

Victimization of Sexual Minority Youth

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February 21, 2008



Special thanks to Sarah Wylie and S. Bryn Austin for their contribution.

Presentation Outline

- Overview of sexual orientation and sexual identity
- Review of studies on rates of victimization in sexual minority youth
- Evidence of health effects
- Public response

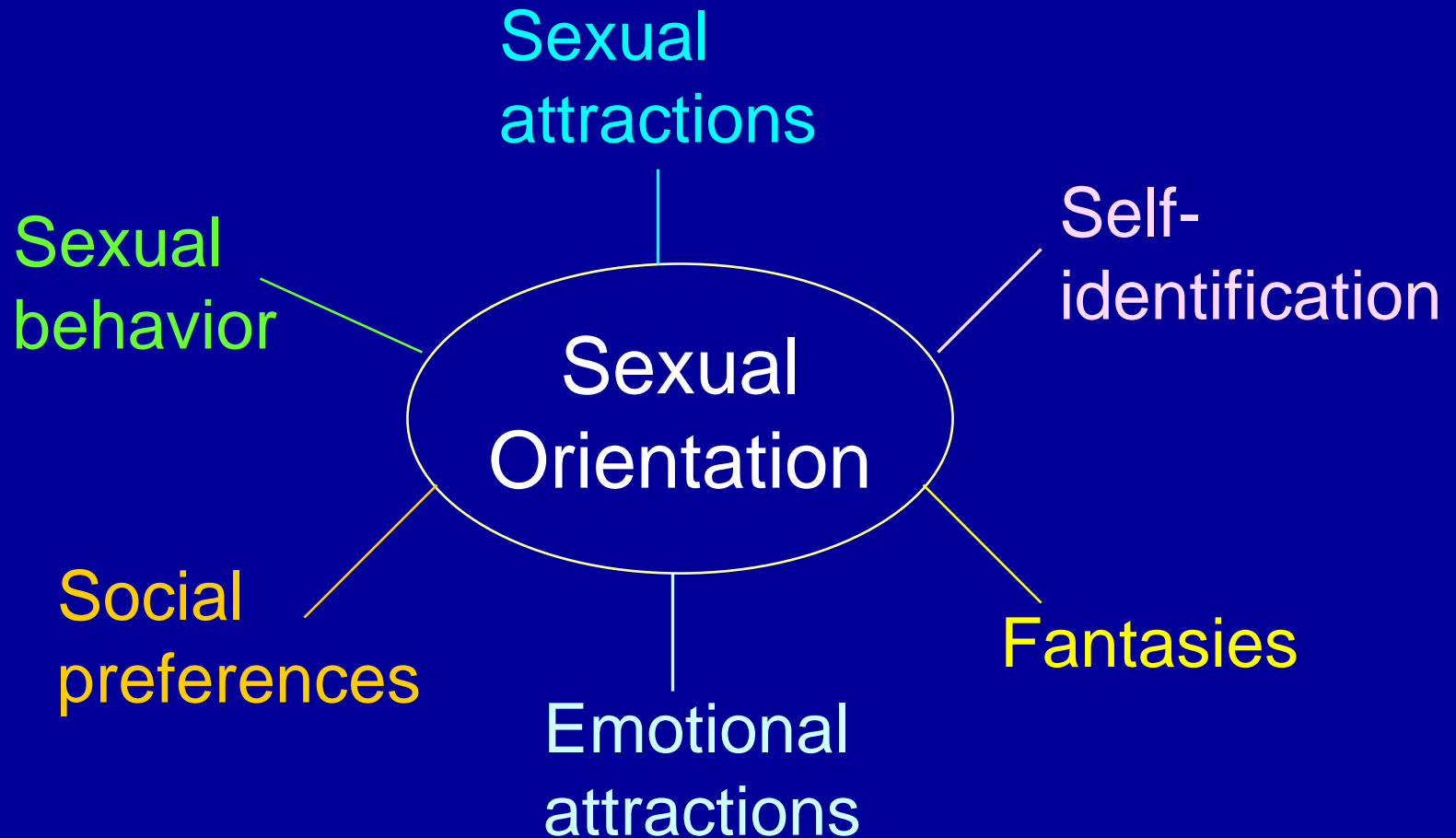
Sexual Minority

- Term describing persons expressing some same-sex sexual orientation
 - Sexual attractions to same-sex individuals
 - Histories of sexual activity with someone of the same sex
 - Identification as lesbian, gay, bisexual (LGB)
- Pertinent to youth populations
- About 5-10% of youth are sexual minority
- A population with health disparities

Sexual Orientation

- An individual's sexual and affectional preferences for males and/or females
- Multidimensional construct

Dimensions of Sexual Orientation



Minority Sexual Orientation Development

- Process generally involving 4 tasks:
 1. Recognition of same-sex attractions
 2. Initiation of same-sex relationships
 3. Disclosure of sexual orientation to others
 4. Identification as lesbian, gay, or bisexual, or something else

Source: Troiden RR (1993). The formation of homosexual identities. In L. D. Garnets & D. C. Kimmel (Eds.), *Psychological perspectives on lesbian and gay male experiences*. New York: Columbia University Press. 191-217.

