles, 2004). In contrast, older LGB individuals have had more time to establish robust social networks and engage in complex social roles, affording them a heightened sense of social capital, as defined by Keyes and Waterman (2003), which encompasses trust, social responsibility, and reciprocal social ties (Kertzner et al.,

2009). Furthermore, studies investigating identity development milestones have revealed generational disparities. Kertzner et al. (2009) observed that younger generations tend to undergo sexual identification and disclosure at an earlier age compared to their older counterparts. This finding resonates with the research conducted by Grov et al. (2006), which demonstrated that younger age cohorts (18-24 years old) experienced their sexual debut with same-sex partners at a younger age and came out to themselves and others at an earlier stage compared to older generations. Consequently, age emerges as a pivotal factor shaping the trajectory of one's identity development. The perception of aging and encounters with ageism can exert significant ramifications on an individual's overall health. Wight et al. (2015) suggested a close correlation between internalized ageism in midlife and older gay men and the manifestation of adverse depressive symptoms, particularly when evaluated within the framework of social stress process theory. In summary, age assumes a critical role in influencing the well-being and identity development of LGB individuals. Nevertheless, in the discourse surrounding attitudes toward the legalization of same-sex marriage, the impact of age has regrettably received inadequate examination, warranting further scholarly attention.

In order to address the gaps in the existing literature concerning non-Western regions and generational differences, this study may draw valuable insights from prior research examining the effects of the legalization of same-sex marriage in Taiwan. Numerous quantitative studies conducted in the Taiwanese context have established the affirmative impact of such legislation on the well-being of the LGBTQ+ community. For instance, Lee and Ostergard (2017) contended that the legal recognition of same-sex marriage would enhance both the legal and psychological protection for lesbian, gay, and bisexual (LGB) individuals, a sentiment harmonizing with the findings of several other studies which have indicated increased financial benefits and family security accruing to LGB individuals (Lannutti, 2005; Philpot et al., 2016). Additionally, sexual minorities derive benefit from heightened visibility and greater societal acceptance of diverse sexual orientations (Flores & Barclay, 2016; Hooghe & Meeusen, 2013). However, it is imperative to acknowledge that the extant literature contains studies that yield divergent results. For instance, Lin et al. (2020) demonstrated that debates surrounding the legislation of same-sex marriage had generated negative repercussions on individuals' daily lives, including deleterious effects on occupational and academic performance, interpersonal relationships, mood, and sleep quality. This observation is in concordance with another study conducted by Lin et al. (2019), which indicated a higher rate of suicidal ideation among non-heterosexual participants subsequent to the referendums concerning same-sex marriage legalization, particularly among the young, females, and gay, lesbian, and bisexual individuals. The propensity for such ideation is exacerbated when unfavorable attitudes toward homosexuality emanate from heterosexual acquaintances (Ko et al., 2020). Moreover, the study by Huang et al. (2021) revealed a decline in the willingness of gay and bisexual men to bear children following the legalization of same-sex marriage. However, studies conducted by Huang et al. (2020) corroborate the significance of self-acceptance as a mediating factor in the relationship between mental health and perceived societal acceptance of same-sex relationships, thereby acting as a resilience factor against the adversity of minority stress. In conclusion, the debate surrounding the impacts of the legalization of same-sex marriage remains multifaceted and contentious. This study endeavors to further delve into this complex topic and offer novel insights into the ramifications of such legalization, with a particular focus on divergent age cohorts.

In summary, structural stigma occupies a pivotal role in influencing the processes of individual and interpersonal stigma, as well as contributing to health disparities (Hatzenbuehler, 2009). The recognition of the right to marry serves as a critical litmus test for gauging a society's commitment to eradicating such structural stigma against marginalized groups. The legal endorsement of same-sex marriage may function as a protective macro-environmental determinant, carrying significant implications for the psychological well-being and health of same-sex couples (Riggle et al., 2010). While previous research has explored how LGBTQ+ individuals make sense of the

legalization of same-sex marriage, it has overlooked comparisons between various age cohorts. Furthermore, the discourse on the impact of same-sex marriage legalization in non-Western contexts remains notably underdeveloped. This research aims to address these gaps by focusing on Taiwan as the research site and investigating how the legalization of same-sex marriage influences the stigma experienced by marriage-age lesbians. The rationale for selecting Taiwan as the study location will be expounded upon in the subsequent section.

