

## ABSTRACT

Lesbian, gay, bisexual, and queer (LGBQ) individuals experience interpersonal and structural discrimination and stigma, leading to higher incidences of psychological distress and trauma. The current study aims to research the relationships between adverse childhood experiences (ACEs) and poor mental health outcomes and LGBQ and ethnic identity centrality and development. The current study's hypothesis suggests that higher levels of ACEs and poor mental health outcomes lead to lower LGBQ and ethnic identity development levels. Secondary data from the Generations: A Study of the Life and Health of LGB People in a Changing Society from 2016 to 2019 was utilized to research these relationships. The current study's findings demonstrate that higher levels of ACEs led to higher levels of ethnic and LGBQ identity. Also, findings suggest that higher levels of psychological distress led to lower levels of ethnic identity. Bisexual participants scored lower in LGBQ identity in comparison to lesbian and gay respondents. These findings support minority stress frameworks that suggest that an increase in identity-based stressors leads to poor mental health outcomes and resiliency, strengthening identity, and protective factors in adversity.

## INTRODUCTION

- Lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals experience societal marginalization which manifests in higher psychological distress rates and greater reports of adverse childhood experiences (Austin et al., 2016).
- Adverse childhood experiences are a risk factor to an increased likelihood to depression, harmful behaviors, and suicide (Merrick et al., 2013).
- LGBTQ identity integration is affected by factors such as structural stigma, adverse childhood experiences, and ethnicity. Individuals from ethnic minority groups can face additional barriers, such as cultural pressures and racism within white-centered LGBTQ+ spaces (Halpin & Allen, 2004).

## OBJECTIVES

### Purpose of Study:

- Increase knowledge related to the mental health of individuals in the LGBQ+ community.
- Address gaps in literature with intersectional frameworks of understanding LGBQ+ identity development.

### Research Question:

- What is the relationship between adverse childhood experiences and mental health on identity development in LGBQ individuals?

### Hypothesis:

- LGBQ individuals experiencing higher incidences of adverse childhood experiences and poorer mental health will have lower identity development outcomes.

## LITERATURE REVIEW

### Adverse Childhood Experiences and Mental Health Outcomes in LGBTQ+ Communities

- High school students who identified as LGB or questioned their sexuality reported a higher number of adverse childhood experiences in comparison to heterosexual participants (Clements-Nolle et al., 2018).
- Austin et al. (2016) found that among participants 15% of LGBTQ individuals reported 6 adverse childhood experiences, while 6% of heterosexual identified individuals endorsed more than 6 adverse childhood experiences.
- Disparities in childhood trauma result in existing health disparities, such as rates of suicidality, mental illness, and substance use among LGBQ communities.

### Community-Level Adverse Childhood Experiences

- Existing research on adverse childhood experiences centers white, middle-class, heterosexual, and cisgender identities and experiences (Austin et al., 2016; Cronholm et al., 2015).
- Expanding the definition of adverse childhood experiences to include community-level adverse experience would encompass individuals impacted by societal, environmental, and health disparities.

### Resilience in Adverse Childhood Experiences and Mental Health in LGBQ Communities

- Resilience includes internal qualities, protective factors, social supports, and stress buffers that foster strength and overcoming trauma and adversity.
- For LGBTQ+ communities, collective resilience is pivotal since it promotes advocacy, community cohesion, and a sense of belonging. For example, McCann and Brown (2017) found that transgender individuals with positive perceptions of community support reported lower levels of psychological distress.

## METHODS

### Research Design:

The current study is a secondary analysis of the Generations: A Study of the Life and Health of LGB People in a Changing Society (Generations Study). The original study was a mixed methods 5-year longitudinal study that collected data from 2016-2019. Both the quantitative and qualitative portions, interviewed and surveyed individuals who identified as lesbian, gay, bisexual and were from the ages 18-59 years old. Transgender individuals were referred to TransPop, a study centering the experiences of transgender communities. Individuals who met criteria for study were sent a questionnaire via email or mail that they self-administered.

### Sampling Method:

The current study utilized quantitative data from the original Generations Study. In the current study, participants who did not fully complete the ACE Questionnaire, Kessler 6 scale, identity centrality survey, and Multigroup Ethnic Identity Measure were excluded from the study. The current study included 1,507 participants.

