



Published in final edited form as:

J Sch Health. 2020 May ; 90(5): 368–377. doi:10.1111/josh.12883.

Bullying and Peer Victimization of Minority Youth: Intersections of Sexual Identity and Race/Ethnicity

KASEY JACKMAN, PhD, RN, PMHNP-BC^{a,*} [Postdoctoral Research Fellow], ELIZABETH J. KREUZE, PhD, RN^{b,*} [Postdoctoral Research Fellow], BILLY A. CACERES, PhD, RN, AGPCNP-BC^c [Assistant Professor], REBECCA SCHNALL, PhD, MPH, RN-BC, FAAN^d [Mary Dickey Lindsay Associate Professor]

^aColumbia University School of Nursing, 630 West 168th Street, Mail Code 6, New York, NY 10032.

^bColumbia University School of Nursing, 630 West 168th Street, Mail Code 6, New York, NY 10032.

^cColumbia University School of Nursing, 630 West 168th Street, Mail Code 6, New York, NY 10032.

^dDisease Prevention and Health Promotion, Columbia University School of Nursing, 630 West 168th Street, Mail Code 6, New York, NY 10032.

Abstract

BACKGROUND: Youth with multiple minority identities, such as those who are both sexual minority (eg, lesbian, gay, bisexual) and racial/ethnic minority (eg, Black, Latino) may be at increased risk for bullying and peer victimization.

METHODS: Youth Risk Behavior Surveillance data (2011-2017) were analyzed (N = 114,881; 50.8% girls; mean age = 15.7 years, SD = 0.03). We used chi-square tests and sex-stratified multiple linear regression models to examine sexual identity and racial/ethnic differences and the intersection between sexual identity and race/ethnicity across 3 forms of bullying and peer victimization, co-occurrence of traditional and electronic bullying, and any type of bullying or peer victimization.

RESULTS: Sexual minority youth reported higher odds of bullying and peer victimization than heterosexual youth. White youth reported higher odds of bullying than racial/ethnic minority youth. In intersectional analyses, all sexual minority and racial/ethnic minority boys, and bisexual racial/ethnic minority girls were at higher risk for bullying and peer victimization compared to heterosexual peers of the same race/ethnicity.

Address correspondence to Rebecca Schnall, Mary Dickey Lindsay Associate Professor, (rb897@cumc.columbia.edu), Disease Prevention and Health Promotion, Columbia University School of Nursing, 630 West 168th Street, Mail Code 6, New York, NY 10032.

*Joint first authors.

Human Subjects Approval Statement

Because this study uses de-identified publicly available data, it was exempt from approval by the Columbia University Institutional Review Board.

Conflict of Interest

All authors of this article declare that they have no conflicts of interest.

CONCLUSIONS: This study of a large diverse sample of youth advances our understanding of vulnerability to bullying and peer victimization among youth with multiple minority identities. This research can inform policy initiatives and interventions to prevent peer victimization of vulnerable youth.

Keywords

adolescents; bullying; peer victimization; race/ethnicity; sexual identity

Given their negative impact on the health and wellbeing of youth in the United States, addressing bullying and peer victimization has been identified as a national priority area.¹ Bullying, one of the most common types of peer victimization, is defined as any unwanted aggressive behavior by another youth or group of youths who are not siblings or current dating partners that involves an observed or perceived power imbalance and is generally repeated or highly likely to be repeated.^{2, 3} Bullying can occur in-person (ie, traditional bullying) or electronically (i.e., bullying through use of technology devices and digital applications).³ In the United States, school-based bullying among youth ranges from 18% to 31%¹ and electronic bullying ranges from 10% to 40%.⁴ Since traditional and electronic bullying are highly correlated, victimization may occur in both school and electronic settings.⁵⁻⁷ Addressing bullying and peer victimization among youth is essential given their associated physical, mental, social, and educational consequences (e.g., obesity, risky sexual behavior, substance use, poor mental health, social withdrawal, and academic decline).^{1, 8-10}

Some subgroups of youth, such as sexual minority youth (e.g., lesbian, gay, bisexual, and other non-heterosexual identities), youth with disabilities, and overweight and obese youth, are especially vulnerable to bullying and peer victimization on the basis of their stigmatized minority identity or status.¹ Multiple studies have identified higher rates of peer victimization among sexual minorities relative to heterosexual youth.¹¹⁻¹⁵ There is evidence of higher rates of traditional bullying but not higher risk of electronic bullying among sexual minority youth compared to heterosexual youth.¹⁶ Further, sexual minority youth who experience lower rates of peer victimization have lower rates of suicidality compared to their sexual minority peers who experienced higher peer victimization.¹⁷ In addition, school-based victimization is associated with higher rates of binge drinking among sexual minority girls.¹⁸

In contrast, differences in peer victimization rates by racial/ethnic group are inconsistent¹⁹ and often difficult to interpret.¹ For example, a meta-analysis of 24 studies found that, in the United States, non-Hispanic White youth report more peer victimization than minorities.²⁰ In another study, rates of different types of bullying and peer victimization differed longitudinally with White youth reporting higher rates of electronic bullying compared to ethnic minority youth.²¹ While emerging research suggests that youth with multiple minority identities are at increased risk of bullying and peer victimization, the majority of studies in this area have examined sexual minority and racial/ethnic minority identities separately.^{1, 22-24} However, youth with these multiple minority statuses are at the

intersection of identities and these aspects of their identities cannot be understood separately.^{23, 25-27}

Findings from studies that have examined the multiplicative effect of sexual and racial/ethnic minority status are varied. For instance, an analysis of Youth Risk Behavior Survey (YRBS) data examining bullying and electronic bullying in the context of suicidality found that White and Hispanic sexual minority youth were at higher risk compared to White heterosexual youth,²⁸ whereas no differences were found between White heterosexual and Black sexual minority youth.²⁸ Similarly, an analysis of YRBS data from 2005 and 2007 found that White and Hispanic sexual minority youth reported more indicators of victimization (skipping school because of feeling unsafe, fights, and having their property stolen) compared to heterosexual youth.²⁹ In a sample of black youth, those who were also sexual minorities reported higher levels of bullying and electronic bullying compared to black heterosexual youth, and this partially explained the elevated levels of mental health concerns in the sexual minority group.³⁰ In another study, sexual minority girls were more likely than heterosexual girls to experience bias-based victimization due to race/ethnicity, whereas sexual minority boys compared to heterosexual boys were not.¹⁵ This underscores the importance of examining the effects of peer victimization based on multiple minority statuses.