Minority Sexual Orientation Development

- May begin in childhood/early adolescence
- Feelings of a sense of difference from peers emerges early (average at age 8 yrs)
- Believed to occur in stages (Troiden, 1993)
- Considerable diversity in nature, timing, and duration of developmental trajectory
- By age 25 years, sexual orientation is fairly stable

Importance of Developmental Process to Health

- Useful in understanding health risks of sexual minorities
- Health experiences differ based on the developmental stage and timing
- Age of experiencing developmental milestones may be decreasing – greater health risks?

Gay-Related Victimization

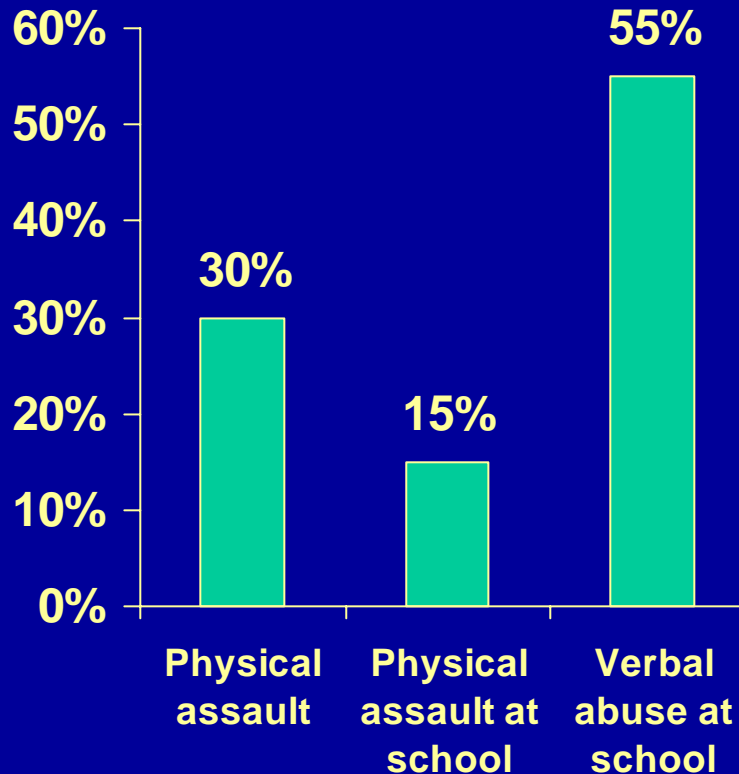
- Victimization based on known or presumed minority sexual orientation status is one of the most common forms of bias-related violence
- An estimated 17% of high school students experience gay-related name calling regardless of their sexual orientation (American Assoc. of University Women, 1993)
- Youth view gay-related verbal harassment as the most distressing type of verbal victimization
- 80-90% of high school students regularly hear anti-gay remarks

Victimization of Sexual Minority Youth

- Occurs across multiple contexts:
 - Family
 - Schools
 - Communities
- Multiple types – verbal, physical, sexual
- Multiple perpetrators – parents, peers, other adults

