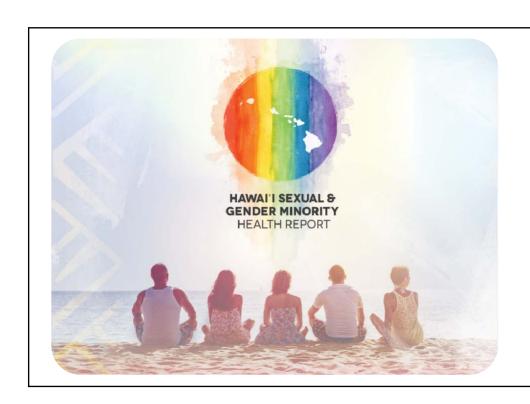


Sexual Minority (SM) and Transgender/Gender Non-Conforming (TG/GNC) Youth in Hawaii

The Hawaii Sexual and Gender Minority Workgroup





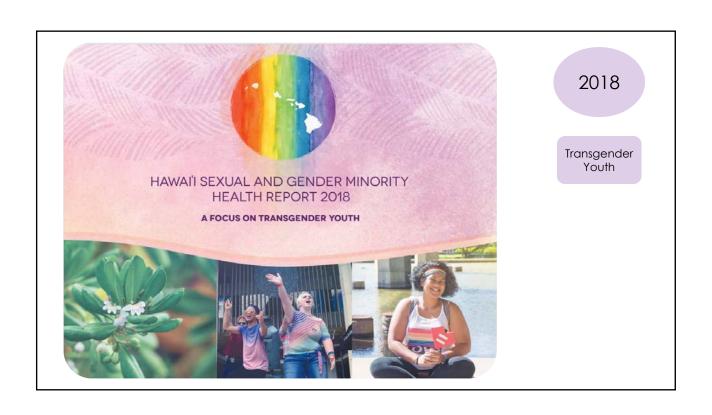
2017

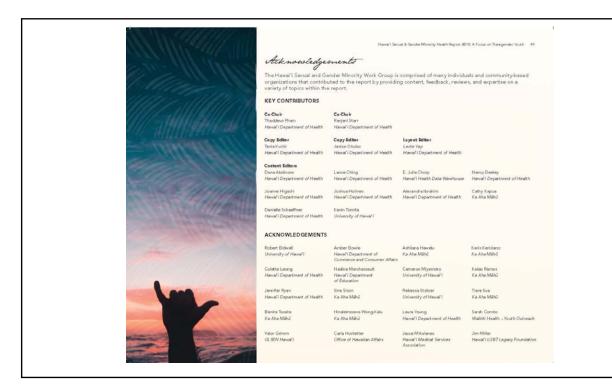
LGB Youth LGB Adults



Suggested Citation: Holmes JR, Ching LK, Tomita KK, Chosy EJ, Pham T, Bowie AY, Young LA, Ryan J, Starr RR for the Hawaii Sexual and Gender Minority Workgroup. *Hawaii Sexual and Gender Minority Health Report.* Honolulu, HI: Hawaii State Department of Health, Chronic Disease Prevention and Health Promotion Division; 2017.









Suggested Citation: Ching LK, Holmes JR, Pham T, Tomita KK, Chosy J, Kapua C, and Starr RR for the Hawai'i Sexual and Gender Minority Work Group. 2018. Hawai'i Sexual and Gender Minority Health Report: A Focus on Transgender Youth. Honolulu: Hawaii State Department of Health, Chronic Disease Prevention and Health Promotion Division.



Sexual and Gender Minority Youth

SM and TG/GNC youth face ongoing stigma and discrimination into adulthood that contribute to sexual orientation and gender identity/expression specific disparities.

