

Still a Target: Sexual Diversity and Power of Caring

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Abstract

This study examined the link between victimization and sexual orientation and how this link contributes to social-emotional health, extending to school-related outcomes among adolescents. Of additional interest was to explore the role of having caring adult support as a protective factor to reduce the risk for high levels of distress or enhance positive aspects of life experiences. Participants included 27,245 students (14,114 girls) in grades 7–12 in Western Canada. Results of logistic regression revealed that Lesbian/Gay/Bisexual youth who had experiences of being victimized were at greatest risk for social-emotional and school-related problems, including educational aspiration and activity engagement. Our results also showed that having caring support from parent or teacher significantly contributed to reducing the likelihood of experiencing social-emotional and educational difficulties even among victimized sexual minority students as well as heterosexual youth.

Keywords

Bullying; victimization; social-emotional health; school climate; sexual minority; Canada

There are increased numbers of anti-bullying programs and safe school policies implemented in schools since bullying was recognized as a serious problem threatening students' healthy growth (e.g., Farrington & Ttofi, 2009). Given the growing efforts in reducing bullying, we would speculate that the prevalence of school bullying might be declining. However, it may not be the case at least in British Columbia in Canada, particularly for sexual minority students. A recent trend study on harassment among adolescents has shown that sexual minority students continued to report higher rates of victimization than exclusively heterosexual peers over time (Saewyc, Konishi, Poon, & Smith, 2011). The present study attempted to seek an answer to respond to this concern, deriving in part from a perspective of resilience that having at least one significant adult could act to buffer children against environmental stresses (e.g., Luthar, 2003; Werner & Smith, 1992). We were interested in providing evidence for the view that we no longer look at sexual minority youth as vulnerable or damaged, but consider how we could foster respect

for sexual diversity, by focusing on protective factors rather than simply providing correlates between sexual minority status and increased distress.

A number of previous studies have documented the direct effects of individual-level characteristics (sexual orientation) and social experiences (victimization) on distress and health (e.g., Berlan, Corliss, Field, Goodman, & Austin, 2010; Birkett, Espelage, & Koenig, 2009; D'Augelli, Pilkington, & Hershberger, 2002; Russell & Joyner, 2001). However, limited attention has been given to whether experiences of victimization during adolescence are largely responsible for the elevated levels of social and emotional distress and health among sexual minority youth. In addition, there is a dearth of research considering the impact of victimization on *school-related* outcomes among sexual minority adolescents, particularly with regard to population-based samples, although a recent study in the United States (Poteat, Mereish, DiGiovanni, & Koenig, 2011) has suggested the association between experiences of victimization and self-reports of truancy and grades among sexual minority students. Extending this suggestion, the present study examined the impact of victimization on wider range of school-related outcomes, including educational aspiration and engagement.

Since Werner and Smith's (1982, 1992) longitudinal study of over 30-years ago, the importance of having at least one significant adult as a means for fostering resiliency among children and youth identified as 'at risk' has become a well-documented phenomenon (Garnezy & Masten, 1986; Luthar, 2003; Noam & Hermann, 2002). Previous research findings are in accord in suggesting that this 'significant adult' need not be a parent or relative. The child-parent relationship is paramount in the development of a child. However, among those children for whom family experiences are inadequate, there is a need to draw support from other 'outside' adults across different contexts, including school. This may be true for the case of sexual minority students. Many sexual minority youth fear or face rejection by their parents because of their sexual identity (Savin-Williams & Ream, 2003). In the present study, a parent and a teacher were examined separately as a caring adult to see their effects. Previous research (Poteat et al., 2011) examining only parent support did not find its significantly moderating effect on the relationship between victimization and school belonging, with the exception of sexual minority students of color.

