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RESEARCH ARTICLE



Self-defining memories as windows into narrative identity: a qualitative study with LGBTQ+ individuals

Maria Luisa Martino^{a*}, Selene Mezzalana^{b*}, Vincenzo Bochicchio^c, Gianluca Cruciani^d, Maria Quintigliano^d, Jefferson Singer^e, Maria Francesca Freda^a, Nicola Carone^b^d and Cristiano Scandurra^a

^aDepartment of Humanities, University of Naples Federico II, Naples, Italy; ^bDepartment of Human and Social Sciences, Mercatorum University, Rome, Italy; ^cDepartment of Humanities, University of Calabria, Rende (CS), Italy; ^dDepartment of Systems Medicine, University of Rome Tor Vergata, Rome, Italy; ^eDepartment of Psychology, Connecticut College, New London, CT, USA

ABSTRACT

The current study qualitatively investigated the narrative identities of LGBTQ+ individuals through their self-defining memories (SDMs): vivid, emotionally intense, and repeatedly recalled autobiographical memories linked to enduring personal concerns. Written SDMs collected from 76 Italian LGBTQ+ individuals through an online survey were analysed to identify the themes and subthemes emerging in their memory narratives. For analytic purposes, participants were considered across four groups: cisgender gay and bisexual+ men, cisgender lesbian and bisexual+ women, transgender and nonbinary (TNB) individuals assigned male at birth (AMAB), and TNB individuals assigned female at birth (AFAB). Reflexive thematic analysis identified patterns of meaning concerning life-story ruptures and loss, experiences of identity and body violation, coming out and identity expression, belongingness, mirroring and self-recognition, and affirming relationships. Experiences of violation recurred across all four groups, and other thematic cores were shared by the two cisgender groups and by the two TNB groups, alongside variations in the salience and configuration of themes. These findings show how experiences of vulnerability, recognition, and relational affirmation become incorporated into autobiographical meaning-making, and they point towards clinical interventions that support the integration and reframing of LGBTQ+ individuals' narrative identities.

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Introduction

'LGBTQ+' is an acronym that refers to lesbian, gay, bisexual, transgender, queer/questioning individuals, as well as to all other individuals who do not self-identify within the cisgender and heterosexual spectrum. LGBTQ+ populations share experiences of both stigma and resilience, along with identity-related processes such as

CONTACT Nicola Carone ✉ nicola.carone@uniroma2.it  Department of Systems Medicine, University of Rome Tor Vergata, Via Montpellier 1, Rome 00133, Italy

*These authors contributed equally.

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coming out and the negotiation of gender or sexual identity within social contexts, all of which are best understood from a life course perspective. Such a perspective also accommodates individual differences in developmental trajectories through an ecological and intersectional lens (Mink et al., 2014). Over recent decades, this has prompted the development of theoretical frameworks that seek to explain the health disparities affecting LGBTQ+ individuals relative to their heterosexual and cisgender counterparts (Fredriksen-Goldsen et al., 2014). Importantly, however, recent contributions on LGBTQ+ health have critically addressed 'damage-centered research' approaches that, by predominantly depicting LGBTQ+ populations through lenses of vulnerability, adversity, and suffering, risk portraying them as powerless or 'damaged', thereby fostering an essentially negative self-concept in sexually and gender marginalised individuals at the expense of recognising their strengths, resources, and other positive features of their identities (Cipollina et al., 2024; Levitt et al., 2023; Tuck, 2009).

Narrative and qualitative research perspectives on LGBTQ+ populations have likewise often focused on specific factors related to marginalisation, frequently highlighting the stigma and discrimination these individuals endure, particularly among transgender and/or nonbinary populations (Schei Jessen et al., 2025). When LGBTQ+ identities are interpreted as emerging from dysfunctional environments or personal and social victimisation, they are not only implicitly pathologized, but trauma and abuse may also be framed as causal explanations of gender and sexual diversity, which are instead to be understood as natural variations of human sexuality and gender (American Psychiatric Association, 1974; American Psychological Association, 2009; Coleman et al., 2022; World Health Organization, 2022). Indeed, research has consistently shown that LGBTQ+ people are not more likely to be LGBTQ+ because of victimisation; rather, they are more likely to be victimised due to their increased exposure to discrimination, stigma, and rejection stemming from societal cis- and heteronormative rules (Ericsson, 2021). Therefore, what places LGBTQ+ people at increased risk of undergoing traumatic experiences is not their LGBTQ+ identity per se, but broader social determinants of health, including stigmatising and oppressive social systems.

Previous research on the narrative identities of LGBTQ+ populations has gathered a wide range of self-stories. For instance, research has documented the pathways related to the coming out process (Galatzer-Levy & Cohler, 2002; L. King & Noelle, 2005; L. A. King et al., 2009; Klein et al., 2015), subjective well-being and ego development (L. A. King & Smith, 2004), political exclusion in the life course (Hammack & Cohler, 2011), social media activities (Bates et al., 2020), and intergenerational story sharing (Weststrate et al., 2024), all in their association with LGBTQ+ individuals' identity narratives.

To our knowledge, however, no study has explicitly examined LGBTQ+ individuals' self-defining memories (SDMs), a specific class of autobiographical memories that are unusually vivid and enduring within the life story (Singer et al., 2013). Because these memories play a central role in narrative identity, it is valuable to establish whether shared and distinctive themes can be identified across a cross-section of LGBTQ+ individuals. Accordingly, the present study addresses this gap by qualitatively exploring the SDMs of LGBTQ+ people for the concerns, conflicts, and recurrent themes they may reveal within narrative identity.

From a damage-centred to an affirming approach in LGBTQ+ research: the importance of narrative identity

More recently, research targeting LGBTQ+ populations has increasingly moved towards empowering, positive, and affirming approaches, which conceptualise LGBTQ+ individuals as active agents capable of constructing a healthy and coherent self-concept through the mobilisation of resilience and adaptive coping strategies (De Lira & De Morais, 2018; Vaughan & Rodriguez, 2014), both in the broader social context and in specific settings such as healthcare (Cruciani et al., 2024, 2025; Mezzalira, Carone, Boichichio, Cruciani, et al., 2025; Cruciani et al., 2025; Mezzalira, Carone, Boichichio, Villani, et al., 2025; Mezzalira et al., 2026). While the minority stress framework (Meyer, 2003; Testa et al., 2015) has played a crucial role in documenting the structural roots of health disparities affecting LGBTQ+ people, research traditions built on it have been criticised for foregrounding distress and vulnerability as the primary lens of inquiry, without adequately accounting for agency, meaning-making, and strengths (Tuck, 2009). Qualitative syntheses have shown how damage-centred research may obscure the generative and agentic dimensions of gender and sexual identities, particularly among trans and nonbinary individuals (Levitt et al., 2023), prompting calls for more integrative perspectives capable of supporting a nuanced and nonpathologizing understanding of LGBTQ+ individuals' self-concepts and life trajectories (Cipollina et al., 2024).

