Victimization of Sexual Minority Youth

A Bibliography





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Scope

This bibliography lists citations and abstracts to literature covering numerous aspects of

victimization of sexual minority youths. While not comprehensive, every effort has been made to

include the most relevant literature.

Organization

Publications are listed in date descending order. Full text links to open access publications are

provided.

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Victimization of Sexual Minority Youth

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Brangwin, E., Zhao, Z., Shramko, M., Toomey, R. B., & Syvertsen, A. K. (2023). <u>The association between family physical abuse and suicide attempts among gender minority adolescents: A comparison study</u>. *LGBT Health*, *10*(2), 99–108. DOI:10.1089/lgbt.2021.0415

Purpose: This study examines the prevalence of reported family physical abuse and the concurrent association between abuse and suicide attempts by adolescent gender identity. Methods: This study used the Profiles of Student Life: Attitudes and Behaviors dataset (N = 121,150 adolescents aged 11-19 [mean = 14.74, standard deviation = 1.78]) collected from61 participating school districts and programs across the United States by Search Institute from 2012 to 2015. Multigroup logistic regression was used to examine the association between family abuse and suicide attempts by gender identity. Correlates included race/ethnicity, age, parent education, rurality, binge drinking, and tobacco use. Results: Results indicated that cisgender adolescents (i.e., participants who did not select a transgender identity) reported significantly less family abuse compared to gender minority adolescents. Family physical abuse was associated with higher odds of suicide attempts among all adolescents. The association was stronger for female adolescents compared to male adolescents but not significantly different across gender minority adolescents, including those who identify as transgender female to male, transgender male to female, and transgender without identifying or being unsure of their gender identity. The association between family physical abuse and suicide attempts was stronger among heterosexual female adolescents compared to sexual minority female, heterosexual male, sexual minority male, heterosexual gender minority, or sexual and gender minority adolescents. Conclusions: Findings highlight the importance of identifying and treating family abuse to prevent suicide attempts, particularly among gender and sexual minority adolescents.

Edwards, K. M., Mauer, V. A., Huff, M., Farquhar-Leicester, A., Sutton, T. E., & Ullman, S. E. (2022). Disclosure of sexual assault among sexual and gender minorities: A systematic literature review. *Trauma, Violence, & Abuse, 0*(0). DOI:10.1177/15248380211073842

Sexual assault is common in sexual and gender minority (SGM) individuals, but few studies have examined SGM victims' disclosure experiences. This systematic review identified 13 studies through searches of research databases on SGM populations with sexual victimization. These studies showed wide variation in disclosure rates, various barriers to disclosure, and psychological impacts of social reactions to disclosure on SGM individuals. Bisexual women were more likely to disclose to formal (e.g., police, healthcare providers) and informal (e.g., friends, family members) sources than other women, and SGM victims disclose to mental health professionals at particularly high rates. Sexual and gender minority victims also reported numerous barriers to disclosure, including those unique to SGM individuals (e.g., fear of being outed). Impacts of negative social reactions appear to be more negative on psychological symptoms of SGM victims, whereas positive reactions are helpful to recovery. Future research is needed taking an intersectional perspective to studying disclosure and social reactions to SGM individuals from both college and community samples, by examining both sexual minority and racial/ethnic identities in the context of intersectional minority stress theory. Studies are needed of both correlates and consequences of disclosures to both informal and formal support sources to better understand SGM individuals' reasons for telling and not telling various support sources and the impacts of their disclosure experiences on their recovery. Such data is also needed to inform interventions seeking to identify and intervene with support network members and professionals to reduce negative social reactions and their psychosocial impacts and to increase positive social reactions and general social support from informal support sources.

Gill, E. K., & McQuillan, M. T. (2022). <u>LGBTQ+ students' peer victimization and mental health</u> <u>before and during the COVID-19 pandemic</u>. *International Journal of Environmental Research and Public Health*, *19*(18), 11537. DOI:10.3390/ijerph191811537

Given the well-established health disparities between lesbian, gay, bisexual, transgender, queer, and gender-expansive (LGBTQ+) and cisgender, straight youth, scholars predicted the COVID-19 pandemic would disproportionately impact LGBTQ+ students. Yet, few studies have described changes in LGBTQ+ students' school experiences and well-being during the pandemic. Using survey data from 40,904 middle and high school students, we examined changes from before

(2018) to during (2021) the pandemic in peer victimization, anxiety, and suicide attempts. We conducted bivariate and multivariate regression analyses to assess changes between the two time points among LGBTQ+ and cisgender, straight students. We found LGBTQ+ students experienced more peer victimization, anxiety, and suicide attempts at both points, before and during the pandemic, than cisgender, straight youth. However, LGBTQ+ students reported increased anxiety, decreased peer victimization, and decreased suicide attempts in 2021, during the pandemic, compared to pre-pandemic 2018 reports. These findings suggest pandemic-related school disruptions may have provided LGBTQ+ students some relief from the harmful effects of poor, in-person school climates.

McCabe, S. E., Hughes, T. L., Beal, S., Evans-Polce, R. J., Kcomt, L., Engstrom, C., West, B. T., Veliz, P., Leary, K., McCabe, V. V., & Boyd, C. J. (2022). Sexual orientation differences in childhood sexual abuse, suicide attempts, and DSM-5 alcohol, tobacco, other drug use, and mental health disorders in the US. Child Abuse & Neglect, 123, 105377. DOI:10.1016/j.chiabu.2021.105377

