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Special Considerations for SGM Youth Online

» Mathijs F. G. Lucassen, PhD,
and Ana M. Ugueto, PhD, ABPP

Despite rapid social progress, including the landmark United States Supreme Court ruling on same-sex marriage in 2015, challenges remain for young individuals who are lesbian, gay, bisexual, transgender/trans, or queer (also known as sexual and gender minority or SGM youth). Fortunately, since the start of this century, online environments have revolutionized the lives of young SGM individuals, so even those in the most remote of locations can access discrete and timely supports. While the internet has generated many benefits for SGM communities, it has also created new problems, such as the rise of internet-based homo-, bi- and trans-phobic bullying, online sexual exploitation, as well as worrying conversion tactics.

Given the diversity implicit under the wider SGM umbrella, it is important to briefly define these unique subpopulations and their mental health needs before delving into the impacts of online environments for these young people.

Defining Communities

To identify as lesbian, gay, or bisexual (LGB) is to claim a certain, often politicized, sexual identity label. However, sexual attractions and sexual behaviors are other important dimensions of human sexuality.¹ Depending on the dimension of sexuality assessed, estimates of nonheterosexual prevalence varies considerably, even when estimates are derived from population-based studies.

Assuming questions related to sexuality are included in these large-scale studies, researchers have consistently reported that a substantial proportion of youth identify as being a sexual minority individual. For instance, up to 8% of youth identify as bisexual, and up to 3% of youth identify as lesbian or gay.¹ Meanwhile, although being LGB is related to sexuality, being transgender/trans pertains to one's gender identity. (See *Sidebar for more information.*)

Mental Health Challenges

Robust population-based data have demonstrated SGM youth are at an elevated risk of a range of mental

health problems, including suicide attempts, depression, anxiety, and addiction issues.^{9,10} Unfortunately, there is limited population-based data focused on the mental health of transgender adolescents.

For instance, a systematic literature review and meta-analysis of suicide attempts among SGM young individuals identified only a single study in which the results for transgender adolescents were presented separately, and not combined together with SGM youth.¹¹ Based on the meta-analysis, transgender adolescents were nearly 6 times more likely to attempt suicide when compared to their cisgender peers.¹¹

The increased rates of mental health problems are hypothesized to be caused by minority stress, whereby the mistreatment associated with the high levels of stress these youth encounter is thought to place them at an increased risk for emotional problems.¹² Experiencing this mistreatment also results in internalizing the negativity associated with anti-SGM messages, which can lead to mental health issues.

Online Environments

Opportunities for Affirmation and Community

The internet has initiated a revolution for SGM youth because geographic boundaries are no longer limiting; these young people can now connect online with others like themselves. As such, the internet has exerted a powerful influence, with numerous advantages. For instance, those in rural or more socially hostile environments can obtain support via online groups as well as from charitable organizations that provide free online services 24 hours a day, 7 days a week (Table 1). This is a huge advantage. SGM-specific information on relationships and sexual health is also freely available online.

Bullying, Harassment, and Exploitation Risks

Bullying behaviors and trolling via social media platforms are concerning issues in general and especially for SGM youth. It is worth noting that some of this mistreatment can take the form of horizontal violence in which one SGM youth bullies another SGM youth. Both young indi-

viduals as well as health professionals have previously identified internet safety and security issues being important considerations.¹⁶ Specific examples include the risk of SGM youth being outed against their will on social media and youth being targeted for sexual exploitation online.^{16,17} The United Kingdom-based SGM charity, Stonewall, has recently made recommendations to support the safety of youth online.¹⁸ Selected top tips from this report are summarised in Table 2.

Risks of Online Conversion Efforts

SGM youth in high-income countries are thought to be coming out at younger ages.¹³ Consequently, many will still be living at home and will be dependent on their families when they first come out. Unfortunately, not all families will be supportive, and some will actively attempt to secure services and information—either online or face-to-face—aimed at “converting” or “correcting” the SGM youth. This practice still occurs, despite the disapproval of professional

bodies toward reparative or conversion therapy, including strong opposition from the American Psychiatric Association¹⁴ as well as the American Academy of Child and Adolescent Psychiatry.¹⁵

Mental Health Services

The online context is a valuable milieu in which to deliver psychotherapy at the present time, especially for SGM youth because this population has previously indicated a preference for web-based support for mental health issues.¹⁶ Yet few evidence-informed interventions have been developed for these youth. Two systematic reviews of psychosocial treatments in the peer-reviewed literature found only a single tested online tool—Rainbow SPARX—to support the mental wellbeing of SGM adolescents.¹⁹⁻²¹

Rainbow SPARX, a cognitive behavioral therapy program for adolescent depression, has been specially adapted for SGM youth, but it has not been made available to prospective users outside of a research context. The mainstream version of SPARX has been freely available to all youth in New Zealand since 2014. However, SPARX was less effective for transgender adolescents in comparison with other users who did not

Table 1. Resources for SGM Youth, Families, and Professionals

For awareness, education, and support	<ul style="list-style-type: none"> ■ The Trevor Project www.thetrevorproject.org ■ Human Rights Campaign www.hrc.org ■ National Gay and Lesbian Task Force https://www.thetaskforce.org/ ■ National Center for Transgender Equality www.transequality.org ■ Gay & Lesbian Alliance Against Defamation (GLAAD) https://www.glaad.org/ ■ Gender Spectrum www.genderspectrum.org/ ■ Family Acceptance Project https://familyproject.sfsu.edu/ ■ Parents, Families, Friends, and Allies of Lesbians and Gays (PFLAG) https://pflag.org/ ■ It Gets Better Project https://itgetsbetter.org/
School resources	<ul style="list-style-type: none"> ■ Gay, Lesbian, and Straight Education Network (GLSEN) www.glsen.org ■ Stomp Out Bullying https://www.stompoutbullying.org/lgbtq-bullying ■ Trans Student Educational Resources www.transstudent.org ■ Gender and Sexualities Alliance (GSA) https://gsanetwork.org/what-is-a-gsa/
Educational resources	<ul style="list-style-type: none"> ■ The Gender Wheel www.genderwheel.com/ ■ The Gender Book www.thegenderbook.com ■ The Gender Unicorn https://transstudent.org/gender/
Legal resources	<ul style="list-style-type: none"> ■ Lambda Legal www.lambdalegal.org ■ Transgender Law Center www.transgenderlawcenter.org