Further, it is important to examine the co-occurrence of traditional and electronic bullying since the combination is associated with worse mental health outcomes compared to either type alone.³¹ Evidence indicates that those who are victims of traditional bullying are more likely to also experience electronic bullying.³² When examining traditional bullying and electronic bullying, evidence suggests that sexual minority youth experience more types of victimization than heterosexual youth.³³

Given the inconsistent evidence in the literature regarding the association between multiple minority identities and bullying and peer victimization in youth, the purpose of this study was to assess the association between bullying and peer victimization with (1) sexual identity, (2) race/ethnicity, and (3) the intersection of sexual identity and race/ethnicity. In this study, we examined 2 types of bullying (traditional bullying and electronic bullying) and an indicator of peer victimization (threatened or injured with a weapon on school property). Based on the extant evidence, we hypothesized that sexual minority youth would report higher rates of bullying and peer victimization than heterosexual youth and that White youth would report higher rates of bullying and peer victimization compared to their racial/ethnic minority peers.²⁰ Further, we posited that, youth with both sexual minority and racial/ethnic minority identities would report increased risk for bullying and peer victimization compared to youth of the same sex who identify as heterosexual and who are in the same racial/ethnic group.

METHODS

Participants and Procedure

The Youth Risk Behavior Surveillance System (YRBSS) conducts a national biennial school-based survey to monitor health-related behaviors that contribute to the leading causes

of death and disability among high school age youth in the United States.³⁴ The YRBSS uses a 2-stage, cluster sample design to produce a representative sample of high school students from states, territories, tribal governments and large urban districts.³⁵ The survey is administered anonymously using paper and pencil in the classroom setting. The present study used data from 4 cycles (2011, 2013, 2015, and 2017) of the local YRBS, which included large urban school districts across the US. These years were selected for our analyses since electronic bullying was first assessed in the YRBS in 2011. Data for this study came from districts that also assessed sexual identity, which included 10 districts in 2011, 14 districts in 2013, 12 districts in 2015, and 13 districts in 2017. YRBS survey methodology and psychometric properties are described elsewhere.³⁵

Inclusion/exclusion criteria—A total of 148,073 youth were included in the 2011-2017 YRBS district surveys. Participants with missing data for sexual identity (N = 24,139), race/ethnicity (N = 5911), sex (N = 399), and bullying and peer victimization (N = 2743) were excluded.

Instruments

Sexual identity was assessed with the item: “Which of the following best describes you?” Response included: “heterosexual (straight),” “gay or lesbian,” “bisexual,” or “not sure.” Gay, lesbian, bisexual, and “not sure” participants are collectively referred to as sexual minority hereafter. No other sexual identities (e.g., queer, pansexual, asexual) were assessed. Likewise, data about gender minority status (e.g., transgender, nonbinary) was not collected by the YRBS in all the survey years used for this study.

Race/ethnicity—We used the YRBS variable that categorized participants as: “Black or African-American,” “Hispanic/Latino,” White, or “All other races.” The YRBS-calculated variable “All other races” included American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander.

Demographics—Demographic characteristics included sex, grade level, and survey site. Sex: “What is your sex?” Response options were: “female” or “male.” We adjusted for grade level since bullying and electronic bullying peak during middle school and early high school years,⁶ with school transitions associated with elevated risk of bullying and peer victimization.³⁶ For grade level, response options included 9th grade, 10th grade, 11th grade, 12th grade, or missing data.

Body mass index—Overweight and obesity are known risk factors for peer victimization, including among sexual minority youth.³⁷⁻³⁹ Weight-based victimization has also been shown to contribute to substance use and poor mental health among sexual minority youth.⁴⁰ We used self-reported height and weight to develop body mass index (BMI) categories based on centers for disease control and prevention (CDC) age- and sex-specific growth charts as follows: underweight = BMI <5th percentile; normal weight = BMI 5th percentile and <85th percentile; overweight = BMI 85th percentile and <95th percentile; and obesity = BMI 95th percentile.⁴¹

Bullying and peer victimization—Bullying was assessed with the following item: “During the past 12 months, have you ever been bullied on school property?” Response options were: “Yes” or “No.” Electronically bullying was assessed by asking: “During the past 12 months, have you ever been electronically bullied? Include being bullied through e-mail, chat rooms, instant messaging, websites, or texting.” Response options included: “Yes” or “No.” Participants were asked: “During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?” We dichotomized responses (range 0-12 times) as 0 = none; 1 = once or more. We then created 2 variables: (1) co-occurrence of traditional and electronic bullying representing participants who endorsed both of these (0 = none or only 1 type; 1 = both), and (2) any victimization for participants who endorsed any of the 3 bullying or peer victimization variables (0 = none; 1 = any).

Data Analysis

Data were merged, weighted, and analyzed according to CDC recommendations^{42, 43} using Stata version 15. Multiple imputation with chained equations with 20 imputations was used to impute missing values for covariates.⁴⁴ We used the Rao-Scott chi-squared tests to examine sexual identity differences across demographics. Because age and grade level were highly correlated ($r = 0.83$, $p < .001$), we retained only grade level as a covariate in regression models. Since elevated BMI is a known risk factor for peer victimization, we adjusted regression models for BMI.³⁷⁻³⁹ Next we used sex-stratified multiple logistic regression models to separately test sexual identity (reference group = heterosexual) and racial/ethnic (reference group = White) differences across all forms of bullying and victimization examined separately. Last, we created a variable representing the intersection between sexual identity and race/ethnicity into sex-stratified logistic regression models to separately examine each form of bullying or peer victimization (reference group = white heterosexual). Across all analyses, model 1 was unadjusted and model 2 added adjustment for grade level, BMI, and survey site.