Narrative identity construction is multilayered, drawing on different facets of any given individual; lives do not reduce easily to a single narrative explanation. The ways that sexually and gender marginalised individuals position themselves within society may not only collide with hostile and oppressive environments but also reflect only one of the various expressions of their multiple intersecting identities (Sadika et al., 2020). Research has shown that LGBTQ+ individuals report better well-being when they are supported in exercising control over the narratives used to define themselves in social contexts. The production of such 'counternarratives' supports positive, health-promoting self-concepts by asserting agency against societal oppression (Wagaman, 2016).

Within this theoretical landscape, McLean and Syed (2016) focused on the interaction between self and society and on the constraints on agency that hinder individuals' efforts to construct their personal identities. On this basis, they highlighted 'master narratives', referring to culturally shared stories that guide thoughts, beliefs, values, and behaviours. Individuals can make sense of their life narratives by focusing on culturally reinforced stories of personal growth, meaning, and integration, which are all associated with well-being (Adler et al., 2016; Syed & McLean, 2022). However, marginalised populations such as LGBTQ+ people are likely to develop *alternative narratives* that do not fit into the societal master narrative expectations and are reinforced by community sharing (McLean & Syed, 2016).

Over the past two decades, a growing body of research has reshaped our understanding of sexual and gender identity development, with self-narratives emerging as a critical theoretical and methodological lens of investigation allowing for a shift from essentialist models that construe identity as fixed and biologically determined (Hammack et al., 2019). Central to this shift was the introduction of the notion of 'narrative generations' to describe how LGBTQ+ individuals construct their identities under the influence of specific historical and social scripts (Cohler & Hammack, 2007; Hammack & Cohler, 2011).

Such frameworks have challenged linear, stage-based developmental models (e.g. the 'classic' coming out as a universal trajectory), proposing instead a pluralistic understanding of identity development as rooted in sociocultural and historical contingencies (Hammack, 2018; Hammack & Cohler, 2009). Researchers have further elaborated this framework by exploring how broader sociopolitical shifts (e.g. the AIDS crisis, the legalisation of same-sex marriage, the biomedicalization of sexuality through PrEP) shape the narrative resources through which LGBTQ+ individuals make sense of their lives (Hammack, 2018; Hammack & Cohler, 2009; Hammack et al., 2019).

Narrative identity: from autobiographical memory to self-defining memories

Within a narrative identity framework, autobiographical memories provide the coherence and continuity that are fundamental to identity integration (McAdams & McLean, 2013). They also play a key role in emotion regulation, with consequences for psychological and physical health (Adler et al., 2016; Singer & Blagov, 2004). Autobiographical memory (AM) refers to a knowledge base of personal information that includes specific episodic memories of past events and conceptual self-information. AM relies on a hierarchical retrieval process that moves across levels of specificity, from the most general to the most specific, when a person searches for a memory. Autobiographical knowledge may be organised into broad phases or stages of life ('life periods'), into more limited thematic timelines spanning months, weeks, or days ('general events'), or into representations with specific imagistic qualities tied to a single moment in time ('event-specific knowledge') (Conway & Pleydell-Pearce, 2000; Conway et al., 2004). AMs are accessed first through abstract categories, and considerable effort is required to reach specific details; executive and working memory difficulties, which may follow critical or traumatic experiences, can impair retrieval and lead to overgeneral memory (Hulbert & Anderson, 2018; Williams et al., 2007).

An SDM is a highly event-specific type of AM (Cuervo-Lombard et al., 2021; Moffitt & Singer, 1994; Murray et al., 2013) that elicits strong emotions and vivid sensory detail when recalled. Its defining characteristics include vividness and emotional intensity, repeated recall, linkage to memories sharing similar thematic content, and connection to ongoing personality concerns or conflicts (Blagov & Singer, 2004; Singer & Bonalume, 2010). The adaptive use of SDMs is associated with individuals' ability to extract an integrative meaning for their sense of self, life goals, and relationships (Blagov et al., 2022; Martino et al., 2024; Morel et al., 2015; Singer & Blagov, 2004; Tuchina & Singer, 2026). As researchers develop a more nuanced understanding of the directions narrative identity may take among LGBTQ+ individuals, it becomes important to examine the salient themes and patterns in their SDMs. Identifying such themes may help both researchers and clinicians to better understand how identity-related concerns, resources, and meanings are organised and negotiated, thereby informing more sensitive ways of exploring and supporting identity development within this heterogeneous population.

The Italian sociocultural context

Given that the current study was conducted in Italy, the specific sociocultural context in which participants' narratives were produced should also be considered.

Italy is a historically and predominantly Catholic country in which substantial progress in LGBTQ+ visibility and recognition has occurred over recent decades, including the introduction of same-sex civil unions in 2016. However, important inequalities persist: same-sex marriage is still unavailable, full equality in family rights has not been achieved, and legal protections against discrimination and hate crimes based on sexual orientation and gender identity remain fragmented and incomplete. These legal disparities coexist with persistent heteronormative and cisnormative expectations and with both explicit and more subtle forms of prejudice and discrimination towards sexual and gender diversity (Bochicchio et al., 2024; Della Casa et al., 2024; Mezza et al., 2024; Mezzalana, Carone, Bochicchio, Villani, et al., 2025; Scandurra, Monaco, et al., 2021). In line with this, recent European data indicate that LGBTQ+ people in Italy remain less likely than the EU average to be open about their identities and continue to report substantial experiences of discrimination (European Union Agency for Fundamental Rights, 2024). This context is relevant to the present study because it may shape the master narratives against which LGBTQ+ individuals in Italy construct their life stories (McLean & Syed, 2016).

The current study

The present study explored the main themes and subthemes emerging from the SDMs recalled by LGBTQ+ individuals. It was guided by the following research question: ‘What patterns of meaning characterize the SDMs recalled by LGBTQ+ individuals, and how might these patterns vary across differently situated gendered and embodied experiences?’ For analytic purposes, participants were considered across four groups defined by the intersection of cisgender/transgender and non-binary status and, for transgender and nonbinary (TNB) participants, sex assigned at birth: (a) cisgender gay and bisexual+ (GB+) men, (b) cisgender lesbian and bisexual+ (LB+) women, (c) TNB individuals assigned male at birth (AMAB), and (d) TNB individuals assigned female at birth (AFAB). This grouping served as an analytic lens rather than as an assumption that the groups constitute homogeneous or inherently distinct identity categories. For TNB participants, sex assigned at birth was retained as one dimension of differently situated gendered and embodied experience; it was not treated as a proxy for current gender identity. Previous research has considered sex assigned at birth alongside current gender identity and suggests that these dimensions may intersect in shaping specific experiences of minority stress, victimisation, and embodiment, with some studies reporting variation across AMAB and AFAB participants (e.g. Mirabella et al., 2020; Rimes et al., 2019). Importantly, however, these findings are heterogeneous: other research found no differences by sex assigned at birth in the timing of gender identity milestones, proximal minority stress, or mental health (Scandurra, Carbone, et al., 2021), and the available evidence does not support a uniform or deterministic distinction between AMAB and AFAB individuals. Accordingly, the present grouping was used to preserve potentially relevant variation in participants’ situated experiences without presuming systematic differences between the two groups.