Background: Childhood sexual abuse (CSA) contributes to increased risk of substance use and mental health disorders in the general population. Objective: To assess the prevalence and associations of CSA and suicide attempts, substance use, and mental health disorders as a function of sex (female, male) and sexual orientation (lesbian, gay, bisexual, heterosexual-identified with same-sex attraction and/or behavior, heterosexual-identified without same-sex attraction and/or behavior, and unsure). Participants and setting: Data were collected using structured diagnostic face-to-face interviews in a nationally representative sample of 36,309 US adults. Methods: We used descriptive statistics and logistic regression modeling to analyze data from the 2012-2013 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC-III). Results: Childhood sexual abuse was most prevalent among sexual minorities, especially bisexual females. Nearly one-third of bisexual females (30.6%) reported experiencing two or more types of CSA, p < .001. Among all participants, exposure to one or more types of CSA was associated with greater odds of lifetime suicide attempts, Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) alcohol, tobacco or other drug use disorder, and mental health disorders, after adjusting for other childhood adversity/maltreatment and general life stressors. Conclusions: Sexual minority females and males in the US are more likely than their heterosexual counterparts to report CSA. Higher risk of suicide attempts and DSM-5 alcohol, tobacco, other

drug use, and mental health disorders in adulthood was directly associated with CSA, particularly among bisexual females. Health professionals working with individuals who have experienced CSA should assess these risks and intervene as needed.

Prince, D. M., Ray-Novak, M., Gillani, B., & Peterson, E. (2022). Sexual and gender minority youth in foster care: An evidence-based theoretical conceptual model of disproportionality and psychological comorbidities. *Trauma, Violence & Abuse, 23*(5), 1643-1657. DOI:10.1177/15248380211013129

Sexual and gender minority youth (SGMY) are overrepresented in the foster care system and experience greater foster-care-related stressors than their non-SGM peers. These factors may further elevate their risk of anxiety/depressive, post-traumatic stress disorder, self-harm, and suicidality. The system currently produces unequal and disproportionate adverse mental health outcomes for SGMY and needs points of intervention to disrupt this status quo. This article provides an empirically grounded conceptual—theoretical model of disproportionate representation and burden of psychological comorbidities experienced by SGMY in the foster care system. We apply findings from an integrated literature review of empirical research on factors related to overrepresentation and mental health burden among SGMY to minority stress theory to explicate how and why the foster care system exacerbates mental health comorbidities for SGMY. Searches were conducted in June 2020 in PubMed using MeSH terms and title/abstract terms for foster care, sexual or gender minorities, and psychological comorbidities. Inclusion criteria are studies conducted in the United States, published in English, focused on mental illness, and published between June 2010 and 2020. Developmental/intellectual and eating disorders were excluded. The initial search returned 490 results. After applying inclusion criteria, 229 results remained and are utilized to build our conceptual-theoretical model. We assert that the phenomenon of disproportionate psychological comorbidities for SGMY in foster care is best represented as a complex and dynamic system with multiple feedback loops. Extant empirical and theoretical literature identifies three critical areas for intervention: family acceptance, community belonging and queer chosen/constructed family, and affirming and nondiscriminatory child welfare policy.

Schaub, J., Stander, W. J., & Montgomery, P. (2022). <u>LGBTQ+ young people's health and well-being experiences in out-of-home social care: A scoping review</u>. *Children and Youth Services Review*, 106682. DOI:10.1016/j.childyouth.2022.106682

Background and objectives: The experiences of lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ+) youth in foster and residential social care have largely been overlooked in research, practice and policy. This scoping review aims to identify and synthesize the existing empirical research concerning the health and well-being needs of LGBTQ+ youth in care. Methods: Following a six-stage approach to scoping reviews, a computerized search was conducted from a total of eight electronic databases: PubMed, Web of Science (Core Collection), Scopus, CINAHL Plus, PsychINFO, Sociological Abstracts, Social Care Online (SCIE), and OpenGrey. Search parameters comprised of three domains (LGBTQ+ status, age, and social care interventions). Data synthesis included thematic analysis, as well as critical appraisal using Critical Appraisal Skills Programme (CASP) criteria. Of the initial 1,962 sources identified, 22 studies met the search and quality criteria and were included in the final review. Results: Overall, the evidence base is limited with most studies originating from the USA (77 % of included papers). The findings indicate that LGBTQ+ youth experience poorer physical and mental health, and also poorer wellbeing outcomes compared to non-LGBTQ+ youth while in foster and residential social care. Racial or ethnic minority LGBTQ+ youth, lesbian/bisexual girls, and trans and nonbinary youth face particular challenges, and social care systems appear especially ill-equipped to meet the needs of transgender and nonbinary youth. Conclusion: While the evidence base continues to grow, there remains a need for high quality research including longitudinal and life course studies in various contexts and countries to generate robust empirical evidence in this area. The implications for practice and policy include policy shifts, mandatory and comprehensive competency-based education and training, as well ongoing coaching regarding anti-LGBTQ+ and heteronormative bias within this system.

Sutton, T. E., Edwards, K. M., Siller, L., & Shorey, R. C. (2022). An exploration of factors that mediate the relationship between adverse childhood experiences and sexual assault Victimization among LGBTQ+ college students. *Child Maltreatment*, *27*(4), 539–549. DOI:10.1177/10775595211041970

Despite alarming rates of sexual assault on college campuses, little research has examined risk factors for sexual victimization among LGBTQ+ college students. This exploratory study aims to

examine adolescent sexual assault, internalized homonegativity, and problematic alcohol use as mediators linking several types of adverse childhood experiences (ACEs; i.e., childhood sexual abuse, parental abuse, and household disorder) to collegiate sexual assault. Utilizing data from 241 LGBTQ+ college students, path analysis findings demonstrated that these proposed mediators increased risk for sexual assault and that various types of ACEs exerted differential impacts on sexual re-victimization, internalized homonegativity, and problematic alcohol use. Practice-based implications are offered, including the need for affirming programming that includes problem drinking prevention components and considers the role of ACEs and internalized homonegativity in increasing risk for sexual assault during college as well as the need for LGBTQ+ resource centers on campus.

