UNIVERSITY OF OKLAHOMA GRADUATE COLLEGE

VOCES SILENCIADAS, MENTES RESILIENTES: THE PSYCHOLOGICAL DISTRESS OF LIFETIME ADVERSITIES ON LATINE LGBQ+ LIVES

A THESIS

SUBMITTED TO THE GRADUATE FACULTY

in partial fulfillment of the requirements for the

Degree of

MASTER OF ARTS

BY

Isaac Romero

Norman, Oklahoma

2025

VOCES SILENCIADAS, MENTES RESILIENTES: THE PSYCHOLOGICAL DISTRESS OF LIFETIME ADVERSITIES ON LATINE LGBQ+ LIVES

A THESIS APPROVED FOR THE DEPARTMENT OF SOCIOLOGY

BY THE COMMITTEE CONSISTING OF

Dr. Meredith Worthen, Chair

Dr. Stephanie Burge

Dr. Ian Carrillo

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Abstract

People of Latin descent residing in the United States may face substantial adversities given stressors of socio, economic, and cultural barriers leading to exposures of discrimination. Additionally, LGBTQ+ people are susceptible to various forms of adversities and violent victimization both during adolescent years and later as adults. While existing research has examined these two groups separately in relation to how such adversities affect their mental health well-being, little research has evaluated the level at which psychological distress is associated to experienced adversities amongst Latine LGBQ+ individuals. Thus, it is imperative to investigate victimization and negative health outcomes among Latine LGBQ+ individuals. In this study, I examine the possible effects of adverse experiences through the minority stress model. Specifically, I use data from the 2016 Generations study (N= 1,384) to examine how experienced lifetime adversities affect the mental health well-being of Latine LGBQ+ respondents face. Findings shows that Latine LGBQ+ respondents are more likely to report higher levels of psychological distress when they report having experienced childhood sexual abuse and adult robbery. In addition, Latine LGBQ+ reported lower levels of psychological distress when they report having experienced childhood physical abuse and adult physical assault. These analyses provide important insight to the social costs and cultural influence that exist for Latine individuals amongst a society and a racialized system that is continuously placing executive orders threatening their livelihood.

Keywords: race/ethnicity; LGBQ+; Latine; mental health; adversities

Introduction

Latine individuals of various backgrounds are disproportionately more at risk for childhood and lifetime adversities (Rojas-Flores 2017). These adversities have many harmful outcomes that can have extreme ramifications toward the mental health well-being of Latine individuals and their families (Merrick et al. 2017; Ramos et al. 2017). Such lifetime adversities are associated with high levels of depression that hinder development (Ahn et al. 2024; Daches et al., 2019). Additionally, various studies suggest that the exposure to adverse experiences, regardless of time of occurrence, negatively affects family functions and relations, which is a key cultural element for Latine families (Ibañez et al. 2015; Kim et al. 2018).

In recent literature not specifically focused on Latine people's experiences, there has been increased focus on LGBTQ+ childhood abuse and assault, with an emphasis on establishing rates of occurrence and mental health outcomes. Research in this area has demonstrated that LGBTQ+ people are at greater susceptibility to health risks compared to their heterosexual counterparts (Hafeez et al. 2017; Lampe et al. 2024; Dawson, Long, & Frederikson 2023). Additional research suggests that LGBTQ+ people endure higher rates of serious mental health disorders (Dawson et al. 2023) and adult victimization (Heidt, Marx, & Gold 2005). These higher rates of risk may relate to the lack of effective and obtainable resources that address traumatic experiences and victimization among LGBTQ+ people. Furthermore, LGBTQ+ women report higher rates of childhood abuse and assaults compared to LGBTQ+ men (Balsam et al. 2010). However, little research has centered the experiences of LGBTQ+ Latine people in such studies.

While researchers have documented the difficulties that LGBTQ+ people endure, there is a significant gap in the literature when it comes to LGBTQ+ Latine people's lifetime adversities. This is notable because Latine people have unique experiences that may differ from other groups. Specifically, LGBTQ+ Latine people face unique adversities where they are vulnerable to negative experiences both from societal discrimination and through interpersonal familial relations (Vargas et al. 2022). In addition, research shows the need to explore how such adversities affect the mental health well-being of LGBTQ+ Latine people (Abreu et al. 2024). Thus, the current study will address this by using specific measurements to examine the relationship between LGBTQ+ Latine people's lifetime adversities and psychological distress. Further, this study will determine whether familial support moderates this relationship, allowing for a better understanding of the potential impact familial support has on LGBTQ+ Latine people's psychological distress after enduring adversities. In doing so, this study provides a multi-dimensional approach to investigate the effects childhood and adult adversities may have toward the mental health of this ethnically marginalized community.

Literature Review

Population Characteristics of Latino/Hispanic/People of Latin American Descent

As recorded by the U.S. Census Bureau, the Latino/Hispanic (the term used by the U.S. Census Bureau) population has reached an all-time high of nearly 65.2 million as of 2023, compared to the 35.7 million recorded in 2000, indicating a growth within this population due to a multitude of factors ranging from emigration and migration displacements. However, analyses conducted by Noe-Bustamante and colleagues (2020) indicated a decrease in growth by an average of 1.9% per year (2015-2019), down nearly 3% from years prior (2000-2005). Even so,

the Latino/Hispanic population continues to outpace other groups despite seeing a decrease in growth in recent years, surpassing the White and Black population with both seeing only about a 1% growth per year (Noe-Bustamente et al. 2020). As the Latino/Hispanic population steadily continues to grow, the number of LGBTQ+ individuals within this population has increased in recent decades. For example, 2021 research conducted by The Williams Institute estimates that over two million adults in the U.S. self-identify as both Latinx (the term used by The Williams Institute) and LGBT with just over half (52%) identifying as women (Wilson et al. 2021). In a 2021 Gallup poll study, 11% of Latino (the term used by Gallup) adults identified as members of the LGBTQ+ community, a 6% increase from 2012 in which they represented twice the amount compared to White and Black LGBTQ+ members (Galván 2022). These growing numbers point to the need to investigate this group's unique experiences in important ways.