Method

Participants and procedures

Data analysed in the current study were obtained as part of a research project entitled 'Intersectional Stigma and Health Equity Promotion for LGBT People in Primary, Sexual/ Reproductive, and Mental Health Care Settings', an Italian study supported by the Italian Ministry of University and Research (MUR) under the call Progetti di Rilevante Interesse Nazionale (PRIN) 2022 funded by the European Union–NextGenerationEU, aimed at analysing the experiences and health outcomes of Italian LGBTQ+ individuals in health-care settings and factors associated with stigma perpetrated against them by healthcare professionals. Using a snowball sampling procedure, the study disseminated a cross-sectional online survey through social media platforms and the main Italian associations advocating for LGBTQ+ rights, in order to gather data from individuals self-identifying as LGBTQ+.

Participants were deemed eligible for the study if they (1) self-identified as LGBTQ+ persons; (2) were at least 18 years old (the age of legal majority in Italy); (3) resided in Italy; and (4) had accessed at least one healthcare service in the past five years. They were asked to answer questions on healthcare experiences, health outcomes, minority stress, and general psychological factors. At the end of the survey, participants were given the option to voluntarily answer additional questions about SDMs. This section was entirely optional, as it was unrelated to their experiences within healthcare settings.

Of the 360 participants who completed the broader survey, 76 provided a response to the SDM task and were included in the present qualitative analysis (21.11% of the total sample). For analytic purposes, participants were grouped as follows: 25 (32.89%) cisgender GB+ men, 26 (34.21%) cisgender LB+ women, 8 (10.53%) AMAB TNB individuals, and 17 (22.37%) AFAB TNB individuals. Within the TNB groups, AMAB participants included 4 trans women (5.26% of the total qualitative sample), 3 nonbinary individuals (3.95%), and 1 questioning individual (1.32%), whereas AFAB participants included 4 trans men (5.26%), 8 nonbinary individuals (10.53%), and 5 questioning individuals (6.58%), thus reflecting heterogeneity in gender identities within both groups. Regarding sexual orientation, 36 participants (47.37%) identified as gay or lesbian, while 26 (34.21%) reported bisexual+ identities, including 18 bisexual and 8 pansexual participants. Four participants (5.26%) identified within the asexual spectrum (asexual, demisexual, or graysexual; Copulsky & Hammack, 2023), 4 (5.26%) as heterosexual, and 6 (7.89%) as having other sexual orientations. The four heterosexual participants were TNB individuals (three trans women and one trans man).

Participants were between 19 and 76 years old ($M = 30.00$, $SD = 10.12$), with the average age of the groups distributed as follows: cisgender GB+ men ($M = 33.36$, $SD = 12.87$), cisgender LB+ women ($M = 29.88$, $SD = 9.79$), AMAB TNB individuals ($M = 27.00$, $SD = 6.63$), and AFAB TNB individuals ($M = 26.65$, $SD = 5.30$). A one-way between-subjects ANOVA revealed no statistically significant difference in mean age across groups, $F(3, 72) = 1.84$, $p = .15$. Most participants had completed at least a college-level education ($n = 48$, 63.16%). The sample was predominantly White ($n = 74$, 97.37%); one gay man and one lesbian woman identified as Hispanic. The sociodemographic questions and response

options used to characterise the participants in the present study are provided as Supplemental Material.

The study was granted ethical approval by the Ethical Committee of the University of Naples 'Federico II' (protocol no. 10/2024) and by the Territorial Ethics Committee Latium Area 2 (protocol no. 197.24 CET2 utv). It complied with the EU General Data Protection Regulation and adhered to the ethical principles of the Declaration of Helsinki regarding medical research involving human participants. Privacy and data security were safeguarded in accordance with Italian law 196/2003. Participant data were gathered through a secure platform accessible only to the principal investigators, and all IP addresses were removed before sharing the dataset with other researchers. Data used in this study were collected between May 2024 and January 2025.

Measures

Within the online survey, administered through the Qualtrics platform, participants completed an SDM elicitation task adapted from the classification and scoring manual of Singer and Blagov (2000). Participants were first given an explanation of what SDMs are and were then asked to recall and describe memories of this kind. The full script given to participants is available as Supplemental Material.

Analyses

The reflexive thematic analysis approach proposed by Braun and Clarke (2006, 2012) was used to explore patterns of meaning across the participants' SDMs. The analysis was conducted by two researchers (MLM and SM) working collaboratively, reflectively, and recursively, with the aim of identifying overarching themes that expressed the central concerns of participants' narrative identities (Braun & Clarke, 2021). When different interpretations emerged, the third and last authors (VB and CS), who were not involved in the first phase of the analysis, contributed to collaborative discussions through which interpretations and thematic patterns were further developed and refined. The analysis followed a six-phase process: (1) familiarization with the data and construction of notes; (2) generation of initial codes; (3) theme generation; (4) review of potential themes; (5) definition and naming of the themes; and (6) production of the report, including collaborative discussion and refinement of the thematic structure with the broader research team.

Although the analysis attended to the four participant groups, it was not designed as a formal comparative qualitative analysis. Similarities and variations across groups were therefore interpreted in terms of the configuration and salience of themes within the present dataset, rather than as evidence of systematic between-group differences. All analyses were conducted on the original Italian narratives. After the analytic process was completed and illustrative quotations were selected, they were translated into English by the research team and subsequently reviewed by a native English-speaking U.S. member of the team to enhance linguistic accuracy while preserving the meaning of participants' original accounts.

Researchers' reflexivity

The research team comprised nine academic researchers, most of whom are also practicing clinical psychologists working with LGBTQ+ individuals. All researchers were cisgender women and men, with diverse sexual orientations, including gay, bisexual, and heterosexual identities. Thus, although the team included substantial diversity in terms of sexual orientation, it did not include transgender or nonbinary researchers. However, several team members have extensive research experience in transgender health and maintain longstanding collaborations with transgender individuals and researchers, including co-authorship of previous studies with transgender scholars. Based on their scholarly, clinical, and personal experience, researchers were attentive to the impact of cis-heteronormative assumptions on LGBTQ+ individuals' lives. At the same time, we acknowledge that researchers' positionalities inevitably shaped the interpretive process and that the absence of TNB researchers may have limited the range of lived perspectives informing the interpretation of TNB participants' narratives. These considerations were explicitly reflected upon throughout the collaborative and recursive analytic process.

