



Sexual minority youth, social connection and resilience: From personal struggle to collective identity

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ABSTRACT

Sexual minority youth are at increased risk for negative health outcomes including substance abuse, depression, anxiety, and suicide. Researchers suggest that sexual orientation victimization is a predictor of such outcomes. Social connectedness—or the importance of belonging where youth perceive they are cared for and empowered within a given context—has been associated with positive youth outcomes. This qualitative study utilized life story methodology. Life stories are considered to be important expressions of one's identity and are shaped by personal, social, and cultural contexts. Twenty-two interviews were conducted with 15 young people ranging in age from 14 to 22 years. Two focus groups with youth were also conducted. Youth were recruited from rural and urban communities in Massachusetts. This study contributes to the literature on resilience by including the voices of sexual minority youth and explores the meaning of social connection in their lives. Youth discuss the ways in which individual connection and group affiliation served to affirm one's identity, and provided a forum for moving personal struggle to collective action. The findings suggest the need to reconceptualize consequences of disconnection (such as depression or suicide) from individual pathology and attend to these consequences as a response to discrimination and stigma. Implications for these findings and areas for future research are discussed.

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Introduction

Sexual minority youth are at increased risk for negative health outcomes including substance abuse, depression, anxiety, and suicide attempts and completions. Researchers suggest that sexual orientation victimization is a predictor of such outcomes (Kosciw, 2004; Kosciw & Diaz, 2006; Russell & Joyner, 2001). Studies indicate that anywhere from 30 to 80% of sexual minority youth and adults have experienced some form of victimization—verbal or physical—based on their sexual orientation (Huebner, Rebhook, & Kegeles, 2004; Massachusetts Department of Education, 2006; Ryan & Rivers, 2003; Safren & Heimberg, 1999).

Suicide is one of the most troubling reported consequences of discrimination and victimization of sexual minority youth. Many studies of suicide find higher instances of suicide attempts among lesbians, gay men, and bisexuals, and transgender individuals (D'Augelli, Hershberger, & Pilkington, 2001; Faulkner & Cranston, 1998; Massachusetts Department of Education, 2006; Paul et al., 2002). Depression and substance abuse have also been reported

as critical predisposing factors for suicide among lesbian, gay, and bisexual youth (McDaniel, Purcell, & D'Augelli, 2001; Williams, Connolly, Pepler, & Craig, 2005). Evidence from a national study on adolescent suicidality and sexual orientation demonstrates that youth reporting same sex attraction are two times more likely than their same sex, heterosexual peers to attempt suicide (Russell & Joyner, 2001). Additionally, youth who reported suicidal thoughts or attempts were more likely to feel helpless, depressed, or abuse alcohol.

Much of the research on sexual minority youth comes from a risk factor approach. Knowing that sexual minority youth may be at risk for a range of negative health and behavioral outcomes is important, but is incomplete. Classifying individuals as at-risk does little to help us understand how people transcend adversity (Massey, Cameron, Ouellette, & Fine, 1998). In contrast, a youth development approach—or a study of resilience—foregrounds the protective factors that may mediate the negative health outcomes experienced by adolescents.

Resilience is defined as “a process of or capacity for, or the outcome of successful adaptation despite challenges and threatening circumstances” (Garmezy & Maston, 1991 p. 159). Studies on resilience have attempted to identify factors that allow some people to have positive life outcomes under adverse circumstances

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(Garmezy, 1985; Masten, 1994). Processes that foster resilience are referred to as protective factors (Arrington & Wilson, 2001; Cowan, Cowan, & Schulz, 1996). Factors can be at the individual (e.g. self-esteem), interpersonal (e.g. family and peer support), or community level (such as school connectedness and community involvement) (Garmezy, 1985; Masten, Morrison, Pelligrini, & Tellegen, 1990; Myers & Taylor, 1998).

Wexler, DiFulvio, and Burke (2009) argue that research on resilience must investigate the ways in which youth interpret and adaptively respond to the discrimination and prejudice they may encounter as members of marginalized groups. Specifically, these authors point to ways in which social connections, especially group affiliations, can help a young person reconceptualize personal difficulty as a collective struggle fostering positive health outcomes (Phinney, 1991; Wakefield & Hudley, 2007).

Paying particular attention to the concept of social connectedness, this paper foregrounds the voices of lesbian, gay, bisexual, and transgender youth. It explores the participants' meaning of social connection, within families, schools, and communities and the ways in which connection and group affiliation served as resources for the youth. Finally, implications for these findings and areas for future research are discussed.

Theoretical framework

Social connectedness—or the importance of belonging where youth perceive they are cared for and empowered within a given context—has been associated with positive youth outcomes (Eisenberg & Resnick, 2006). At an individual level, social connectedness and social support have been shown to be beneficial in times of stress (Cohen, 2004). Factors such as number of friends, higher frequency of social contact, and lower levels of social isolation have been identified as protective against suicidal thoughts and behaviors, substance abuse and other high-risk behaviors (Bearman & Moody, 2004; Kaminski et al., 2009; Uchino, Cacioppo, & Kiecolt-Glaser, 1996).