Identities of People of Latin American Descent

People of Latin American descent have a vast array of cultural uniqueness and as a result, they have various ways to identify themselves that are embedded within their cultural identities. While most identify themselves as "Latino/a," others closely align themselves with "Hispanic" (Martínez & Gonzalez 2020; Schut 2022). However, in late 2018, the Merriam-Webster dictionary added the controversial term "Latinx." Because the Spanish language is highly gender specific and aligns closely to pan-ethnic labels, the "Latinx" term emerged to combat these structures as an alternative means to include LGBTQ-inclusive language and a gender-neutral way to describe Latin people of this population (Río-González 2021). However, the "Latinx" term has been met with opposition within the Latine LGBTQ+ community. "Latinx" has been rejected due to the tacked-on letter "x" being viewed as an imposition (at best) and bastardization (at worst) on indigenous language during the Spanish Conquest (Ramos et al. 2023; Río-

González 2021). In other words, though designed to be neutral (akin to the use of "X" as the neutral gender marker on the U.S. passport), the use of "x" in "Latinx" does not reflect awareness of the Spanish language and instead, conveys a misunderstanding altogether of Spanish culture. Indeed, Neo-Bustamante et al. (2020) show that only 23% of adults residing in the United States have heard of the term "Latinx" and only 3% uses the term, with younger generations and those with higher education being more likely to use this term, 7% and 5% respectively. As an alternative to "Latinx," many LGBTQ+ native Spanish speakers and feminist anti-sexist language reformist prefer the term "Latine" (which replaces the gendered "a" and "o" endings with a gender-neutral Spanish letter "e") to include inclusivity and dissolve linguistic sexism (Papadopoulos 2022) . Thus, the preferred gender-neutral term "Latine" is utilized in the current project.

Lifetime Adversities: Adverse Childhood Experiences (ACEs) and Adult Adversities

ACEs comprise the psychological and physical abuse a child might experience during their development process, which may include sexual abuse, neglect, and household dysfunctions of domestic violence and parental incarceration. A child who is exposed to such toxic stress may experience harm to their neurophysiological regulation state, which may leave the child vulnerable to serious mental health issues both as a child and later in their adulthood (McLean 2016; Nelson et al. 2020). ACEs can cause stress reactions for children such as feelings of intense fear, terror, and helplessness when activated repeatedly through prolonged periods of time (Lee & Chen 2017). Negative outcomes of ACEs include some of the most extreme health issues: suicide, substance abuse, and depression (Felitti et al. 1998). Such hardships can prevent children who have experienced adversities from further developing in various contexts of

emotional development, behavioral development, and education achievements (Nelson et al. 2020; Webster 2022).

LGBTQ+ Youth Adversities

Various studies have explored the prevalence of ACEs among LGBTQ+ youths and have consistently found that stressful childhood experiences (e.g., childhood sexual abuse, neglect, and physical abuse) were higher in prevalence in comparison to their cis-heterosexual counterparts (Craig et al. 2020; Dosanjh et al. 2023; Feil et al. 2023; McCabe et al. 2020; Schnarrs et al. 2019). While much of the research regarding LGBTQ+ youth has primarily focused on LGBTQ+ victimization and bullying within school settings (Moyano & Sánchez-Fuentes 2020), exposure to adversities within family contexts are also prevalent for this youth population, though understudied (Clements-Nolle et al. 2018). For example, Cook-Daniels and Munson (2019) state that LGBTQ+ youth experience higher rates of emotional abuse and exposure to family domestic violence compared to non-LGBTQ+ youth. In general, adverse experiences negatively impact self-esteem and increase the feelings of depression amongst LGBTQ+ youth (Almeida et al. 2009). Additionally, emerging findings suggest the importance of a need for continued work to better understand ACEs' impact on mental health outcomes among the LGBTQ+ population. Extant research in this area shows that LGBTQ+ youth are at greater risk of experiencing mental and behavioral distress of depression, suicidality, and substance abuse due to both their sexual identity and any potential adverse experiences (Russel & Fish 2016), which is why it is important to consider ACEs and the LGBTQ+ population through an intersectional perspective.

In recent years, published work has explored the issues related to childhood sexual abuse (CSA) and the abuse of LGBTQ+ children. Research in this area has demonstrated that LGB people are more likely to experience sexual abuse compared to their cisgender heterosexual counter parts (Nath et al. 2021). In addition, LGB and gender non-conforming youths exhibit higher rates of depression and other extreme forms of mental health disorders (Russel & Fish 2016). These higher rates of mental health risks may be indicative of multiple factors, including lack of resources addressing sexual victimization among LGBTQ+ people and lack of familial support in navigating sexual victimization (Williams et al. 2021). Studies that focus on rates of sexual victimization have shown that LGB youth experience rates as high as 76% (Rothman, Exner, & Baughman 2011). In a study conducted by Friedman et al. (2011), male and female sexual minority individuals were 4.9 and 1.5 times more likely to experience childhood sexual abuse as compared to their heterosexual counterparts respectively.

LGBTQ+ Adult Adversities

In 2016, the Bureau of Justice Statistics' (BJS) National Crime Victimization Survey (NCVS) added questions to include diversity in the sexual identity of respondents. Analyses from Flores and colleagues (2020) using NCVS LGBTQ+ victimization have indicated the odds of experiencing violent forms of victimization (physical and/or sexual assaults) were higher for sexual and gender minority (SGM) respondents compared to their non-SGMs. While emerging studies have begun to examine racial/ethnic minorities' and SGM individuals' victimization experiences (Blayney et al. 2023), other existing studies have examined daily discrimination rates amongst LGBTQ+ people of color. Using the KFF's Racism, Discrimination, and Health Survey (2023), Montero and colleagues (2024) analysis found that 51% of Black LGBT adults and 44% of Hispanic LGBT adults report experiencing forms of discrimination in their daily

lives in the past year due to their racial/ethnic identity as compared to their non-LGBT racial/ethnic counterparts, 40% and 28% respectively. Similarly, the 2022 nationally representative survey of LGBTQI+ adults in the U.S. conducted by the Center of American Progress found that 58% of their LGBTQI+ people of color sample reported experiencing forms of discrimination on the basis of their racial and ethnic identity. However, additional studies are needed to further explore the complexities of victimization experiences (e.g., physical assault cases, sexual assault/harassment cases, and theft cases) and other adverse experiences amongst LGBTQ+ racial/ethnic minority groups.