Results

The results are organised into two main sections. The findings for cisgender GB+ men and LB+ women are presented together to foreground areas of thematic convergence while preserving the group-specific themes and subthemes identified in the analysis. The findings for TNB AMAB and AFAB participants are presented together following the same logic. [Table 1](#) provides an overview of the themes and subthemes identified across the four analytically defined participant groups.

SDM themes in cisgender sexual minority participants

The SDMs recalled by cisgender GB+ men and LB+ women showed substantial overlap in their broader thematic structure, particularly around life-story ruptures associated with loss and experiences of identity violation and interpersonal harm. Within these shared thematic cores, however, the memories showed somewhat different configurations and emphases, as reflected in the group-specific theme and subtheme labels reported in [Table 1](#). In addition, coming out and the negotiation between concealment and an authentic self emerged particularly in the SDMs of cisgender GB+ men, whereas belongingness, negotiated between separation and connection, was particularly salient among cisgender LB+ women.

Life-story ruptures

Life-story ruptures associated with experiences of death, loss, and separation emerged in the SDMs of both cisgender GB+ men and LB+ women. Although this represented a shared thematic core, the memories showed somewhat different configurations across the two groups.

Cisgender GB+ men: when loss reshapes the self (theme 1). Among cisgender GB+ men, experiences of death, loss, and grief emerged as turning points capable of reshaping

Table 1. Overarching themes and subthemes identified through reflexive thematic analysis across the four LGBTQ+ participant groups ($N = 76$).

LGBTQ+ population	Major themes	Subthemes
Cisgender GB+ men	1. Life-story ruptures: when loss reshapes the self	1.1. Loss and grief as turning points
	2. Violated identities: making sense of the self after victimisation	2.1. Trauma, guilt, and distorted self-attributions 2.2. The body as a site of shame and humiliation
	3. Coming out: between concealment and an authentic self	3.1. Discovering and naming the self 3.2. Between concealment and self-disclosure
Cisgender LB+ women	1. Life-story ruptures: living through loss and separation	1.1. Loss and grief as enduring emotional traces
	2. Violated identities: when relationships become sites of harm	2.1. Victimisation, powerlessness, and guilt 2.2. Being hurt without understanding why
	3. Belongingness: between separation and connection	3.1. From separation and loneliness to belonging 3.2. Finding belonging in the LGBTQ+ community
TNB AMAB individuals	1. The body as a site of trauma and violation	1.1. Trauma as a rupture in meaning
TNB AFAB individuals	2. Being seen to recognise the self	2.1. Finding oneself through mirroring
	3. Coming out as a search for an authentic self	3.1. Experimenting with gender expression
	1. The body as a site of trauma and powerlessness	1.1. Sexual abuse as a rupture in meaning 1.2. Being invalidated through gendered norms
	2. Mirroring as a path to self-recognition	2.1. Recognising oneself beyond gender norms
	3. Affirming relationships as sources of safety and self-worth	3.1. Being accepted and cared for by significant others

GB+ = gay/bisexual+; LB+ = lesbian/bisexual+; TNB = transgender and nonbinary; AMAB = assigned male at birth; AFAB = assigned female at birth. In the Results, Themes 1 and 2 are presented jointly as thematic cores shared by the two cisgender groups (life-story ruptures; violated identities) and by the two TNB groups (the body as a site of trauma; mirroring and self-recognition), each with group-specific configurations; Theme 3 is presented separately for each group.

the individual's sense of self and relationship with life. Such experiences were associated with mourning, perceived emptiness, and a sense of discontinuity between life before and after the loss. Loss and grief as turning points (subtheme 1.1) could be recalled as emotionally overwhelming and as marking a profound crisis, as recounted by ID 34, a 24-year-old man:

I know for a fact that it changed me and marks an important turning point in my life and explains well why I am the way I am today. It was my first encounter with death, I had attended other funerals but never of people I had known, this time it was one of my high school teachers, who had had a strong influence on me [...]. When I saw her coffin, I felt an emotional overload that paralysed my thoughts. [...] that sent me into a deep crisis.

Cisgender lb+ women: living through loss and separation (theme 1). Among cisgender LB+ women, the memories retraced the actual or symbolic loss of significant figures. These losses emerged as enduring emotional traces within participants' life stories, linking experiences of separation to feelings of grief, emptiness, and powerlessness. Loss and grief as enduring emotional traces (subtheme 1.1) were particularly evident in memories

concerning the death of significant others. Actual loss could involve the death of someone who represented ‘a great reference point and an example [...] A woman who in her strength of spirit was able to convey and give me security and love’ (ID 24, 28-year-old woman).

At times, LB+ women recounted experiences of death and loss without explicitly mentioning any feelings, as in the memory of ID 4, a 32-year-old woman, who narrated that when she was 15: ‘My best friend and my grandfather (who raised me as if he were my father) died on the same day, and I stayed in the mortuary between their two open coffins all afternoon’.

Symbolic loss of significant others (e.g. the end of important relationships) similarly appeared to leave enduring emotional traces in participants’ narratives. Abandonment, betrayal, rejection, and separation were expressed by ID 10, a 33-year-old woman (‘The day I was dumped by my ex: it was one of the worst days of my life. [...] The pain I felt was excruciating and still hurts me today’), and ID 18, a 22-year-old woman: ‘When my best friend from high school moved away from me (I was in love with her) I felt very bad’.

Violated identities

Experiences of victimisation and interpersonal harm represented another shared thematic core across the SDMs of cisgender GB+ men and LB+ women. Across participants’ narratives, sexual abuse, harassment, physical aggression, bullying, and bodily humiliation were associated with experiences of guilt, powerlessness, shame, and difficulties in making sense of what had happened.

Cisgender GB+ men: making sense of the self after victimization (theme 2). Among cisgender GB+ men, experiences of victimisation and bodily humiliation entered participants’ narratives about themselves and their attempts to make sense of what had happened.

Trauma, guilt, and distorted self-attributions (subtheme 2.1) were particularly evident when experiences of sexual abuse became intertwined with participants’ attempts to understand themselves and their sexual identity. For instance, ID 28, a 28-year-old man, described the abuse he experienced as a loss of his ‘innocence’ and connected it with profound feelings of guilt:

I was raped on several occasions from when I was a child to when I was 15/17 years old. I don’t remember well, sometimes I think I am gay because after being raped they stole my innocence. I enjoyed it, but I feel like a sinner who can’t let go of sin and if I died today, I would go to hell.

