

ASSESSING ROMANTIC ATTRACTION IN ADOLESCENTS ACROSS EUROPE: Health correlates and practical considerations

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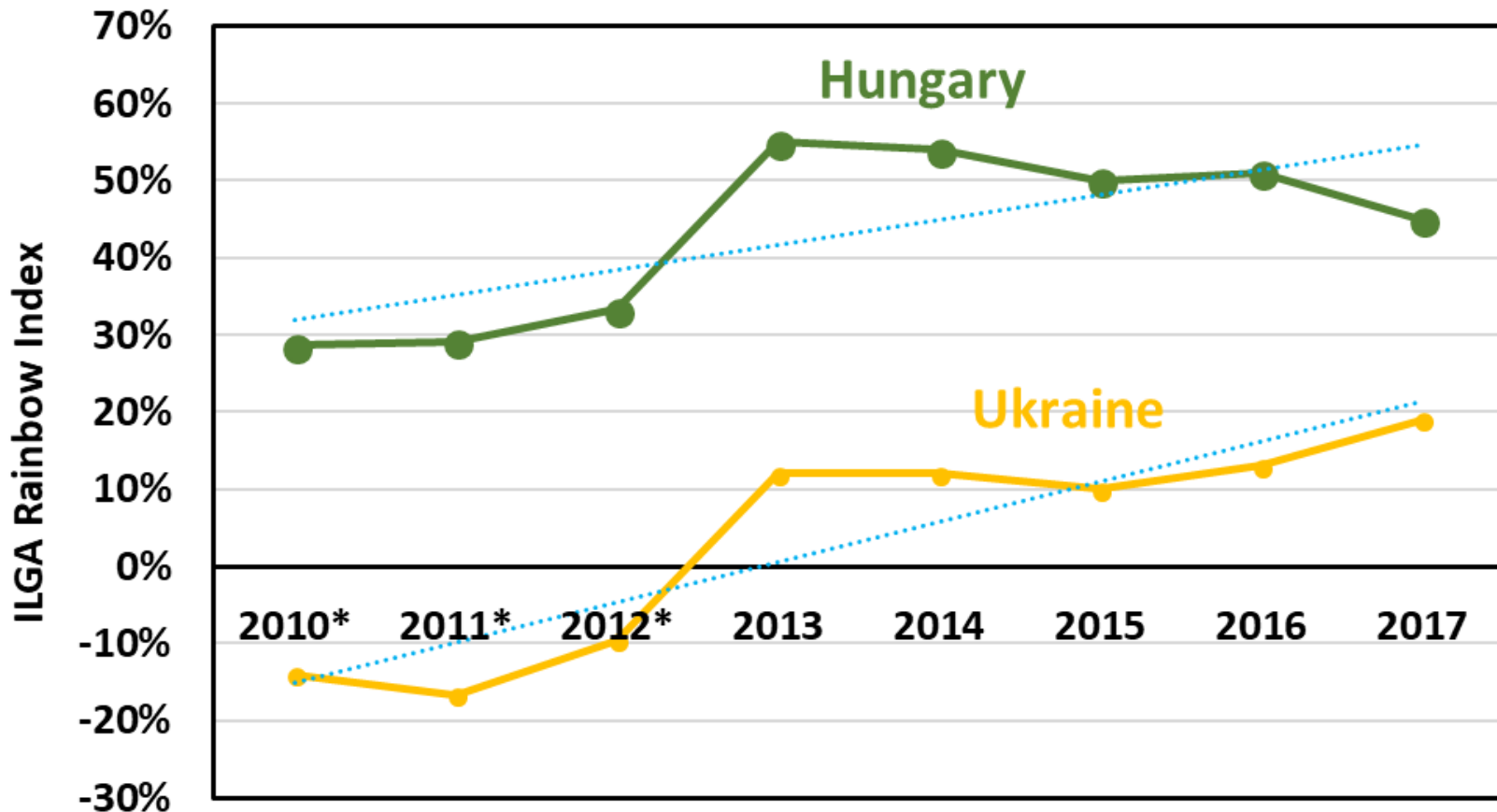
Outline