Latine Lifetime Adversities

It is commonly known that racial and ethnic minorities are more susceptible to lifetime adversities due to stigma, prejudice, and discrimination in the U.S. The Latine population is one of the minority groups vulnerable to unique types of adversities due to personal and familial experiences, and this becomes prevalent during childhood. Research suggests that Latine children and their parents may be exposed to more adversities than White children (Slopen et al. 2016; Zarei et al. 2022). On average, Latine households experience higher rates of poverty, discrimination, and parental incarceration compared to non-Latine White families (Cabrera et al. 2022). Furthermore, LGBTQ+ Latine people experience various forms of discrimination within the U.S. Firstly, acts of discrimination amongst this population tend to be in part based on their sexual/gender identity (i.e., homonegativity and heterosexism). Additionally, they are vulnerable to experience acts of racism and discrimination due to their Latine identity, as this becomes a rampant part of America's political discourse (Canizales & Vallejo 2021). Moreover, LGBTQ+ Latine individuals encounter discriminatory experiences based on the multiplicative effects

associated with having multiple marginalized identities within U.S. society (Vargas et al. 2022), which in turn have added risks of experiencing discriminatory acts of violence.

LGBTQ+ Latine Youth Adversities

While the original conceptualization of ACEs has primarily been used within the context of homogenous non-Latine White samples, recent studies have seen its application among other racial and ethnic minority groups (Lam-Hine et al. 2023; Stinson et al. 2021). However, less research has focused on its application toward Latine youth, thus hardly any known literature revolves around the ACEs experiences of the Latine LGBTQ+ youth population. Given the link between an individual's own childhood experiences with adversity and the transmission of trauma within this specific group, it is particularly important to understand the prevalence of ACEs and their correlates among Latine LGBTQ+ youth. While there has been substantial evidence that Latine children may be exposed to more adversities of financial hardships and discrimination than White children (Zarei et al. 2022), and LGBTQ+ children additionally face adversities of physical and sexual abuse (Craig et al. 2020; Dosanjh et al. 2023), it is necessary to intersectionally examine the unique adversities that are experienced amongst LGBTQ+ Latine youth and how they affect their mental health and family functioning.

Latine LGBTQ+ Individuals and Lifetime Adversities

Research suggests that LGBTQ+ racial and ethnic minority people are at greater risk of experiencing physical violence than their heterosexual and cisgender White counterparts (Dosanjh et al. 2023; Lam-Hine et al. 2023; Stinson et al. 2021). While there is a plethora of research examining the prevalence rates of such violent victimization amongst this population, these rates vary considerably across studies (Peitzmeier et al. 2020; Wirtz et al. 2020). Estimates

have suggested that lifetime prevalence rates of violent assaults range from 30% to 50% (Chen et al. 2020). Additionally, prevalence in experiencing violent assaults goes up to 60% amongst LGBTQ+ college individuals (Kammer-Kerwick et al. 2019). However, few studies have examined the acts of violence toward Latine LGBTQ+ individuals. Literature that has examined such adversities amongst this population has either: (1) only examined violence and physical assault within intimate partner violence (Huster et al. 2025), or (2) acts of violence experienced within the context of the immigration process (Jolie et al. 2021; Minero et al. 2022). These limitations are further explored in the current study with the examination of how such adversities and acts of violence experienced amongst LGBTQ+ Latine people affect their mental health and well-being.

LGBTQ+ Latine Individuals' Mental Health and Well-Being

Recent developments in literature involving the mental health and well-being of Latine LGBTQ+ individuals have suggested this population is at higher risk for severe mental health disorders compared to their heterosexual counterparts, specifically regarding depression, anxiety, and substance use disorders (Gmelin et al. 2022; Meyer 2003). For many Latine LGBTQ+ people, issues regarding mental health and well-being begin in adolescence and young adulthood and are embedded in experiences with social stigma, discrimination, and other ACEs (Kirikbride et al. 2024). While emerging literature has begun implementing intersectional approaches, few studies have utilized in-depth frameworks to understand Latine LGBTQ+ individuals interconnected social identities as they are linked to oppression and discrimination.

Research regarding the health of Latine LGBTQ+ people in the U.S. has provided insight into the numerous challenging experiences they endure as well as how they influence this

population's health and well-being. LGBTQ+ Latine adults report high levels of perceived discrimination, racism, and homophobia (Diaz et al. 2001; Paul et al. 2014; Sun et al. 2016). Additionally, literature has identified mental health disparities among the Latine LGBTQ+ population, with this population reporting higher rates of poor mental health outcomes compared to their heterosexual counterparts (Martinez et al. 2017). Additional work finds that Latine sexual minorities report higher rates of suicide ideation and depressive symptoms in comparison to White and Black LGB people (Meyer et al. 2008; O'Donnell et al. 2011). Nationally representative studies have also indicated that LGB Latines have a higher prevalence of poor mental health outcomes compared to their heterosexual counterparts (Martinez et al. 2017).

LGBTQ+ and Latine Adversities: Minority Stress and Intersectionality

The minority stress model provides a framework to understand the experiences of minority-related stigma and discrimination that affects mental and physical health (Frost, Lehavot, & Meyer 2015; Meyer 2003). The model specifically highlights the chronic stress experienced by minority groups and the societal need to address these stressors to improve health outcomes (Meyer 2003). While the minority stress model has been influential in directing research in gender and sexual minority health, few studies have fully examined the impact of the minority stressors of people living at the intersection of multiple marginalized identities. Specifically, the minority stress model predominately focuses on a single categorical social identity and often does not account for the intersectional systems of oppression based on their identity features (Para & Hastings 2018). Regardless, many scholars have proposed the implementation of an intersectional framework in understanding how multiple social identities intersect at the micro level of LGBTQ+ people of color's lived experiences to the reflect systemic oppression at the macro level (Bowleg 2013). Given that Latine LGBTQ+ people are

subject to excess social stressors from experiences of racism and heterosexism both within the larger U.S. society as well as within their respective ethnic communities, Latine LGBTQ+ people may compartmentalize their identities and stress related to negotiating their marginalized identities within different contextual spaces, leaving this group vulnerable to experience different forms of adversities (McConnell et al. 2018). As the minority stress model places emphasis on the detrimental impact of cumulative stress on wellbeing, intersectional work is critical in better understanding the health disparities by illuminating the complexities of social inequalities.