In this account, the participant explicitly connects the experience of sexual abuse with guilt, religious condemnation, and uncertainty about the meaning of his sexual identity.

The body as a site of shame and humiliation (subtheme 2.2) emerged in memories of body shaming, in which participants’ bodies became the target of degrading interpersonal experiences. This is illustrated by ID 39, a 38-year-old man, who described an experience of ‘medical fatphobia’: ‘At an anal inspection for a hemorrhoid problem, the doctor said, laughing, in front of the residents, trainees, and nurse, that I had a “very big buttock”.’

Cisgender LB+ women: when relationships become sites of harm (theme 2). Among cisgender LB+ women, interpersonal relationships, including those expected to provide trust and safety, instead emerged as contexts of victimisation, powerlessness, and harm. Across these narratives, experiences of harassment, physical aggression, and bullying were intertwined with feelings of guilt, helplessness, and difficulty making sense of why the harm occurred.

Victimisation, powerlessness, and guilt (subtheme 2.1) emerged particularly clearly in memories of sexual harassment and physical aggression. As recalled by ID 21, a 36-year-old woman, a feeling of guilt accompanied her experience of sexual harassment and her freezing response:

During the night he [a man who was sitting nearby on the train] started to harass me by putting his hands on me, on my breasts, between my legs, and licking my ear and neck. [...] I froze and pretended to be asleep. In the morning, I looked stubbornly out the window. I felt very guilty.

Interpersonal harm also emerged within close relationships, as in the case of ID 9, a 20-year-old woman:

I had a best friend with whom I had opened up a lot, we saw each other almost every day until [...] she started mistreating me with rather sadistic methods [...] she stepped on my back and pinched me, from which I still have small scars [...] I finally cut off relations with her.

Her account describes a movement from being subjected to aggression within a trusted relationship to ending that relationship.

Being hurt without understanding why (subtheme 2.2) characterised memories of bullying in which participants explicitly described the absence of an intelligible explanation for others' behaviour. ID 3, a 23-year-old woman, recalled only 'Being bullied by my best friend'. The absence of an explanation is particularly explicit in the experience of ID 7, a 24-year-old woman:

I'm in primary school class; a note lands on my desk. At the top, it says, 'Do we fight with *my name*?' and following it are almost all affirmative answers from my classmates. It's not the first time; it hurts just the same. It hurts, I cannot even ask why. I get no explanation.

Coming out: between concealment and an authentic self (theme 3, cisgender GB + men)

Coming out to oneself and others emerged as a complex and multifaceted process through which participants negotiated the tension between concealing their sexual identity and expressing a more authentic sense of self. For GB+ male participants, this process was strongly intertwined with self-discovery, but it was not portrayed as straightforward or uniformly liberating.

Discovering and naming the self (subtheme 3.1) frequently involved gaining greater awareness of one's sexual identity. Achieving self-awareness could be accompanied by a blend of positive (e.g. self-affirming) and negative (e.g. anxiety-provoking) emotions. Ambivalent feelings were at times associated with the disappearance of 'doubts, worries, fears' (ID 47, 50-year-old man), and at other times with their intensification:

Mixed emotions in my stomach, but so much desire to shout to the world what I always knew I was. Conflicting thoughts out of fear of the truth, but also out of the desire that internal-I and external-I could finally come together (ID 43, 34-year-old man).

Between concealment and self-disclosure (subtheme 3.2) captured the tension between keeping one's sexual orientation private and disclosing it to others. In the case of ID 34, a 24-year-old man, the process moved from concealment ('I had always believed that my homosexuality would forever be only in my head') to moments of ambivalence as to whether to disclose his identity to his family ('the vague idea of talking about it with other family members crept into my head'), to the final coming out ('I'm gay'), followed by reassuring attitudes from his family members.

Belongingness: between separation and connection (theme 3, cisgender lb+ women)

Belongingness emerged as a relational process negotiated between experiences of separation and loneliness and the possibility of finding meaningful forms of connection.

From separation and loneliness to belonging (subtheme 3.1) emerged in memories illustrating how leaving familiar relational contexts could coexist with the possibility of establishing new forms of connection. At times, participants described withdrawing into themselves. At other times, new encounters transformed experiences of uncertainty and displacement into an unexpected sense of belonging:

I graduated and arrived in [city] with only one pair of shoes and one bra. I was coming from a toxic and negative love affair. [. . .] The taxi driver was a wonderful person, and at the end of the ride, full of life talk, he gave me a book by Schopenhauer. I immediately felt at home (ID 21, 36-year-old woman).

The participant described the encounter as making her feel 'at home' despite arriving in an unfamiliar city after a difficult relationship.

Finding belonging in the LGBTQ+ community (subtheme 3.2) emerged in memories in which participants described connection with others alongside feelings of joy and pride, sometimes in contrast with previous experiences of discrimination:

My first gay pride in [city] was a total celebration. Walking around the streets of the city with pride and absolute joy. [. . .] I felt that we were taking back the city, in the only place in the world where I was openly insulted while holding hands with my girlfriend at the time (ID 21, 36-year-old woman).

SDM themes in TNB participants

The SDMs recalled by TNB AMAB and AFAB participants also showed substantial overlap in their broader thematic structure, particularly around the body as a site where experiences of trauma and violation are lived and remembered, and around mirroring experiences through which participants could recognise themselves. Within these shared thematic cores, the memories showed somewhat different configurations and emphases, as reflected in the group-specific theme and subtheme labels reported in [Table 1](#). In addition, gender-related coming out, explored through experimentation with gender expression, emerged particularly in the SDMs of TNB AMAB participants, whereas affirming relationships as sources of acceptance, safety, and self-worth were particularly salient among TNB AFAB participants.

The body as a site of trauma

Memories in which the body became a site of sexual violation and trauma emerged in the SDMs of both TNB AMAB and AFAB participants. Although this represented a shared thematic core, the memories showed somewhat different configurations across the two groups. Among TNB AFAB participants, for instance, the theme also encompassed invalidation through gendered norms.

TNB AMAB participants: the body as a site of trauma and violation (theme 1). This theme captures memories in which the body becomes the site through which traumatic experiences of sexual violation are lived and subsequently given meaning.

Trauma as a rupture in meaning (subtheme 1.1) emerged in memories in which sexual abuse disrupted participants' relationship with their own bodies and required subsequent efforts to make sense of what had happened. This is evident in the account of ID 58, a 19-year-old trans woman, who recalled an extremely traumatic episode of sexual abuse:

I was sexually abused when I was 14 years old by a man who was 36 at the time. [...] I thought that giving my body to someone who said he liked me was my duty and so I did it. [...] I vividly remember the humiliation and confusion when, once I got home, his sperm started coming out of my anus. [...] It left me with a trauma that I had to unravel and heal in the following years.