Some Early Studies

29 GB males, 15-19 years old



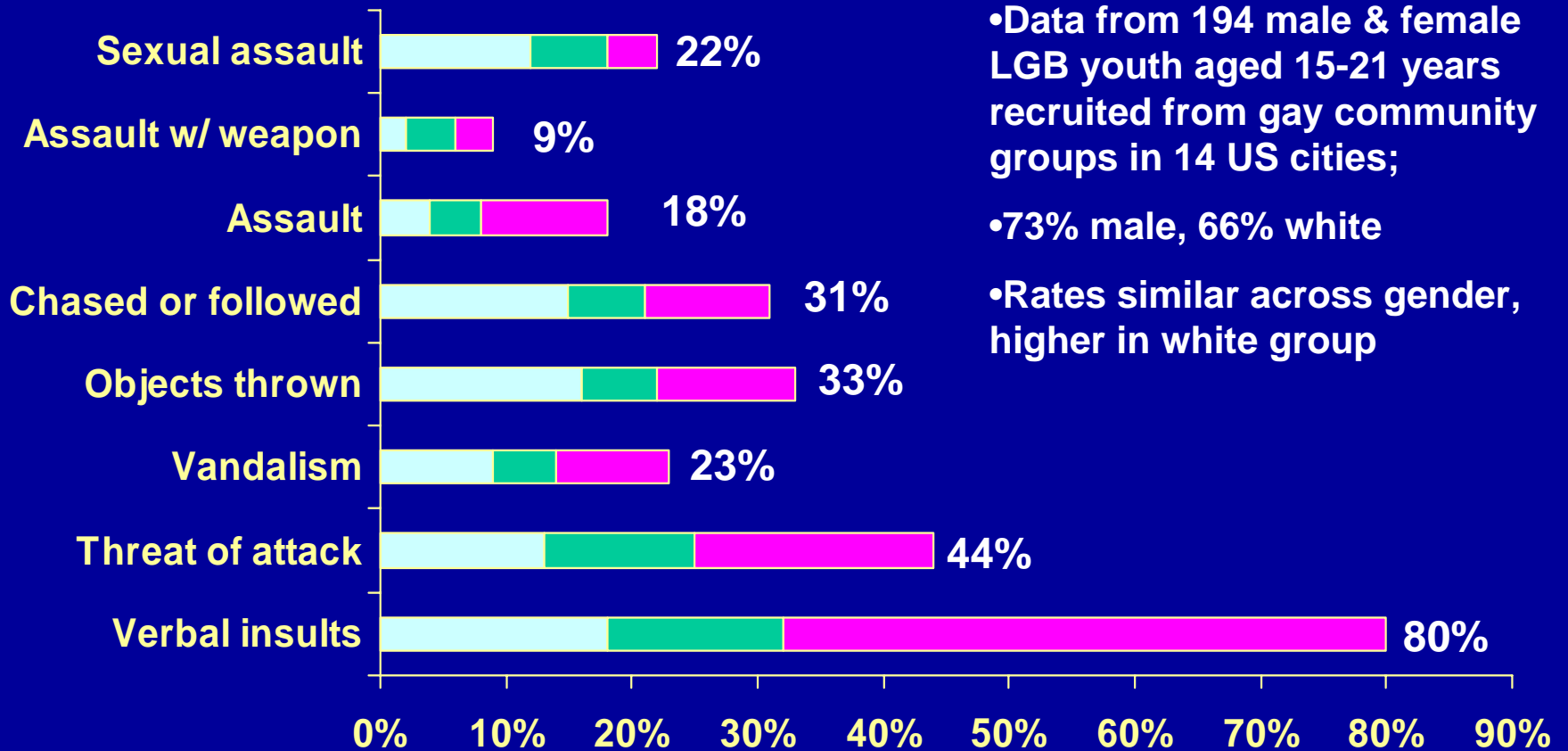
Remafedi G. *Pediatrics*, 1987

> 2000 youth (12-21 years old)
seen between 1983-1985 at a
NYC social service agency



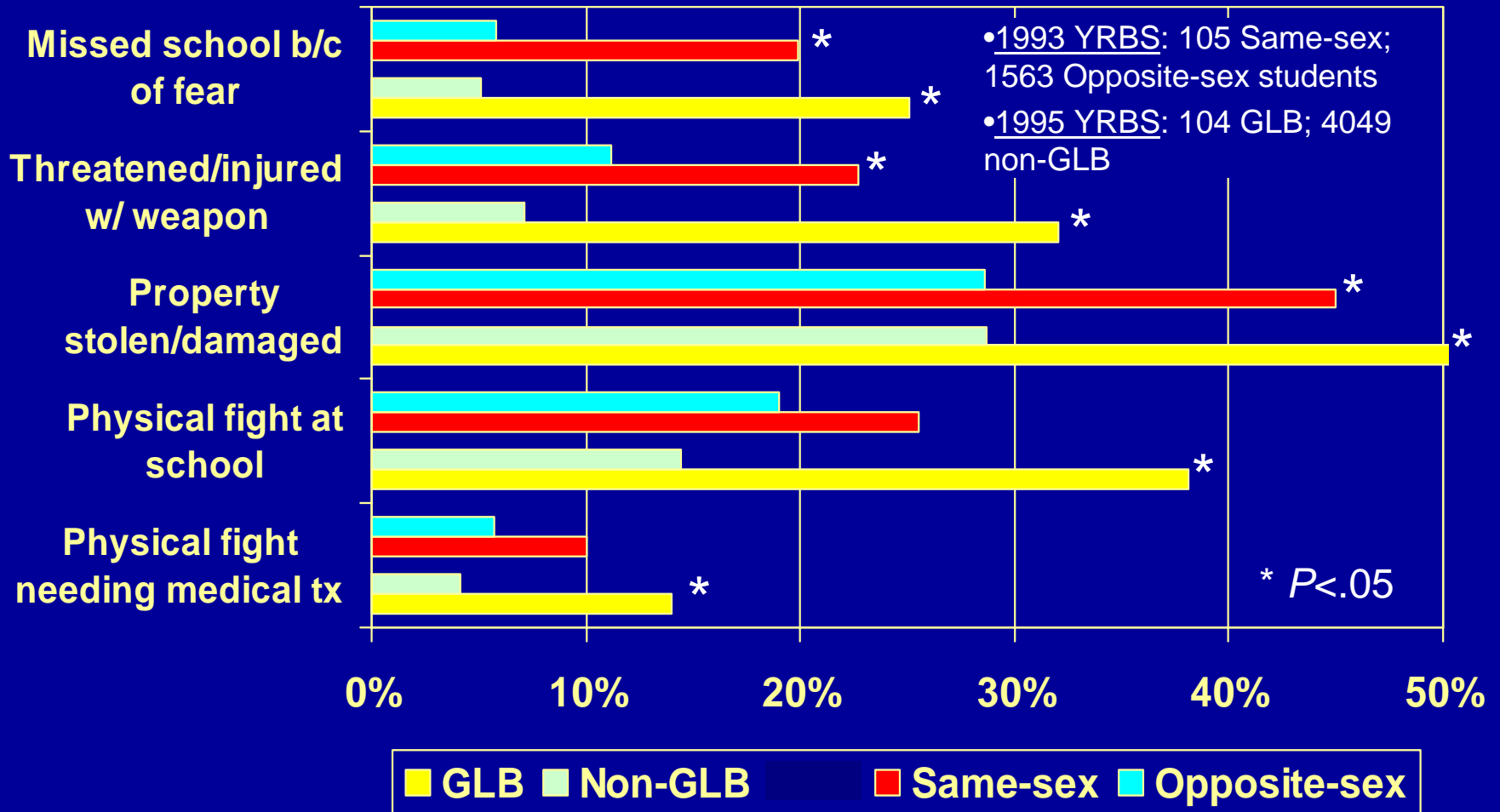
Martin AD & Hetrick ES. *J Homosex*, 1988

Lifetime victimization specifically because someone knew or assumed you were gay...