- Growing acceptance towards Gender and Sexual Minority (GSM) individuals ↔ stagnating or worsening health inequalities: **The LGBT+ Health Paradox**
- **Minority stress** in GSM adolescents
- The Health Behaviour in School-aged Children (**HBSC**) study
- Assessing sexual health and **romantic attraction in HBSC**
- **Love and dating patterns** in the international study
- Self-esteem, depressive mood, suicidality, psychosomatic symptoms, and romantic attraction in **Hungarian adolescents** aged 13–17
- Positive approach and practical **suggestions**

**LGBTQQIP2SAA..... (...) = LGBT+
Gender and Sexual Minorities**

Changes in the ILGA Score in Ukraine and Hungary, 2010–2017

www.ilga-europe.org



LGBT+ Health inequalities in adulthood

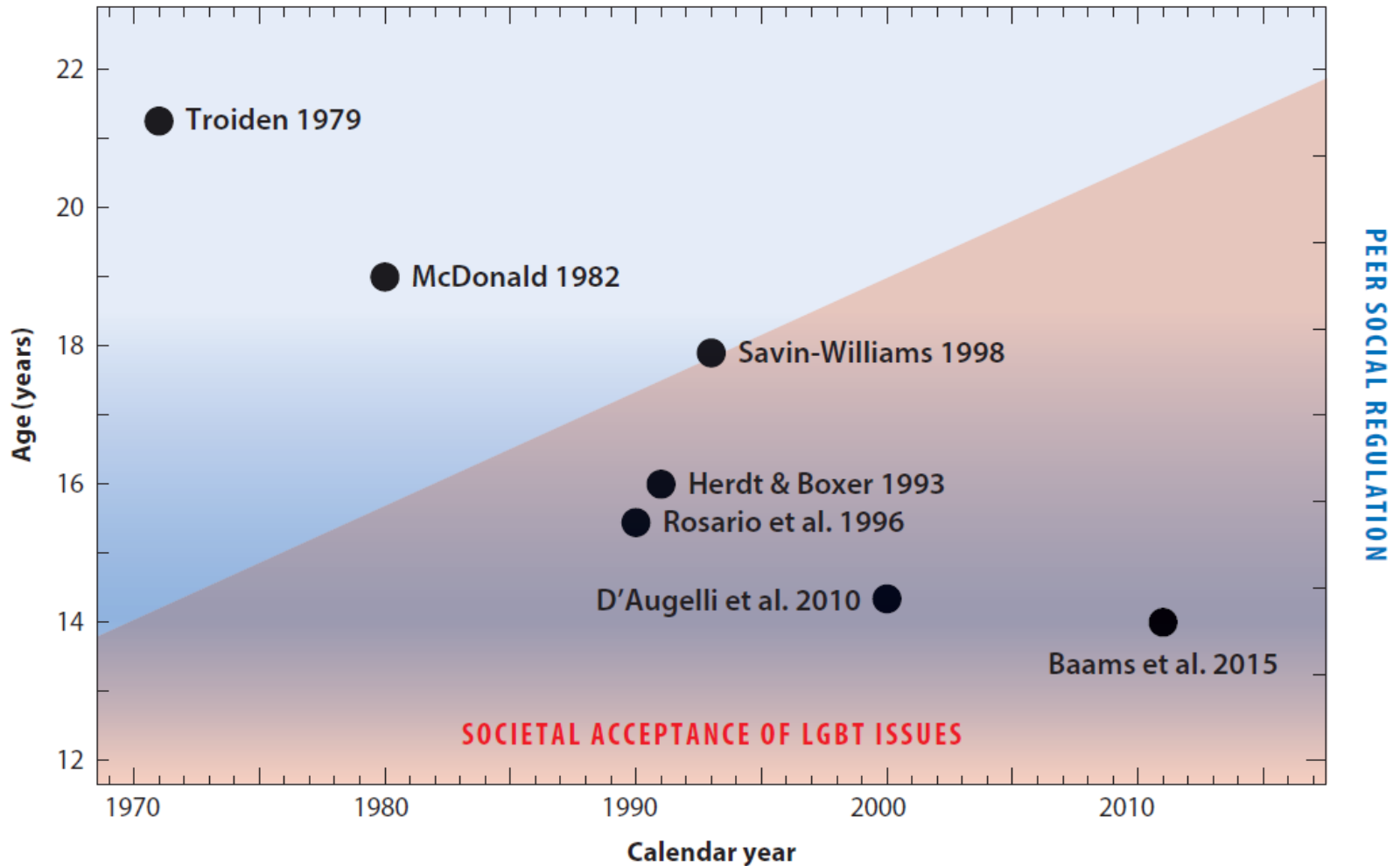
- **Depression and mood disorders** (Bostwick et al. 2010, Cochran et al. 2007)
- **PTSD** (Hatzenbuehler et al. 2009)
- **Alcohol consumption and abuse** (Burgard et al. 2005)
- **Suicidal ideation, attempts and suicide** (Cochran et al. 2003; Gilman et al. 2002)
- **Psychosomatic and physical diseases** (Cochran et al. 2007)
- **Drug abuse psychiatric comorbidity, ...**