Mallory, A. B., & Russell, S. T. (2021). <u>Intersections of racial discrimination and LGB</u> victimization for mental health: A prospective study of sexual minority youth of <u>color</u>. *Journal of Youth and Adolescence*, *50*(7), 1353-1368. DOI:10.1007/s10964-021-01443-x

Sexual minority youth (i.e., lesbian, gay, and bisexual youth; LGB) of color have multiple minoritized identities, and few studies examine the implications of intersectional minority stressors for their prospective mental health. The current study tested three intersectional hypotheses: the additive hypothesis—racial discrimination and LGB victimization are independently associated with mental health; the multiplicative hypothesis—racial discrimination and LGB victimization interact in to exacerbate their negative association with mental health, and the inuring hypothesis—only racial discrimination or LGB victimization is associated with mental health. Data come from a sample of lesbian, gay, and bisexual youth of color (36% Black, 30% Latino, 26% Multi-racial, 4% Native American, and 3% Asian, Hawaiian, and Pacific Islander) from two U.S. cities, one in the Northeast (77%) and one in the Southwest, who were between ages 15–24 (M = 19) and surveyed four times over three years spaced nine months apart (N = 476; 38% bisexual; 67% free and reduced lunch; and 49% assigned female at birth). The multiplicative hypothesis was supported for depression symptoms, and the additive hypothesis was supported for suicidal ideation. Intersectional minority stressors undermine the mental health of sexual minority youth of color and warrant further investigation.

Miller, Q. C., & London, K. (2021). Mock jurors' perceptions of child sexual abuse cases involving sexual and gender minority victims. *Psychology of Sexual Orientation and Gender Diversity*. DOI:10.1037/sgd0000541

Sexual and gender minority youth are at high risk of maltreatment and subsequent criminal justice system involvement, yet jurors' perceptions of these individuals have yet to be investigated. In the current research, we examined mock jurors' decisions after reading a case summary manipulating victim gender (boy, girl), gender identity (cisgender, transgender), and sexual orientation (straight, gay). Jury-eligible community member participants (N = 368) read a case summary describing an alleged incident of child sexual abuse between a male teacher and an adolescent victim then rendered various case judgments. Mock jurors rendered more prosecution case judgments when the victim was cisgender versus transgender. When the victim was cisgender versus transgender, mock jurors were more likely to convict, rated the defendant less credible, and rated the victim more credible. Effects of victim gender identity varied as a function of gender, but only when the victim was transgender. When the victim was a transgender boy versus girl, jurors were more likely to convict, rendered higher ratings of defendant degree of guilt, rated the defendant less credible, and rated the victim more credible. Findings have implications for jury instructions and voir dire processes when gender minority individuals encounter the justice system.

Petit, M.-P., Blais, M., & Hébert, M. (2021). Dating violence victimization disparities across sexual orientation of a population-based sample of adolescents: An adverse childhood experiences perspective. *Psychology of Sexual Orientation and Gender Diversity*. DOI:10.1037/sgd0000518

Sexual minority youth are more vulnerable to adverse childhood experiences (ACEs) and several associated negative consequences. It remains unknown whether such vulnerability explain their excess risk for teen dating violence victimization (TDVV) documented previously. It is also unclear whether risk and protective factors associated with TDVV in the general adolescent population are also shared by sexual minority youth. Using longitudinal data from a representative sample of Quebec adolescents in a relationship (n = 4,515), the current study aimed to (a) test whether the differential exposure to risk factors account for TDVV disparities, and (b) to determine whether established TDVV correlates vary by sexual attraction and lifetime sexual partners' gender. Multilevel models revealed that participants with multigender sexual attraction or sexual partners were at increased risk for TDVV and nearly all risk factors examined, including ACEs,

compared with different-gender and, to a lesser extent, same-gender peers. The association between sexual orientation and TDVV remained significant when ACEs were added, but not when all other risk and protective factors were accounted for. The patterns of risk and protection factors related to TDVV greatly differed across sexual orientation. The only common correlate of TDVV across groups was TDV perpetration. ACEs were associated with TDVV across all sexual orientation groups, but not after adjusting for other risk and protective factors. These findings suggest that negative consequences of ACEs better explain TDVV disparities than ACEs alone. Trauma-informed interventions aiming at building resilience among youth, especially among multigender groups, might support dating violence prevention.

Semprevivo, L. K. (2021). Dating and Sexual Violence Victimization among Lesbian, Gay, Bisexual, and Questioning Youth: Considering the Importance of Gender and Sexual Orientation. *Journal of Aggression, Maltreatment & Trauma*, 30(5), 662–678. DOI:10.1037/sgd0000518

Violence and victimization among LGBTQ youth and adults is a growing topic of concern due to overwhelming disparities in victimization rates and the continued lack of understanding and education on these issues. Utilizing data from the 2013 Youth Risk Behavior Surveillance System (YRBSS), this study investigates dating and sexual violence victimization within the intersections of gender and sexual orientation. Drawing from a sample of 12,642 (1,428 LGBQ and 11,214 heterosexual) 9th through 12th grade students, the prevalence of victimization among lesbian, gay, bisexual, questioning (LGBQ), and heterosexual females and males is examined. Results show that LGBQ youth are more likely to experience dating and sexual violence victimization. When the intersection of gender is also considered, females who identified as LGBQ had the highest odds of dating and sexual violence victimization, followed by LGBQ males, and heterosexual females. This study also discusses these findings within the context of the gendered and sexualized dynamics and barriers unique to LGBTQ dating and sexual violence in hopes of providing more understanding for future research, theorizing, and services provided to LGBTQ survivors.