Another focus of the present study was to examine the 'mostly heterosexual' group as a distinct subtype of sexual identity in adolescents. Whereas this group tends to be neglected in many studies, a few researchers have recently addressed the uniqueness of this particular group being distinct from exclusively heterosexual and lesbian/gay/bisexual (LGB) individuals (Austin, Conron, Patel, & Freedner, 2007; Austin, Roberts, Corliss, & Molnar, 2008; Saewyc et al., 2004; Thompson & Morgan, 2008; Savin-Williams & Vrangalova, 2013). In earlier research, this group has been estimated 6% to 10%, as compared to LGB peers estimated 1% to 4% (e.g., Austin, Ziyadeh, Fisher, Kahn, Colditz, & Frazier, 2004a; Saewyc, Richens, Skay, Reis, Poon, & Murphy, 2006; Saewyc et al., 2011), and found to be at higher risk than exclusively heterosexual peers for smoking (Austin et al., 2004a), eating disorder (Austin, Ziyadeh, Kahn, Camargo, Colditz, & Field, 2004b), and sexual risk behavior (Saewyc et al., 2006).

To that end the present study aimed: to build on previous research that separately shows the direct effects of sexual orientation and victimization on distress, extending to school-related outcomes, including educational aspiration and engagement; and to examine effects of having caring adults, including parents and teachers, on levels of distress among sexual minority youth as well as mostly heterosexual and exclusively heterosexual youth experiencing victimization. We hypothesized that having caring adult support would have significant effects in reducing the negative effects of victimization on students' social-emotional outcomes as well as educational aspiration and engagement; especially, we posited, that the effect of teacher support would be higher. We also expected that 'mostly heterosexual' youth would report higher rates of victimization experiences and distress than their exclusively heterosexual peers, including lower levels of educational aspiration and engagement.

Method

Data Sources and Procedures

Data collected in 2008 as part of the British Columbia Adolescent Health Survey (BCAHS) in Canada conducted by the McCreary Centre Society in collaboration with the provincial government, public health system, and school districts, were used in this study. The BCAHS is a cluster-stratified random survey of classrooms of students in grades 7–12 in public schools across this Canadian province. This survey is one of the largest its kind in Canada, regularly repeating school-based surveys, and represents the diverse range of school districts across Western Canada, including urban, rural, and remote schools across the province. Original data consisted of 29,315 students and randomly sampled within strata of health-service delivery area and grade (see Saewyc, Taylor, Homma, & Ogilvie, 2008 for details) to represent the population of students in the province. The pencil-and-paper questionnaire collected extensive information on various health and behavioral variables. The University of British Columbia behavioral research ethics board reviewed and approved the project.

Sample/Participants

Cases missing key data (i.e., gender, age, and sexual orientation) were eliminated from the current analyses (7% of the total sample). The final weighted sample in this study included 13,131 boys and 14,114 girls, weighted for differential probability of selection and response rate across regions. Students from a variety of ethnic backgrounds were included (boys: 51.9% European, 16.0% East Asian, 7.1% First Nations, 7.6% South Asian, 4.5% Southeast Asian, 3.1% Latin, 2.2% African, 2.0% West Asian, 1.7% Australian/Pacific Islander, 1.2% "Other," and 9.3% "Don't know"; girls: 55.4% European, 16.6% East Asian, 7.9% First Nations, 7.8% South Asian, 5.4% Southeast Asian, 3.7% Latin, 1.9% African, 1.7% West Asian, 1.8% Australian/Pacific Islander, 1.0% "Other," and 8.7% "Don't know") (see Table 1 in Supplemental Materials).

Measures

Sexual orientation—To assess students' sexual orientation, a self-labeling measure defined by attraction was used, with six-category options: 100% heterosexual, mostly heterosexual, bisexual, mostly homosexual, 100% homosexual, and not sure. Following the

suggestion by Saewyc and colleagues (2004) based on the extensive measurement evaluation and power issues, the 100% homosexual youth and mostly homosexual youth were combined to form a group of gay/lesbian. The ‘not sure’ group was excluded in the present analyses because of the various reasons for choosing that option which leaves it unclear how they are responding to the item. For example, students who chose the option were more likely to speak a language other than English at home and to be recent immigrants as compared to those who described as 100% heterosexual. Also, they were the youngest among all orientation groups. Therefore, the respondents with this option may not have understood what the question is asking about, may not yet have thought about their orientation, or may be questioning their orientation.