Current Study

The objective of this study is to examine the relationships between lifetime adversities (childhood and adulthood) and psychological distress among Latine LGBQ+ people compared to White LGBQ+ and Black LGBQ+ individuals. In addition, perceived familial support is investigated as a potential moderator in these relationships.

Methods

Data for the current study have been drawn from the first wave of the panel study Generations: A study of the life and health of LGB in changing society, 2016-2019 dataset (hereafter Generations) which is the first national probability sample of sexual minority adults in the United States (Meyer 2023). The Generations study aimed to examine health and well-being across three generations of lesbian, gay, and bisexuals (LGB) of different age cohorts (younger= ages 18-25, middle= ages 34-41, and older= ages 52-59) by exploring the similarities and differences in sexual identity, minority stress and queer resilience, access to health care, and health outcomes. The sample was drawn by Gallup, Inc. which utilized a dual-frame sampling method. First, telephone interviews were conducted to screen primary eligibility for the study.

Participants were asked the following question: “Do you, personally, identify as gay, lesbian, or bisexual, or transgender?” Those who answered affirmatively were then screened for additional questions for enrollment; however, eligibility for the Generations study was initially limited to those who identified as gay, lesbian, or bisexual, and respondents who identified as transgender in the initial phone interview were then referred to a sibling survey (*Transpop*). Thus, the current study only includes LGBQ+ respondents (described further below). After adjusting for missing information, the final analytical sample includes 1,384 LGBQ+ individuals.

Measures

Psychological Distress

The emotional health variables were measured using the Kessler Psychological Distress Scale (K6; Kessler et al. 2003). Respondents were asked about their emotional well-being and distress over the past 30 days that covers a range of depressive and anxiety symptoms. Response options were on a five-point scale and included *all the time, most of the time, some of the time, a little of the time,* and *none of the time.* Due to cell size issues, I recoded this ordinal variable to express a more proportionate range of experienced psychological distress amongst respondents within the past 30 days: “none or little of the time”, “some of the time”, “most of the time”, and “all of the time.”

Childhood Adversities

Childhood adversities were assessed using items derived from the BRFSS Adverse Childhood Experiences (ACE) module. Respondents indicated whether they had ever experienced any of the following childhood adversities: physical abuse, sexual touch, forced to sexually touch, and forced sex. Respondents were able to indicate the frequency of occurrence by

each experience: *Never, Once, and More than once.* As shown in Table 1, of the total sample, 28% of LGBQ+ individuals experienced childhood physical abuse, 32% experienced childhood sexual touch, 28% experienced childhood forced sexual touch, and 15% experienced childhood forced sex. Amongst LGBQ+ Latine individuals, 37% experienced childhood physical abuse, 41% experienced childhood sexual touch, 36% experienced childhood forced sexual touch, and 20% experienced childhood forced sex.

Adult adversities

Similar to childhood adversities, *adult adversities* were assessed using a modified version of the ACE module. Respondents indicated their experience and the frequency of occurrence of the following adversities within the past year as an adult: physical assault, robbery, personal attack (*Never, Once, Twice, and Three or more times*). As seen in Table 1, amongst the Latine sample, 40% experienced physical assault, 39% experienced instances of robbery, and 23% experienced instances of personal attacks.

Race and Ethnicity

Participants were asked to report their racial and ethnic identity via the question "Which of the following describes your race/ethnicity?" with the response options of Black/African American (n= 199), White (n= 913), and Hispanic/Latino (n= 272) (which I refer to as Latine, as discussed earlier). Participants were asked this question on the first wave of the Generations survey. The Black/African American and White groups are used as reference categories in the models. As shown in Table 1, Latine LGBQ+ individuals made up 19% of the total sample size.

Sociodemographic Controls and Covariates

For *sexual identity*, participants were asked "which of the following best describes your current sexual orientation?": lesbian (n= 263), gay (n= 497), bisexual (n= 454), queer (n= 82), and other sexual identities (straight, same gender loving, asexual, pansexual (n= 88)). It is important to note that the Generations dataset labeled itself as an "LGB" study; however, because these data provide queer+ identities, I refer to the current study's population as "LGBQ+." As seen in Table 1, 35% of the sample identified as gay.

For *gender identity*, respondents were asked: "If you had to choose only one of the following terms, which best describes your current gender identity?": woman (n= 673), man (n=624), non-binary /gender-queer (n= 87). Presented in Table 1, 48% of the sample identified as a woman.

Age (treated as a continuous variable) was included as a control because research indicates that younger LGBTQ+ people experience higher levels of emotional distress and maladaptive behaviors than older cohorts (Russel and Fish 2016). As shown in Table 1, the sample has a mean age of 36.

Perceived familial support was measured using the familial support subsection of the Multidimensional Scale of Perceived Social Support (Ziment et al. 1990). Participants were asked to respond to the following statements: "My family really tries to help me; I get the emotional help and support I need from my family; I can talk about my problems with my family; My family is willing to help me make decisions." Response options were on a seven-point scale ranging from "very strongly disagree" to "very strongly agree" with higher numbers indicating greater familial support. The Generations dataset cumulated the four statements above to make the *Familial Support Scale* (α= 0.91).