Thoma, B. C., Rezeppa, T. L., Choukas-Bradley, S., Salk, R. H., & Marshal, M. P. (2021). <u>Disparities in childhood abuse between transgender and cisgender adolescents.</u> *Pediatrics*, *148*(2). DOI:10.1542/peds.2020-016907

BACKGROUND AND OBJECTIVES Transgender adolescents (TGAs) exhibit disproportionate levels of mental health problems compared with cisgender adolescents (CGAs), but psychosocial processes underlying mental health disparities among TGAs remain understudied. We examined self-reported childhood abuse among TGAs compared with CGAs and risk for abuse within subgroups of TGAs in a nationwide sample of US adolescents. METHODS Adolescents aged 14 to 18 completed a cross-sectional online survey (n = 1836, including 1055 TGAs, 340 heterosexual CGAs, and 433 sexual minority CGAs). Participants reported gender assigned at birth and current gender identity (categorized as the following: cisgender males, cisgender females, transgender males, transgender females, nonbinary adolescents assigned female at birth, nonbinary adolescents assigned male at birth, and questioning gender identity). Lifetime reports of psychological, physical, and sexual abuse were measured. RESULTS Seventy-three percent of TGAs reported psychological abuse, 39% reported physical abuse, and 19% reported sexual abuse. Compared with heterosexual CGAs, TGAs had higher odds of psychological abuse (odds ratio [OR] = 1.84), physical abuse (OR = 1.61), and sexual abuse (OR = 2.04). Within separate subgroup analyses, transgender males and nonbinary adolescents assigned female at birth had higher odds of reporting psychological abuse than CGAs. CONCLUSIONS In a nationwide online sample of US adolescents, TGAs had elevated rates of psychological, physical, and sexual abuse compared with heterosexual CGAs. Risk for psychological abuse was highest among TGAs assigned female at birth. In the future, researchers should examine how more frequent experiences of abuse during childhood could contribute to disproportionate mental health problems observed within this population.

Craig, S. L., Austin, A., Levenson, J., Leung, V. W., Eaton, A. D., & D'Souza, S. A. (2020). Frequencies and patterns of adverse childhood events in LGBTQ+ youth. *Child Abuse & Neglect*, 107, 104623. DOI:10.1016/j.chiabu.2020.104623

Background: Trauma, specifically adverse childhood experiences (ACEs), predicts significant health and mental health disparities, yet there is a paucity of research with LGBTQ + youth. Objective: This study explored ACE prevalence in a large sample of LGBTQ+ youth; examined ACE patterns within and across subgroups; and compared results with the general population.

Participants and setting: Participant (n = 3,508) ages ranged between 14-18 (\bar{x} = 16.02) and represented a range of sexual orientations: pansexual (33.9 %), bisexual (26.6 %), and queer (16.2 %), and gender identities: female (39.9 %), non-conforming (38 %), male (14.9 %), and transgender (16.6 %). Methods: An online cross-sectional survey was conducted with LGBTQ+ youth ages 14-18 that self-identified as LGBTQ+ and resided in the US or Canada. Descriptive statistics generated the prevalence of ACEs, and ANOVAs and post-hoc tests were run for comparisons. Results: Participants reported multiple ACEs (M = 3.14, SD = 2.44) with emotional neglect (58 %), emotional abuse (56 %), and living with a family member with mental illness (51 %) as the most prevalent. Notably, 43 % of participants experienced 4+ ACEs, considered to be a high level of trauma exposure. Compared to national samples, LGBTQ + youth demonstrated unique patterns of ACEs and were higher in 9 of 10 categories. Significantly high (all p < .001) ACEs were found in pansexual (t = 7.67), transgender and gender non-conforming (t = 5.19), American-Indian (t = 6.42), Latinx (t = 2.83) and rural youth (F = 12.12) while those with highly educated parents (F = 83.30, p < .001), lived with a parent (t = 6.02), and in Canada (t = 6.14) reported fewer ACEs. Conclusion: LGBTQ+ youth experience significant childhood trauma with potential impact on their mental health. This study identifies implications for trauma-informed practice and research.

Flores, A. R., Langton, L., Meyer, I. H., & Romero, A. P. (2020). <u>Victimization rates and traits of sexual and gender minorities in the United States: Results from the National Crime Victimization Survey, 2017</u>. *Science Advances*, 6(40), eaba6910. DOI:10.1126/sciady.aba6910

Mental health disparities between heterosexual and sexual minority youth are partly explained by the higher rates of victimization experienced by sexual minority youth. The onset and progression of these victimization disparities, however, are poorly understood. Using multi-rater longitudinal data, trajectories of victimization starting at age nine were compared among youth who did and did not report same-sex attraction at age $15 \, (N=310)$. Self and teacher, but not primary caregivers, reported victimization was significantly higher among sexual minority youth starting at age nine, but did not vary across time. The findings underscore the importance of understanding homophobic experiences of sexual minority youth during late childhood and early adolescence in order to inform prevention programs.

Kahle L. (2020). Are sexual minorities more at risk? Bullying victimization among lesbian, gay, bisexual, and questioning youth. *Journal of Interpersonal Violence*, *35*(21-22), 4960–4978. DOI:10.1177/0886260517718830

Bullying has garnered the attention of researchers and policy makers alike, because of various negative physical, mental, and educational outcomes that stem from these experiences. Certain youth are more at risk for bullying victimization (ASPA, 2012). Thus, research highlighting and addressing these experiences is crucial to provide safer environments for youth. This study utilizes the 2013 Youth Risk Behavior Surveillance System (YRBSS) data to investigate whether or not experiences of victimization differ for lesbian, gay, bisexual, and questioning (LGBQ) youth. Drawing from a sample of 12,642 9th through 12th grade youth, this study investigates two primary areas: (a) the prevalence of traditional bullying, electronic bullying, and homophobic bullying victimizations among LGBQ youth, and (b) the interaction of sexual orientation and gender with traditional bullying, electronic bullying, and homophobic bullying victimizations. Results suggest that LGBQ youth experience all types of bullying victimization at higher rates than heterosexual youth. Results also highlight the importance of the interaction of sexual orientation and gender in bullying victimization. Findings reveal that LGBQ females, LGBQ males, and heterosexual females experience each type of victimization at higher rates than heterosexual males. Findings confirm that disparities exist in bullying victimization among LGBQ youth, and thus cannot be ignored in schools. School policies must explicitly acknowledge and address how sexual orientation and gender matter within the constructs of youth violence if they wish to create safer learning environments for youth.