Victimization—Two measures, bullying and sexual harassment, were collected to represent a range of different victimization experiences. In addition to bullying, sexual harassment has been reported as a significant problem among youth (e.g., D’Augelli et al., 2002). The bullying measure consisted of three items defined on the three critical elements of bullying (Olweus, 1993): physical, verbal, and social bullying (e.g., How many times did another youth keep you out things on purpose, exclude you from their group of friends or completely ignore you?). Original responses were rated on a 3-point scale (0 = *never* to 2 = *2 or more times*). The sexual harassment measure included two 3-point scale items (0 = *never* to 2 = *3 or more times*): verbal sexual-harassment and physical sexual-harassment (e.g., “Have you had unwanted sexual comments, jokes or gestures directed at you?”). Responses were dichotomized as *never* or *ever*, and adolescents who reported being ever victimized were classified as victimized.

Social-emotional variables—Social-emotional variables included: *running away*, *binge-drinking*, and *despair*. For the variable of running away, students’ responses were dichotomized into never and ever experienced running away from home in the past year. Binge drinking was defined as having five or more drinks of alcohol in a row during the past 30-days. Despair was assessed by asking if students had felt so sad, discouraged, hopeless, or had so many problems that they wondered if anything was worthwhile in the past 30 days. Students who reported having felt these symptoms enough to bother them or more were classified as having despair.

School-related variables—The school-related variables included *skipping school*, *liking school*, *educational aspiration*, and *activity engagement*. To assess experience of skipping school, students were asked if they had ever missed full days of school because they skipped or cut classes in the past 30-days. Liking school was measured by asking students how they feel about going to school. Students’ responses were dichotomized into ‘don’t like school’ and ‘like school some or very much.’ Students’ educational aspirations were categorized to indicate finishing before or when graduating from high school and plans for further education beyond high school. Activity engagement was assessed by asking students about their weekly or more frequent involvement in: sports without a coach/instructor, sports with a coach/instructor, dance/aerobics, art/drama/singing/music, club/group membership, hobbies, and volunteering.

Caring adults—Three parallel questions for caring support from mother, father, and teacher were used to assess students' perceived caring support from adults (e.g., How much do you feel that your teachers care about you?). Responses were rated on a 5-point scale (0 = *not at all* to 4 = *very much*) for each item.

Data Analyses

All statistical analyses were performed with SPSS (Statistical Package for the Social Sciences) version 19.0. An alpha of .01 was used to determine statistical significance unless otherwise noted. Bivariate associations between categorical variables were assessed using chi-square tests. Multiple logistic regressions were also used to examine the effects of victimization experiences on the outcome measures (i.e., social-emotional and school-related variables), as well as to assess the effects of having a caring adult on the relationship between victimization and social-emotional and school-related variables. Given the maturational and gender differences related to various health and risk behaviors (Saewyc, Bearinger, Heinz, Blum, & Resnick, 1998), separate analyses by gender were conducted, controlling for age.

Results

Approximately 94% of male students described themselves as exclusively heterosexual, 4% as mostly heterosexual, 1.2% as bisexual, and 0.9% as gay. For girls, 86.5% of respondents identified themselves as exclusively heterosexual, 9.7% as mostly heterosexual, 3.3% as bisexual, and 0.5% as lesbian (see Table 1 in Supplemental Materials).