Minority stress is defined as the additional stressors that people experience due to a stigmatized minority status

Some of these include:

- Access to health services
- Mental health
- Physical health



Youth Risk Behavior Survey (YRBS)

National and state-wide survey administered in odd years to <u>public middle and high school</u> students

Used to assess and monitor six health-risk behaviors

Transgender data collected since 2017

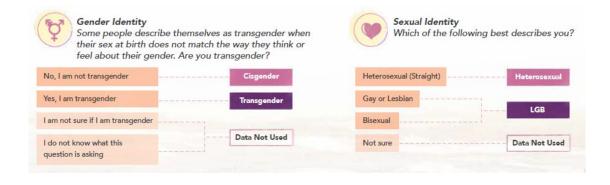


ttps://www.cdc.gov/healthyyouth/data/yrbs/

Indicator Definitions & Years

2017 Report: Combined 2011, 2013, and 2015 high school datasets

2018 Report: Only included the 2017 high school dataset

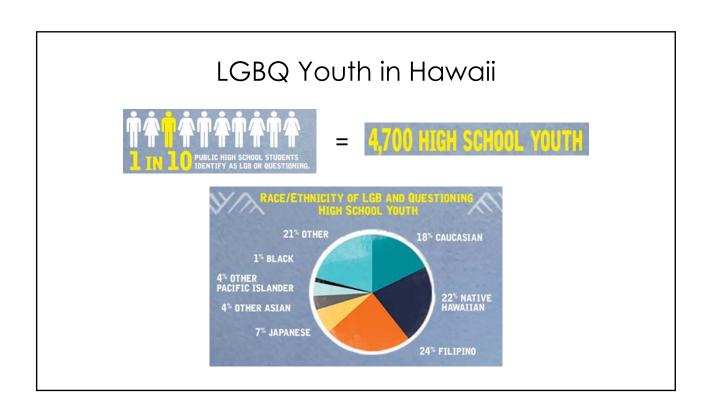


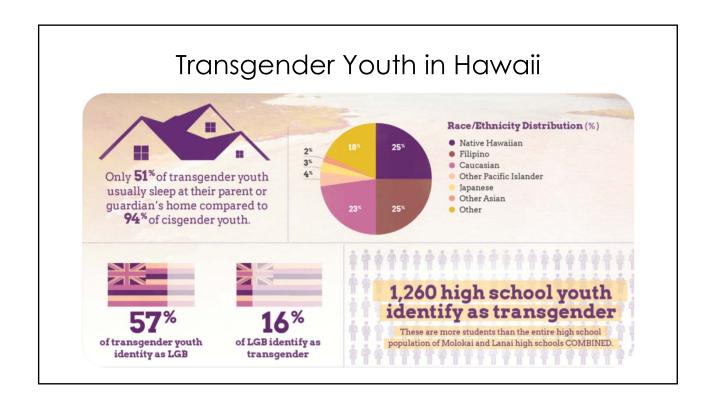
Magnitudes of Disparity

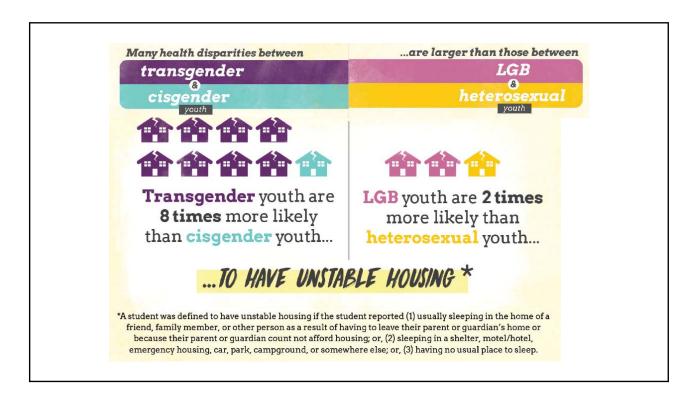
- Two reports intended to convey disparity between LGB and heterosexual students & transgender and cisgender students.
- Direct comparisons of LGB and transgender students are inappropriate



 Therefore, we compared the magnitude of disparities using 2017 data for both comparisons (LGB/heterosexual and Transgender/Cisgender) – select findings highlighted