Norris, A. L., & Orchowski, L. M. (2020). Peer victimization of sexual minority and transgender youth: A cross-sectional study of high school students. *Psychology of Violence*, 10(2), 201–211. DOI:10.1037/vio0000260

Objective: To identify rates of victimization experiences by gender identity and sexual orientation in a large regional sample of 14-to-17-year-old high school students. Method: All 10th-grade students from 27 Northeastern high schools were invited to participate in a survey of dating and sexual experiences (N = 2,766). Results: Compared with heterosexual youth, sexual minority youth reported greater peer victimization of every kind (i.e., bullying, sexual harassment, unwanted sexual contact and intercourse, and every type of dating conflict [threatening behavior, physical abuse, and sexual abuse]). Sexual minority girls evinced particularly high levels of bullying.

Similarly, transgender youth were more likely than nontransgender youth to experience every form of peer victimization except physical abuse in a dating relationship. Cumulatively, 91% of sexual minority girls, 86% of transgender youth, and 79% of sexual minority boys experienced at least one form of peer victimization, compared with 78% of heterosexual girls and 63% of heterosexual boys. Further, 14% of transgender youth experienced all 4 victimization types in the past year alone. Finally, bias-based harassment was rarely the only form of victimization experienced by these youth. Conclusion: The victimization of sexual minority youth, particularly girls, and transgender youth was pervasive across individual forms of victimization and multiple forms of victimization concurrently. Further, bias-based harassment was imbedded within a pattern of victimization, such that youth experienced it in concert with multiple other forms of victimization. Researchers implementing prevention-based programs for interpersonal violence should examine the experiences of and impact on youth of diverse gender and sexual identities.

Hatchel, T., Valido, A., De Pedro, K. T., Huang, Y., & Espelage, D. L. (2019). Minority stress among transgender adolescents: The role of peer victimization, school belonging, and ethnicity. *Journal of Child & Family Studies*, 28(9), 2467–2476. DOI:10.1007/s10826018-1168-3

Transgender youth peer relations is understudied when compared to lesbian, gay, and bisexual youth (LGB). Likewise, transgender youth of color (YOC) are also understudied given the difficulties associated with accessing the sample. This study examines the relations among peer victimization, school belonging, and mental health with an ethnically diverse sample of transgender adolescents (N=4778). Invariance testing and structural equation modeling were employed to explore these relations as well as the potential moderating role of ethnic minority status. Findings demonstrate that an alarming number of transgender youth were exposed to victimization and that victimization predicted mental health issues like suicidal ideation. Furthermore, analyses showed that peer victimization was associated with diminished school belonging. School belonging was associated with better mental health and appeared to mediate the relation between victimization and mental health issues. Ethnic minority status did not moderate these associations. Implications for research are discussed.

Martin-Storey, A., & Fish, J. (2019). Victimization disparities between heterosexual and sexual minority youth from ages 9 to 15. *Child Development*, 90(1), 71-81. DOI:10.1111/cdev.13107

Mental health disparities between heterosexual and sexual minority youth are partly explained by the higher rates of victimization experienced by sexual minority youth. The onset and progression of these victimization disparities, however, are poorly understood. Using multirater longitudinal data, trajectories of victimization starting at age 9 were compared among youth who did and did not report same-sex attraction at age 15 (N=310). Self and teacher, but not primary caregivers, reported victimization was significantly higher among sexual minority youth starting at age 9, but did not vary across time. The findings underscore the importance of understanding homophobic experiences of sexual minority youth during late childhood and early adolescence in order to inform prevention programs.

Paul, J. C., & Monahan, E. K. (2019). Sexual minority status and child maltreatment: How do health outcomes among sexual minority young adults differ due to child maltreatment exposure?, *Child Abuse & Neglect*, *96*, 104099. DOI:10.1016/j.chiabu.2019.104099

Background: Although prior studies indicate heightened health and well-being concerns for sexual minority (SM) youth, as well as for youth exposed to child maltreatment in the general population, it is unclear whether there are differences in these outcomes among SM youth that have and have not experienced maltreatment. Objective: Our aim was to investigate the unique associations between child maltreatment and emerging health outcomes beyond the impact of SM status. Data was drawn from a nationally representative sample of 648 SM youth in the U.S. in grades 7-12 during the 1994-1995 school year. Methods: Using data from the National Longitudinal Study of Adolescent to Adult Health, descriptive statistics and ordinary least squares regression models were used to investigate differences in SM young adult outcomes by experiences of child maltreatment. Results: Maltreatment among SM individuals showed strong associations with poor adult mental health outcomes (e.g. depression, anxiety, isolation, and suicidal ideation) and fairly strong negative associations with general health outcomes (e.g., heart and lung problems) when compared to their non-maltreated peers. Associations with maltreatment and behavioral health and socioeconomic outcomes were not as strong for this population, which suggests the effects of maltreatment for SM youth are most salient in regards to mental and physical health. Conclusions: Findings provide insight into what areas of health and well-being should be focused

on when working with SM youth that have been maltreated, and offer evidence to encourage further exploration of the outcomes of SM maltreated individuals in young adulthood.