Experiences of Victimization

Because preliminary chi-square tests revealed no significant differences between the gay/lesbian and bisexual groups on all dependent variables, these two groups were combined to form a single group of LGB. As shown in Figures 1 and 2 (see Supplemental Materials), for both boys and girls, the prevalence of all forms of victimization among LGB students was higher than those for their heterosexual peers (boys: 54.1% vs 26.5% for verbally bullied, 45.7% vs 23.0% for purposefully excluded, 28.2% vs 11.0% for physically bullied, 66.9% vs 37.3% for verbally sexually harassed, 37.5% vs 14.6% for physically sexually harassed; girls: 60.2% vs 35.0% for verbally bullied, 55.0% vs 35.4% for purposefully excluded, 22.6% vs 4.7% for physically bullied, 72.3% vs 54.3% for verbally sexually harassed, 56.0% vs 35.7% for physically sexually harassed). Especially, more than half of lesbian or bisexual girls reported being victimized in all forms of bullying and sexual harassment (55–72%), except the case of physical bullying. The rates of all forms of victimization were about twice as high for LGB boys as exclusively heterosexual peers. Higher prevalence rates of victimization were also reported among mostly heterosexual and girls compared to heterosexual peers (mostly heterosexual boys: 40.2% for verbally bullied, 40.7% for purposefully excluded, 19.5% for physically bullied, 47.3% for verbally sexually harassed, 25.2% for physically sexually harassed; mostly heterosexual girls: 46.2% for verbally bullied, 47.0% for purposefully excluded, 8.0% for physically bullied, 71.2% for verbally sexually harassed, 54.5% for physically sexually harassed). Especially the rates of being

sexually harassed in verbal and physical forms among mostly heterosexual girls were as high as those for lesbian and bisexual girls.

Social-Emotional and School-Related Adjustments Comparing Victimized and Non-Victimized Groups

The next objective was to consider the link between identifying as a sexual minority and the negative experiences of victimization in relation to outcome variables. For this objective, the following six groups were formed to examine whether or not students' scores differed across the groups: (a) 100% heterosexual youth who have not been victimized (i.e., bullied and sexually harassed), (b) 100% heterosexual youth who have been victimized, (c) mostly heterosexual youth who have not been victimized, (d) mostly heterosexual youth who have been victimized, (e) LGB youth who have not been victimized, and (f) LGB youth who have been victimized.

As seen in Table 2 in Supplemental Materials, the LGB youth, both boys and girls, who had been victimized were at greater risk for all school-related as well as social-emotional problems than their non-victimized 100% heterosexual peers. They were more likely than heterosexual peers to report lower educational aspiration (only one fifth to two fifth), activity engagement (one third to two third), and feelings of liking school (one fifth to two fifth). They are also more likely to experience running away (15 to 26 times higher), binge drinking (2 to 5 times higher), despair (10 to 13 times higher), and skipping school (3 to 4 times higher), compared to their non-victimized heterosexual peers. With respect to comparisons between the victimized and non-victimized groups, regardless of sexual-orientation status, in general all three *victimized* groups of LGB, mostly heterosexual, and 100% heterosexual students appeared to be at higher risk for social-emotional and school-related problems than non-victimized groups. Especially for girls, all three victimized groups (i.e., victimized LB, victimized mostly heterosexual, and victimized 100% heterosexual) were at greater risk for all variables, except activity engagement for victimized mostly heterosexual students.

The Role of Caring Adult Support for Victimized Youth

Results for the role of having caring adult support on student outcomes are presented in Table 3 in Supplemental Materials. Having caring support from parent or teacher was significantly effective in reducing greater risk for the most of the social-emotional and school-related problems not only for LGB adolescents experiencing victimization but also for mostly heterosexual and 100% heterosexual adolescents who had been victimized, except a handful of cases (i.e., educational aspiration and despair for LB girls; binge drinking and activity engagement for mostly heterosexual boys and girls and educational aspiration for mostly heterosexual girls). The odds of liking school, educational aspiration, and activity engagement were augmented up to more than 5 times, with an increase of one point on the caring support score. Particularly the effect of caring support from teacher appeared to be higher for the school-related variables, including liking school (boys: adjusted odds ratio [AOR] = 3.80 for LGB, AOR = 2.52 for mostly heterosexual, AOR = 2.24 for 100% heterosexual; girls: AOR = 2.57 for LGB, AOR = 2.47 for mostly heterosexual, AOR = 2.49 for 100% heterosexual) and educational aspiration (boys: AOR = 2.21 for LGB, AOR = 3.41 for mostly heterosexual, AOR = 1.49 for 100% heterosexual;

girls: AOR = 1.38 for LGB, AOR = 1.19 for mostly heterosexual, AOR = 1.40 for 100% heterosexual), as compared to parental support, except one case (i.e., educational aspiration for mostly heterosexual girls). Caring adult support either from parent or teacher also reduced the odds of running away, binge drinking, despair, and skipping school, down by more than half for each one point increase in respondent's caring adult support score.