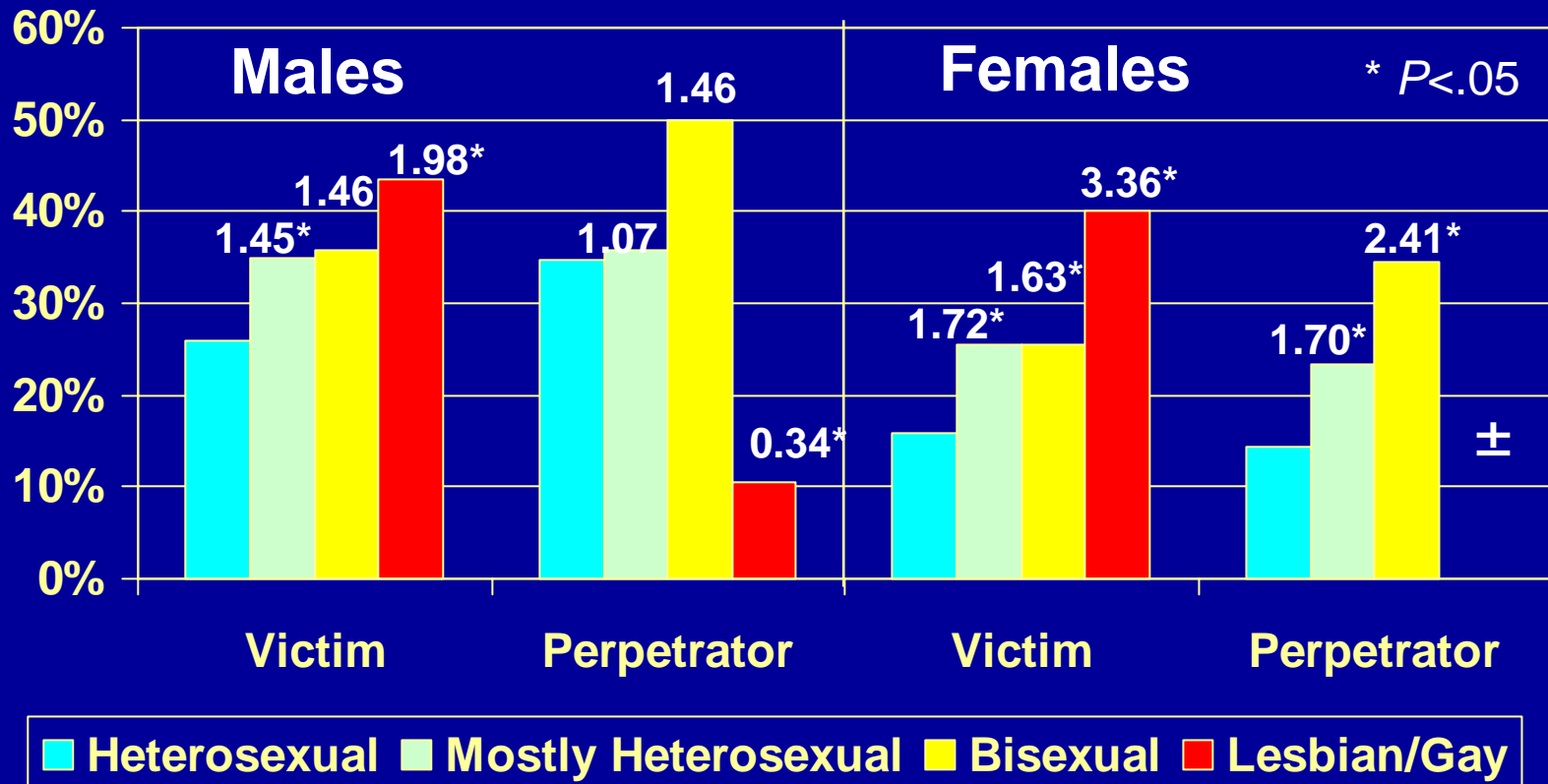
- Data from 194 male & female LGB youth aged 15-21 years recruited from gay community groups in 14 US cities;
- 73% male, 66% white
- Rates similar across gender, higher in white group

School-based Massachusetts YRBS (1993, 1995)



Bullying Experiences in Past Year

•Data from 7559 youth aged 14-22 years participating in the Growing Up Today Study



Numbers at top of bars are risk ratios adjusted for age, race, and weight status. Referent is heterosexual. \pm No lesbians reported bully perpetration.