Tobin, V., & Delaney, K. R. (2019). Child abuse victimization among transgender and gender nonconforming people: A systematic review. *Perspectives in Psychiatric Care*, 55(4), 576–583. DOI:10.1111/ppc.12398

Purpose: Conduct a systematic review of abuse of transgender and gender nonconforming (TGNC) people in childhood. Design and Methods: Scopus, PubMed, PsychInfo databases were searched. Articles included in final analysis were those with respondents who reported childhood abuse and were either transgender adults or described gender nonconforming traits in childhood. Of 186 articles originally identified, 14 are included in the final review. Findings: Research on TGNC individuals and child abuse varied in how populations were identified and methodology used. Those who are transgender and those who display gender nonconforming traits in childhood are at risk for child abuse and sequelae. Conclusion: Research should use the two-step methodology of identifying transgender people. Recalled Childhood Gender Identity Scale should be used. Providers should screen for child abuse.

Whitton, S. W., Newcomb, M. E., Messinger, A. M., Byck, G., & Mustanski, B. (2019). <u>A longitudinal study of IPV victimization among sexual minority youth.</u> *Journal of Interpersonal Violence*, *34*(5), 912-945. DOI:10.1177/0886260516646093

Intimate partner violence (IPV) is highly prevalent among sexual and gender minority youth. Yet, due to a lack of longitudinal research, little is known regarding the developmental patterns, risk factors, or health-related consequences of IPV among lesbian, gay, bisexual, and transgender (LGBT) adolescents and young adults. In this study, we examined IPV victimization in an ethnically diverse community-based convenience sample of 248 LGBT youth in Chicago (aged 16–20 at study outset) who provided six waves of data across a 5-year period. Results from multilevel models with Bernoulli distributions indicated high, stable rates of IPV victimization across this developmental period (ages 16–25 years) that differed between demographic groups. Overall, 45.2% of LGBT youth were physically abused and 16.9% were sexually victimized by a dating partner during the study period. Odds of physical victimization were 76% higher for female than for male LGBT youth, 2.46 times higher for transgender than for cisgender youth, and 2–4 times higher for racial-ethnic minorities than for White youth. The prevalence of physical IPV

declined with age for White youth but remained stable for racial-ethnic minorities. Odds of sexual victimization were 3.42 times higher for transgender than for cisgender youth, 75% higher for bisexual or questioning than for gay or lesbian youth, and increased more with age for male than female participants. Within-person analyses indicated that odds of physical IPV were higher at times when youth had more sexual partners, engaged in more marijuana use, and perceived lower social support; odds of sexual IPV were higher at times when youth had more sexual partners and experienced more LGBT-specific victimization. In prospective analyses, sexual IPV significantly predicted increased psychological distress; both IPV types marginally predicted increased marijuana use. Other traditional correlates (e.g., alcohol use) were not associated with IPV trajectories.

Baams, L. (2018). <u>Disparities for LGBTQ and gender nonconforming adolescents</u>. *Pediatrics*, 141(5), e20173004. DOI:10.1542/peds.2017-3004

OBJECTIVES: To identify patterns of childhood adversity in a sample of adolescents and assess disparities in these experiences for lesbian, gay, bisexual, transgender, and questioning adolescents and by level of gender nonconformity. METHOD By using the crosssectional, statewide, anonymous 2016 Minnesota Student Survey, 81 885 students were included in the current study (50.59% male; mean age= 15.51). Participants were enrolled in grades 9 and 11 in a total of 348 schools. RESULTS: Four patterns of childhood adversity were identified with sex-stratified latent class analyses (entropy = 0.833 males; 0.833 females), ranging from relatively low levels of abuse (85.3% males; 80.1% females) to polyvictimization (0.84% males; 1.98% females). A regression analysis showed that compared with heterosexual adolescents, gay, lesbian, bisexual, and questioning adolescents were more likely to be classified into profiles characterized by polyvictimization (odds ratio [OR] 1.81-7.53) and psychological and/or physical abuse (OR 1.29-3.12), than no or low adversity. Similarly, compared with nontransgender adolescents, transgender adolescents were more likely to be classified into profiles characterized by patterns of polyvictimization (OR 1.49–2.91) and psychological and/or physical abuse (OR 1.23-1.96). A higher level of gender nonconformity predicted a higher likelihood of being classified into each adversity profile compared with the no or low adversity profile (OR 1.14–1.45).CONCLUSIONS:Sexual minority adolescents and adolescents with high levels of gender nonconformity are vulnerable to experience adversity. The disparities for lesbian, gay,

bisexual, transgender, and questioning adolescents and adolescents with high gender nonconformity highlight the variation in patterns of childhood adversity that these youth are at risk of experiencing. The findings reveal the need for further research on the benefits and harm of screening for childhood adversity by physicians and pediatricians.

Weeks, A., Altman, D., Stevens, A., Lorthridge, J., & Heaton, L. (2018). Strengthening the workforce to support youth in foster care who identify as LGBTQ+ through increasing LGBTQ+ competency. *Child Welfare*, 96(2), 125-150.

This article discusses the Los Angeles LGBT Center's Recognize, Intervene, Support and Empower (RISE) Initiative's training evaluation; trainers' experiences with bias, and the impact that participant bias had on the delivery of the training intervention. This article also discusses ways in which the Outreach and Relationship Building (ORB) personnel mitigated risks, and how the short-term outcomes were interpreted in the context of the experiences of bias. This article proposes that, after initial training on youth who identify as lesbian, gay, bisexual, trans gender, or questioning (LGBTQ), staff need coaching and follow-up training to effectively address and reduce the mistreatment of this population in child welfare settings and decrease anti-LGBTQ+ bias.

Crothers, L. M., Kolbert, J. B., Berbary, C., Chatlos, S., Lattanzio, L., Tiberi, A., Wells, D. S., Bundick, M. J., Lipinski, J., & Meidl, C. (2017). Teachers', LGBTQ students', and student allies' perceptions of bullying of sexually-diverse youth. *Journal of Aggression, Maltreatment & Trauma*, 26(9), 972-988. DOI:10.1080/10926771.2017.1344344

In this study, educators, LGBTQ (gay, lesbian, bisexual, transgender, or questioning their sexuality) students, and their allies in a southwestern Pennsylvania sample reported their perceptions of bullying of LGBTQ youth and school climate and awareness of anti-bullying laws and policies within their school systems. Results indicate differences in students' and educators' perceptions of the frequency of bullying of LGBTQ students and support for LGBTQ students. LGBTQ students report significantly more bullying of LGBTQ students than their straight allies as well as educators for all forms of bullying assessed. Additionally, educators perceive higher levels of support for students from school personnel and students than reported by students. The importance of educator understanding and intervention in the bullying experiences of LGBTQ students is discussed.