Discussion

This study examined the relationship between victimization and school-related as well as social-emotional outcomes with particular emphasis on sexual orientation, using population-based Canadian data. Of additional interest was to investigate the roles of having caring-adult support from parent or teacher as a protective factor in reducing the risk for high levels of distress. Furthermore, an investigation of the "mostly heterosexual" group as a distinct subtype of sexual identity was another focus of the present study. As consistent with previous studies (e.g., Berlan et al., 2010; Birkett et al., 2009; D'Augelli et al., 2002; Russell & Joyner, 2001), results of our study demonstrated that reports of being victimized among LGB youth were greater for both boys and girls in all forms of bullying and sexual harassment than heterosexual peers.

The prevalence of victimization was also high for 'mostly heterosexual' boys and girls. Especially, reports of sexual harassment in verbal and physical forms for mostly heterosexual girls were comparable to those for lesbian and bisexual girls. With a longitudinal study of adolescents and young adults (ages 12–25) on the mobility of sexual orientation identity, Ott and colleagues (Ott, Corliss, Wypij, Rosario, & Austin, 2011) have indicated that youth who identified themselves as 'mostly heterosexual' were more likely to either remain in that state across adolescence and young adulthood or describe as 'completely heterosexual' in later times. This recent empirical finding suggests close attention to the group of 'mostly heterosexual' youth who may need to be distinguished from LGB individuals.

In the study, we also focused on whether experiences of victimization were predicative for *school-related* concerns as well as social-emotional concerns on account of adolescents' sexual orientation. Results showed that victimized LGB boys and girls were at greatest risk not only for social-emotional problems but also for educational concerns (i.e., skipping school, liking school, educational aspiration, activity engagement). A growing body of research supports the theory that negative experiences resulting from sexual minority stigma can lead to chronic stress that contributes to psychosocial distress among sexual minority youth and adults, indicating the mediating role of being treated 'badly' (Almeida, Johnson, Corliss, Molnar, & Azrael, 2009; Murdock & Bolch, 2005; Williams, Connolly, Pepler, & Craig, 2005). Our results were consistent with this theory. Academic success, including motivation and engagement, is one of the critical indicators informing us of the effective school life of students. High rates of running away and binge drinking among victimized students are of even greater concern, regarding their academic success, because they could endanger students' school performance, even hinder youth to stay in schools.

Our findings identified critical roles of caring-adult support in reducing greater risk for social-emotional problems and educational concerns among all victimized adolescents, whether LGB, mostly heterosexual, or exclusively heterosexual. All three sources of caring support -from mother, father, and teacher - were significantly effective in buffering the increased risk. Unlike previous research (Poteat et al., 2011) conducted in the U.S., the role of caring support from *teacher* was also examined in the present study, in addition to the role of parental support. Our results demonstrated the significant moderating effect of teacher support on the relationship between victimization and outcome variables among all victimized students (i.e., LGB, mostly heterosexual, and 100% heterosexual). These results support the resilience perspective that a significant adult is not necessarily a parent or relative, but can be an *outside* adult, including a teacher.

Limitations

One of the strengths of the present study was use of the largest regularly repeating population-based survey of students in Canada that also includes measures of sexual orientation. However, this also contributed to some limitations in this study. For example, given the limited space on the questionnaire and limited time to complete it, a number of the study variables were measured with single-item questions. As a result, this potentially limits our ability to evaluate their reliability and validity. Also school-based surveys miss adolescents who are out of school by skipping or dropping out. Sexual minority students often appear to be “overrepresented” in this group (Goodenow, Szalacha, & Westheimer, 2006). Further, given the correlational nature of the present study, a longitudinal study would be required to determine the directionality of the relationships among the study variables.