The problems usually appear first in adolescence
(Fish & Paisley, 2015; Needham, 2012; Ueno, 2010)

LGBT+ health inequalities in adolescence

- Emotional distress, anxiety and mood disorders, self-harm, health compromising behaviours (Eskin et al. 2005; Fergusson et al. 2005; Fleming et al. 2007; Marshal et al. 2011)
- **Suicidality** among LGBT+ adolescents is threefold compared to their heterosexual peers (Marshal et al. 2011)
- Exposition of **bisexual / both gender attracted youths** is even higher than those of gay and lesbian / same gender attracted
- **Multiple minority status** (GSM and ethnic, religious, geographical etc.) – intersectionality

Coming out and adolescent social regulation intersect with each other (Russell & Fish, 2016)



Minority stress

(Meyer, 1995, 2003)

Distal



- **External stressors**

Prejudice, discrimination, direct aggression (bullying) and victimisation

- **Anticipating exclusion, harassment and aggression**

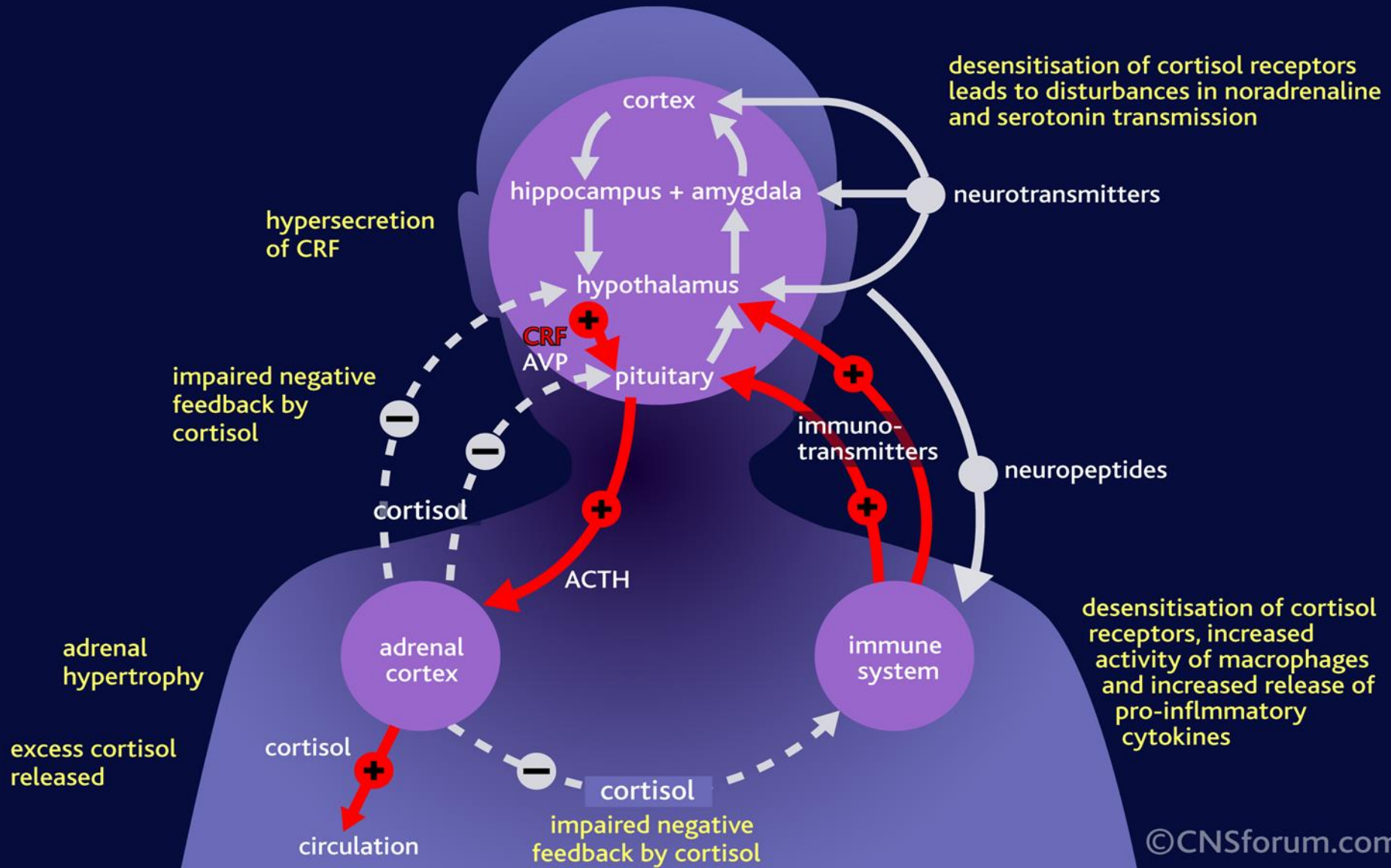
Constant alertness

- **Embracing negative societal/peer attitudes**

Internalised homophobia

Proximal

Stigma, exclusion, bullying – Stress – Psychosomatic symptoms – Chronic disease



Health Behaviour in School-aged Children, (HBSC), a WHO collaborative cross-cultural study

- **Healthy and risky behaviours** and their **psychosocial background** in 11–15-year old school children
- In 2018: **48 countries**
- **4 year data collection cycles**: last completed data collection in 2013-2014
- Anonymous, **paper-pencil/online** survey
- **Nationally representative samples** – a minimum of 4,650 pupils per country

<http://www.hbsc.org/publications>

<http://www.nuigalway.ie/hbsc>



hbsc
HEALTH BEHAVIOUR IN
SCHOOL-AGED CHILDREN

Romantic attraction in HBSC

Have you ever been in love with someone?

- Yes, with a girl or girls
- Yes, with a boy or boys
- Yes, with girls and boys
- No, never

Have you ever been going out (dating) with someone?

- Yes, a girl or girls
- Yes, a boy or boys
- Yes, girls and boys
- No, never

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Love and Dating Patterns for Same- and Both-Gender Attracted Adolescents Across Europe

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International findings

Distribution of love and dating patterns in adolescents from eight European countries