Flynn, A. B., Johnson, R. M., Bolton, S. L., & Mojtabai, R. (2016). Victimization of lesbian, gay, and bisexual people in childhood: Associations with attempted suicide. *Suicide & Life-threatening Behavior*, 46(4), 457–470. DOI:10.1111/sltb.12228

Higher rates of attempted suicide have been documented among people who identify themselves as gay, lesbian, and bisexual (LGB) compared with heterosexuals. This study sought to ascertain the association between childhood abuse and neglect and attempted suicide, comparing LGBs and heterosexuals. Childhood sexual abuse among men and childhood sexual and physical abuse among women were found to mediate the association between LGB identity and attempted suicide. The experience of childhood abuse likely plays a significant role in the relationship between LGB identity and attempted suicide, but other factors such as experience of discrimination are also important.

Mustanski, B., Andrews, R., & Puckett, J. A. (2016). The effects of cumulative victimization on mental health among lesbian, gay, bisexual, and transgender adolescents and young adults. *American Journal of Public Health*, 106(3), 527–533. DOI:10.2105/AJPH.2015.302976

Objectives. To examine the effects of the cumulative victimization experienced by lesbian, gay, bisexual, and transgender youths on mental disorders. *Methods*. We recruited 248 participants from the Chicago, Illinois, area in 7 waves of data collected over 4 years, beginning in 2007 (83.1% retention rate). Mean age at enrollment was 18.7 years, and 54.7% were Black. We measured depression and posttraumatic stress disorder using structured psychiatric interviews. *Results*. Latent class analyses of victimization over time identified a 4-class solution. Class 1 (65.4%) had low, decreasing victimization. Class 2 (10.3%) had moderate, increasing victimization. Class 3 (5.1%) had high, steady victimization. Class 4 (19.2%) had high, decreasing victimization. Controlling for baseline diagnoses and birth sex, lesbian, gay, bisexual, and transgender youths in classes 2 and 3 were at higher risk for depression than were those in class 1; youths in classes 2, 3, and 4 were at elevated risk for posttraumatic stress disorder. *Conclusions*. Lesbian, gay, bisexual, and transgender youths with steadily high or increasing levels of victimization from adolescence to early adulthood are at higher risk for depression and posttraumatic stress disorder.

Sterzing, P. R., Hong, J. S., Gartner, R. E., & Auslander, W. F. (2016). Child maltreatment and bullying victimization among a community-based sample of sexual minority youth: The meditating role of psychological distress. *Journal of Child & Adolescent Trauma*, *9*(4), 283–293. DOI:10.1007/s40653-016-0101-4

Child maltreatment and bullying victimization disproportionately affect sexual minority youth. Little research exists that explores psychological distress as a modifiable risk factor connecting these two forms of victimization. Utilizing a community-based sample of sexual minority youth (N = 125, 15-19 y/o), this study provides estimates of child maltreatment and bullying victimization, identifies their associations, and explores psychological distress as a potential mediator. Approximately 46 % of the sample reported moderate to extreme childhood emotional abuse, followed by physical abuse (34 %), sexual abuse (32 %), emotional neglect (28 %), and physical neglect (26 %). Higher levels of emotional, physical, and sexual abuse were associated with more frequent bullying victimization. Psychological distress mediated the relationship between emotional abuse and verbal bullying victimization only. Additional research is needed to explore other potential mental health mediators (e.g., emotional dysregulation, posttraumatic stress). Addressing psychological distress holds the potential to prevent or reduce verbal bullying victimization by improving social functioning.

Reuter, T. R., Sharp, C., & Temple, J. R. (2015). An exploratory study of teen dating violence in sexual minority youth. *Partner Abuse*, 6(1), 8–28. DOI:10.1891/1946-6560.6.1.8

Objective: Teen dating violence (TDV) represents a serious social problem in adolescence and is associated with a host of physical and emotional consequences. Despite advances in identification of risk factors, prevention efforts, and treatment, the TDV literature has overwhelmingly used samples that do not assess sexual orientation or assume heterosexuality. Although a few studies have explicitly examined dating violence among sexual minorities in adolescents, methodological issues limit the generalizability of these findings, and no study to date has examined patterns of dating violence over time in sexual minority youth. Method: An ethnically diverse sample of 782 adolescents completed self-report measures of dating violence, hostility, alcohol use, exposure to interparental violence, and sexual orientation. Results: Sexual minority adolescents reported higher rates of both TDV perpetration and victimization, and this finding persisted across 2 years for perpetration but not victimization. Findings also revealed that traditional risk factors of TDV (i.e., alcohol use, exposure to interparental violence) were not associated with TDV for sexual

minority youth, although sexual orientation itself emerged as a risk factor over and above covariates when considering severe (i.e., physical and sexual) dating violence perpetration. Conclusions: Sexual minorities may be at a greater risk for TDV than their heterosexual peers. Findings are discussed within the context of a minority stress model. Future research is needed to parse out factors specifically related to sexual orientation from a stressful or invalidating environment.