Implications of Findings

There are a growing number of policies and programs established in schools in attempting to reduce the negative impact of bullying and harassment. A great deal of the program- and policy-establishment efforts has been currently focused on promoting positive school climate not only for heterosexual students but also for sexual minority individuals. However, our results show that the prevalence of victimization remains high and a common experience particularly among sexual minority students. These victimized students are also suffering from greater levels of social-emotional and education concerns than non-victimized peers. Researchers and scholars have addressed the imperative for *safe* school environments or *positive* school climate. However, the idea of ‘safe school’ or ‘positive school climate’ may not be clear or concrete enough particularly for adults who are actually working with students to work together toward positive change. Given the buffering effects of caring-adult support from parent or teacher found in the present study, it may be worthwhile for us, as adults, to consider that establishing caring relationships with our children and students is critical for their success in school. For example, challenging school staff to greet students by their names, and allowing students and their parents to utilize their schools outside of school hours for relevant events, could be strategies to promote caring and supportive environments (Centers for Disease Control and Prevention, 2009). Providing a caring and supportive school environment for students requires efforts not only from those within the school, including teachers, but also those outside the school, such as parents and communities (Centers for Disease Control and Prevention, 2009). Listening, talking, and even simply

being there for our children and students would be our action to start and would help in having such policies and programs effective.

Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

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References

- Almeida J, Johnson RM, Corliss HL, Molnar BE, Azrael D. Emotional distress among LGBT youth: The influence of perceived discrimination based on sexual orientation. *Journal of Youth and Adolescence*. 2009; 38:1001–1014. [PubMed: 19636742]
- Austin SB, Conron KJ, Patel A, Freedner N. Making sense of sexual orientation measures: Findings from a cognitive processing study with adolescents on health survey questions. *Journal of LGBT Health Research*. 2007; 3:55–65.
- Austin SB, Roberts AL, Corliss HL, Molnar BE. Sexual violence victimization history and sexual risk indicators in a community-based urban cohort of “mostly heterosexual” and heterosexual young women. *American Journal of Public Health*. 2008; 98:1015–1020. [PubMed: 17901440]
- Austin SB, Ziyadeh N, Fisher LB, Kahn JA, Colditz GA, Frazier AL. Sexual orientation and tobacco use in a cohort study of U.S. adolescent girls and boys. *Archives of Pediatrics & Adolescent Medicine*. 2004a; 158:317–322. [PubMed: 15066869]
- Austin SB, Ziyadeh N, Kahn JA, Camargo CA, Colditz GA, Field AE. Sexual orientation, weight concerns, and eating disordered behaviors in adolescent girls and boys. *Journal of American Academy of Child and Adolescent Psychiatry*. 2004b; 43:1115–23.
- Berlan ED, Corliss HL, Field AE, Goodman E, Austin SB. Sexual orientation and bullying among adolescents in the Growing Up Today Study. *Journal of Adolescent Health*. 2010; 46:366–371. [PubMed: 20307826]
- Birkett M, Espelage DL, Koenig B. LGB and questioning students in schools: The moderating effects of homophobic bullying and school climate on negative outcomes. *Journal of Youth and Adolescence*. 2009; 38:989–1000. [PubMed: 19636741]
- Centers for Disease Control and Prevention. *School connectedness: Strategies for increasing protective factors among youth*. Atlanta, GA: U.S. Department of Health and Human Services; 2009.
- D'Augelli AR, Pilkington NW, Hershberger SL. Incidence and mental health impact of sexual orientation victimization of lesbian, gay, and bisexual youths in high school. *School Psychology Quarterly*. 2002; 17:148–167.
- Farrington, DP., Ttofi, MM. Reducing school bullying: Evidence-based implications for policy. In: Tonry, M., editor. *Crime and Justice*. Vol. 38. Chicago: University of Chicago Press; 2009. p. 281–345.
- Garnezy N, Masten AS. Stress, competence and resilience: Common frontiers for therapist and psychopathologist. *Behavior Therapy*. 1986; 17:500–521.
- Goodenow C, Szalacha L, Westheimer K. School support groups, other schools factors, and the safety of sexual minority adolescents. *Psychology in the Schools*. 2006; 43:573–589.