### Measures:

**Independent Variables:** The independent variables for this study were adverse childhood experiences and mental health. Adverse childhood experiences were measured using the 8-item ACE questionnaire and mental health outcomes were measured using the Kessler 6 scale for psychological distress.

**Dependent Variables:** The dependent variables for this study were identity development in LGBQ individuals relating to LGBQ identity and ethnic identity. LGBQ identity centrality was measured using the identity centrality survey and ethnic identity was measured using the Multigroup Ethnic Identity Measure. Both measurement tools were 5 –point Likert scales.

## RESULTS

### Pearson's Correlation:

- The strength of the correlation between ACE scores and LGBQ identity was weak. Higher levels of ACEs were associated with higher levels of LGBQ identity.
- The strength of the correlation between ACE scores and ethnic identity was weak. Higher levels of ACEs were associated with higher levels of ethnic identity.
- The strength of the correlation between K6 scores and ethnic identity was weak. Higher levels of K6 were associated with lower levels of ethnic identity.
- The strength in correlation between K6 scores and LGBQ identity was weak. K6 scores were not associated with LGBQ identity centrality.

### Multiple Linear Regression:

**LGBQ Identity:** Participants who graduated college and had higher levels of ACEs and psychological distress also had higher levels of LGBQ identity ( $p < .05$ ), but participants who identified as bisexual scored, on average, 0.527 points lower in LGBQ identity, when compared to lesbian and gay participants. Age, ethnicity, and other sexual minority were not significant predictors of LGBQ identity among the study participants ( $p > .05$ ).

**Ethnic Identity:** Black respondents, on average, scored .842 points higher in ethnic identity when compared to White study participants. In addition, Latinx respondents, on average, scored .557 higher in ethnic identity when compared to White study participants. Older participants who scored lower in psychological distress, on average, scored higher in ethnic identity.

Table 2

Regression Model for LGBQ Identity Centrality

Predictor	B	SE	β
Constant***	3.912	.123	
Age	-.003	.002	-.034
College Graduate*	.153	.061	.068
Ethnicity: Black/African American	-.020	.081	-.007
Ethnicity: Latino/Hispanic	.042	.075	.015
Bisexual***	-.527	.068	-.220
Other sexual minority	.082	.094	.024
Adverse Childhood Experiences**	.039	.014	.075
Kessler 6*	-.013	.006	-.061

\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

Reference groups: Lesbian/Gay, White, and Not a College Graduate

Table 3

Regression Model for Ethnic Identity Centrality

Predictor	B	SE	β
Constant***	2.869	.091	
Age ***	.007	.002	.115
College Graduate	.056	.045	.032
Ethnicity: Black/African American***	.842	.060	.348
Ethnicity: Latino/Hispanic***	.557	.056	.252
Bisexual	-.004	.050	-.002
Other sexual minority	-.039	.069	-.014
Adverse Childhood Experiences	.013	.010	.031
Kessler 6***	-.015	.004	-.095

\*\*\* $p < .001$ ; \*\* $p < .01$ ; \* $p < .05$

Reference groups: Lesbian/Gay, White, and Not a College Graduate

## CONCLUSIONS

- Higher levels of psychological distress led to a decrease in ethnic identity centrality among LGBQ individuals. This finding is consistent with the minority stress framework, which states that the increase of identity-based stressors, which impact identity development, increases likelihood of poor mental health outcomes in LGBQ individuals.
- Current study aligns with research that signals that bisexual individuals are often more at risk for increased poor mental health outcomes (Russell & Fish, 2016). Individuals who identify as bisexual often encounter invisibility and erasure both within and outside of the LGBT community, which affect their sense of belonging and wellbeing.
- Higher levels of ACE's were associated with higher levels of ethnic and LGBQ identity. The current study's findings support resilience frameworks which suggest that increased interpersonal and structural stressors lead to increased resiliency factors among minoritized communities.
- The resilience hypothesis within the minority stress framework suggests that marginalized communities tend to more frequently cope with the effects of marginalization and minority stress due to past experiences confronting discrimination, resulting in higher levels of resilience (Meyer, 2010).

## IMPLICATIONS FOR SOCIAL WORK PRACTICE

- Demonstrated role of resilience in LGBQ+ and ethnic minoritized communities due to systemic barriers across their lifespan.
- Increased need to expand definition of adverse childhood experiences to include community-level adverse childhood experiences that impact individuals from marginalized communities to have a deeper understanding of childhood trauma.

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