Zou, C., & Andersen, J. P. (2015). <u>Comparing the rates of early childhood victimization across sexual orientations: Heterosexual, lesbian, gay, bisexual, and mostly</u> heterosexual. *PloS One*, *10*(10), e0139198. DOI:10.1371/journal.pone.0139198

Few studies have examined the rates of childhood victimization among individuals who identify as "mostly heterosexual" (MH) in comparison to other sexual orientation groups. For the present study, we utilized a more comprehensive assessment of adverse childhood experiences to extend prior literature by examining if MH individuals' experience of victimization more closely mirrors that of sexual minority individuals or heterosexuals. Heterosexual (n = 422) and LGB (n = 561) and MH (n = 120) participants were recruited online. Respondents completed surveys about their adverse childhood experiences, both maltreatment by adults (e.g., childhood physical, emotional, and sexual abuse and childhood household dysfunction) and peer victimization (i.e., verbal and physical bullying). Specifically, MH individuals were 1.47 times more likely than heterosexuals to report childhood victimization experiences perpetrated by adults. These elevated rates were similar to LGB individuals. Results suggest that rates of victimization of MH groups are more similar to the rates found among LGBs, and are significantly higher than heterosexual groups. Our results support prior research that indicates that an MH identity falls within the umbrella of a sexual minority, yet little is known about unique challenges that this group may face in comparison to other sexual minority groups

Pauletti, R. E., Cooper, P. J., & Perry, D. G. (2014). Influences of gender identity on children's maltreatment of gender-nonconforming peers: A person × target analysis of aggression. *Journal of Personality and Social Psychology*, 106(5), 843–866. DOI:10.1037/a0036037

We investigated whether gender identity influences preadolescents' tendency to single out genderatypical peers for abuse. Data were gathered from 195 boys and girls (M age = 10.1 years) in the fall and spring of a school year. Children self-reported multiple dimensions of gender identity (intergroup bias, felt pressure for gender differentiation, felt gender typicality, gender contentedness); peers assessed each other's social behavior (gender nonconformity, aggression toward each classmate). Using multilevel modeling, we examined how children's attacks on gender-nonconforming peers (relative to their attacks on other peers) changed over the school year depending on their gender identity. There was modest support for the hypothesis that overconfident, arrogant gender identity promotes abuse of gender-atypical peers but considerable support for the hypothesis that insecure, self-questioning gender identity fosters this tendency. Implications for issues central to contemporary personality theory (e.g., Person × Situation interaction) are discussed. New and somewhat surprising information about the cognitive and behavioral characteristics of gender-nonconforming preadolescents is provided.

Alvy, L. M., Hughes, T. L., Kristjanson, A. F., & Wilsnack, S. C. (2013). Sexual identity group differences in child abuse and neglect. *Journal of Interpersonal Violence*, 28(10), 2088 2111. DOI:10.1177/0886260512471081

Childhood abuse and neglect are pervasive problems among girls and young women that have numerous health consequences. Research suggests that sexual minority women are more likely than heterosexual women to report childhood abuse and neglect, but little is known about which sexual minority women are at greatest risk for these early adverse experiences. Using data from a pooled sample of women in a national probability study and in a large community-based study of sexual minority women designed to replicate the national study's methodology (pooled n = 953), we investigated rates and characteristics of childhood sexual abuse, physical abuse, and neglect among women from five sexual identity groups. As predicted, heterosexual women reported significantly less childhood abuse and neglect than did women who identified as mostly heterosexual, bisexual, mostly lesbian, or lesbian. We found considerable variability across the sexual minority subgroups, including severity of abuse, highlighting the need for research that distinguishes among these groups. To the extent that differences reported by women in the sample reflect the actual prevalence and severity of abuse experiences, sexual identity group differences in childhood abuse have important clinical and public health implications.

Burton, C. M., Marshal, M. P., Chisolm, D. J., Sucato, G. S., & Friedman, M. S. (2013). <u>Sexual minority-related victimization as a mediator of mental health disparities in sexual minority youth: a longitudinal analysis</u>. *Journal of Youth and Adolescence*, 42(3), 394-402. DOI:10.1007/s10964-012-9901-5

Sexual minority youth (youth who are attracted to the same sex or endorse a gay/lesbian/bisexual identity) report significantly higher rates of depression and suicidality than heterosexual youth. The minority stress hypothesis contends that the stigma and discrimination experienced by sexual minority youth create a hostile social environment that can lead to chronic stress and mental health problems. The present study used longitudinal mediation models to directly test sexual minorityspecific victimization as a potential explanatory mechanism of the mental health disparities of sexual minority youth. One hundred ninety-seven adolescents (14-19 years old; 70 % female; 29 % sexual minority) completed measures of sexual minority-specific victimization, depressive symptoms, and suicidality at two time points 6 months apart. Compared to heterosexual youth, sexual minority youth reported higher levels of sexual minority-specific victimization, depressive symptoms, and suicidality. Sexual minority-specific victimization significantly mediated the effect of sexual minority status on depressive symptoms and suicidality. The results support the minority stress hypothesis that targeted harassment and victimization are partly responsible for the higher levels of depressive symptoms and suicidality found in sexual minority youth. This research lends support to public policy initiatives that reduce bullying and hate crimes because reducing victimization can have a significant impact on the health and well-being of sexual minority youth.

Saewyc, E. M., Skay, C. L., Pettingell, S. L., Reis, E. A., Bearinger, L., Resnick, M., Murphy, A., & Combs, L. (2006). Hazards of stigma: The sexual and physical abuse of gay, lesbian, and bisexual adolescents in the United States and Canada. *Child Welfare*, 85(2), 195–213. DOI:10.1016/j.jadonhealth.2003.11.069

Some studies suggest lesbian, gay, and bisexual (LGB) teens are at higher risk than peers for violence at home, in school, and in the community. That can bring them into the child welfare system or services for runaway and homeless teens. This study compared self-reported experiences of sexual and physical abuse based on sexual orientation and gender in seven population-based surveys of youth. The authors used c2 and age-adjusted odds of abuse to compare bisexual to heterosexual, mostly heterosexual, and gay and lesbian students. They also provide case studies to illustrate the experiences of such youth