

Transitional Age Lesbian, Gay, Bisexual, Transgender, and Questioning Youth



Issues of Diversity, Integrated Identities, and Mental Health

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KEYWORDS

- Sexual orientation • Gender identity • Lesbian • Gay • Bisexual • Transgender • Questioning

KEY POINTS

- LGBTQ transitional age youth face heightened risk of victimization through bullying and discrimination in a variety of environments.
- Educational institutions, families, and churches, usually considered safe havens for people, are sometimes unsupportive of LGBTQ youth.
- Health and mental health of LGBTQ youth and young adults may be compromised by unsupportive environments and bullying/victimization.
- Changing the outcome for LGBTQ transitional age youth is possible through a variety of best practices.

INTRODUCTION

Many lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth do well as they make the transition from adolescence to adulthood, but research suggests that the population is at a higher risk for developing certain health, mental health, and social problems. These include, but are not limited to, sexually transmitted diseases, school difficulties, addiction, depression, and suicide.^{1,2} These negative outcomes may be higher because of the discrimination, marginalization, and isolation that are associated with LGBTQ youth. LGBTQ youth experience bullying and victimization

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at higher rates than their heterosexual and cisgender peer group.^{3–6} Additionally, LGBTQ youth sometimes lack the type of support that exists for most youth in such settings as the home environment, on campus, and in the workplace, and religion may become a source of distress if one's beliefs are in conflict with one's sexual identity.^{2,7,8} Furthermore, LGBTQ youth with gender-nonconforming behaviors seem to be at higher risk for bullying and victimization than those with gender-conforming behaviors, and males seem to have heightened risk.^{9,10} As these youth enter adulthood, bullying and victimization begin to decrease, and this results in overall improvement in health for some individuals. However, there remain persistent health disparities in LGBTQ young adults.¹¹ There are research-supported interventions that work to reduce the risk of poor health outcomes for LGBTQ youth as they make the transition to adulthood.^{12–15}

HEALTH AND MENTAL HEALTH DATA

Compared with heterosexuals, members of sexual minority groups experience lower levels of self-esteem, higher levels of psychological stress, and a lower level of general well-being.^{9,16–18} Additionally, those whose gender expression does not match typical masculine and feminine appearance and behaviors (also known as gender nonconformity) experience more stigmatization, rejection, and a lower level of well-being than those with a lower level of gender nonconformity.^{8,18–20} Indeed, gender nonconformity seems to be a stronger predictor of a lower level of well-being and of greater stigmatization among sexual minorities than sexual orientation.⁹ Stigmatization, in turn, may adversely affect the development of sexual minority youth, specifically by worsening their psychosocial adjustment and mental health, and by inducing more health risk behaviors.^{8,21–23}

The lower level of psychological well-being among sexual minorities is understood by the minority stress model, as described by Meyer.^{19,24} Several stressors exist for the LGBTQ community, including discrimination, expected homonegativity, concealing one's sexual orientation, and internalized homonegativity.^{19,24} Discrimination involves experiencing prejudice events; for LGBTQ youth, bullying at school and being rejected by family and friends are prime examples.^{11,23,25,26} A second type of stressor involves "expecting to experience prejudice events or rejection."¹¹ When LGBTQ youth experience discrimination, the result is an expectation that these experiences will recur, and this leads to heightened vigilance and greater stress.^{11,19,27} Concealment is a third stressor; it involves attempting to conceal one's LGBTQ status. Concealment requires "constant self-monitoring" to ensure that one's behavior conforms to expected gender-based behaviors, and the stigma of concealment can have an adverse effect on mood and self-esteem.^{11,28} Finally, members of the LGBTQ community sometimes internalize the negative societal views of LGBTQ people. When this happens, individuals begin to think less of themselves based on social stigma.²⁹ Greater levels of these stressors are associated with poor psychosocial health outcomes.^{30,31}

"Coming out" is a process in which one chooses to disclose to others his/her sexual orientation and/or gender identity, and it is considered a key developmental milestone associated with better psychological well-being. In a study by Kosciw and colleagues,³² outness was associated with higher levels of peer victimization, with rural youth experiencing more victimization than urban youth. However, outness was also associated with higher self-esteem and lower levels of depression. Being out may reflect resilience despite the higher risk of victimization and may promote well-being

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