RESULTS

The final sample consisted of 115,637 youth; 54,321 (49.2%) boys; and 61,316 (50.8%) girls. Among boys, 48,124 (90.5%) were heterosexual, 1344 (2.5%) were gay, 1443 (2.5%) were bisexual, and 2410 (4.5%) were “not sure” of their sexual identity. In terms of race/ethnicity, 9508 (18.1%) were White, 13,006 (29.2%) were Black, 22,930 (37.7%) were Hispanic, and 8877 (15.0%) were another race. Among girls, 48,787 (79.2%) were heterosexual, 1600 (2.5%) were lesbian, 6997 (11.4%) were bisexual, and 3932 (6.9%) were “not sure” of their sexual identity. In terms of race/ethnicity, 9972 (16.1%) were White, 15,450 (31.0%) were Black, 26,165 (38.4%) were Hispanic, and 9729 (14.5%) were another race.

Table 1 displays the demographic characteristics of the boys in the sample comparing each sexual minority group to heterosexual youth of the same sex. Compared to heterosexual boys, gay ($p < .01$) and bisexual ($p = .02$) boys were more likely to identify as Hispanic. “Not sure” boys were more likely to identify as other race relative to heterosexual boys (p

< .001). Gay ($p < .05$) and bisexual ($p < .01$) boys were also more likely than heterosexual boys to be obese.

Table 2 displays differences in demographic characteristics for the girls in the sample. Compared to heterosexual girls, lesbian girls were more likely to identify as Black ($p < .001$). Bisexual girls were less likely to identify as White ($p < .001$). “Not sure” girls were less likely to identify as Black ($p < .01$) relative to heterosexual girls. Lesbian girls were more likely than heterosexual girls to be in the 12th grade ($p < .01$). Bisexual girls were more likely to be in lower grade levels compared to heterosexual girls ($p < .01$). All groups of sexual minority girls were more likely to be obese than heterosexual girls ($p < .001$).

In adjusted models examining sexual identity differences, all groups of sexual minority boys and girls reported higher odds of all forms of bullying and peer victimization compared to their heterosexual counterparts (data not shown). In addition, in adjusted models examining racial/ethnic differences we found that, compared to White boys, all groups of racial/ethnic minority boys reported lower odds of being bullied on school property or electronically bullied. However, Black (AOR 1.18, 95% confidence interval [CI] = 1.02-1.35) and Hispanic (AOR 1.13, 95% CI = 1.01-1.29) boys had higher odds of being threatened or injured with a weapon on school property compared to White boys. Among girls, all groups of racial/ethnic minority girls were less likely than White girls to report being bullied on school property or electronically bullied (data not shown). Among girls there were no racial/ethnic differences in being threatened or injured with a weapon on school property. These data can be provided upon request.

Table 3 displays analyses examining the intersection of sexual identity and race/ethnicity on peer victimization among boys. Compared to White heterosexual boys, all groups of White sexual minority boys reported higher rates of all forms of peer victimization, except White gay boys reported similar rates of having been threatened or injured with a weapon on school property. Among Black boys, all groups of Black sexual minority boys reported higher rates of all forms of peer victimization, except Black bisexual boys reported similar rates of being bullied on school property relative to Black heterosexual boys. All groups of Hispanic boys and boys of another race reported higher odds of all forms of bullying and peer victimization compared to their heterosexual peers.

Table 4 displays the intersection of sexual identity and race/ethnicity on bullying and peer victimization among girls. White bisexual girls were more likely than White heterosexual girls to report all forms of bullying and peer victimization. White lesbian girls were more likely to report all forms of bullying and peer victimization, except having been threatened or injured with a weapon on school property (AOR 2.14, 95% CI = 0.81-5.66). Among Black girls, bisexual girls were more likely than Black heterosexual girls to experience all forms of bullying and peer victimization. In addition, Black lesbian girls only reported higher rates of having been threatened or injured with a weapon on school property than Black heterosexual girls (AOR 2.89, 95% CI = 1.76-3.05), whereas Black “not sure” girls were more likely to report bullying on school property (AOR 1.63, 95% CI = 1.11-2.39) and electronic bullying (AOR 1.84, 95% CI = 1.29-2.63). Among Hispanic girls, bisexual and “not sure” girls reported higher rates of all forms of bullying and peer victimization

compared to Hispanic heterosexual girls. Among girls of another race, lesbian girls reported higher rates of all forms peer victimization, with the exception of electronically bullying, relative to other race heterosexual girls (AOR 2.52, 95% CI = 0.95-6.67). Other race bisexual girls reported higher rates of all forms of peer victimization compared to their heterosexual counterparts. Other race girls who were “not sure” of their sexual identity reported higher rates of being threatened or injured with a weapon on school property (AOR 3.71, 95% CI = 1.72-8.02) compared to other race heterosexual girls.

DISCUSSION

This study used a large diverse sample of youth to assess the associations between minority identities and different forms of bullying and peer victimization. These findings advance our understanding of the associations between sexual minority and racial/ethnicity minority status and the prevalence of bullying and victimization among youth. A unique strength of this study was the use of an intersectional approach to examining bullying and peer victimization prevalence in youth and the large proportion of non-Whites who were included in the final analysis.

All groups of sexual minority youth in the present study reported higher odds of all forms of bullying and peer victimization when compared to their heterosexual peers. We also identified lower rates of all types of bullying and peer victimization among racial/ethnic minority youth compared to White youth with the exception of being threatened or injured with a weapon at school, which was reported at higher rates by Black and Hispanic boys. Previous evidence from a meta-analysis indicates that White youth are more likely to report bullying and peer victimization than racial/ethnic minorities.²⁰ A previous study examining bullying among sexual minorities also found that racial and ethnic minority adolescents were less likely than White adolescents to report bullying and that this effect was stronger among sexual minorities.³⁹ Research indicates that the method of assessing bullying influences responses by race/ethnicity, such that Black students are less likely than White peers to report bullying in response to a single item assessment thus leading to underreporting of bullying in this racial minority group.⁴⁵ Given that the YRBS used single items to assess different forms of bullying and peer victimization, our findings of lower rates of peer victimization among racial/ethnic minority youth may be biased. Thus, future work is needed that incorporates multi-item validated measures of bullying and peer victimization to comprehensively examine racial/ethnic differences among youth.