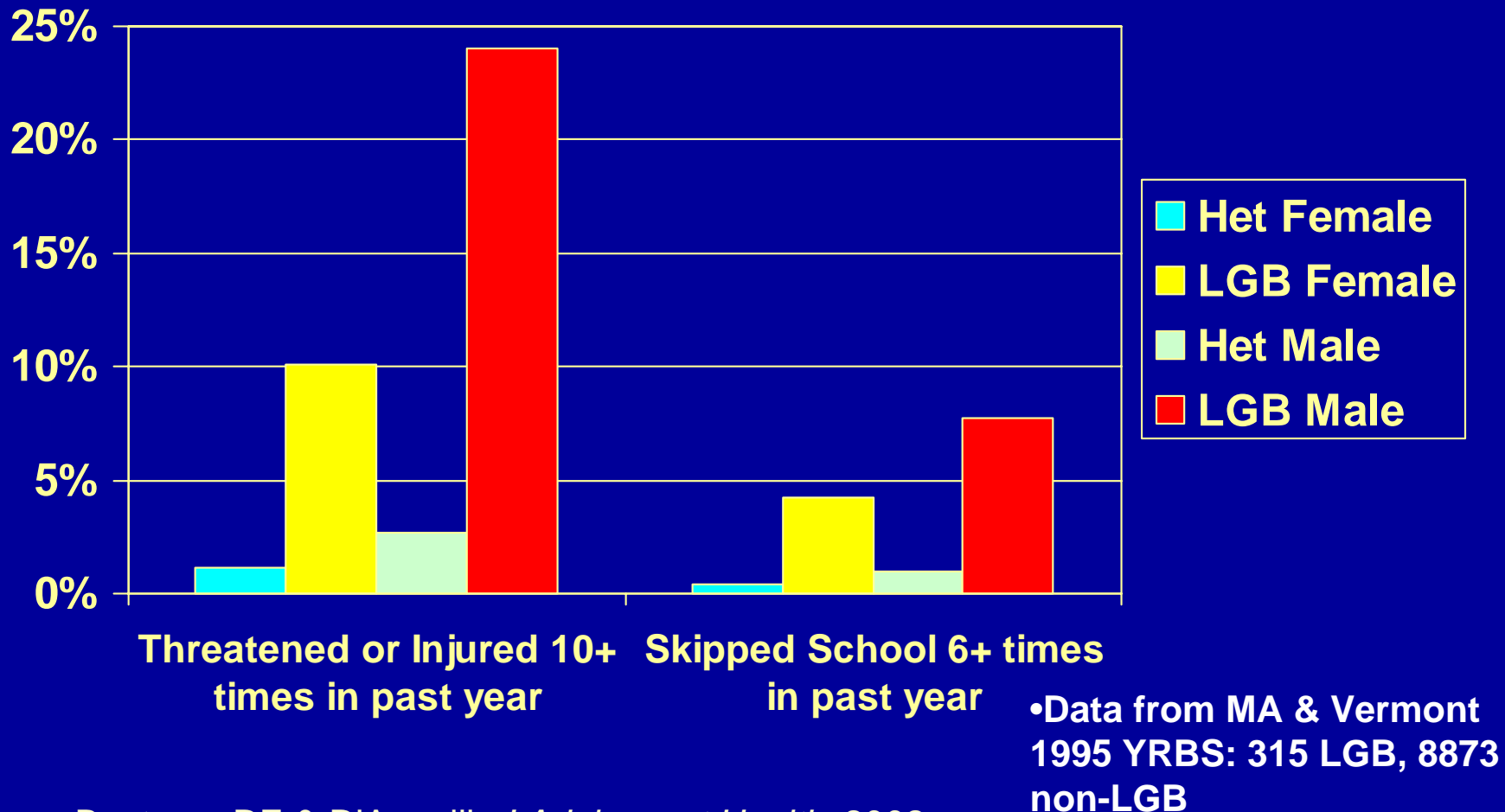
Manuscript in preparation: Berlan ED et al.

Whose at Greater Risk?

- Younger age of awareness of a same-sex sexual orientation
- Younger age of self-identification as LGB
- Younger age of disclosure to others
- Greater degree of “outness”
- Self-perceived obviousness as LGB
- Gender atypicality (HUGE!)
- Males
- Bisexually active vs. those with histories of only opposite- or same-sex sex (Robin L et al., 2002)

