

Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults

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What's Known on This Subject

To our knowledge, no other study has examined the relationship between family rejection of LGB adolescents with health and mental health problems in emerging adulthood.

What This Study Adds

This study expands our understanding of predictors of negative health outcomes for LGB adolescents and provides new directions for assessing risk and preventing health and mental health problems in LGB adolescents

ABSTRACT

OBJECTIVE. We examined specific family rejecting reactions to sexual orientation and gender expression during adolescence as predictors of current health problems in a sample of lesbian, gay, and bisexual young adults.

METHODS. On the basis of previously collected in-depth interviews, we developed quantitative scales to assess retrospectively in young adults the frequency of parental and caregiver reactions to a lesbian, gay, or bisexual sexual orientation during adolescence. Our survey instrument also included measures of 9 negative health indicators, including mental health, substance abuse, and sexual risk. The survey was administered to a sample of 224 white and Latino self-identified lesbian, gay, and bisexual young adults, aged 21 to 25, recruited through diverse venues and organizations. Participants completed self-report questionnaires by using either computer-assisted or pencil-and-paper surveys.

RESULTS. Higher rates of family rejection were significantly associated with poorer health outcomes. On the basis of odds ratios, lesbian, gay, and bisexual young adults who reported higher levels of family rejection during adolescence were 8.4 times more likely to report having attempted suicide, 5.9 times more likely to report high levels of depression, 3.4 times more likely to use illegal drugs, and 3.4 times more likely to report having engaged in unprotected sexual intercourse compared with peers from families that reported no or low levels of family rejection. Latino men reported the highest number of negative family reactions to their sexual orientation in adolescence.

CONCLUSIONS. This study establishes a clear link between specific parental and caregiver rejecting behaviors and negative health problems in young lesbian, gay, and bisexual adults. Providers who serve this population should assess and help educate families about the impact of rejecting behaviors. Counseling families, providing anticipatory guidance, and referring families for counseling and support can help make a critical difference in helping decrease risk and increasing well-being for lesbian, gay, and bisexual youth. *Pediatrics* 2009;123:346-352

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Keywords

LGB adolescents, risk factors, sexual orientation, gay youth, homosexuality

Abbreviations

LGB—lesbian, gay, and bisexual
 FAR—Family Acceptance Project
 GEM—Center for Epidemiologic Studies Depression Scale
 SID—sexually transmitted disease
 OR—odds ratio

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SINCE STUDIES WERE first published on homosexual youth in the 1970s and 1980s,^{1,2} serious health disparities³⁻⁸ have been documented among lesbian, gay, and bisexual (LGB) adolescents compared with their heterosexual peers. Population-based and community studies have documented higher levels of suicide attempts,⁹⁻ substance use,^{5,40} symptoms of depression and mental health problems,^{12,13} and sexual health risks, including risk for sexually transmitted infections, HIV,^{5,14,15} and adolescent pregnancy.¹ Similarly, population-based studies have reported high levels of negative health outcomes for LGB adults compared with heterosexuals.^{19,22}

Both practitioners and researchers have noted that risks to physical, emotional, and social health for sexual minority adolescents are primarily related to social stigma and negative societal responses,²³⁻²⁶ particularly in schools.^{3,25-29} In addition, several studies have linked minority stress (experiencing and internalizing negative life events and victimization in the social environment) with negative health outcomes in LGB adults, including depressive symptoms, substance use, and suicidal ideation.^{10,31}

Pediatric providers are trained to work closely with families and to recognize that families have "a central and enduring influence" on a child's life.³² Because parents and key caregivers are perceived to play a vital role in an