Table 2. Tips Communicating With Young Patients

Top tips*	What this entails
Use the internet for all the right reasons	The internet can be used for a range of positive purposes, from raising money for charity to sharing posts from other SGM youth doing great things, or simply for sending a friend an amusing photo to cheer them up when they are down.
Report online bullying and mistreatment	If someone is treating an SGM young individual unkindly online and/or not respecting them for who they are, encourage the young individual to report this behavior.
Ask if it is OK to do	Encourage the youth to reflect upon how their own online actions might make others feel. Obtain permission before posting a picture with others, or before adding others into group chats.
It is important to keep personal information safe	Personal information includes SGM status, full names, date of birth, addresses, and passwords.
Think before posting	Consider the possible consequences of online actions, because a posting can be seen by a lot of individuals. Sometimes, for reasons of self-preservation, an SGM young individual may be better off not commenting on certain posts in unsupportive forums.
Think critically	Not all information on the internet is trustworthy or helpful. Youth should use their critical thinking skills, as well as the support of those around them, to figure out what is reliable, helpful, and good for their mental health.
Not everyone is who they say they are online	Youth should seek advice from a trusted adult if anyone (only known to the youth online) makes them feel uncomfortable, or asks to meet up or share personal information, including images.
Talking helps	Talking to a trusted individual (especially if something happens online that makes the youth feel worried, upset, or confused) is important.

*Tips derived from the *Staying Safe Online* report¹⁶

identify as transgender.²² The results suggest targeted efforts are needed to address the mental health needs of SGM youth.

Concluding Thoughts

The internet is both ubiquitous and influential. SGM youth have grown up with modern technologies in a way that their caregivers and clinicians have not. As such, it is important that clinicians defer to their expertise as digital natives and remain open-minded about online environments as they proffer many benefits. Clinicians also need to be nonjudgmental and aware of the considerable challenges facing SGM youth online, so that SGM youth will discuss their concerns with their clinicians as these arise. In addition, treatment providers should encourage their SGM youth patients to maximize the benefits from their online experiences while managing the potential risks or challenges. We anticipate more work will be undertaken in the fields of cognitive-behavioral therapy and e-therapies for SGM youths.

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What Constitutes an SGM Community?

» Mathijs F. G. Lucassen, PhD; and Ana M. Ugueto, PhD, ABPP

In the academic literature the terminology “sexual and gender minority” or SGM is commonplace. That is because SGM helps to succinctly encapsulate a diverse range of people, who often identify with multiple SGM identities. However, it is rare for young people to refer to themselves as SGM, instead (as summarized below) LGBTQ+ terms are more likely to be used.

Typically, when an individual's sex assigned at birth differs from their gender identity (ie, how they know themselves to be), they are categorized as transgender or gender diverse.² Thus, an individual assigned male at birth who identifies as female is frequently described as a *trans girl* or *trans woman* (or simply just as a *girl* or *woman*).² Individuals who identify as non-binary (ie, not exclusively masculine or feminine identified) are also gender diverse, as they fit outside the male/female gender binary. Conversely, a young individual whose sex assigned at birth directly aligns with their gender identity is usually described as cisgender. Based on population-based data and other study estimates, approximately 1% of young individuals are transgender.^{3,4}

It is important to note that LGBTQ+-related labels and terms continue to evolve. For instance, there has been some debate about whether or not the more established sexual identity labels (ie, gay, lesbian, and bisexual) have now lost their meaning and relevance resulting in young people today being post-gay.⁵ These old labels still appear to be of value for the majority of sexual minority youth,⁵ alongside the meanings ascribed to more contemporary terms such as “pansexual” (ie, attraction regardless of assigned sex or gender identity), “queer” (a reclaimed word), or developmentally relevant terms such as “questioning.”

Other unique subpopulations, which at times are grouped under the “plus” in LGBTQ+, include asexual and intersex individuals. Asexual individuals are those who lack sexual attractions to others. In the case of adolescents, however, it is important to consider developmental factors. For example, younger teenagers may report being “neither sex attracted.” This does not necessarily mean that they are asexual per se, but rather with age many are likely to start experiencing sexual attractions.⁶ Intersex individuals are born with biological or physical sex characteristics (eg, sexual anatomy and hormonal variations) that are more diverse than those stereotypically linked to male and female bodies.⁷ Consequently, they are diverse in terms of their sex.

LGBTQ+ youth are also diverse in terms of other important demographic features, such as being from a racial, ethnic, or religious minority group, having a disability, having an overlapping identity (like being LGB as well as transgender), or any combination of these features.⁸ Unfortunately, there is still stigma associated with being anything other than exclusively heterosexual and cisgender.⁸ As a result, LGBTQ+ youth often remain hidden (what is known as “in the closet”) and subsequently can be hard to reach.

Language does matter, and although “sexual and gender minority” terminology is useful, particularly in the academic literature, it tends to be “technical jargon” that is not in common usage. When working with SGM youth, it is therefore important to pay attention to the labels and their associated descriptions, as these are used by the young person. This also extends to using the patient's correct pronouns (ie, she/her, he/him or they/them), as indicated by the young person. □

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