In this memory, the bodily experience of abuse is intertwined with humiliation and confusion, while the participant explicitly describes the trauma as something she had to 'unravel and heal' in the following years.

TNB AFAB participants: the body as a site of trauma and powerlessness (theme 1).

This theme captures memories in which experiences of sexual abuse and gender-related invalidation position the body as a site of trauma and powerlessness.

Sexual abuse as a rupture in meaning (subtheme 1.1) emerged in memories in which bodily violation disrupted participants' sense of safety and their relationship with their own bodies. Participants' narratives illustrate how such experiences could leave enduring traumatic traces. For example, ID 71, a 29-year-old nonbinary AFAB person, recalled: 'During my early teens I repeatedly had non-consensual relations with an older man. I was a child; he was a toothless old man. This experience traumatised me'.

The asymmetry between the participant as a child and the older perpetrator foregrounds the powerlessness embedded in the experience and the enduring traumatic meaning attributed to it. A particularly explicit connection between bodily violation, lack of safety, and estrangement from one's body emerges in the account of ID 67, a 22-year-old nonbinary AFAB person, who described:

Not having the conception of this body as my own; since I did not have access to safe environments in adolescence, I ended up growing up in street environments with particularly physically abusive friends and partners, whom I accepted as I did not recognise the violence done to me and many of them were queer with an extremely violent past.

Here, the participant explicitly connects a disrupted sense of bodily ownership with the absence of safe relational environments and subsequent experiences of interpersonal violence.

Being invalidated through gendered norms (subtheme 1.2) emerged in less overt but still harmful interpersonal experiences in which participants' gendered selves or expressions were judged against normative expectations. For example, ID 64, a 37-year-old questioning person, recalled: 'A family member with whom I lived in the family home told me that I was not a "typical" man'.

Mirroring and self-recognition

Mirroring experiences, through which encounters with representations, definitions, or significant others made aspects of the self recognisable, represented another shared thematic core across the SDMs of TNB AMAB and AFAB participants. Among TNB AMAB participants, these memories also included the converse experience of concealing gendered interests, whereas among TNB AFAB participants recognition was framed more explicitly in relation to binary gender norms.

TNB AMAB participants: being seen to recognise the self (theme 2). This theme captures mirroring as a process through which participants could encounter representations of gender diversity that made previously difficult-to-name aspects of themselves recognisable. Finding oneself through mirroring (subtheme 2.1) emerged when encounters with alternative gender representations provided participants with a language or image through which to recognise themselves. After watching a TV series, ID 8, a 19-year-old trans woman, started to identify

as a transgender woman and this is the label that still defines me today. I felt relieved as if I had finally found a definition of me that described me in some respect and made me feel right with myself, no longer confused and lost as I had been for several years, unhappy with myself.

Here, the encounter with an external representation appears to function as a mirror through which the participant can name and recognise an aspect of herself that had previously been experienced through confusion and a sense of being lost.

Conversely, participants also recalled experiences in which gendered interests or expressions were associated with shame and concealment:

I remember a vivid sense of shame felt when, as a child [...] I used to hide my toy doll and unicorn so that those who came to my house would not see that I had a 'forbidden' toy. [...] I felt a strong sense of insecurity and immense shame for who I was and what I liked. (ID 58, 19-year-old trans woman)

Across these memories, encounters with affirming representations were associated with self-recognition, whereas their absence was reflected in experiences of shame and concealment.

TNB AFAB participants: mirroring as a path to self-recognition (theme 2). This theme captures mirroring experiences through which participants encountered identities, representations, or relationships that enabled them to recognise aspects of themselves beyond binary gender norms. Recognising oneself beyond gender norms (subtheme 2.1) emerged both through encountering language that made nonbinary identities intelligible and through relational contexts that supported experimentation with

gender expression. For instance, ID 65, a 29-year-old TNB AFAB person, recalled the moment ‘When I first saw a non-binary definition of a human being. It was like feeling an enormous weight lift from my heart’. Similarly, ID 63, a 34-year-old nonbinary AFAB person, recounted:

When I was 13, I cut my hair short ‘like a boy’. [...] I decided to experiment with my gender expression (clothes and haircut) strong in the fact that I had her [a close friend] as an ally in this rebellion against the norm. I remember it was the best summer of my life, I finally felt comfortable with my appearance, I could express myself outside the social impositions of gender binarism.

Across these narratives, mirroring operates as a pathway to self-recognition: encountering a definition in which one can recognise oneself or having an ally who supports gender exploration creates space for participants to understand and express themselves beyond socially imposed gender norms.

Coming out as a search for an authentic self (theme 3, TNB AMAB participants)

This theme captures gender-related coming out as a process of exploring and expressing an authentic sense of self rather than as a single act of disclosure.

Experimenting with gender expression (subtheme 3.1) emerged as an important pathway through which TNB AMAB participants could explore the relationship between how they presented themselves and their developing understanding of gender identity. This process is recounted by ID 55, a 24-year-old nonbinary AMAB person (‘The first time I tried make-up thanks to friends allowed me to access a feminine part of me and from there to reflect on my gender identity’); and by ID 60, a 25-year-old trans woman (‘I put on very feminine clothes, looked at myself in the mirror and even put the photo on Instagram’).

These memories portray experimentation with appearance not merely as a change in presentation, but as an opportunity to explore and give expression to aspects of the self. Coming out could also be remembered as a moment in which a self-defined identity was shared and celebrated with others, as illustrated by ID 56, a 39-year-old nonbinary AMAB person: ‘My first coming out as a nonbinary person took place at a self-awareness circle for nonbinary people, I said I had chosen my name, and we celebrated’.

Affirming relationships as sources of safety and self-worth (theme 3, TNB AFAB participants)

This theme concerns the relational experience of being accepted and cared for by significant others. Here, affirming relationships emerge as contexts in which participants can experience safety, belonging, and a sense of being worthy of care. Being accepted and cared for by significant others (subtheme 3.1) emerged in participants’ narratives as an experience through which relational safety and self-worth could be restored or strengthened. This is particularly evident in the account of ID 67, a 22-year-old nonbinary AFAB person:

I told her my history and identity, and she accepted me as such and made me feel seen and a person worthy of unconditional affection, who could have friends who were not dangerous to my mental health or who rejected my identity.

In this account, acceptance is explicitly linked by the participant to feeling 'seen', worthy of affection, and able to imagine relationships that are safe rather than dangerous or rejecting.

