



Examining stress and coping as a mediator for internalizing symptomatology: A comparison between sexual minority and majority first-year college students



Tracey J. Riley^{*}, Alexandra C. Kirsch, Jenna B. Shapiro, Colleen S. Conley

Loyola University Chicago, USA

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ABSTRACT

Sexual and gender minority (SGM) adolescents experience unique stressors and elevated internalizing symptoms. This study examines differences in coping styles between SGM and heterosexual adolescents and the potential mediating roles of stress and coping styles. Analyses indicated that SGM ($N = 75$) adolescents reported higher levels of internalizing symptoms (depression, anxiety, and distress), higher use of maladaptive coping styles (denial and blame), lesser use of adaptive coping styles (reframing and religion), and greater experiences of stress, compared to their heterosexual counterparts ($N = 1702$). Bootstrapping analyses revealed the relationship between sexual identity and internalizing symptoms measured approximately 3 months later was not mediated by stress and coping, adjusting for gender, age, and baseline symptomatology. Findings suggest that earlier adolescent differences in internalizing symptoms presage increasing symptomatology across the transition to college, and other mediators during the college transition explain the continued increases in internalizing symptoms.

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SGM mental health and the impact of sexual minority stress

Sexual and gender minority (SGM) individuals are confronted with a variety of unique experiences as a result of their sexual minority status that place them at an increased risk for mental health symptomatology and psychological distress (e.g., [Cochran & Mays, 2000](#); [King et al., 2008](#)). In a meta-analysis, SGM individuals were 1.5 times more likely than heterosexual individuals to be diagnosed with depression or an anxiety disorder ([King et al., 2008](#)), and other research found SGM youth had higher prevalence of mental health diagnoses than heterosexual youth in national samples ([Mustanski, Garofalo, & Emerson, 2010](#)). These startling statistics indicate the need to identify and explore factors that explain these elevated levels of psychopathology, which will provide insight on areas to intervene with this at-risk population.

Research suggests that one source of the augmented rates of mental health disorders among SGM individuals involves an increased risk for adverse life events ([Oswalt & Wyatt, 2011](#)). Specifically, research has indicated that the high prevalence of psychological disorders is often a direct result of stigma, prejudice, and discrimination ([Mays & Cochran, 2001](#)) characterized by alienation, victimization, and abuse ([Robinson & Espelage, 2011](#)). Such experiences can lead to anticipatory fear of negative

^{*} Corresponding author. Loyola University Chicago, 1032 W. Sheridan Road, Chicago, IL 60660, USA. Tel.: +1 773 508 3020; fax: +1 773 508 8713.
E-mail address: tracey.riley5@gmail.com (T.J. Riley).

events, the internalization of negative attitudes, and hiding one's sexual identity, which can create a stressful social environment for SGM individuals.

This research is derived from the minority stress model that explains the elevated rates of mental health symptomatology for minority individuals as a result of their increased experiences of stress (Meyer, 2003). Specifically, these sources of stress are often related to their minority status and include interpersonal prejudice, discrimination, adverse events, poor social support, and feelings of stigma (Meyer, 2003). It is theorized that SGM individuals' greater experiences of stress arise in the context of intervening factors (e.g., coping, concealment of sexual identities, internalized homophobia; Williams, Connolly, Pepler, & Craig, 2005), and contribute to increased risk for mental health symptomatology, specifically, depression and anxiety disorders (Marshall et al., 2008; Meyer, 2003). This link between sexual identity, stress, and psychopathology may be especially salient in the context of stressful developmental transitions, specifically for adolescents making the transition to college. The current study further investigates the minority stress model to assess the impact of stress and coping on SGM individuals' increased experiences of internalizing symptoms compared to heterosexual individuals during the college transition.

The college climate

Transitioning to college is a stressful experience for many late adolescents (Bayram & Bilgel, 2008), as students encounter a new set of responsibilities and developmental tasks, including changes in relationships and roles (Arnett, 2006; Schulenberg, Sameroff, & Cicchetti, 2004). Due to the difficulties of the college transition, adolescents are at an increased risk for mental health symptomatology (Eisenberg, Gollust, Golberstein, & Hefner, 2007), and the majority of students face elevated feelings of stress, psychological distress, depression, and anxiety (e.g., Bewick, Trusler, Mulhearn, Barkham, & Hill, 2008). Conley, Kirsch, Dickson, and Bryant (2014) found an increase in psychological distress, stress, and cognitive-affective vulnerabilities over the pivotal first year of college, during the time when adolescents are transitioning into the college environment. In general, college students experience higher levels of distress than adult or younger adolescent samples (Bayram & Bilgel, 2008).

While there are some benefits associated with the college transition specific to the SGM population (e.g., increased opportunity to network with other SGM students; Ueno, 2005), the transition may be uniquely challenging (Arnett, 2006). For many late adolescents, college is a time of identity exploration and commitment, but some SGM students conceal their sexual identity in an effort to protect themselves from harm or out of guilt and shame (D'Augelli & Grossman, 2001). Rankin, Blumenfeld, Weber, and Frazer (2010) found that one-fourth of SGM students experienced negative events, such as harassment or sexual violence, during college; further, close to half of students who had not experienced such negative events had avoided revealing their sexual identity due to fear of potential negative events.

During the first year of college, SGM adolescents experience greater levels of depression, anxiety, and distress compared to heterosexual adolescents (Kirsch, Conley, & Riley, 2015). Research suggests that while heterosexual students can systematically work through developmental crises on campus, sexual identity development takes precedence for many SGM students, at the expense of resolving other crises during college (Chickering & Reisser, 1993; Stevens, 2004). Many of the salient challenges of the college environment, such as maintaining self-esteem and establishing relationships, are exacerbated for SGM-identified students (Evans, D'Augelli, Savin-Williams, & Cohen, 1996). While variability exists across college campuses, studies suggest that SGM adolescents generally experience an unwelcoming context to develop a positive sense of self (Evans et al., 1996; Rankin, 2003). Given these challenges, it is important to explore how SGM students' experiences of stress and corresponding coping styles within the college environment may affect mental health.

Coping in the SGM population

Coping is a key element for theory and research on adaptation and health. Specifically, coping mechanisms are primarily employed as a way of dealing with threats to one's psychological integrity (Lazarus, 1993). Some research suggests that SGM individuals employ more maladaptive coping mechanisms to handle stressful situations (Almeida, Johnson, Corliss, Molnar, & Azrael, 2009). For example, research indicates that men who identify as gay are more likely to engage in avoidance coping, emotion-oriented coping, self-blame, and substance use in comparison to their heterosexual counterparts (Christman, 2012; Hetrick & Martin, 1987; Reed, Prado, Matsumoto, & Amaro, 2010; Sandfort, de Graaf, & Bijl, 2003). On the other hand, a few studies have indicated that SGM individuals also employ adaptive coping styles such as relaxation techniques, humor, and community involvement which can mitigate some of the impact of discriminatory experiences (Christman, 2012).

Coping styles – both adaptive and maladaptive – are strong predictors of psychological functioning and wellbeing. For SGM-identified people, research suggests that coping mechanisms significantly influence the relationship between minority-related stressors and psychological health (Christman, 2012; Szymanski & Owens, 2008). Further, research has suggested that certain coping styles may mediate the differences in mental and physical health between heterosexual and sexual minority men (Sandfort et al., 2003). This study seeks to understand differences in stress and coping styles for SGM and heterosexual adolescents in the college context, and to explore if these differences explain SGM students' increased rates of internalizing symptoms across the first semester of college.

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