Analytical Plan

To speak to the objectives of this study, I use an ordinal logistic regression with multiple interactions that are modeled by the following equation:

$$\log\left(\frac{\mathrm{P}(PD \leq j)}{(\mathrm{P}(PD > j))}\right)$$

$$= a_j + \beta_1\,(cpa) + \beta_2(cst) + \beta_3(cfst) + \beta_4(cfs)$$

$$+ +\beta_5(pa) + \beta_6(rob) + \beta_7(att) + \beta_8\,(re) + \beta_9(int) + \beta_{10}(cont)$$

Where *PD* is the predicted logged odds of psychological distress experienced in the past 30 days. The *j* term is an indicator of the threshold parameter that defines the probability of being in one of the *PD* categories, excluding the reference category (*none or little of the time*). *Cpa* is an indicator of childhood physical abuse experienced in respondent's youth paired with the coefficient, which captures the differences in experiencing psychological distress for those who were physically abused as a child. The *cst* is an indicator of childhood sexual touch paired with the coefficient, which captures the differences in experiencing psychological distress for those who were sexually abused as a childhood. The *cfst* is an indicator of childhood forced sexual touch paired with the coefficient, which captures the differences in experiencing psychological distress for those who were forced to sexually touch another their perpetrator. The *cfs* is an indicator of childhood forced sexual encounter paired with the coefficient, which captures the differences in experiencing psychological distress for those who were forced to have a sexually interaction with their perpetrator. Alternatively, the *pa* is an indicator of adult physical abuse paired with the coefficient, which captures the differences in experiencing psychological distress for those who were physically assaulted as an adult within the past year. The *rob* is an indicator of adult robbery paired with the coefficient, which captures the differences in experiencing

psychological distress for those who were robbed as an adult within the past year. The *att* is an indicator of personally attacked paired with the coefficient, which captures the differences in experiencing psychological distress for those who were personally attacked as an adult within the past year. The *re* vector includes indicators of Black and Latine individuals with the accompanying effect of experienced psychological distress which is represented in the coefficient. Several of my models include interactions to separate the effect of experienced psychological distress on childhood/adult adversities and race/ethnicity. These effects are represented by the *int* vector with the differences between interactions captured in the coefficient. All models include control variables, which are represented by the *cont* vector coefficient. Lastly, to assess the proportional odds assumption in our ordered logistic regression model, a Brant test was conducted (*df=28; p= 0.39*). Upon running the appropriate tests, the reported p-value (0.39) indicates that we have not violated the proportional odds assumption.

Results

Ordinal Logistic Regression – Psychological Distress

Table 2 presents the ordinal regression of psychological distress experienced in the past 30 days by childhood physical abuse (CPA), childhood sexual touch (CST), childhood forced sexual touch (CFST), childhood forced sex (CFS), physical assault (PA) as an adult, robbery as an adult, attacked as an adult, and race/ethnicity. Presented in the uninteracted Model 1, for every instance of CPA experienced in the past year respondents have 0.165 significantly higher logged odds of reporting greater psychological distress within the past 30 days than those who have not experienced CPA. Using predicted probabilities, LGBQ+ individuals who experienced CPA once had a 38.8 percent probability of experiencing psychological distress some of the time, 26.3

percent most of the time, and 11.8 percent all of the time within the past 30 days. Alternatively, LGBQ+ individuals who experienced CPA more than once had a 37.6 percent probability of experiencing psychological distress some of the time, 28.4 percent most of the time, and 13.6 percent all of the time within the past 30 days. Additionally shown in Model 1, for every instance of childhood forced sexual touch (CFST) experienced, LGBQ+ respondents have a 0.274 significantly higher logged odds of reporting experiencing greater psychological distress. To make this more concrete, LGBQ+ respondents who have experienced CFST once have a 38 percent probability of experiencing psychological distress some of the time, 27.2 percent probability most of the time, and 12.5 percent probability all of the time within the past 30 days. Alternatively, LGBQ+ individuals who experienced CFST more than once have a 36 percent probability of experiencing psychological distress some of the time, 30.6 percent probability most of the time, and 15.8 percent probability all of the time within the past 30 days. The main effects of CSA, CFS, and Latine identity variables were not statistically significant. This could be due to the low response rates of these variables. In addition, because experiences of psychological distress were roughly proportionate across the overall sample, it is even more difficult to disaggregate adversities and racial/ethnic differences. This is discussed further in the limitations section.

[INSERT TABLE 2]

Model 2 includes the interaction of CPA, CST, CFST, CFS by race/ethnicity (*see Table 3*). Because cross-group comparisons of logistic coefficients are unreliable due to differences in residual variation, Wald tests of probability are used to formally test the significant differences of all interactions (Long & Mustillo 2018). According to these probability tests, four interactions are significant and are further explored in the following figures.

[INSERT TABLE 3]

Figure 1 contains a graph representing Model 2 interaction term of childhood physical abuse and race/ethnicity (*see Table 3*). This figure shows the effects of race/ethnicity and the frequency of childhood physical abuse experienced on psychological distress. Firstly, Latine LGBQ+ respondents reported lower predicted probabilities in the most of the time and all of the time categories of psychological distress when compared to Black LGBQ+ respondents with experiences of childhood physical abuse. To further make this concrete, Black LGBQ+ who experienced CPA once reported psychological distress 30 percent most of the time and 26 percent all of the time within the past 30 days, as compared to Latine LGBQ+ with experience of CPA of more than once report psychological distress 23 percent most of the time and 12 percent all of the time within the past 30 days. This shows a 7-point and 14-point difference between these groups respectively.

[INSERT FIGURE 1]

Figure 2 contains a graph representing Model 2 that shows the interaction term (*see Table 3*) of race/ethnicity and childhood sexual touch on psychological distress experienced within the past 30 days. Most notably, Latine LGBQ+ individuals who experienced CST more than once are statistically different from Black LGBQ+ individuals who experienced CST more than once. Firstly, among Latine LGBQ+ individuals with CST, the model predicts 28 percent will report having psychological distress most of the time within the past 30 days, as compared to the Black LGBQ+ individuals reporting 16 percent within the same category. This is a 12-point difference in predicted probabilities between these two groups as confirmed by Wald's test. Additionally, Latine LGBQ+ individuals with more than one experience of CST are predicted to report

psychological distress all of the time by 21 percent, compared to Black LGBQ+ individuals reporting only 8 percent within this category. This indicates a 13-point difference between these two groups within the all of the time category, as confirmed by Wald's test.