Our intersectional analyses revealed higher rates of bullying and peer victimization of sexual minority boys compared to heterosexual boys of the same race/ethnicity. Among girls, the rates of bullying and peer victimization were not consistently higher among sexual minority girls of color compared to heterosexual girls of the same race/ethnicity. However, bisexual girls reported higher rates of all the bullying and peer victimization variables we examined compared to heterosexual girls of the same race/ethnicity. Previous research suggests that youth who identify as bisexual or who report sexual activity with both boys and girls are at highest risk for indicators of bullying and peer victimization.²⁹ Since peer victimization may contribute to the higher rates of negative mental health outcomes observed among bisexuals,⁴⁶ our findings suggest that risk factors for mental health disparities in bisexual

adults may start during adolescence. More research that incorporates life course approaches to the study of victimization in sexual minorities is needed to determine whether there are crucial developmental periods during which bullying and peer victimization have the greatest impact on mental health in this group.⁴⁷

This study has several strengths. We combined 4 cycles of YRBS data (2011-2017) to produce a larger sample size than previous studies.^{28, 29} The sample included a larger proportion of racial/ethnic minority participants than previous work that allowed for better representation of these understudied youth. We considered 3 distinct forms of bullying and peer victimization and created 2 variables to identify differences in specific types of bullying and peer victimization, as well as the co-occurrence of these experiences among sexual minority and racial/ethnic minority youth. In addition, our intersectional analyses compared sexual minority subgroups to heterosexual peers within the same racial/ethnic group, rather than comparing all sexual minority youth regardless of race/ethnicity, to White heterosexual youth as has been done in previous work.²⁸ This provides a more nuanced understanding of the experiences of sexual minority youth of color in relation to their heterosexual peers of the same race/ethnicity.

Limitations

While the study included a large sample of racially/ethnically diverse youth in 10 urban school districts located in 9 US states, these findings may not be generalizable to other geographic regions. In particular, given that previous evidence suggests residing in an urban environment reduces risk for bullying and victimization,^{48, 49} results may not be generalizable to youth residing in non-urban settings. Due to the cross-sectional design of the YRBS no causality can be inferred for these results. Also, it was not possible to statistically account for other variables that may affect risk for peer victimization such as socioeconomic status, immigration status, disability status, and religious affiliation, because the YRBS does not collect these data. We were not able to control for family or neighborhood level factors, but we did control for survey site. The range of sexual orientation identities was limited, so there is no data available for participants who identify with other sexual orientation labels (e.g., queer, pansexual, asexual). In addition, despite reporting high rates of bullying and peer victimization,⁵⁰ data about gender minority status (e.g., transgender, nonbinary) were not collected in these YRBS districts during the years of this study. Although protective factors for homophobic bullying are an important area of research,⁵¹ we were not able to examine these in this study since these data are not collected by the YRBS.

Conclusions

Youth with multiple minority identities are particularly vulnerable to bullying and peer victimization. Consistent with previous studies, sexual minority youth reported higher odds of all types of bullying and peer victimization compared to heterosexual youth. All boys who were sexual minorities and racial/ethnic minorities were at higher risk for bullying and peer victimization compared to heterosexual boys of the same race/ethnicity. Among girls, bisexual girls were found to be at consistently higher risk of bullying and peer victimization compared to heterosexual girls of the same race/ethnicity. These findings are essential for

informing school, community, and state policy initiatives, as well as intervention development aimed at preventing bullying and peer victimization of youth with multiple minority identities.

IMPLICATIONS FOR SCHOOL HEALTH

Findings from this study suggest directions for future intervention development and research. Sexual minority youth in school settings should be better supported at the individual, interpersonal and school level.⁵² Various interventions for school-based and electronic bullying have been developed⁵³ and meta-analytic results demonstrate that these interventions are effective in reducing bullying.^{54, 55} A recent systematic review of stigma-based bullying interventions identified 10 interventions targeting sexual minority-based bullying and 2 for racial/ethnic-minority related bullying; however, none were aimed at mitigating victimization of youth who are members of both groups.⁵⁶ Schools should implement existing evidence-based anti-bullying interventions and be alert to the effects of multiple minority identities on vulnerability to bullying and peer victimization of students.

School stakeholders, such as teachers, principals, and parents, along with researchers can play a role in future intervention development which takes into account how multiple minority identities influence vulnerability to peer victimization among youth. Involving school stakeholders can enhance identification of intersectional oppression in the school environment and how this affects bullying and peer victimization among youth.⁵⁷ Working with key stakeholders, including policy makers, school administration, teachers, school nurses, parents, and students of diverse racial and ethnic backgrounds and sexual identities, can also help to ensure research on bullying and peer victimization in youth is informed by various perspectives and is responsive to the needs of youth and their communities.^{1, 19, 22} Policy initiatives are essential since research indicates that state anti-bullying laws help to reduce bullying of sexual minority youth, particularly for sexual minority boys.⁵⁸ School staff can take an active role in advocating for minority students to ensure that protective policies are in place. Schools can educate their students and parents about the severe negative sequelae of bullying and peer victimization and institute school-based and community-level education programs which include the increased vulnerability of minority students to these harmful behaviors.

Acknowledgments

Research reported in this publication was supported by the National Institute of Nursing Research of the National Institute of Health. K.J. was supported by T32NR007969 (PI: Bakken). B.A.C. and E.J.K. were supported by T32NR014205 (PI: Stone). R.S. was supported by K24NR018621. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

References

1. National Academies of Sciences Engineering and Medicine. Preventing Bullying through Science, Policy, and Practice. Washington, DC: National Academies Press; 2016.
2. Olweus D Bullying at School: What We Know and What We Can Do. Wiley-Blackwell: Malden, MA; 1993.