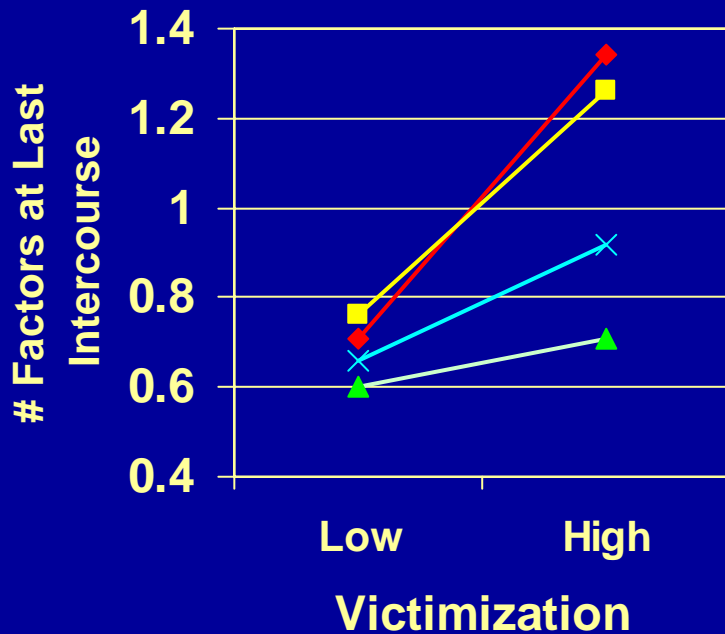
Health Consequences

Health Implications of At-School Victimization: Evidence from YRBS



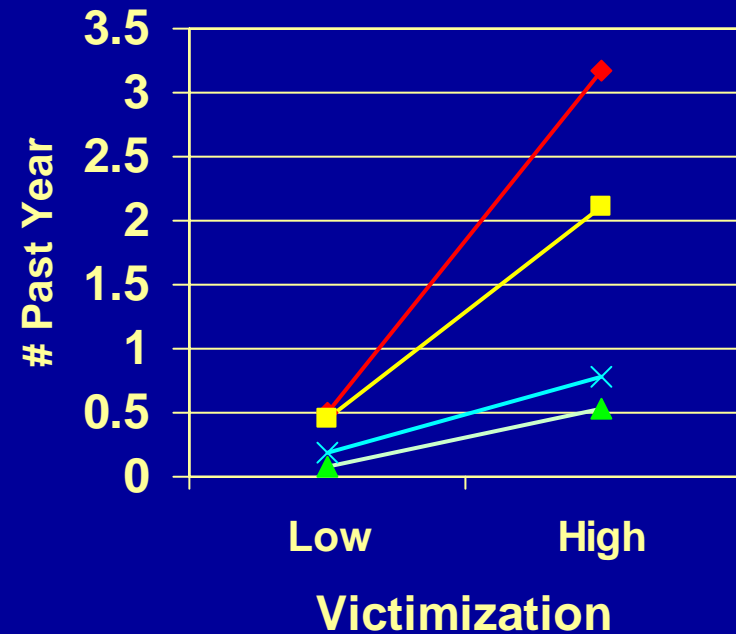
Health Implications: Evidence from YRBS

Sexual Risk



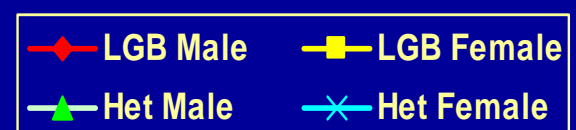
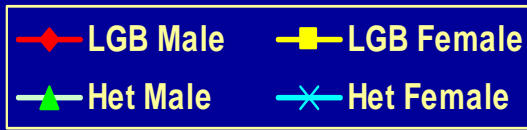
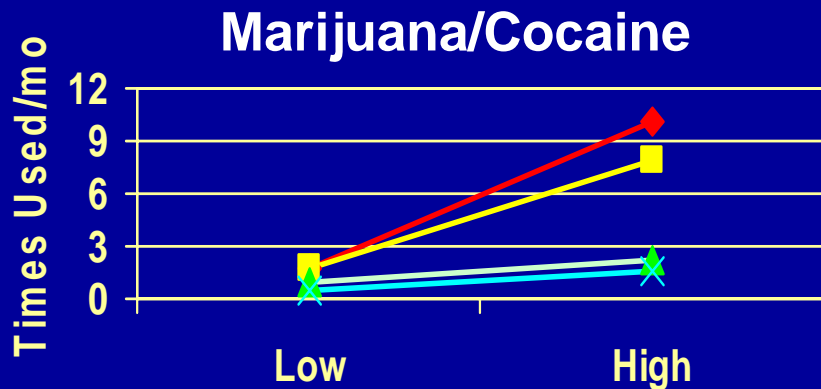
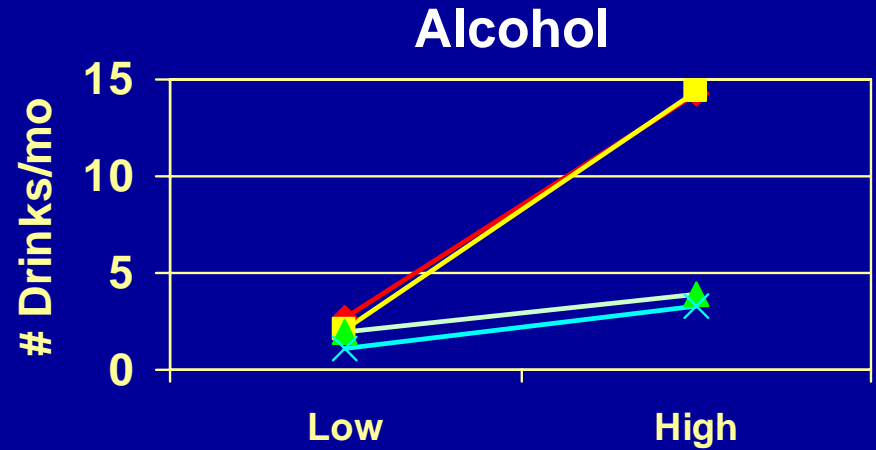
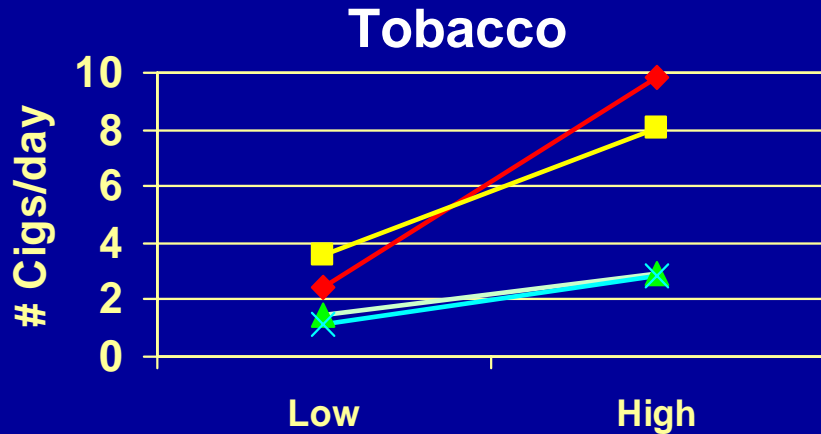
◆ LGB Male ■ LGB Female
▲ Het Male ✕ Het Female