[INSERT FIGURE 2]

Models 3 and 4 show the ordinal regression of psychological distress experienced in the past 30 days by the uninteracted and interacted terms, respectively, of adult adversities (physical assault, robbery, and attack), and race/ethnicity (*see Table 2 & Table 3*). Presented in the uninteracted Model 3, for every instance of physical assault in the past year, respondents have 0.250 significantly higher logged odds of reporting greater psychological distress within the past 30 days than those who have not experienced PA. Using predicted probabilities, LGBQ+ individuals who experienced PA once are predicted to report experiencing psychological distress 39.6 percent some of the time, 25.5 percent most of the time, and 11 percent all of the time within the past 30 days. Those who experienced PA twice within the past year are predicted to report psychological distress 37.9 percent some of the time, 28.8 percent most of the time, and 3.7 percent all of the time. Finally, respondents who experienced three or more instances of PA in the past year are predicted to report psychological distress 35.3 percent some of the time, 31.8 percent most of the time, and 16.9 percent all of the time. Additionally shown in Model 3, for every instance of robbery experienced, the log odds of reporting psychological distress increase by 0.12 for LGBQ+ individuals. To make this more concrete, LGBQ+ respondents who have experienced one instance of robbery have a 39.7 percent probability of experiencing psychological distress some of the time, 25.1 percent probability most of the time, and 10.7 percent probability all of the time within the past 30 days. Those who experience at least two instances of robbery within the past year are predicted to report psychological distress 39.1

percent some of the time, 26.7 percent most of the time, and 11.9 percent all of the time. Finally, respondents who have experienced three or more instances of robbery within the past year are predicted to report psychological distress 38.2 percent some of the time, 28.3 percent most of the time, and 13.2 percent all of the time.

Figure 3 contains a graph representing Model 4 that shows the effect of race/ethnicity and robbery on psychological distress experienced within the past 30 days. Firstly, there is a statistical difference in psychological distress amongst LGBQ+ Latine and Black respondents who experienced instances of robbery. LGBQ+ Latine respondents who experienced three or more robbery incidents within the past year are predicted to report having psychological distress 29 percent most of the time and 23 percent all of the time within the past 30 days. Comparatively LGBQ+ Black respondents who experienced only one robbery incident predicted to report 21 percent most of the time and 11 percent all of the time. This shows an 8-point and 12-point difference in predicted probabilities between these two groups.

[INSERT FIGURE 3]

Figure 4 contains a graph representing Model 5 that shows the effect of race/ethnicity and physical assault on psychological distress experienced within the past 30 days. Firstly, there is a statistical difference in psychological distress amongst LGBQ+ Latine and Black respondents who experienced instances of physical assault. Latine LGBQ+ respondents who experienced one incident of physical assault within the past year are predicted to report having psychological distress 20 percent most of the time and 9 percent all of the time within the past 30 days. Comparatively Black LGBQ+ respondents who experienced two incidents of physical assault are predicted to report psychological distress 30 percent most of the time and 32 percent all of the

time. This shows a 10-point and 23-point difference in predicted probabilities between these two groups.

[INSERT FIGURE 4]

Discussion

As previously noted, little research has been conducted to investigate the mental health well-being of Latine LGBQ+ people who have experienced various forms of lifetime adversities. Using the 2016 Generations study, I assessed the relationships between Latine LGBQ+ individuals' lifetime adversities and psychological distress while also comparing between White and Black LGBQ+ groups. By doing this, I add to an already scarce area of literature that aims to understand the role that lifetime adversities have on Latine LGBQ+ mental health and well-being.

This study offers three major findings to expand on current research. First, as found in previous literature, LGBQ+ respondents who experience childhood and adult adversities have significantly higher levels of psychological distress than LGBQ+ respondents who have not experienced these adversities (Craig et al. 2020; McCabe et al. 2020; McLaughlin et al. 2012). In other words, the more often a LGBQ+ individual experiences adversities of CPA, CFST, PA, and robbery, the more they are subjected to greater levels of psychological distress. However, experiences of CST, CFS, and personal attack as an adult showed no significant levels of psychological distress.

These findings align to previous work in field of ACEs amongst LGBTQ+ individuals, which suggests that LGBTQ+ youths experience a higher prevalence of stressful childhood events of abuse and neglect (Balsam et al. 2010). Additionally, these findings speak to Meyer's (2003) minority stress model, which suggests that LGBTQ+ stigmatization compounds experiences of adversities. Overall, these findings can help further explain why respondents with multiple stigmatized identities report higher levels of maladaptive behaviors.

A second major finding extends on the previous one, which is the prevalence of greater psychological distress amongst Latine LGBQ+ respondents who have experienced CST and robbery. In Figure 2 and Figure 3, it is evident that Latine LGBQ+ respondents who have experienced instances of childhood sexual touch and adult robbery also reported statistically significantly higher levels of psychological distress compared to Black LGBQ+ respondents who also have had experienced with these adversities. However, Latine LGBQ+ respondents who experienced CST and adult robbery were not significantly different from White LGBQ+ respondents who have and have not experienced these two adversities, this could be due to the small Latine sample size (19%; this limitation is discussed further below).

Broadly speaking, aligning with my first major finding, this finding speaks again to the minority stress model, which suggests that individuals with intersecting minoritized identities are more likely to experience significant stress and poorer health outcomes from daily victimization and adversities (Meyer 1995; Meyer 2003; Sacks & Murphy 2018; Williams et al. 2020). My study along with previous research findings show that LGBQ+ individuals experience high levels of psychological distress due to experiences of adversities from childhood and as adults (McLaughlin et al. 2012). My research contributes to the underdeveloped area of Latine LGBQ+ people's experiences with lifetime adversities and poor mental health outcomes. Due to the

significant differences in psychological distress amongst Latine LGBQ+ individuals with experience of childhood sexual touch and adult robbery compared to Black LGBQ+ who have also experienced these adversities but at a lower frequency, research on minority stress suggests these experiences of adversities could lead to significantly worse life outcomes (Meyer 2003).

The final major finding is the lower prevalence of psychological distress among Latine LGBQ+ who experienced CPA and PA. In Figure 1 and Figure 4, it is evident that Latine LGBQ+ individuals who experienced childhood physical abuse more than once and adult physical assault once are predicted to report lower probabilities of psychological distress compared to Black LGBQ+ individuals who experienced CPA once and PA twice. This is different from the previous models, as the frequency of these adversities not only differs but both the cultural difference in perspectives of these adversities and immigrant status are of great influence in predicting psychological distress amongst the Latine population.