3. US Centers for Disease Control and Prevention. Bullying Research. National Center for Injury Prevention and Control. Available at: <https://www.cdc.gov/violenceprevention/youth violence/bullying research>. Accessed July 16, 2018.
4. McHugh MC, Saperstein SL, Gold RS. Omg u #cyberbully! An exploration of public discourse about cyberbullying on twitter. *Health Educ Behav*. 2019;46(1):97–105.
5. Hertz MF, Everett Jones S, Barrios L, David-Ferdon C, Holt M. Association between bullying victimization and health risk behaviors among high school students in the United States. *J Sch Health*. 2015;85(12):833–842. [PubMed: 26522172]
6. Kowalski RM, Giumetti GW, Schroeder AN, Lattanner MR. Bullying in the digital age: a critical review and meta- analysis of cyberbullying research among youth. *Psychol Bull*. 2014;140(4):1073–1137. [PubMed: 24512111]
7. Modecki KL, Minchin J, Harbaugh AG, Guerra NG, Runions KC. Bullying prevalence across contexts: a meta-analysis measuring cyber and traditional bullying. *J Adolesc Health*. 2014;55(5):602–611. [PubMed: 25168105]
8. David-Ferdon C, Vivolo-Kantor AM, Dahlberg LL, Marshall KJ, Rainford N, Hall JE. A Comprehensive Technical Package for the Prevention of Youth Violence and Associated Risk Behaviors. Atlanta, GA: National Center for Injury Prevention and Control, US Centers for Disease Control and Prevention; 2016.
9. Klomek AB, Sourander A, Gould M. The association of suicide and bullying in childhood to young adulthood: a review of cross- sectional and longitudinal research findings. *Can J Psychiatry*. 2010;55(5):282–288. [PubMed: 20482954]
10. Kuehn KS, Wagner A, Velloza J. Estimating the magnitude of the relation between bullying, e-bullying, and suicidal behaviors among United States youth, 2015. *Crisis*. 2019;40(3):157–165. [PubMed: 30215304]
11. Friedman MS, Marshal MP, Guadamuz TE, et al. A meta- analysis of disparities in childhood sexual abuse, parental physical abuse, and peer victimization among sexual minority and sexual nonminority individuals. *Am J Public Health*. 2011;101(8):1481–1494. [PubMed: 21680921]
12. Toomey RB, Russell ST. The role of sexual orientation in school- based victimization: a meta-analysis. *Youth Soc*. 2016;48(2):176–201. [PubMed: 26997680]
13. Hong JS, Espelage DL. A review of research on bullying and peer victimization in school: an ecological system analysis. *Aggress Violent Behav*. 2012;17(4):311–322.
14. Katz-Wise SL, Hyde JS. Victimization experiences of lesbian, gay, and bisexual individuals: a meta-analysis. *J Sex Res*. 2012;49(2-3):142–167. [PubMed: 22380586]
15. Price-Feeney M, Jones LM, Ybarra ML, Mitchell KJ. The relationship between bias-based peer victimization and depressive symptomatology across sexual and gender identity. *Psychol Violence*. 2018;8(6):680–691. [PubMed: 32368360]
16. DeSmet A, Rodelli M, Walrave M, Soenens B, Cardon G, De Bourdeaudhuij I. Cyberbullying and traditional bullying involvement among heterosexual and non-heterosexual adolescents, and their associations with age and gender. *Comput Human Behav*. 2018;83:254–261.
17. Espelage DL, Merrin GJ, Hatchel T. Peer victimization and dating violence among LGBTQ youth: the impact of school violence and crime on mental health outcomes. *Youth Violence Juv Justice*. 2018;16(2):156–173.
18. Fish JN, Schulenberg JE, Russell ST. Sexual minority youth report high-intensity binge drinking: the critical role of school victimization. *J Adolesc Health*. 2019;64(2):186–193. [PubMed: 30660247]
19. Flannery DJ, Todres J, Bradshaw CP, et al. Bullying prevention: a summary of the report of the national academies of sciences, engineering, and medicine. *Prev Sci*. 2016;17(8):1044–1053. [PubMed: 27722816]
20. Vitoroulis I, Vaillancourt T. Meta-analytic results of ethnic group differences in peer victimization. *Aggress Behav*. 2015;41(2):149–170. [PubMed: 27539935]
21. Barlett CP, Wright MF. Longitudinal relations among cyber, physical, and relational bullying and victimization: comparing majority and minority ethnic youth. *J Child Adolesc Trauma*. 2018;11(1):49–59. [PubMed: 32318137]