Suicide Attempts



◆ LGB Male ■ LGB Female
▲ Het Male ✕ Het Female

Substance Use Implications: Evidence from YRBS



Mental Health Implications: Evidence from Gay Community Studies

- Largest predictors of negative mental health in a community sample of 206 LB females age 14-21 years (D'Augelli AR, 2003):
 - Fear of future sexual orientation victimization
 - Actual experiences of victimization
- Dahlia describing why she quit school in 11th grade: “...Mostly it was the fact that I was scared. It wasn't even the verbal abuse. It was the fact that at any time people could walk up to me and knock the crap out of me because I am gay. I always had to watch my back.” (Human Rights Watch, 2001)

Suicide Attempts: Evidence from Gay Community Studies

- Strong predictors of a serious suicide attempt in a gay community sample of 528 youth ages 15-19 yrs:
 - Early parental psychological abuse
 - Parental discouragement of childhood gender atypical behavior
 - Gay-related verbal abuse
 - Gender-related verbal abuse (sissy, tomboy)
- More important than family history of suicide

D'Augelli AR et al. Predicting the suicide attempts of lesbian, gay, and bisexual youth. *Suicide & Life-Threatening Behaviors* 2005;35:646-60.

Post Traumatic Stress: Evidence from Gay Community Studies

- Victimization experiences also found to predict traumatic stress & PTSD symptoms in the same sample
- Childhood gender atypicality was a contributing factor
- Average age of start of gay-related victimization:
 - Verbal – 11 years for males; 14 for females
 - Physical – 13 years for both males & females
 - Sexual – 13 years for males; 16 for females

D'Augelli AR et al. Childhood gender atypicality, victimization, and PTSD among lesbian, gay, and bisexual youth. *Journal of Interpersonal Violence* 2006;21:1462-82.

Buffers of Negative Effects of Victimization

- Relationship quality with mother and friends buffered the link between victimization and depression (but not externalizing symptoms) in a high school sample (Williams T, et al., 2005)
- Family support in conjunction with self-acceptance associated with lower risk of suicide attempt (Hershberger & D'Augelli, 1995)
- More work need to be done – factors contributing to resilience not well described

Community Response

- Accelerated research in past 15 years
- Legal advancements protecting sexual minority students in public schools
- New policies and programs in schools
 - Nondiscrimination and anti-bullying policies
 - Personnel training
 - Gay-Straight Alliances – started in 1988 in Concord, MA; 3,000+ registered with GLSEN
 - School-wide diversity events – Day of Silence
 - MA Safe Schools Program – mandated state-wide program began in 1993

Evaluation of Massachusetts Safe Schools Program (SSP)

- Purpose of program:
 - Develop policies protecting sexual minorities from harassment, violence & discrimination
 - Train personnel in crisis & suicide intervention
 - Support establishment of support groups
 - Provide counseling for families w/ gay students
- Random sample of 35 schools & 11th graders in 99 classrooms (61% response rate at level of school)