A similar movement towards relational safety and belonging emerged in memories involving LGBTQ+ community spaces. For ID 63, a 34-year-old nonbinary AFAB person, participation in a lesbian festival transformed an ordinarily anxiety-provoking social situation into an experience of euphoria and feeling 'at home':

First lesbian festival I attended [...]. The atmosphere enraptures me, I feel intoxicated, and what I see and breathe is new and attracts me. My usual social anxiety is transformed into a kind of euphoria, I have no fear, I feel at home even though I am surrounded by strangers.

Discussion

The thematic analysis of the SDMs recalled across the four participant groups revealed shared patterns of meaning linked to potentially disruptive experiences: victimisation and body-related trauma and violation recurred across groups, whereas loss characterised the SDMs of cisgender participants. These findings align with an extensive literature documenting the disproportionate exposure of LGBTQ+ individuals to stigma, discrimination, rejection, and victimisation, as conceptualised within minority stress frameworks (Hendricks & Testa, 2012; Meyer, 2003). They extend that literature by showing how such experiences may be represented within SDMs not simply as adverse events, but as autobiographical turning points through which participants organise meanings concerning their self, body, and relationships with others.

Alongside these shared thematic cores, the analysis suggested some variation in the configuration and salience of thematic patterns across the four participant groups. Among cisgender sexual minority participants, SDMs converged around life-story ruptures related to loss and experiences of identity violation and interpersonal harm, while varying in the salience of other thematic patterns. Among cisgender GB+ men, one particularly salient pattern concerned coming out, with memories capturing a tension between concealment and self-disclosure and the search for an authentic sense of self. This pattern is consistent with research conceptualising coming out not as a single event but as an ongoing and context-dependent process in which disclosure is negotiated in relation to anticipated acceptance, rejection, and safety (e.g. Legate et al., 2012; Pachankis et al., 2020). From an SDM perspective, the present data further suggest that particular moments within this process may acquire autobiographical significance because they connect the naming and disclosure of sexual identity with a perceived movement towards greater congruence between internal and socially expressed aspects of the self. In the Italian context, where LGBTQ+ people remain less likely than the EU average to be open about their identities (European Union Agency for Fundamental Rights, 2024), such moments may carry particular autobiographical weight.

Among cisgender LB+ women, one particularly salient pattern concerned belongingness, negotiated between separation, loneliness, and connection. This finding echoes work identifying belonging and LGBTQ+ community connectedness as important relational resources in the context of minority stress (Frost & Meyer, 2012). The SDMs examined here add a narrative dimension by illustrating how belonging can be organised

around specific autobiographical moments in which experiences of isolation or displacement are transformed through interpersonal or community connection.

Among TNB participants, whose SDMs likewise converged across the AMAB and AFAB groups around the body as a site of trauma and around mirroring, embodied and relational processes of identity recognition were particularly salient. TNB AMAB participants recalled mirroring experiences through which previously difficult-to-name aspects of the self could become recognisable, alongside memories in which experimentation with gender expression contributed to the exploration of an authentic gendered self. This finding is consistent with research showing that gender-related self-expression and disclosure are negotiated in relation to gender recognition, stigmatisation, and embodied experience (Kade, 2021). TNB AFAB participants similarly described mirroring as a pathway to self-recognition beyond gender norms, while their narratives also emphasised affirming relationships as sources of safety and self-worth. These patterns converge with work emphasising the importance of gender affirmation, social recognition, and supportive relationships for TNB individuals' well-being, particularly within social environments structured by cisnormative expectations (Esposito et al., 2022; Johns et al., 2018; Lemma, 2013; Lewis et al., 2023). The SDMs analysed here add to that work by showing how experiences of recognition and affirmation may become embedded in autobiographical memory as moments through which participants make sense of who they are and of their relationship with others.

At the same time, the prominence of bodily violation and powerlessness in TNB participants' SDMs is consistent with evidence documenting heightened exposure to interpersonal and sexual victimisation among transgender and gender-diverse populations (Closson et al., 2024; McLellan et al., 2026). Importantly, the present findings highlight not only exposure to such experiences but also their narrative significance: the body emerges as a site through which experiences of violation, shame, and powerlessness are remembered and incorporated into the life story. In some narratives, bodily estrangement and interpersonal violence were also intertwined with the absence of safe relational environments, suggesting that embodiment, relational safety, and subsequent meaning-making may become closely connected within autobiographical memory. Embodiment and relational recognition thus emerge as interconnected dimensions of autobiographical meaning-making in TNB participants' SDMs.

Taken together, the findings point to a broader tension between experiences that disrupt or constrain the sense of self and experiences that create opportunities for recognition, connection, and narrative reorganisation. Across the dataset, loss, victimisation, bodily violation, and invalidation coexisted with memories of coming out, belonging, mirroring, gender exploration, and affirming relationships. Rather than representing simply negative versus positive experiences, these memories illustrate different ways in which participants negotiate the relationship between the self and the social world within their autobiographical narratives. This interpretation is consistent with contemporary perspectives on narrative identity, which increasingly emphasise that the construction of a coherent sense of self is not merely an intrapsychic process but is shaped through cultural meanings, interpersonal environments, and structural systems of social power (McLean, 2024; McLean et al., 2023). On this basis, SDMs may constitute privileged narrative sites in which socially imposed meanings are reproduced, questioned, or transformed. This account also connects with work showing that marginalised individuals

construct their identities in relation to culturally available master narratives while also developing alternative or counternarratives that preserve agency and enable more personally meaningful self-definitions (McLean & Syed, 2016; Wagaman, 2016).

From this perspective, the present findings also contribute to recent critiques of damage-centred LGBTQ+ research. Although adversity and victimisation were clearly represented in participants' SDMs, the narratives were not organised exclusively around vulnerability. Memories of self-recognition, relational affirmation, community belonging, and identity expression also revealed participants' capacity to actively reorganise the meaning of their experiences. This reading aligns with recent calls to move beyond frameworks that treat oppression and its psychological consequences as the defining features of LGBTQ+ lives. For instance, Cipollina et al. (2024) highlighted how damage-centred approaches remain pervasive in LGBTQ+ health research and argued for greater attention to strengths, autonomy, and positive experiences, which contribute to the different and heterogeneous ways in which sexually and gender marginalised individuals construct their lives.

Similarly, recent research has emphasised that social support and community connectedness contribute directly to positive identity development and thriving, particularly when connectedness entails a subjective sense of belonging (Baron & Collins, 2025). In this sense, examining SDMs may offer a way of holding together vulnerability and agency, showing how experiences shaped by heteronormative and cisnormative social contexts can coexist with autobiographical processes through which LGBTQ+ individuals construct more affirming and self-defined narratives (Cipollina et al., 2024; Levitt et al., 2023), in which the social world figures not merely as a source of stress or support but as a fundamental context for self-recognition.