22. Earnshaw VA, Reisner SL, Juvonen J, Hatzenbuehler ML, Perrotti J, Schuster MA. LGBTQ bullying: translating research to action in pediatrics. *Pediatrics*. 2017;140(4):e20170432 10.1542/peds.2017-0432. [PubMed: 28947607]
23. Garnett BR, Masyn KE, Austin SB, Miller M, Williams DR, Viswanath K. The intersectionality of discrimination attributes and bullying among youth: an applied latent class analysis. *J Youth Adolesc*. 2014;43(8):1225–1239. [PubMed: 24318776]
24. Ghavami N, Katsiaficas D, Rogers LO. Toward an intersectional approach in developmental science: the role of race, gender, sexual orientation, and immigrant status. *Adv Child Dev Behav*. 2016;50:31–73. [PubMed: 26956069]
25. Bowleg L. The problem with the phrase women and minorities: intersectionality—an important theoretical framework for public health. *Am J Public Health*. 2012;102(7):1267–1273. [PubMed: 22594719]
26. Jamil OB, Harper GW, Fernandez MI. Sexual and ethnic identity development among gay-bisexual-questioning (GBQ) male ethnic minority adolescents. *Cultur Divers Ethnic Minor Psychol*. 2009;15(3):203–214. [PubMed: 19594249]
27. Meyer IH. Identity, stress, and resilience in lesbians, gay men, and bisexuals of color. *Couns Psychol*. 2010;38(3):442–454. 10.1177/0011000009351601
28. Mueller AS, James W, Abrutyn S, Levin ML. Suicide ideation and bullying among US adolescents: examining the intersections of sexual orientation, gender, and race/ethnicity. *Am J Public Health*. 2015;105(5):980–985. [PubMed: 25790421]
29. Russell ST, Everett BG, Rosario M, Birkett M. Indicators of victimization and sexual orientation among adolescents: analyses from youth risk behavior surveys. *Am J Public Health*. 2014;104(2):255–261. [PubMed: 24328633]
30. Mereish EH, Sheskie M, Hawthorne DJ, Goldbach JT. Sexual orientation disparities in mental health and substance use among black american young people in the USA: effects of cyber and bias-based victimisation. *Cult Health Sex*. 2019;21(9): 985–998. [PubMed: 30601086]
31. Tural Hesapcioglu S, Ercan F. Traditional and cyberbullying co-occurrence, and its relationship to psychiatric symptoms. *Pediatrics Int*. 2017;59(1):16–22.
32. Vieira MA, Ronning JA, Mari JJ, Bordin IA. Does cyberbullying occur simultaneously with other types of violence exposure? *Rev Bras Psiquiatr*. 2019;41(3):234–237. [PubMed: 30672967]
33. Myers ZR, Swearer SM, Martin MJ, Palacios R. Cyberbullying and traditional bullying: the experiences of poly-victimization among diverse youth. *Int J Technoethics*. 2017;8(2):42–60.
34. US Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance System (YRBSS). 2018 Available at: <https://www.cdc.gov/HealthyYouth/data/yrbs/>. Accessed March 20, 2019.
35. Brener ND, Kann L, Shanklin S, et al. Methodology of the youth risk behavior surveillance system - 2013. *MMWR Recomm Rep*. 2013;62(RR-1):1–20.
36. Juvonen J, Graham S. Bullying in schools: the power of bullies and the plight of victims. *Annu Rev Psychol*. 2014;65:159–185. [PubMed: 23937767]
37. Himmelstein MS, Puhl RM, Watson RJ. Weight-based victimization, eating behaviors, and weight-related health in sexual and gender minority adolescents. *Appetite*. 2019;141:1–8.
38. Van Geel M, Vedder P, Tanilon J. Are overweight and obese youths more often bullied by their peers? A meta-analysis on the relation between weight status and bullying. *Int J Obes (Lond)*. 2014;38(10):1263–1267. [PubMed: 25002148]
39. Ash-Houchen W, Lo CC. Intersections of gender and sexual minority status: co-occurring bullying victimization among adolescents. *Comput Human Behav*. 2018;80:262–270.
40. Puhl RM, Himmelstein MS, Watson RJ. Weight-based victimization among sexual and gender minority adolescents: implications for substance use and mental health. *Health Psychol*. 2019;38(8):727–737. [PubMed: 31157534]
41. US Centers for Disease Control and Prevention. Defining childhood obesity. 2018 Available at: <https://www.cdc.gov/obesity/childhood/defining.html>. Accessed February 13, 2020.
42. US Centers for Disease Control and Prevention. How to analyze YRBS sexual minority data. 2018 Available at: https://www.cdc.gov/healthyouth/data/yrbs/pdf/2017/2017_analyze_sexual_minority_data.pdf. Accessed October 14, 2018.

43. US Centers for Disease Control and Prevention. Software for analysis of YRBS data. 2018 Available at: https://www.cdc.gov/healthyyouth/data/yrbs/pdf/2017/2017_YRBS_analysis_software.pdf. Accessed October 14, 2018.
44. Sullivan TR, Salter AB, Ryan P, Lee KJ. Bias and precision of the “multiple imputation, then deletion” method for dealing with missing outcome data. *Am J Epidemiol*. 2015;182(6): 528–534. [PubMed: 26337075]
45. Sawyer AL, Bradshaw CP, O’brennan LM. Examining ethnic, gender, and developmental differences in the way children report being a victim of “bullying” on self-report measures. *J Adolesc Health*. 2008;43(2):106–114. [PubMed: 18639783]
46. Pompili M, Lester D, Forte A, et al. Bisexuality and suicide: a systematic review of the current literature. *J Sex Med*. 2014;11(8):1903–1913. [PubMed: 24839908]
47. Avison WR. Incorporating children’s lives into a life course perspective on stress and mental health. *J Health Soc Behav*. 2010;51(4):361–375. [PubMed: 21131615]
48. Bradshaw CP, Sawyer AL, O’brennan LM. A social disorganization perspective on bullying-related attitudes and behaviors: the influence of school context. *Am J Community Psychol*. 2009;43(3-4):204–220. [PubMed: 19333749]
49. Klein J, Cornell D. Is the link between large high schools and student victimization an illusion? *J Educ Psychol*. 2010;102(4):933–946.
50. Witcomb GL, Claes L, Bouman WP, Nixon E, Motmans J, Arcelus J. Experiences and psychological wellbeing outcomes associated with bullying in treatment-seeking transgender and gender-diverse youth. *LGBT Health*. 2019;6(5):216–226. [PubMed: 31184969]
51. Espelage DL, Valido A, Hatchel T, Ingram KM, Huang Y, Torgal C. A literature review of protective factors associated with homophobic bullying and its consequences among children & adolescents. *Aggress Violent Behav*. 2019;45:98–110.
52. Johns MM, Poteat VP, Horn SS, Kosciw J. Strengthening our schools to promote resilience and health among LGBTQ youth: emerging evidence and research priorities from the state of LGBTQ youth health and wellbeing symposium. *LGBT Health*. 2019;6(4):146–155. [PubMed: 30958731]
53. Espelage DL, Hong JS. Cyberbullying prevention and intervention efforts: current knowledge and future directions. *Can J Psychiatry*. 2017;62(6):374–380. [PubMed: 28562094]
54. Gaffney H, Farrington DP, Espelage DL, Ttofi MM. Are cyberbullying intervention and prevention programs effective? A systematic and meta-analytical review. *Aggress Violent Behav*. 2019;45:134–153.
55. Gaffney H, Ttofi MM, Farrington DP. Evaluating the effectiveness of school-bullying prevention programs: an updated meta-analytical review. *Aggress Violent Behav*. 2019;45: 111–133.
56. Earnshaw VA, Reisner SL, Menino DD, et al. Stigma- based bullying interventions: a systematic review. *Dev Rev*. 2018;48:178–200. [PubMed: 30220766]
57. Hatchel T, Marx R. Understanding intersectionality and resiliency among transgender adolescents: exploring pathways among peer victimization, school belonging, and drug use. *Int J Environ Res Public Health*. 2018;15(6):E1289 10.3390/ijerph15061289. [PubMed: 29921806]
58. Seelman KL, Walker MB. Do anti-bullying laws reduce in-school victimization, fear-based absenteeism, and suicidality for lesbian, gay, bisexual, and questioning youth? *J Youth Adolesc*. 2018;47(11):2301–2319. [PubMed: 30117086]

Table 1.

