



In Brief: LGBT Youth of Color and Mental Health

This research brief describes trends in research on LGBT youth of color and addresses life domains that may be experienced differently at younger developmental stages (for research on LGBT people of color more generally, please see MPIPP's Research Brief on LGBT People of Color).¹ It is important to understand LGBT youth of color in the context of their growth and family: youths are reliant on family and community structures (e.g., home, school) and are working on fundamental developmental tasks such as identity development, academic achievement, and learning to cope with adversity.

Risks at the Intersections of Gender and Sexuality with Race

FINDINGS: LGBT youth of color are at increased risk of homelessness.

Estimates of homelessness among youth suggest that LGBT youth are at increased risk of homelessness, with the most commonly cited reason being family rejection or conflict about youths' sexual orientations and/or gender identities (Durso & Gates, 2012). A New York Survey of homeless youth found that **of homeless gay youth, 44% were Black and 26% Hispanic. Of homeless transgender youth, 62% were Black and 20% were Hispanic** (Freeman & Hamilton, 2008). In Detroit's Ruth Ellis Center, the only LGBT youth shelter in Michigan, 99% of their clients are LGBT youth of color (Ray, 2006). Homelessness puts youth at risk for gaps in education, health problems, mental health problems, and sexual exploitation.

FINDINGS: LGBT youth of color are disproportionately targets of violence.

An analysis of GLSEN's national school climate survey revealed alarmingly high rates harassment: More than 60% of LGBT youth of color had been verbally harassed at school because of their gender, and 54% of Native American, 33% of African American, 45% of Latino/a, 41% of Asian and Pacific Islander, and 45% of multiracial students reported experiencing physical violence targeting their sexual orientation. **More than half of all LGBT youth of color felt unsafe at school because of their sexual orientation** (Diaz & Kosciw, 2009).

The most recent report from the National Coalition on Anti-Violence Programs (NCAVP), which tracks bias-related crimes reported by NCAVP member agencies, reported that **people of color were the victims of 73% of anti-LGBTQ homicides**: 53.8% were Black or African American; 15.4% were Latino/a; 11.5% were white;

¹ Please note that studies cited here are generally representative of the larger empirical literature and often contain limitations, including: 1) transgender youth are commonly underrepresented in studies using LGBT youth samples as are certain racial groups, such as Asian, Native American, and Arab youths, 2) researchers sometimes analyze youth by imperfect demographics (e.g., lumping together those who describe themselves as Black, Latino/a, and Asian, and comparing that diverse group to whites), and 3) much research ignores ethnic identities (e.g., a 1st-generation Chinese youth, a 5th-generation Korean youth, and a 2nd-generation Laotian youth may all be categorized as "Asian" by the researchers). MPIPP attempts to use the language and labels (e.g., Black, African American) used by the original authors so as not to misconstrue descriptions of youth.

3.9% were Native American. Notably, 53.8% of the LGBTQ-bias homicide victims were transgender. This is the third consecutive year in which LGBTQ people of color disproportionately represent victims of this type of homicide (NCAVP, 2013).

Well-being and Identity

FINDINGS: Racial, ethnic, and sexual identities, and their development, are each distinct.

Although they can certainly interact with each other, there is some indication that youth experience these as distinct processes of identity development. In interviews with 22 African American and Latino gay and bisexual adolescent males, youth described their ethnic and sexual identity development in different ways. Ethnic identity development was often triggered by social experiences and formulated by connecting to youths' respective cultures, community practices, and people. In contrast, youth described first becoming aware of their sexual identity from internal experiences of romantic attraction and then searching for a label to describe their internal experience in a more solitary fashion. **These youth connected to their ethnic and sexual communities in different ways. Importantly, they did not have to "choose" between their ethnic and sexual communities** (Jamil et al., 2009).

FINDINGS: LGBT youth of color are not simply more or less 'at risk' for mental health and substance use problems.

In a recent study that focused on racial minority LGBT youth ages 16-20 from Chicago (86% of sample described themselves as Latino/a, Black, or "Other"), one-third met criteria for a mental health disorder in the past year: 9% had PTSD, 15% Major Depressive Disorder, and 15% reported suicidal ideation. There were no differences by race for any of the disorders, except for Conduct Disorder (Black: 19%; Latino/a: 10%; White: 3%; Mustanski, Garofalo, & Emerson, 2010).

LGBT youth of color are often found to drink alcohol less frequently than their white counterparts. In a nationally representative study of youth, LGBT youth of color had fewer instances of drunkenness in the past year in high school and in early adulthood compared to LGBT white youth² (Dermoddy, et al., 2013). Similarly, **LGBTQ high school youth of color in a Midwestern county had lower rates of substance use than whites and similar rates of substance use as heterosexual youth of color, except for questioning boys: boys of color who were questioning or uncertain about their sexual orientation reported higher rates of substance use than other boys of color** (Poteat, Aragan, Espelage, & Koenig, 2009).