- Luthar, SS. Resilience and vulnerability: Adaptations in the context of child adversities. Cambridge: Cambridge University; 2003.
- Murdock TB, Bolch MB. Risk and protective factors for poor school adjustment in lesbian, gay, and bisexual (LGB) high school youth: Variable and person-centered analyses. *Psychology in the Schools*. 2005; 42:159–172.
- Noam GG, Hermann CA. Where education and mental health meet: Developmental prevention and early intervention in schools. *Development and Psychopathology*. 2002; 14:861–875. [PubMed: 12549707]
- Olweus, D. *Bullying at school: What we know and what we can do*. Oxford, UK: Blackwell; 1993.
- Ott MQ, Corliss HL, Wypij D, Rosario M, Austin SD. Stability and change in self-reported sexual orientation identity in young people: Application of mobility metrics. *Archives of Sexual Behavior*. 2011; 40:519–532. [PubMed: 21125325]
- Poteat VP, Mereish EH, DiGiovanni CD, Koenig BW. 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*. 2011; 58:597–609. [PubMed: 21859187]
- Russell S, Joyner K. Adolescent sexual orientation and suicide risk: Evidence from a national study. *American Journal of Public Health*. 2001; 91:1276–1281. [PubMed: 11499118]
- Saewyc EM, Bauer GR, Skay CL, Bearinger LH, Resnick MD, Res E, Murphy A. Measuring sexual orientation in adolescent health surveys: Evaluation of eight school-based surveys. *Journal of Adolescent Health*. 2004; 35:345e1-e.16.
- Saewyc EM, Bearinger LH, Heinz PA, Blum RW, Resnick MD. Gender differences in health and risk behaviors among bisexual and homosexual adolescents. *Journal of Adolescent Health*. 1998; 23:181–188. [PubMed: 9730361]
- Saewyc E, Konishi C, Poon C, Smith A. Is it safer to be gay in high school today?: Trends in sexual orientation identity and harassment. *Journal of Adolescent Health*. 2011; 48:S8–9.
- Saewyc E, Richens K, Skay CL, Reis E, Poon C, Murphy A. Sexual orientation, sexual abuse, and HIV-risk behaviors among adolescents in the Pacific Northwest. *American Journal of Public Health*. 2006; 96:1104–1110. [PubMed: 16670224]
- Saewyc EM, Taylor D, Honna Y, Ogilvie G. Trends in sexual health and risk behaviours among adolescent students in British Columbia. *The Canadian Journal of Human Sexuality*. 2008; 17:1–13. [PubMed: 23115485]
- Savin-Williams RC, Ream GL. Suicide attempts among sexual-minority male youth. *Journal of Clinical Child and Adolescent Psychology*. 2003; 32:509–522. [PubMed: 14710459]
- Savin-Williams RC, Vrangalova Z. Mostly heterosexual as a distinct sexual orientation group: A systematic review of the empirical evidence. *Developmental Review*. 2013; 33:58–88.
- Thompson EM, Morgan EM. "Mostly straight" young women: Variations in sexual behavior and identity development. *Developmental Psychology*. 2008; 44:15–21. [PubMed: 18194001]
- Werner, EE., Smith, R. *Vulnerable but invincible: A longitudinal study of resilient children and youth*. New York: McGraw-Hill; 1982.
- Werner, EE., Smith, R. *Overcoming the odds: High risk children from birth to adulthood*. New York: Cornell University; 1992.
- Williams T, Connolly J, Pepler D, Craig W. Questioning and sexual minority adolescents: High school experiences of bullying, sexual harassment, and physical abuse. *Canadian Journal of Community Mental Health*. 2003; 22:47–58. [PubMed: 15868837]

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