## 2. Research questions and hypotheses

As mentioned before, the driving research question of this study is how the legalisation of same-sex marriage affects stigma against lesbians of marriageable age in Taiwan. This section will first explain why the present research is centred explicitly on Taiwan society as the targeted region of investigation and then break down the grand research questions and list hypotheses.

Taiwan is chosen for its special contextual conditions that differ from both Western and East Asia countries. Regarding romantic relationships, Taiwan is one of the societies with the most significant marriage delays (DGBAS 2016). This can be attributed to the emphasised parental influences in the Taiwanese context (Raymo et al., 2015). Specifically, Taiwanese parents, just like other East Asian parents, intervene in the marriage entry of their children by providing monetary support (Lin & Pei 2016) or opinions and suggestions about mate selections (Wang & Chen 2017). Despite on May 24, 2017, the legal right to marry a person of same sex was ruled by the constitutional court in Taiwan (Hsu & Yen 2017), the acceptance rate is low among older generations (Cheng, Wu, and Adamczyk 2016). Such pressure from family can serve as a stressor for the stigmatised, according to the minority stress model proposed by Meyer (2003). Thus, the cultural norm of Taiwanese society contributes to the structural stigma against same-sex couples.

Moreover, structural stigma against the LGBTQ+ community is institutionally severe in East Asia, except Taiwan. In 2014 The Guardian surveyed five LGBT laws (consensual sex, workplace non-discrimination, marriage, adoption, and protection against hate crime) and found that 55% of Asian countries do not have any form of protection while 44% having only one. Thus the comparison between Taiwan and other regions with different institutional contexts is of significant value in discussions around structural stigma beyond predominantly Western examples.

The grand research question is narrowed into more minor questions to sectionalise the study. In the first section, the research team will be aimed to investigate the main types of stigma experienced by the lesbian group in Taiwan before and after the legalisation of same-sex marriage. In the following section, we will be endeavoured to answer how age affects the experience of each type of stigma in the lesbian group before and after same-sex marriage legalisation according to the data collected. The hypotheses partially stem from the minority stress model developed by Meyer (2003). Firstly, it is hypothesised that participants of different age groups experience different minority stress processes to a different extent. Example minority stress processes include prejudice events, expectation of rejection, concealment, and internalised stigma. Secondly, we hypothesised that part of the stress suffered by the lesbian group is derived only from the female gender, or it is the combination of gender and sexual orientation together producing a synthesised distressful effect on the lesbian group. Thirdly we hypothesised that the overall impact of same-sex marriage legalisation on the lesbian group is positive. In other words, the lesbian groups suffered less from minority stress and structural stigma. We finally hypothesised that the mediating effect brought by the legalisation is more evidential on the younger generation.

## 3. Methods

Understanding that one's well-being is characterised by complexity, temporality, variability, and contextual specificity (White & Jha, 2014), the study will adopt a qualitative research method.

### 3.1 Participant recruitment

Participants will be sampled from various venues to ensure the diversity and representativeness of the participants' demographic information. Possible recruitment venues include: (a) gay bars; (b) coffee shops; (c) gyms; (d) parks and streets; (e) LGBTQ+ organisations; (f) events (such as film screenings, art exhibitions, performances, the Pride Parade). Overrepresentation will be avoided by limiting the number of selected respondents in each venue. Such limitation can be around five people per venue in maximum. Ideally, same number of participants are recruited from each venue. Moreover, venues offering mental health support will be excluded to further reduce selection bias, such as organisations offering treatment for HIV/AIDS. In addition, this study also holds requirements regarding participants' age. As the research question is established with a comparative emphasis on different age cohorts, participants will be allocated to two age groups, old and young. People older than 30 will be classified into the 'old' group, while the rest belong to the 'young' group. We also want to ensure there are sufficient participants in both age groups, say at least more than 20 participants in each.

Participants are expected to be 18-50 years old Taiwanese lesbian dwellers for more than ten years. They are required to provide demographic information, including age, self-identified gender, nationality, occupation and significant medical history. Once they are selected, they will be emailed about the time of the two separate interviews conducted via Skype.

### 3.2 Procedure and Data Analysis

After the collection of informed consent, participants will be put into virtual rooms where the interview will happen. Fake names will be used throughout the study. Once the participants enter the room, notes will be taken to record the timing and contents of the interview, behaviours and speaking tones of the interviewee. Such production of transcripts ensures abundant data collection for further analysis.