Youth of color, including LGBT youth of color, are often found to have the same or lower rates of mental health disorders compared to white youth. However, **compared to their white LGB counterparts, LGB Black and Latino youths could have 2.5-3 times the odds of a suicide attempt before age 24**. The increased risk of suicide attempt among Black and Latino/a LGB youth could not be explained by mood disorder symptoms or substance use (O'Donnell, Meyer & Schwartz, 2011). The pathways to risk of suicide for LGBT youth of color may differ from white LGBT youth, and so a lack of reported psychological distress should not be interpreted as a lack of risk for suicidality. Researchers are working to better understand predictors of suicidality in LGBT youth of color.

² Note that the highest rate of drunkenness episodes in the past year were for gay and bisexual men at approximately 1.6 episodes.

Experiences with Oppression and Resilience

FINDINGS: LGBT youth of color experience negative consequences of unsafe schools.

In general, young people who experience anti-LGBT bullying at school have greater risk of drug use, depression, and suicidality, as well as higher rates of truancy and school problems. It appears this relationship holds true regardless of youth race (Birkett, et al., 2009; Button, et al., 2012).

FINDINGS: Race-, sexuality-, and gender-based discrimination and are harmful.

There is some evidence that having both a marginalized sexuality and minority race does not necessarily increase risk of psychiatric disorders (Mustanski, Garofalo, & Emerson, 2010). However, exposure to discrimination and other forms of oppression, do. For example, in a study that examined racial- and sexuality-based aggression of young sexual minority men, both types of victimization predicted greater depressive symptoms (Hightow-Weidman et al., 2011).

FINDINGS: The particular effects of LGBT-based victimization may vary by race.

LGBTQ African American youths (age 16-20) tend to drink less than LGBTQ youths of other races. Although African American LGBT youths do not drink more in response to anti-LGBTQ victimization, they appear to drink more when they experience less family support, which is consistent with other LGBTQ youths (Newcomb et al., 2012).

In a Midwestern sample of high school students, and after controlling for general victimization, youth of all races and sexual orientations who experienced homophobic victimization reported lower levels of school belongingness, which included skipping school, poorer academic performance, and feeling it is less important to graduate. In the same sample, homophobic victimization led to greater depression and suicidal feelings, but for LGBT white youth and not for LGBT youth of color (Poteat, Mereish, DiGiovanni, & Koenig, 2011). The researchers speculated that because LGBT youth of color learn how to manage racial victimization, they may have learned ways of coping to protect their mental health from the ill-effects of homophobic abuse as well. However, youth may have difficulty maintaining their engagement at school when that is where they are experiencing homophobic victimization.

FINDINGS: Supportive climates help LGBT youth of color succeed.

In a study of sexual minority youth (SMY) in 7th through 12 grades, 23% of SMY of color had teacher-mentors while 36% of white SMY did. Sexual minority girls of color were especially likely to benefit from these formal mentorships: 57% of sexual minority girls of color completed at least one year of college if they had a formal mentor in high school; 32% completed at least one year if they had an informal mentor (Gastic & Johnson, 2009).

FINDINGS: Supportive family environments help LGBT youth of color be well.

In a study of young LGBT adults, approximately half of whom identified as Latino/a, family acceptance of youths' sexual orientation and gender expression during adolescence was linked with fewer depressive

symptoms, lower suicidality, better general health, and greater social support in young adulthood. When youths' families were accepting of their sexual orientations and gender expressions, stronger religiosity in childhood was associated with greater social support (Ryan, Russell, Huebner, Diaz, & Sanchez, 2010). Family acceptance of youths' sexual orientations and genders can have a powerful, protective effect for all LGBT youth.