It is essential to consider the importance of cultural influence at play when discussing forms of abuse within Latine households. One Latine cultural construct and household teaching is *respeto* which is intended to maintain cohesion and harmony amongst interpersonal relationships within the cultural familial hierarchies. In particular, Latine children are taught the rules of respecting their elders through tactics of cherished greetings and the avoidance of challenging the ideals of the adults around them (Dixon, Graber, & Brooks-Gunn 2008). The teachings of *respeto* have ties to authoritarian parenting approaches, with Latine parents who hold greater value toward respect as more likely to use authoritarian strategies that rely on punitive measures to enact obedience (Calzada et al. 2012). Such measures take on the form of corporal punishment that, within the cultural context of Latine households, may include acts of physical punishments. Thus, children of Latine parents who used this form of physical

punishments to enforce *respeto* and its cultural significance, may minimize or even blatantly dismiss these childhood experiences as abusive.

Additionally, sociocultural barriers involving mental health stigma amongst the Latine community may also contribute to the underreporting and significantly lower predicted differences of psychological distress. In Latine communities, mental health stigma involves associating mental illness with weakness, *volviendos locas* (going crazy), or lack of faith with the Catholic church (Ahmedani 2011; Caplan 2013; Caplan 2019). In addition, research suggests cultural constructs of *machismo* (i.e., the masculine, strong, and stoic cultural expectations of Latino men) have great intersecting relationships to mental health stigma. In particular, due to its emphasis on restricting emotional vulnerability in efforts to avoid selfish perceptions and to maintain familial cohesion, *machismo* may contribute to an underreporting of mental health distress among Latine men (Abdullah & Brown 2011; Lindinger-Sternart 2015). While I am unable to formally investigate the precise influence of these cultural constructs due to the nature of the data, I suggest these frameworks be centered by future researchers as longitudinal Latine LGBTQ+ and culturally diverse LGBTQ+ data becomes available. In doing so, we will be able to better understand the lifelong effects of adversities toward the mental health well-being of Latine LGBTQ+ people.

An additional reasoning for Latine LGBTQ+ peoples' low frequency in reporting instances of abuse may have to do with possible personal and interpersonal relations with immigration experiences. Many studies have found that Latine immigrants and Latine children of immigrant parents have low frequencies of ACEs and other ACE-related experience in the U.S., despite the fact that this population is suspectable to higher rates of poverty and other forms of social distress (Caballero et al. 2017; Crounch et al. 2019; Loria & Caughy 2018). While the

ACE module covers an array of specific traumatic experiences that might be endured during childhood, such measurements do not account for the unique experiences of children of detained parents, deported parents, or even parents undergoing legal actions toward their immigration status. Studies have shown that this unique health paradox is a result of the failure of traditional ACEs measures' inability to capture immigrant-specific adverse experiences (e.g., ICE arrests/deportations of parents, victim/witnessing of ICE raids, or experiencing anti-immigration discrimination; Cronholm et al. 2015; Vaughn et al. 2015). Furthermore, immigrants' underreporting of the traditional ten ACEs and other offenses may reflect an innate fear of deportation. Fear of deportation and interactions with law enforcement are an extreme and common occurrence amongst Latine individuals of all document statuses. Such fears leave Latine people in vulnerable positions and deter them from seeking legal assistance when experiencing various forms of victimization. This further contributes to inaccurate reports of crime and lack of understanding the experiences of what adversities are like for Latine immigrant individuals (Becerra et al. 2017; Vaughn et al. 2015).

Lastly, while perceived familial support was kept as a control variable in my analyses, it is important to discuss its influential impact on the psychological distress amongst the sample. Respondents with greater perceived familial support have significantly higher chances of reporting lower levels psychological distress within the past 30 days. This speaks to the importance of social support systems amongst minoritized groups who have experienced and been victims of adversities, as these support systems influence the processing of such adversities which in turn contributes to mental health outcomes (Acoba 2024; McConnell et al. 2015). This further aligns with previous research and solidifies similar qualitative claims on the benefits of familial and parental support amongst LGBTQ+ populations to combat societal stigmatization

and discrimination (Alday-Mondaca & Lay-Lisboa 2021; Katz-Wise, Rosario, & Tsappis 2016). Supportive family relationships are critical to the well-being of those who experience adversities. Family dynamics can greatly impact the mental health of those with adversities and as a result, understanding the contexts of this support system is essential for supporting those who have experienced trauma. Specifically, parental support amongst LGBTQ+ individuals has been found to be one of the strongest predictors of long-term adjustment to their livelihood and progression in their identity (Resnick et al. 1997).

Latine culture has often been known for its collectivist views and multigenerational households in which many cultural ideals and traditions are enforced and taught (Ruiz & Ransford 2012). In Latine households that uphold such traditional values, any behaviors or displays of identity that deviate from these traditional alignments are not typically taken lightly or with open acceptance. Many Latine families are overwhelmed by other external factors that may put the family at risk for separation (e.g., immigration policies, death by law enforcement, and lack of access to health care) and as a result, they may have little bandwidth for supporting their LGBTQ+ family members. Thus, it necessary for future studies to consider the full extent of the influence of familial support on the mental health and well-being of LGBTQ+ Latine individuals, including those who have experienced lifetime adversities.

In conclusion, LGBQ+ respondents and Latine LGBQ+ respondents who have had direct experiences with lifetime adversities experience high levels of psychological distress which could be an effect of minority stress (Meyer 2003; Para & Hastings 2018). However, future studies with larger samples of LGBTQ+ people of color are needed for further analyses on the long-term effects of LGBTQ+ racialized victimization. Further, the mental health effects of adverse experiences amongst racial and ethnic diverse LGBTQ+ individuals should be measured

longitudinally to get a better understanding of this populations' progression of mental health while traversing through society vulnerable to additional adverse experiences. Finally, the alarming increase in experiences of ICE raids and arrests occurring in recent months since the second election of President Donald Trump clearly shows a very specific vulnerability amongst this population indicating a need for deeper and updated investigation.

Implications

These analyses provide an insight to the social costs that exist for individuals who have directly experienced lifetime adversities and how those adversities affect their mental health well-being. I concur with past research on the high social risks for LGBTQ+ and racial/ethnic minorities, especially as anti-LGBTQ+ and anti-immigration rhetoric continues to gain momentum in both social and political spaces. Although the livelihood of LGBTQ+ and Latin communities continues to be threatened, scholars and activists alike have previously and continue to remain critical to these experiences. For example, scholars like Roberto C. Orozco have been in the center discussion in the theorizing of *joteria studies* in higher education scholarship and for an inclusion of *feminista pláticas* methodologies when studying queer and/or trans Latine people. Incorporating and highlighting the lived experiences of Latine LGBTQ+ individuals of all documentation statuses is the only way we can know the true effects of Latine adverse experiences and victimization.