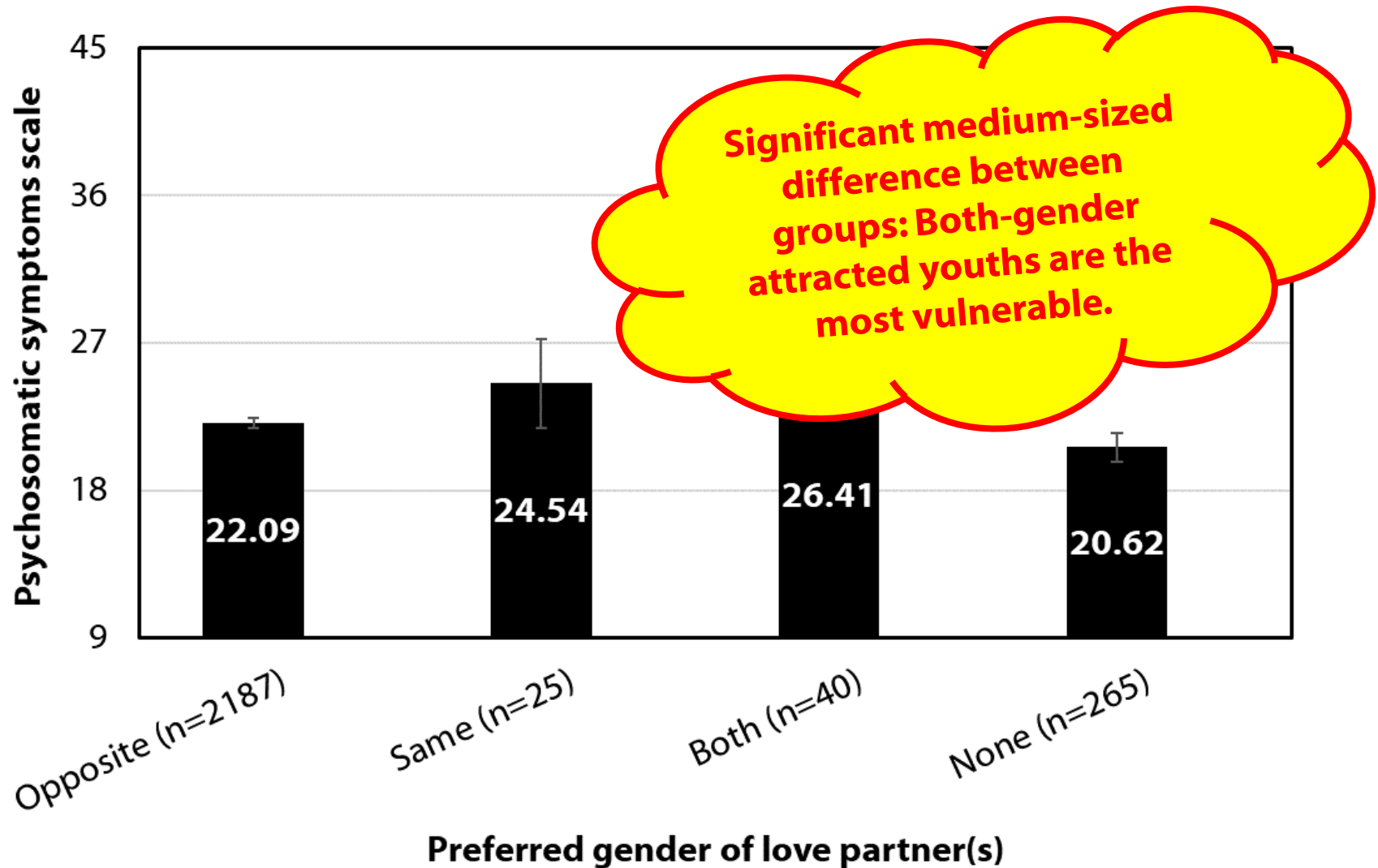
	Love	Dating
BOYS	<i>N</i> = 7241	<i>N</i> = 4904
Attracted to girls	85.6%	71.1%
Attracted to boys	1.6%	1.4%
Attracted to girls and boys	1.2%	1.2%
Never / None	11.6%	26.2%
GIRLS	<i>N</i> = 7246	<i>N</i> = 4938
Attracted to boys	80.7%	67.8%
Attracted to girls	1.8%	1.7%
Attracted to boys and girls	2.7%	1.8%
Never / None	14.7%	28.7%

Belgium (French), Bulgaria, England, France, FYR Macedonia*, Hungary, Iceland*, and Switzerland (*Just administered the item on love)