Social connections between individuals and larger organizations or institutions may also be beneficial for overall health and wellbeing. Researchers have found that connection to schools, family, or a larger community may be particularly beneficial to youth (Kaminski et al., 2009). One study found that family connectedness, adult caring, and school safety served as protective factors against suicidal ideation and attempts among sexual minority youth (Eisenberg & Resnick, 2006). However, connectedness within these social contexts can be particularly problematic for sexual minority youth who may experience these locations as unsafe or threatening (Bontempo & D'Augelli, 2002; Burkett, Espelage, & Koenig, 2009; Kosciw, 2004; Kosciw & Diaz, 2006; Lombardi & Wilchins, 2001; Williams et al., 2005). Likewise, the development of a lesbian, gay, bisexual, or transgender identity may occur without the support of one's family or peer support network; therefore, these individuals will not benefit from family and community support (Ryan & Rivers, 2003).

A growing body of research suggests that a pathway toward resilience may be identifying with a larger sense of purpose (Erikson, 1968; Damon, Menon, & Bronk, 2003; Hunter & Csikszentmihalyi, 2003). Borrowing from conflict psychology, Punamaki (1996) describes the relationship between ideological commitment and psychological endurance in situations of political violence. "Ideological commitment is psychologically important because people strive to find a meaning for traumatic events and incorporate them into their life experiences" (Punamaki, 1996, p.55). In other words, "making sense of" a marginalized identity and possible negative experiences associated with it (e.g. victimization and stigma) may serve to lessen the effects of those events. Therefore, social connectedness may be psychologically important because it can

provide people with a collective process from which members make sense of a specific group identity (Phelan, 1989). This process can make injustice visible, allowing one to make sense of personal experiences of oppression in a larger context (Wexler, 2006). In this way, ideological commitment and resistance against oppression may help to move one's personal struggles to a collective interpretation.

Although this theoretical framework has been investigated within the context of colonization (Adelson, 2000; Chandler & Lalonde, 1998; Whitbeck, Chen, Hoyt, & Adams, 2004) and war (Barber, 2009; Betancourt & Khan, 2008), its utility for understanding the importance of connection for sexual minority youth has been underinvestigated. Yet, sexual minority youth in the United States live in a world where heterosexuality and gender conformity dominate. The constant reminder of being "other" both perpetuates the invisibility of sexual minority youth and makes for an increasingly unsafe social world (Andersen, 2007). Sexual minority youth, therefore, may negotiate one's identity without access to others who share similar constructions of identity—an isolating experience. For this reason, connection to individuals or a larger social group with shared experiences may be particularly important. This research focuses on the meaning of social connection and its importance as an avenue toward resilience is discussed providing direction for researchers and practitioners choosing to work with sexual minority youth.

Methods

These data are part of a larger study that employed a life story methodology to understand how sexual minority youth define risk and enact resilience. Life stories are considered to be important expressions of one's identity and are shaped by personal, social, and cultural contexts (Charmar, 1999; Denzin, 1989). They tell "who one thinks one is and how one came to be that way" (Titon, 1980, p. 290). The life story allows for people's narratives to include feelings, perceptions, and interpretations of life events. This methodology is particularly useful in research with the most vulnerable or invisible participants as it may reveal hidden aspects of experience (Slim & Thompson, 1993).

Because the interviews relied upon life stories, I did not have a list of questions to ask participants. Instead, I encouraged participants to talk about all aspects of their lives. I wanted to understand both their strengths and challenges and how they talked about feeling both safe and unsafe in the world. To start our discussion, my first question was very general, asking the participant to tell me a little bit about her or himself. This usually led the participants to share their story of coming out, first to themselves, and then to others. If the participant had trouble beginning his or her story with this question, I asked him or her to start by telling me "the story of when you came out—either to yourself or to others." This was still general enough to allow them to construct their stories, but gave the participants a starting point. I did not inquire specifically about how social connection contributes to resilience. Rather it emerged as an important construct for each of the participants. I was acutely aware of my role as researcher and the power dynamic that may be formed. The stories, therefore, were co-constructed and allowed for power to reside with the research participants, an important characteristic of culturally responsive research. This allowed for the production of a richer perspective than either perspective alone (Charmar, 1999).

The study reflects the meaning of social connection as described in 22 interviews with 15 individuals between the ages of 14 and 22 years of age (average age 18 years). Seven of the 15 individuals were interviewed twice and eight were interviewed once for a total of 22 interviews (See Table 1). Participants were recruited through a purposive sampling method. Specifically, I wanted to talk with

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