References

- Birkett, M., Espelage, D. L., & Koenig, B. (2009). LGB and Questioning Students in Schools: The Moderating Effects of Homophobic Bullying and School Climate on Negative Outcomes. *Journal of Youth and Adolescence*, 38, 989–1000. doi: 10.1007/s10964-008-9389-1
- Button, D. M., O'Connell, D. J., & Gealt, R. (2012). Sexual Minority Youth Victimization and Social Support: The Intersection of Sexuality, Gender, Race, and Victimization. *Journal of Homosexuality*, 59(1), 18-43. doi: 10.1080/00918369.2011.614903
- Dermody, S. S., Marshal, M P., Cheong, J., Burton, C. Hughes, T., Aranda, F., & Friedman, M. S. (2013). Longitudinal Disparities of Hazardous Drinking Between Sexual Minority and Heterosexual Individuals from Adolescence to Young Adulthood. *Journal of Youth and Adolescence*. doi: 10.1007/s10964-013-9905-9
- Diaz, E. M. & Kosciw, J. G. (2009). Shared Differences: The Experiences of Lesbian, Gay, Bisexual, and Transgender Students of Color in Our Nation's Schools. New York: GLSEN. Available at: <http://www.glsen.org/learn/research/national/report-shared-differences>
- Durso, L.E., & Gates, G.J. (2012). Serving Our Youth: Findings from a National Survey of Service Providers Working with Lesbian, Gay, Bisexual, and Transgender Youth who are Homeless or At Risk of Becoming Homeless. Los Angeles: The Williams Institute with True Colors Fund and The Palette Fund. Available at: <http://williamsinstitute.law.ucla.edu/research/safe-schools-and-youth/serving-our-youth-july-2012/>
- Freeman, L., & Hamilton, D. (2008). A Count of Homeless Youth in New York City. Empire State Coalition of Youth and Family Services . Available at: www.citylimits.org/images_pdfs/pdfs/HomelessYouth.pdf
- Gastic, B., & Johnson, D. (2009). Teacher-Mentors and the Educational Resilience of Sexual Minority Youth. *Journal of Gay & Lesbian Social Services*, 21(2-3), 219-231. doi: 10.1080/10538720902772139
- Hightow-Weidman, L.B., Phillips, G., Jones, K.C., Outlaw, A.Y., Fields, S.D., et al. (2011). Racial and sexual identity-related maltreatment among minority YMSM: Prevalence, perceptions, and the association with emotional distress. *AIDS Patient Care and STDs*, 25(Sup1), S39-S45.
- Jamil, O.B., Harper, G.W., & Fernandez, M.I. (2009). Sexual and Ethnic Identity Development Among Gay–Bisexual–Questioning (GBQ) Male Ethnic Minority Adolescents. *Cultural Diversity and Ethnic Minority Psychology*, 15(3), 203–214. doi: 10.1037/a0014795
- Mustanski, B.S., Garofalo, R., & Emerson, E.M. (2010). Mental health disorders, psychological distress, and suicidality in a diverse sample of lesbian, gay, bisexual, and transgender youths. *American Journal of Public Health*, 100 (12):2426–2432

National Coalition of Anti-Violence Programs (NCAVP). (2013). Lesbian, Gay, Bisexual, Transgender, Queer And HIV-Affected Hate Violence In 2012. 2013 Release Edition. Available at: <http://www.avp.org/about-avp/coalitions-a-collaborations/82-national-coalition-of-anti-violence-programs>

Newcomb, M.E., Heinz, A.J., & Mustanski, B. (2012). Examining Risk and Protective Factors for Alcohol Use in Lesbian, Gay, Bisexual, and Transgender Youth: A Longitudinal Multilevel Analysis. *Journal of Studies on Alcohol and Drugs*, 73(5), 783-793.

O'Donnell, S., Meyer, I.H., & Schwartz, S. (2011). Increased Risk of Suicide Attempts Among Black and Latino Lesbians, Gay Men, and Bisexuals. *American Journal of Public Health*, 101, 1055-1059. doi: 10.2105/AJPH.2010.300032

Poteat, V. P., Aragan, S. R., Espelage, D. L., & Koenig, B. W. (2009). Psychosocial Concerns of Sexual Minority Youth: Complexity and Caution in Group Differences. *Journal of Consulting and Clinical Psychology*, 77(1), 196–201. doi: 10.1037/a0014158

Poteat, V. P., Mereish, E. H., DiGiovanni, C. D., & Koenig, B. W. (2011). The effects of general and homophobic victimization on adolescents' psychosocial and educational concerns: The importance of intersecting identities and parent support. *Journal of Counseling Psychology*, 58(4), 597-609. doi:<http://dx.doi.org/10.1037/a0025095>

Ray, N. (2006). *Lesbian, gay, bisexual and transgender youth: An epidemic of homelessness*. New York: National Gay and Lesbian Task Force Policy Institute and the National Coalition for the Homeless. Available at: http://www.thetaskforce.org/reports_and_research/homeless_youth

Ryan, C., Russell, S.T., Huebner, D., Diaz, R., & Sanchez, J. (2010). Family Acceptance in Adolescence and the Health of LGBT Young Adults. *Journal of Child and Adolescent Psychiatric Nursing*, 23(4), 205-213. doi: 10.1111/j.1744-6171.2010.00246.x