Hungarian findings

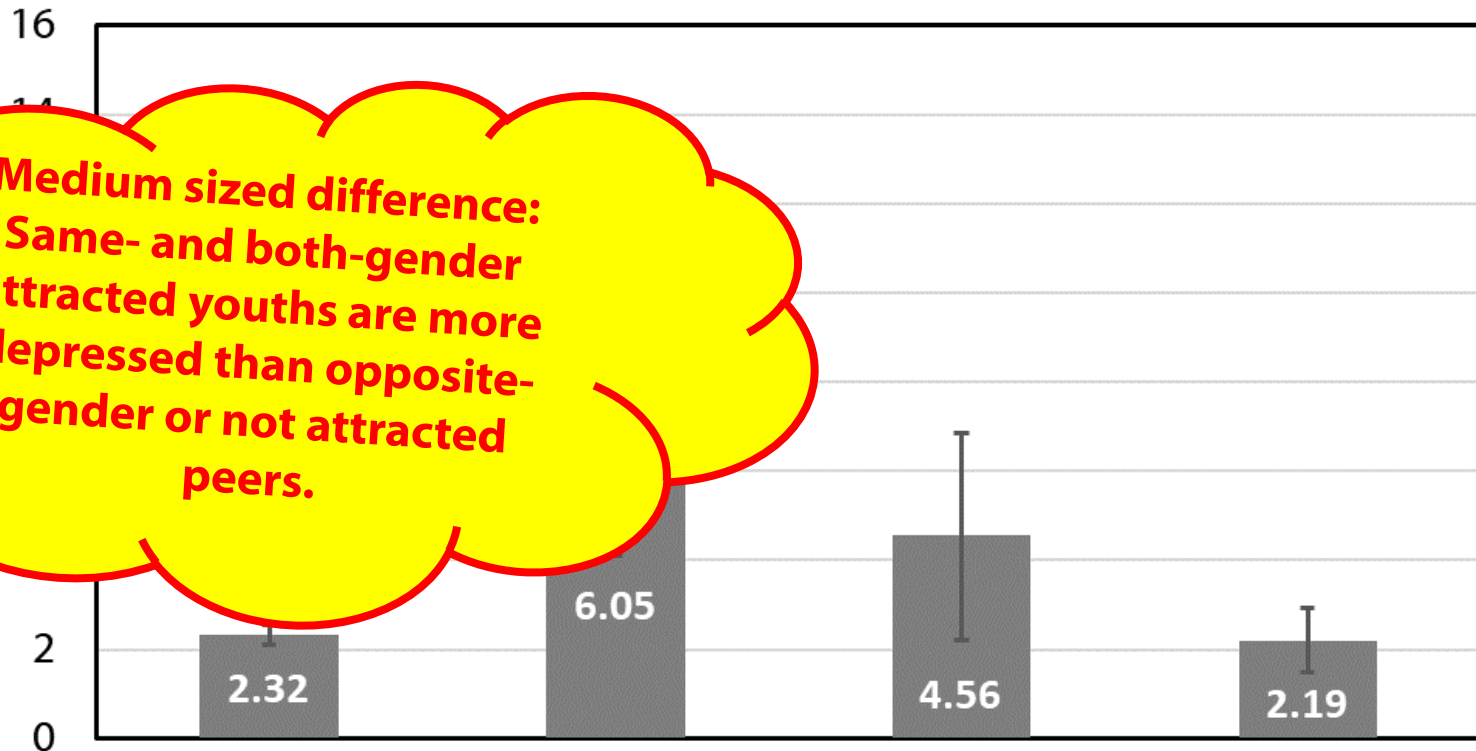
Psychosomatic symptoms and love ($N = 2517$)

$F(\text{bootstrap}) = 8.510; p < .001; \eta^2 = .010$.
Error bars indicate 95% confidence intervals.



Depressive mood and love ($N = 2487$)

$F(\text{bootstrap}) = 26.48; p < .001; \eta^2 = .031$.
Error bars indicate 95% confidence intervals.



Medium sized difference:
Same- and both-gender
attracted youths are more
depressed than opposite-
gender or not attracted
peers.