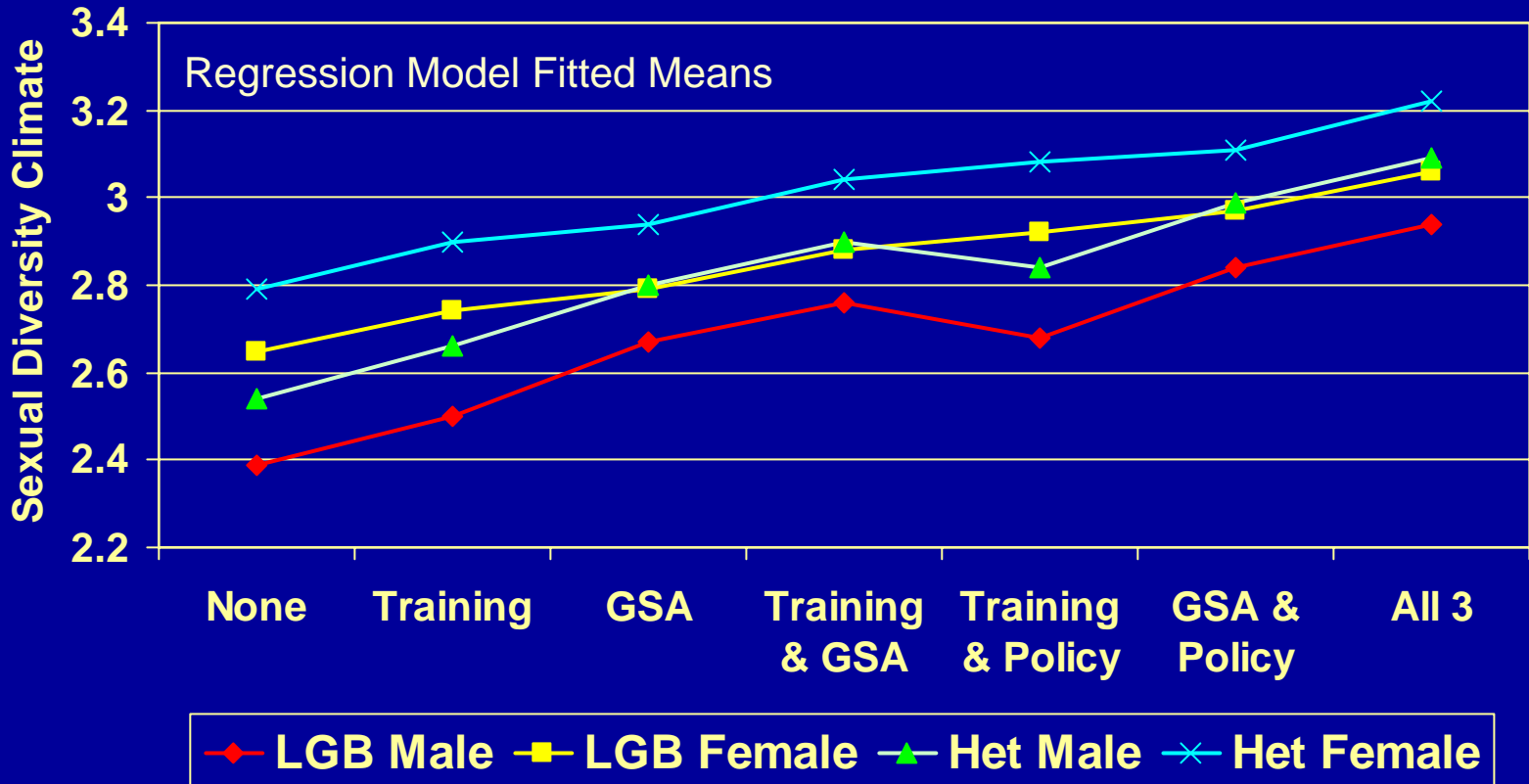
Szalacha LA. Safer sexual diversity climates: Lessons learned from an evaluation of Massachusetts Safe Schools Program for gay and lesbian students. *American Journal of Education* 2003; 110 58-88.

Evaluation of Massachusetts SSP

Degree of Implementation	%
None	36
GSA only	9
Personnel training only	3
Personnel training & policy	3
GSA & personnel training	12
GSA & policy	12
Full Implementation	21

Evaluation of Massachusetts SSP

Main Outcome: Perceived Sexual Diversity Climate – 19-item scale covering curricula, attitudes, and behaviors related to homosexuality



Evaluation of Massachusetts SSP

- Limitations
 - Limited causal inference: Do schools with a better sexual diversity climate have better implementation of SSP or vice versa?
 - Unanswered question: Is better sexual diversity climate associated with lower rates of victimization and more positive health in sexual minority students?
- Nonetheless, findings are compelling

Protective Effects of LGB Programs & Policies among Sexual Minority Students

	Threatened/ injured at school	Skipped school b/c unsafe	2+ Suicide attempts
School Program/Policy	OR	OR	OR
LGB Support Group (GSA)	0.47	0.43	0.29
Perceived Staff Support	0.36	n/a	0.34
Other Peer Support Group	0.35	0.27	n/a
Anti-Bullying Policy	n/a	n/a	0.19

All odds ratios (OR) significant at $P < .05$.

Goodenow C, Szalacha L, Westheimer K. School support groups, other school factors, and the safety of sexual minority adolescents. *Psychology in the Schools* 2006;43:573-89. (1999 Massachusetts YRBS)

Other Areas of Research Not Covered Today

- Only touched on youth research; large literature using adult samples
- Sexual orientation differences in childhood maltreatment
 - LGB adults are more likely to report child abuse experiences (Corliss, Cochran & Mays, 2002; Austin et al., in press)
- Long-term effects of youth victimization on adult health & adjustment

Variation Across Studies

- Study design – sampling, cross-sectional vs. longitudinal
- Population – youth vs. adults (focused on youth studies; adult studies comparable)
- Measures of sexual orientation
- Measures of victimization – type, sexual orientation-specific, location
- Dates of studies – historical changes in societies' views of homosexuality
- Diversity in research = diversity in findings

Conclusions Across Studies

- Despite diversity, common findings
- Victimization experiences are more frequent in sexual minority youth
- Negatively impacts physical & mental health
- Strong relationships with family & friends can buffer detrimental consequences
- Society is making progress, but more needs to be done
- Sexual minority youth have resilience – most are healthy and well adjusted