Sample Characteristics of Boys in the 2011-2017 Youth Risk Behavior Surveillance (N =54,321)

Demographic Characteristics	Heterosexual Gay (N = 49,124) (N = 1344)		Heterosexual vs gay	Bisexual (N =1443)	Heterosexual vs bisexual	Not sure (N =2410)	Heterosexual vs not sure
	N (weighted %)		p-value	N (weighted %)	p-value	N (weighted %)	p-value
Race/ethnicity			.01 **		.02 *		<.001 ***
White	8705(18.4)	199 (16.1)		226 (15.1)		378 (15.4)	
Black	11,927(29.6)	336 (28.3)		282 (25.6)		461 (24.1)	
Hispanic	20,613(37.3)	597 (44.5)		695 (43.8)		1025(37.5)	
Other race	7879(14.7)	212 (11.1)		240 (15.6)		546 (22.9)	
Grade			.07		.18		.24
9th	13,063(28.3)	293 (24.7)		369 (26.5)		701 (31.2)	
10th	12,662(27.0)	359 (28.7)		356 (25.4)		590 (24.3)	
11th	11,641(22.5)	303 (19.8)		352 (23.6)		555 (23.4)	
12th	11,295(21.3)	372 (25.8)		340 (22.6)		526 (19.8)	
Missing	463(0.9)	17 (1.0)		26 (1.9)		38 (1.3)	
Body mass index			.02 *		<.001 ***		<.001 ***
Underweight	1917(4.2)	65 (4.1)		68 (6.3)		134 (5.3)	
Normal	29,575(60.9)	741 (54.1)		734 (49.4)		1156(50.)	
Overweight	6847(13.3)	155 (13.0)		233 (15.5)		331 (13.6)	
Obese	7013(13.3)	218 (17.0)		251 (17.2)		340 (12.3)	
Missing	3772(8.3)	165 (11.8)		157 (11.6)		449 (18.5)	
Peer victimization							
Bullied on school property	5550(11.2)	355 (25.3)	<.001 ***	383 (23.5)	<.001 ***	517 (20.4)	<.001 ***
Electronically bullied	3816(7.7)	296 (21.1)	<.001 ***	321 (21.3)	<.001 ***	411 (17.4)	<.001 ***
Both bullied on school property and electronically	7, 197(14.4)	453 (32.8)	<.001 ***	507 (32.5)	<.001 ***	685 (27.5)	<.001 ***
Threatened or injured with a weapon on school property	3143 (6.4)	200 (14.8)	<.001 ***	205 (14.5)	<.001 ***	351 (14.4)	<.001 ***
Any peer victimization	8993(18.2)	513 (36.4)	<.001 ***	584 (38.8)	<.001 ***	803 (32.0)	<.001 ***

* p< .05.

** p< .01.

*** p< .001.

Reference group =heterosexual youth of the same sex.

Table 2.

Sample Characteristics of Girls in the 2011-2017 Youth Risk Behavior Surveillance (N =61,316)

Demographic characteristics	Heterosexual Lesbian (N = 48,787) (N = 1600)		Heterosexual vs lesbian	Bisexual (N =6997)	Heterosexual vs bisexual	Not sure (N =3932)	Heterosexual vs not sure
	N (weighted %)		p-value	N (weighted %)	p-value	N (weighted %)	p-value
Race/ethnicity			<.001 ***		<.001 ***		<.001 ***
White	8286(16.8)	221 (14.0)		921 (13.0)		544 (14.8)	
Black	12,218(30.8)	532 (37.8)		1852(33.7)		848 (26.5)	
Hispanic	20,401(37.6)	669 (38.8)		3412(44.5)		1683 (38.1)	
Other race	7882 (14.8)	178(9.4)		812 (8.8)		857 (20.6)	
Grade			<.01 **		<.01 **		.06
9th	12,482 (26.9)	304 (21.1)		1895 (28.7)		1101(30.2)	
10th	12,903(26.0)	433 (28.2)		1975(28.3)		1123 (27.3)	
11th	11,905(23.9)	390 (22.4)		1577(21.3)		843 (21.0)	
12th	11,193(22.6)	448 (27.5)		1505(21.1)		825 (20.6)	
Missing	304(0.6)	25 (0.8)		45 (0.6)		40 (0.9)	
Body massindex			<.001 ***		<.001 ***		<.001 ***
Underweight	1146(2.6)	41 (1.9)		165(2.5)		109 (2.2)	
Normal	31,758(65.0)	902 (55.5)		3903(57.7)		2168 (54.4)	
Overweight	7395(14.6)	293 (19.1)		1268(17.2)		628 (16.2)	
Obese	4056(8.2)	206 (13.0)		1018(13.1)		489 (12.8)	
Missing	4432(9.6)	158 (10.5)		643(9.5)		538 (14.4)	
Peer victimization							
Bullied on school property	6803(13.9)	298 (19.1)	<.01 **	1592(22.5)	<.001 ***	799 (20.8)	<.001 ***
Electronicallybullied	5970(12.3)	261 (17.6)	<.001 ***	1573(22.3)	<.001 ***	692 (17.9)	<.001 ***
Both bullied on school property and electronically	9584(19.7)	409 (26.7)	<.001 ***	2275(32.6)	<.001 ***	1078 (27.7)	<.001 ***
Threatened or injured with a weapon on school property	1690(3.4)	159 (9.9)	<.001 ***	534(7.3)	<.001 ***	271 (7.2)	<.001 ***
Any peervictimization	10,309(21.2)	478 (30.9)	<.001 ***	2463(35.2)	<.001 ***	1157 (29.5)	<.001 ***

* p < .05.

** p < .01.

*** p < .001.

Reference group =heterosexual youth of the same sex.

Table 3.