Opposite (n = 2161)

Same (n = 21)

Both (n = 43)

None (n = 262)

Preferred gender of love partner(s)

Suicidal ideation and love (N= 2580)

χ^2 (bootstrap) = 109.52; $p < .001$, Cramer's $V = .146$ [.092-.230]

Suicidal thought	Opposite (n =2242), 86.9%	Same (n=23), 0.7%	Both (n=43), 1.7%	None (n=272), 10.5%
Have not thought on killing myself	1610 71.8%	9 39.1%	16	21 3%
Thought on killing myself but I wouldn't do it	577 25.7%			
I would kill myself right now				7%

Medium sized difference in suicidal ideation: same- and both-gender attracted youths are the most vulnerable, while not attracted are at the lowest risk.

Ethical note

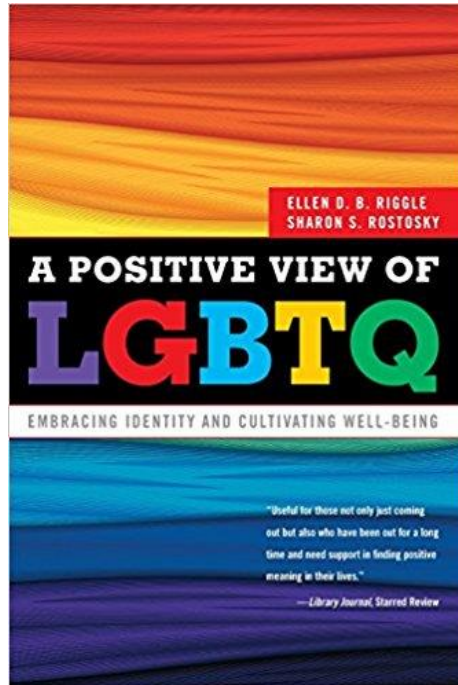
- The Hungarian HBSC 2014 study was approved by the **National Healthcare Council's Research Ethical Committee**. A key point of the ethical review was the examination of **suicidal thoughts and intent**.
- Although we could not provide direct help to vulnerable young people, **an email address was given** at the end of the questionnaire, and youths were encouraged to share any thoughts or requests with the researchers who maintained links with **psychiatrists** and **clinical psychologists**.

How to help GSM young people

- **Non-judgmental approach, training and learning**
- **LGBT+ sensitivity training**
- **LGBT+ inclusive sexual education**, anti-bullying programmes
- LGBT+ sensitisation and trainings for healthcare and psycho-social care services
- **Introducing and monitoring** Gay-Straight Ally programmes.
NB! Introducing GSA programmes in Canada reduced the risk of suicidality in heterosexual boys too (Saewyc et al. 2016)
- **Personal examples**
- As researchers: **trans and non-binary gender identities**, emphasis on **both-gender attracted/bisexual** youths, and **interszekcionalnosc** (ethnicity, religion, race, immigrant status etc).

A positive view of LGBT

(Riggle & Rostosky, 2013)



- Authenticity
- Self-knowledge and introspection
- Flexible gender roles
- Close emotional bonds
- Unique view of life, and compassion to marginalised people
- Model role, mentoring, activism for social justice
- Belonging to the LGBT+ community
- **Coming out growth:** equivalent with post-traumatic growth

Summary

- **Despite growing societal tolerance**
- **LGBT+ means higher risk for physical, mental and psychosomatic health**
- **One reason might be chronic stress and alterations in the HPA axis in adolescence**
- **Evidence from HBSC: same- and both-gender attracted youths are more vulnerable to psychosomatic symptoms, depressive mood and suicidal ideation (but not having lower self-esteem) than their opposite-gender or not attracted peers**
- **Inclusivity and antibullying programmes in education, health and psychosocial care services**
- **Positive aspects of LGBT+**

A large rainbow flag is shown waving against a clear blue sky. The flag's colors are vibrant and the fabric has a visible texture. The flag is attached to a pole on the left side of the frame.

Thank you for your attention

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