Healthcare Access

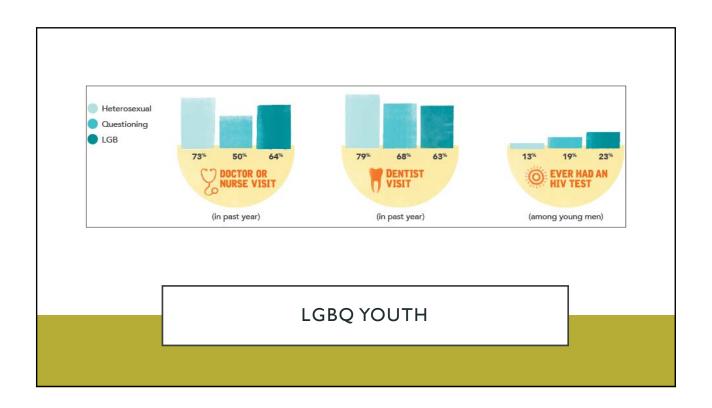


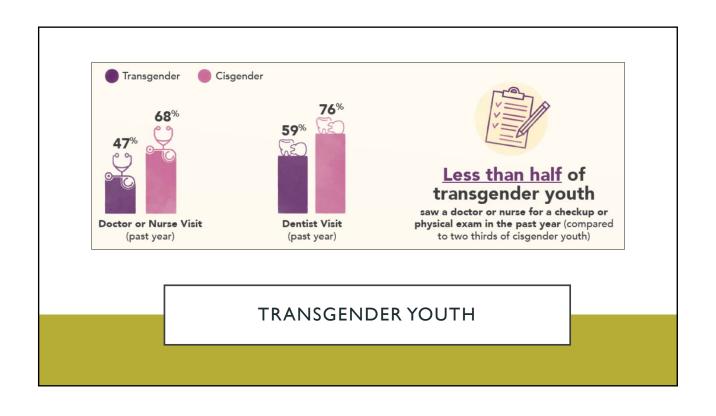
When seeking health services, SM & TG/GNC youth are:

- · Denied care
- Treated harshly, harassed, or refused to be touched by providers
- Subject to excessive questioning or examination
- Denied access to hormonal therapy
- Referred to harmful healthcare practices such as conversion therapy
- · Less likely to receive routine health services like dental care
- · Less likely to receive testing for STDs

In a policy statement the American Academy of Pediatrics (AAP) affirmed the positive role healthcare providers can play in serving as a supportive role model to SM & TG/GNC youth







General Health



SM and/or TG/GNC youth are:

- · Less likely to report consumption of fruits and vegetables
- · Less likely to participate on at least one sports team
- Less likely to engage in daily physical activity, or meet recommended aerobic and muscle strengthening guidelines
- More likely to spend three or more hours per day playing video games or engaging in non-academic computer time
- · More likely to have an eating disorder
- · Have higher rates of obesity

Having PE teachers who students feel comfortable talking to about SM & TG/GNC issues and having policies that explicitly offer protections from bullying and harassment encourage greater SM & TG/GNC student involvement in PE & team sports