The study is sectionalised with different research topics. In the first section, the research team will be aimed to investigate the main types of stigma experienced by the lesbian group in Taiwan before and after the legalisation of same-sex marriage. The first three hypotheses aforementioned will be tested: (1) participants of different age groups experience different minority stress processes to a different extent; (2) part of the stress suffered by the lesbian group is derived only from the female gender, or it is the combination of gender and sexual orientation together producing a synthesised distressful effect on the lesbian group. Therefore, the focal point in this session is the intersectionality inherent to the lesbian identity and its impact on the well-being of the Taiwanese lesbian group.

Before the interview starts, participants are informed about the topic of the following interview. Example questions will be given. The real intention of the interview will not be disguised so to avoid ethical issues. However, during the interview, leading questions are designed to test the reliability of participants' answers. Answers will be interpreted only if it is constant throughout the interview.

To test the first two hypotheses, open-ended questions will be proposed to measure the stress resulted from minority identities (female, lesbian) and age. To measure the level of minority stress, questions regarding prejudice events, expectation of rejection, concealment and internalised stigmatisation. Similar questions will be asked with regards to gender and age respectively. Example questions can be like: what is the most recent prejudice event you experienced because of your gender? What is the most recent prejudice event that you experienced because of your age? How much of your stress comes from your gender/age? To what degree do yourself accept homosexuality?

In the second session, the third hypothesis will be tested. The second interview happens after a five-minute break. Once again, open-ended questions are proposed to evaluate the impacts of the legalisation of same-sex marriage. Example questions can be like: Do you expect less rejection after the legalisation of same-sex marriage? Can you perceive less micro-aggression after the legalisation

of same-sex marriage? Are you more willing to reveal your sexual orientation? Can you perceive less discrimination or hate against homosexuality after the legalisation of same-sex marriage? Does the legalisation of same-sex marriage help you better embrace your identity as a lesbian? Can you perceive a more friendly public attitude toward homosexuality after the legalisation of same-sex marriage?

The severity of stigma experienced by the participants is judged by multiple researchers. The severity level ranges from extremely mild, slightly mild, to slightly severe and extremely severe. Answers from participants are then compared between two age cohorts to test the final hypothesis that the mediating effect brought by the legalisation is more evidential on the younger generation.

A follow-up study will be conducted after two years. Similar questions are proposed again. Answers from the participants at different periods are compared to extricate the effect of age, as it is cohort differences that the study is investigating. Final data interpretation is reached only if the research questions are adequately answered.

#### 4. Conclusion

This study delves into the repercussions of the legalization of same-sex marriage, focusing its examination on the lesbian demographic. This emphasis underscores the significance of incorporating gender as an additional stressor in the realm of lesbian-focused research. This consideration is grounded in Meyer's (2003) Minority Stress Model, which posits that an augmented disadvantaged status can engender elevated stress levels. The study's primary objective is to ascertain whether a portion of the stress experienced by the lesbian group is attributed solely to gender-related factors, or if it is the combined effect of gender and sexual orientation that jointly generates a compounded impact on the lesbian community. The findings, should they substantiate this hypothesis, would serve to fortify the legitimacy of Meyer's (2003) Minority Stress Model.

Furthermore, the protracted follow-up interviews conducted in this research grant it the capacity to disentangle variances attributable to different cohorts from the influence of age. Furthermore, the comprehensive incorporation of sexual minority identity, gender dynamics, legal alterations, and age group distinctions aligns with the framework delineated by the Institute of Medicine (IOM, 2011). This framework amalgamates four focal aspects to provide a more comprehensive understanding of the condition and requirements of sexual minority populations, encompassing minority stress, life course, social ecology, and intersectionality. Consequently, this study can be regarded as one of the scarce initiatives that assess the well-being of LGBTQ+ individuals within the purview of the model advocated by the IOM. It offers valuable insights for future investigations concerning the pragmatic application of such a framework in studies related to the health of sexual minority populations.

This study also serves to address the dearth of research on the subject of same-sex marriage within a non-Western context. The specific backdrop of Taiwan offers a valuable setting for analysis, and its shared characteristics with neighboring East Asian regions are noteworthy. Consequently, this study underscores the importance of meticulous consideration of the nuanced contextual variables within research concerning stigma, thereby offering pertinent policy implications for East Asian neighboring areas where cultural norms surrounding marriage and intimate relationships are akin to those in Taiwan, yet homosexuality remains subject to substantial stigmatization. The validation of the hypothesis that institutional changes like the legalization of same-sex marriage can have a positive impact on the overall well-being of the LGBTQ+ community would lend a sound basis for such legal enactments.

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