Limitations

The results of the present study should be read in light of some limitations. First, because the analysis focused on patterns of meaning across the four participant groups, it did not explore in depth how SDMs might be differently configured across specific sexual orientation identities. Future studies could therefore examine whether and how autobiographical meaning-making varies across more finely differentiated sexual orientation groups. Second, the sociodemographic composition of the sample limits the range of perspectives represented in the findings. Participants were predominantly White (74 of 76) and relatively young ($M = 30$ years), and most had completed at least a college-level education; moreover, all were recruited in Italy, and some sexual orientation and gender identity groups were represented by relatively small numbers. Thus, experiences shaped by the intersection of sexual and gender minority status with racialised identities, older age, different educational backgrounds, and other social positions may be underrepresented. These intersecting positions may shape exposure to stigma, access to affirming relationships and communities, and autobiographical meaning-making. Future research should therefore examine SDMs in more sociodemographically and intersectionally diverse LGBTQ+ samples.

Third, some limitations concern the way SDMs were elicited. The SDM section of the survey was optional, and only 21.11% of the broader sample completed it; participants who chose to narrate a SDM may therefore differ systematically from those who did not,

for instance in their willingness to disclose or in the salience of identity-related experiences. Participants responded to a single open-ended SDM task in a survey format, which allowed considerable freedom in selecting and narrating personally meaningful memories but did not provide opportunities for follow-up questions or probing. Consequently, some meanings may have remained implicit or insufficiently elaborated. Moreover, SDMs are retrospective autobiographical constructions rather than objective records of past events. While this reconstructive quality is central to the study of autobiographical meaning-making, it limits conclusions about the remembered events themselves. Future studies could complement SDM tasks with qualitative interviews or follow-up prompts to allow for deeper exploration of participants' meaning-making processes.

Fourth, our study lacked external measures that could validate the qualitative data. Thus, future research should address this by incorporating additional qualitative and quantitative measures.

Fifth, the analytic grouping of TNB participants according to sex assigned at birth warrants caution. Although previous research suggests that sex assigned at birth may intersect with gender identity in shaping particular gendered and embodied experiences (e.g. Mirabella et al., 2020; Rimes et al., 2019), the evidence is mixed (Scandurra, Carbone, et al., 2021), and sex assigned at birth should not be understood as a proxy for current gender identity or as implying homogeneous experiences among AMAB or AFAB individuals. Indeed, both groups in the present study included participants with heterogeneous gender identities, and their relatively small sample sizes further limit any inference about systematic differences between them. Future research should examine these processes in larger and more diverse TNB samples while attending simultaneously to current gender identity, sex assigned at birth, and other intersecting social positions.

Finally, as noted in the reflexivity statement, the absence of TNB researchers on an otherwise sexually diverse team may have shaped the interpretive lens through which TNB participants' narratives were analysed.

Implications for clinical practice

Despite these limitations, the findings suggest several implications for clinical practice. First, because life-story identity work can help a person construct meaning for their long-term self in relation to the critical experiences they have lived through, working with SDMs may allow psychotherapists to reach a deeper understanding of a patient's experiences, conflicts, and concerns. Furthermore, the recollection process may help the individual to bring together different 'pieces' of their life story in a coherent way, which can foster positive outcomes in terms of mental health and well-being. In addition, the immediacy of these memories and their linkage to similar memories emerging over the course of therapy provide a window into a patient's dominant concerns and conflicts. Their imagery can help therapist and patient find a shared metaphor that becomes a touchstone in the work, a shorthand for a recurring theme.

In this regard, clinical work may draw on SDMs to support patients in exploring vivid and personally meaningful memories and the meanings attached to them. This may allow individuals to use critical past experiences to find a 'silver lining' (Holland & Kensinger, 2013), which can reduce the distress associated with recalling such events (e.g. through reconsolidation; Hallford et al., 2024). Cognitive reconstruction and retrospective re-

evaluation can likewise reframe past experiences towards more redemptive meanings (Baker et al., 2017; Samide & Ritchey, 2021).

Indeed, working with autobiographical and self-defining memories in psychotherapy may help individuals connect affective experiences with narrative representations, facilitating meaning-making and the integration of personally significant experiences into a more coherent narrative identity (Singer & Kasmark, 2015; Singer et al., 2013). For LGBTQ+ individuals, this process may be particularly relevant when self-defining experiences involve stigma, identity invalidation, victimisation, or relational affirmation. In such cases, memory work can connect the 'here-and-now' of the therapeutic relationship with the 'there-and-then' of the life story. However, the clinical application of SDM-based work has yet to be specifically examined among LGBTQ+ populations. Future research should therefore investigate the feasibility and potential effectiveness of interventions incorporating SDMs with LGBTQ+ individuals, including whether and how such approaches may support autobiographical meaning-making, narrative integration, and the processing of identity-related experiences.

Therefore, from a clinical standpoint, the present study suggests the importance of supporting LGBTQ+ patients in the process of reconstructing and reframing memories in a more specific and integrative way. Given that experiences of limited or absent mirroring emerged in some participants' SDMs, memory work may help create conditions in which such experiences can be explored and reworked. Mirroring and self-recognition were especially salient in TNB participants' narratives, suggesting that clinical work may benefit from attending to experiences of being seen, recognised, and affirmed in one's gender identity.

On the one hand, the current findings align with research documenting health disparities among LGBTQ+ populations associated with experiences of discrimination, rejection, and stigma (Fredriksen-Goldsen et al., 2014; Medina-Martínez et al., 2021). At the same time, however, the present study moves beyond a damage-centred perspective by highlighting not only experiences of adversity but also processes of self-recognition, relational affirmation, belonging, and resilience within participants' SDMs. Fostering overarching coherence in a person's narrative identity may therefore help counteract the effects that difficult life experiences, and the memories attached to them, exert on the 'here-and-now' of their existence.

Conclusion

This study qualitatively investigated the SDMs of 76 Italian LGBTQ+ individuals and identified both shared patterns and variations in the configuration and salience of themes across the four participant groups. The findings point to the relevance of SDMs for understanding autobiographical meaning-making among LGBTQ+ individuals and suggest that future clinical research could examine whether working with SDMs supports the development of more coherent and meaningful narrative identities.

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ORCID

Nicola Carone  <http://orcid.org/0000-0003-3696-9641>

Data availability statement

Research data supporting the findings of the current study are available upon reasonable request to the corresponding author.

Ethical approval

The study was granted ethical approval by the Ethical Committee of the University of Naples 'Federico II' (protocol no. 10/2024) and the Territorial Ethics Committee Latium Area 2 (protocol no. 197.24 CET2 utv). It complied with the EU General Data Protection Regulation and adhered to the ethical principles of the Declaration of Helsinki regarding medical research involving human participants.

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