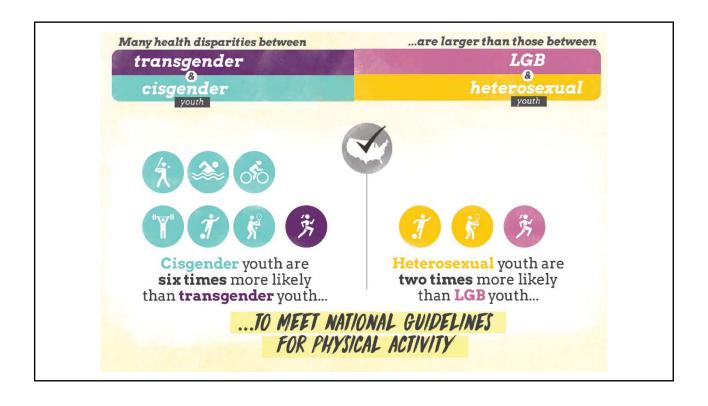






LGBQ YOUTH





Injury, Violence & Bullying



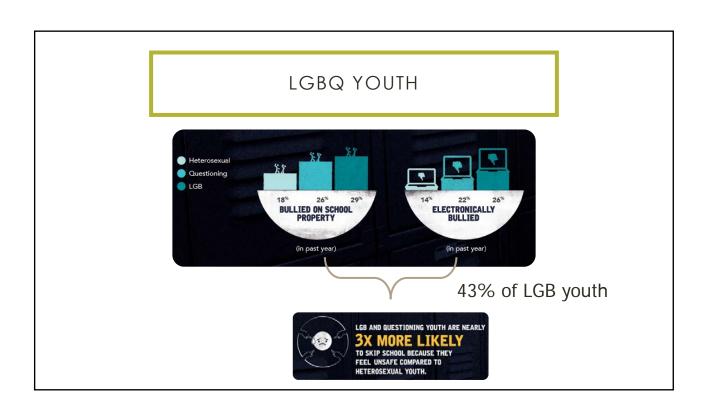
SM and/or TG/GNC youth are at greater risk of:

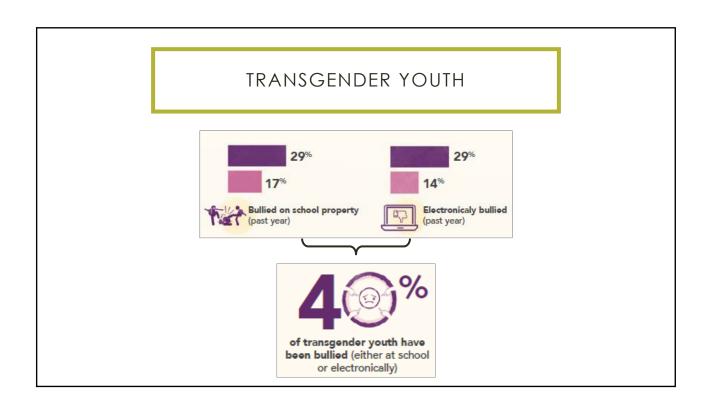
- Experiencing bullying (teasing, harassment, physical and sexual assault, and cyber bullying)
- Experiencing dating violence, including physical abuse by dating partners and sexual coercion
- · Perpetrate dating violence

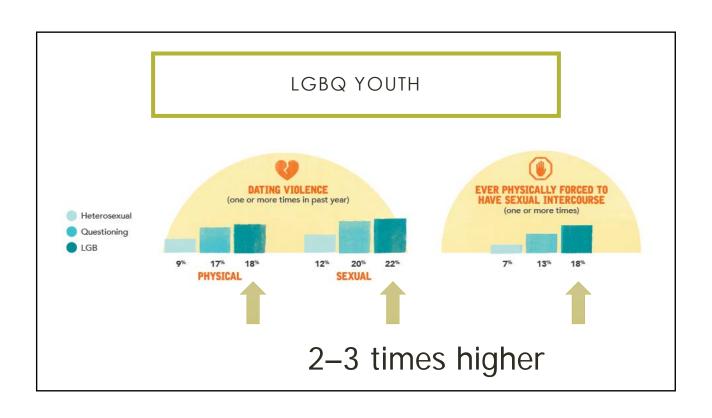


4 states and the District of Columbia expressly require sexual education to be inclusive of sexual and gender minorities

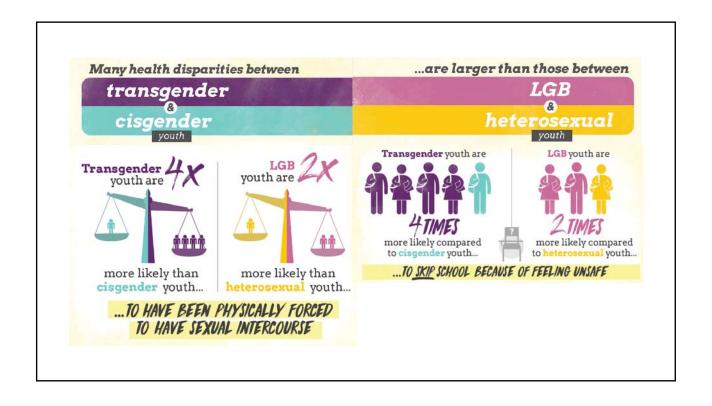












Mental Health



SM and/or TG/GNC youth often cope with:

- challenges of social stigma and discrimination
- · lack of acceptance, neglect or abuse from their families
- bullying from peers due to their sexual orientation or gender identity/expression
- 2 to 3 times higher risk for depression, anxiety disorders, suicidal ideation, suicide attempts, and self-harm

St. Paul Minnesota's "Out for Equity" program addresses homophobia in schools and at home

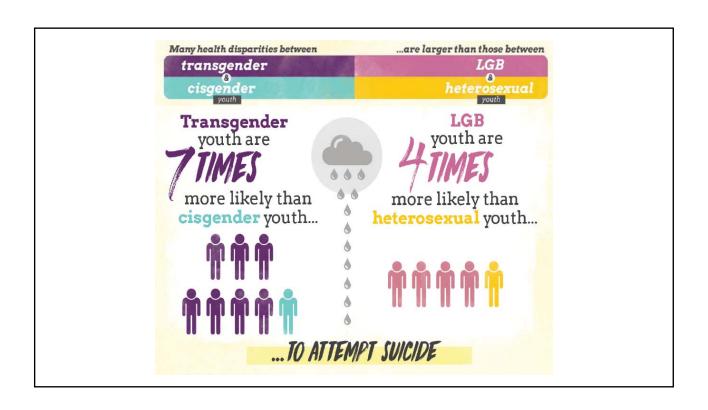








TRANSGENDER YOUTH



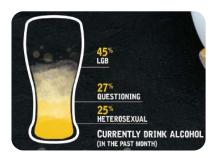
Behavioral Risk Factors



- SM & TG/GNC youth may use substances to cope with bullying and harassment, family conflict and rejection, minority stress, childhood abuse, gender stereotypes, and peer influence. Important interventions to reduce substance use include:
- Social supports in schools
- Community access to preventive health programs specific to SM & TG/GNC youth
- Strategies to reduce family hostility toward SM & TG/GNC youth
- Providing access to one or more adults who are accepting of the youth's sexual or gender identity who they feel comfortable talking with