Intersection of Sexual Identity and Race/Ethnicity on Bullying and Peer Victimization Among Boys in the 2011-2017 Youth Risk Behavior Surveillance (N = 54,321)

	White N = 9508	Black N = 13,006	Hispanic N = 22,930	Other race N = 8877
Bullying and Peer Victimization				
AOR (95% CI)				
Bullied on school property				
Gay	2.13 (1.16-3.95) *	3.02 (1.92-4.75) ***	2.94 (2.22-3.88) ***	2.83 (1.52-5.27) **
Bisexual	2.30 (1.55-3.40) ***	1.33 (0.80-2.21)	3.09 (2.37-4.02) ***	3.13 (1.78-5.50) ***
Not sure	2.28 (1.38-3.77) **	1.57 (1.05-2.34) *	2.30 (1.81-2.94) ***	1.83 (1.15-2.92) *
Electronically bullied				
Gay	2.81 (1.39-5.70) **	2.69 (1.81-4.00) ***	3.37 (2.33-4.88) ***	4.82 (2.43-9.53) ***
Bisexual	3.20 (2.00-5.12) ***	2.20 (1.31-3.69) **	3.39 (2.55-4.50) ***	4.84 (2.87-8.17) ***
Not sure	2.91 (2.02-4.18) ***	2.64 (1.72-4.06) ***	2.54 (1.90-3.38) ***	1.99 (1.13-3.53) *
Both bullied on school property and electronically				
Gay	2.07 (1.16-3.71) *	3.05 (2.11-4.41) ***	3.12 (2.40-4.06) ***	3.86 (2.18-6.86) ***
Bisexual	2.88 (1.96-4.22) ***	1.89 (1.24-2.87) **	3.21 (2.51-4.11) ***	3.92 (2.35-6.55) ***
Not sure	2.58 (1.73-3.86) ***	2.10 (1.44-3.06) ***	2.43 (1.93-3.05) ***	1.78 (1.22-2.60) **
Threatened or injured with a weapon on school property				
Gay	2.19 (0.80-5.98)	2.13 (1.17-3.87) *	2.84 (2.04-3.95) ***	2.66 (1.08-6.55) *
Bisexual	4.94 (2.59-9.41) ***	1.70 (1.06-2.71) *	2.29 (1.57-3.35) ***	2.80 (1.25-6.27) *
Not sure	3.05 (1.95-4.77) ***	2.31 (1.55-3.45) ***	2.40 (1.67-3.47) ***	2.30 (1.38-3.83) ***
Any peer victimization				
Black	1.92 (1.09-3.37) *	2.42 (1.70-3.43) ***	2.91 (2.23-3.77) ***	3.18 (1.78-5.65) ***
Hispanic	3.54 (2.41-5.20) ***	1.96 (1.36-2.84) ***	2.97 (2.33-3.79) ***	3.87 (2.31-6.49) ***
Other race	2.50 (1.72-3.64) ***	2.14 (1.49-3.05) ***	2.24 (1.78-2.81) ***	1.60 (1.12-2.30) *

* p< .05.

** p< .01.

*** p< .001.

Reference group = heterosexual youth of the same race/ethnicity and sex. All models adjusted for grade level, body mass index, and survey site. AOR, adjusted odds ratio; CI, confidence interval.

Table 4.

Intersection of Sexual Identity and Race/Ethnicity on Bullying and Peer Victimization Among Girls in the 2011-2017 Youth Risk Behavior Surveillance (N = 61,316)

	White N = 9972	Black N = 15,450	Hispanic N = 26,165	Other race N = 9729
Bullying and Peer Victimization				
AOR (95% CI)				
Bullied on school property				
Lesbian	1.69 (1.07-2.69) *	1.35 (0.85-2.17)	1.11 (0.81-1.51)	4.14 (1.82-9.41) **
Bisexual	2.45 (1.86-3.22) ***	1.57 (1.22-2.02) **	1.68 (1.43-1.96) ***	1.92 (1.40-2.63) ***
Not sure	1.50 (1.03-2.20) *	1.63 (1.11-2.39) *	1.63 (1.31-2.03) ***	1.46 (0.99-2.14)
Electronically bullied				
Lesbian	1.85 (1.06-3.21) *	0.94 (0.58-1.52)	1.81 (1.34-2.44) ***	2.52 (0.95-6.67)
Bisexual	2.26 (1.71-2.99) ***	2.00 (1.63-2.45) ***	1.96 (1.68-2.28) ***	2.64 (1.72-4.05) ***
Not sure	1.13 (0.77-1.68)	1.84 (1.29-2.63) **	1.71 (1.35-2.17) ***	1.27 (0.83-1.93)
Both bullied on school property and electronically				
Lesbian	1.89 (1.19-3.00) **	1.15 (0.79-1.70)	1.43 (1.08-1.90) *	3.34 (1.59-7.02) **
Bisexual	2.45 (1.86-3.22) ***	1.84 (1.50-2.25) ***	1.86 (1.62-2.15) ***	2.21 (1.62-3.02) ***
Not sure	1.28 (0.92-1.78)	1.69 (1.21-2.35) **	1.68 (1.38-2.06) ***	1.29 (0.90-1.84)
Threatened/injured with a weapon on school property				
Lesbian	2.14 (0.81-5.66)	2.89 (1.76-4.73) ***	2.99 (1.91-4.68) ***	4.67 (1.83-11.94) **
Bisexual	2.87 (1.81-4.56) ***	2.18 (1.56-3.05) ***	1.84 (1.44-2.36) ***	1.95 (1.03-3.71) *
Not sure	1.78 (0.85-3.73)	1.47 (0.94-2.29)	2.30 (1.57-3.38) ***	3.71 (1.72-8.02) **
Any peer victimization				
Lesbian	1.87 (1.18-2.97) **	1.41 (0.99-2.01)	1.67 (1.30-2.13) ***	3.16 (1.51-6.63) **
Bisexual	2.37 (1.80-3.12) ***	1.99 (1.63-2.42) ***	1.89 (1.64-2.18) ***	2.22 (1.63-3.02) ***
Not sure	1.23 (0.88-1.72)	1.62 (1.18-2.22) **	1.65 (1.36-2.01) ***	1.46 (0.97-2.20)

* p < .05.

** p < .01.

*** p < .001.

Reference group = heterosexual youth of the same race/ethnicity and sex. All models adjusted for grade level, body mass index, and survey site. AOR, adjusted odds ratio; CI, confidence interval.