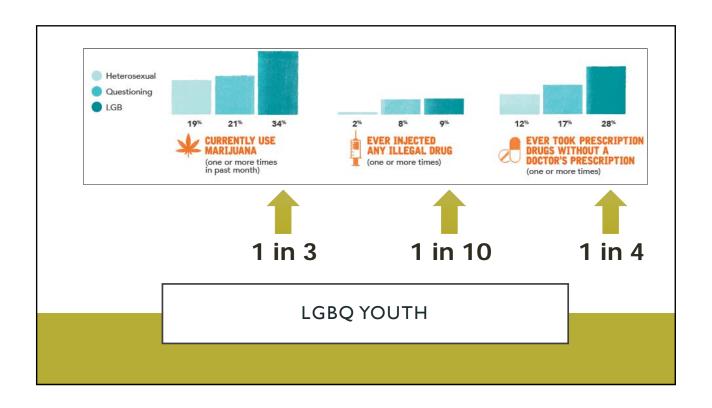




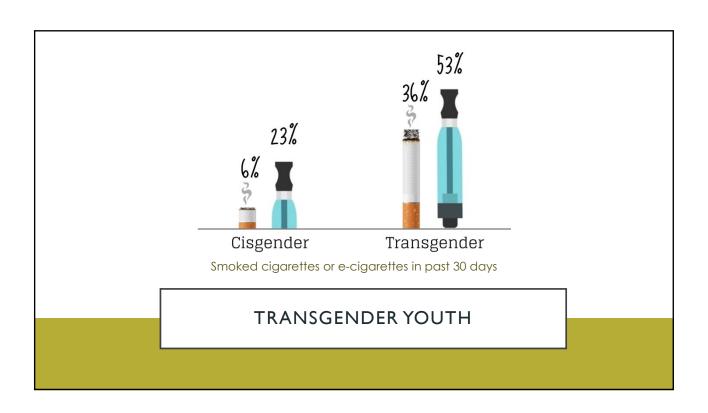


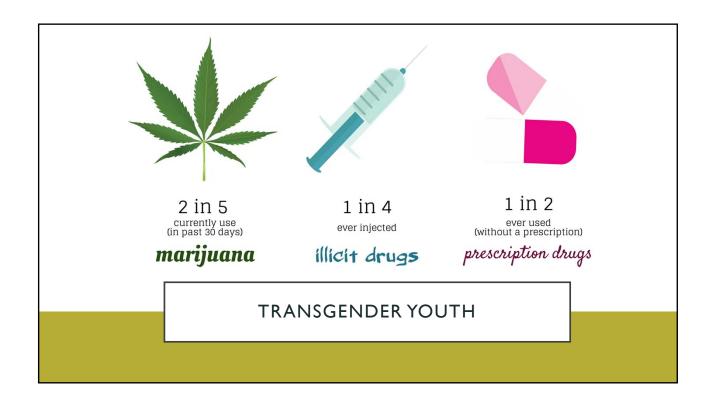
43% LGB VS 26% OF HETEROSEXUAL YOUTH ARE AT INCREASED RISK FOR ALCOHOL AND DRUG DEPENDENCY.

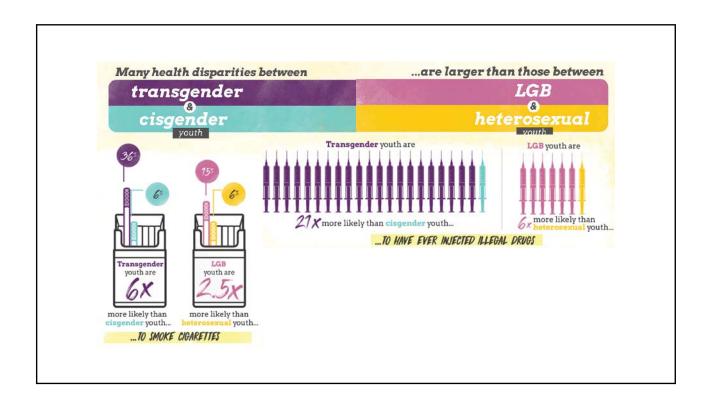
LGBQ YOUTH











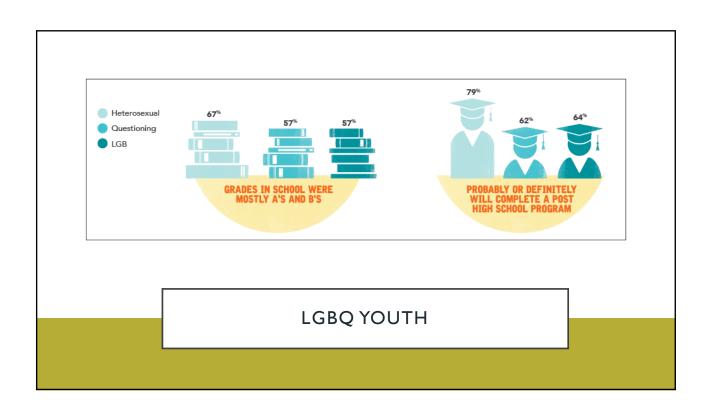
Academic Achievement

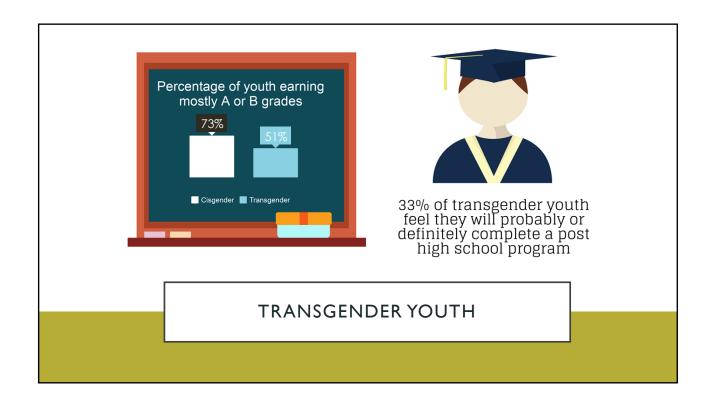


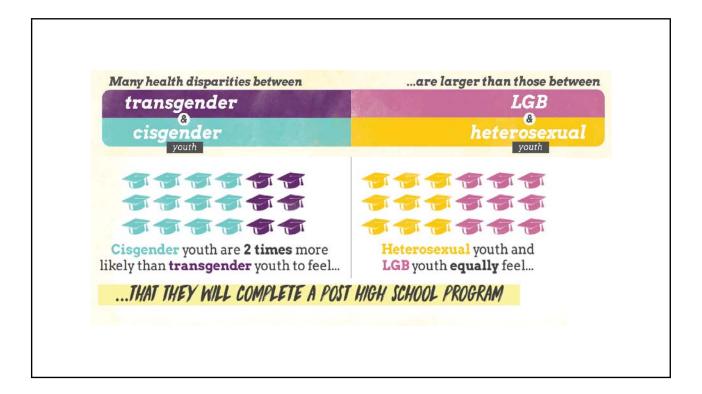
- There is a close relationship between health and academic achievement.
- Attaining higher levels of education is associated with greater income, lower rates of obesity and chronic diseases, and longer life expectancy
- Experiencing negative school climates and victimization are related to lower academic performance and self-esteem
- SM & TG/GNC students who experience a hostile climate at school may miss school to avoid unpleasant and negative experiences

SM & TG/GNC students who feel more supported in school have higher grade point averages and are more likely to intend to pursue post-high school education









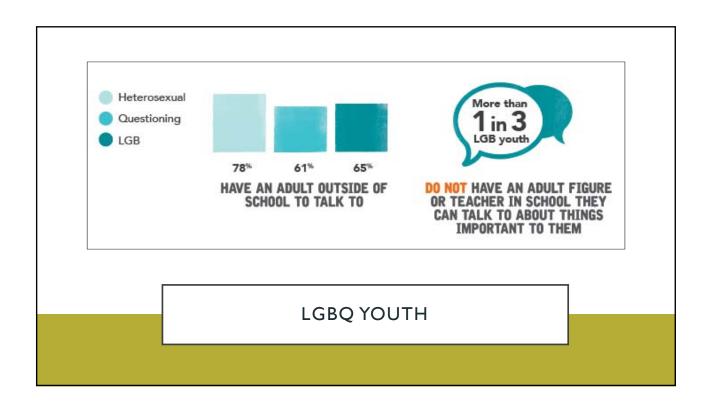
Protective Factors



Factors that help SG and/or TG/GNC youth build resiliency and overcome adversity include:

- family support and acceptance
- presence of Gay-Straight Alliances (GSA) in school
- policies that protect youth from bullying and harassment
- the presence of caring adults, including in the school environment
- positive peer influences
- strong self-esteem
- involvement in school activities
- positive social transition (e.g. utilizing clothing, a name, pronouns, and overall gender expression that is consistent with an individual's gender identity)*







Stories of Resiliency



RESOURCES

- Kua'ana Project & Ka Aha Māhū youth programs to empower, support, enhance resiliency
- "Grow a Rainbow" seeks to end harassment and violence against transgender students, staff, and families
- Gay Straight Alliances (e.g. Farrington High School)

Future Directions

- Limited data exists at national and state levels → systematize data collection
- Conduct analyses of adult transgender data when feasible
- Conduct additional sub-analyses of existing data to elucidate disparities experienced by LGBT
- Conduct qualitative research to include Native Hawaiian cultural contexts/stories