Because Latine LGBQ+ individuals report higher levels of psychological distress when experiencing specific adversities and victimization during their lifetime, I argue that this intensity and continuous victimization can lead to harmful life and health outcomes, which is consistent with previous literature (Meyer 2003; Sacks & Murphy 2018; Schmitz et al. 2020; Williams

2020). However, we still know very little of the adverse immigration experiences of Latine LGBTQ+ individuals of different documentation statuses and how these experiences overall affect their mental health. While the intersection of race, LGBTQ+ identity, and gender make up a lot of the current ACE-related and victimization literature, immigration experiences and documentation status should be assessed as forms of adversities that can additionally add to the level of psychological distress that Latine LGBTQ+ may face.

Meaningful reforms should be included in the decisions for policy changes/implementations and education. In terms of policy reforms, over the years, hundreds anti-LGBTQ+ bills have been introduced to prevent LGBTQ+ folks in the U.S. from accessing basic human rights and furthering threatening the health and well-being of this population (Levengood & Hadland 2023). Under the pretenses that "LGBTQ people are a danger to our children" or "The Bible condemns homosexuality" these policies incite queer panic and leave this population susceptible to additional victimization. For example, at the time of writing (March 2025) over 500 bills are being introduced across the U.S. that are restricting student and educator rights, healthcare restrictions, free speech/expression bans, and the barriers for accurate gender markers on IDs (ACLU 2025). With such a high amount of anti-LGBTQ+ legislation being introduced throughout the U.S. in 2025, and with the progression of the current administration, LGBTQ+ people are in grave danger. Further, in order for meaningful reform to occur in educational settings, our lawmakers must first enforce protections for all LGBTQ+ folks. With the overwhelming amount of LGBTQ+ folks of color (and especially Black and Brown trans people) being targeted and killed, LGBTQ+ people's survival in our current environment is and will continue to be threatened. While most scholars will promote the urgency for structural reversals of these harmful bills' effects, and while important, such a demand seems

far from reach at this point in time. Thus, I recommend my fellow LGBTQ+ folks to channel the techniques and skills from our predecessors to be resourceful, resilient, and now more than ever communal with one another to ensure the safety of our community.

Education-based changes are also needed for Latine LGBTQ+ people's safety. Hispanic/Latin cultural constructs that perpetuate gender binary alignments should be rethought in a way that does not harm the lives of Latine LGBTQ+ people. As previously mentioned, Latine culture is centered around collectivist views that enforce various culturally rich traditions, yet any behaviors or displays of identity that deviate from these binary alignments are not typically taken lightly or with open acceptance (Ruiz & Ransford 2012). Research has indicated that traditional beliefs of *machismo* predict adoption of explicit homophobia and blatant prejudice toward LGBTQ+ people (Hirai et al. 2018). Thus, it is essential to reevaluate traditional Latine norms to include the experiences of Latine LGBTQ+ people, while also upholding the supportive and collectivist nature of traditional cultural values to ensure their safety and familial support. Promoting and centering teachings of more positive and nurturing behaviors could ensure the embracement and safety of Latine LGBTQ+ people. For example, while traditional *machismo* beliefs center around the representation of aggression, sexism, and hyper-masculine traits, its alternative domain of *caballerismo* involves the beliefs and representation of nurturing behaviors that are family-centered and emotionally attuned, allowing for opportunities of acceptance and safety for LGBTQ+ people within Latin spaces.

Limitations and Future Directions

This study dealt with a few limitations, including issues with data. First, the current study uses data with a mostly White sample (65%), which does not allow us to understand the

multidimensionality of race and ethnicity in these relationships. This is problematic because current population estimates suggest there is a great deal of racial and ethnic diversity among LGBTQ+ people (Dowd 2022). In addition, research has demonstrated that LGBTQ+ racial and ethnic people experience different levels of mental health strains than white individuals (Bostwick et al. 2014), suggesting the need for a deeper investigation to how racial and ethnic identities are typically coded in quantitative studies. Future research should prioritize racial and ethnic diversity when collecting data on lifetime adversities and mental health well-being, as this intersection complicates and adds layers to the experiences of LGBTQ+ Latine people. In addition, the nature of snowball sampling could be a potential source for limited data on the Latine LGBTQ+ population, thus, rethinking how we collect data on this group who encompass multiple marginalized identities should be of high consideration.

Second, the current study could not account for the immigration status, nor the generational status of the Latine sample. The Latine population are one of the minority groups vulnerable to unique types of adversities due to the personal and familial experiences with the immigration system. The migration process is a complex and stressful course that challenges individuals seeking asylum and/or entrance into the United States that causes mental, physical, and financial hardships (Cohodes et al. 2021; Kirmayer et al. 2011). Thus, researchers should include generational information (and citizenship status with IRB approval) to further examine the differences of lifetime adversities among various generational backgrounds, alongside examining if and how the migration process has personally affected them and their families. Additionally, future studies should prioritize conceptualizing and implementing immigrant-specific adversity measures to examine the traumatic and fear-inducing experiences that are

outside the framework of traditional ACE measures, as well as protective factors unique to the cultural values to immigrant families (Caballero et al. 2017; Flores & Salazar 2017).

In sum, we know that LGBQ+ Latine people who have experienced lifetime adversities experience higher rates of psychological distress, but how do we combat these inequalities? Future research should aim to highlight and celebrate Latine diversity in a western society that tends to discriminate and view Latin culturally positive traditions as disruptive. In addition, future research should examine the specific effects of how intersecting identities affect one's cultural connection and its relation to experiencing adversities and their mental health. For example, does having a marginalized gender and/or sexual identity affect a Latine person's ethnic identity from scrutiny amongst various communities, and does this increase their likelihood of adversities and negative mental health outcomes? Future research should work to unpack these complicated questions.

Concluding remarks

In a time of increased anti-LGBTQ+ legislation and anti-immigration policies, nation-wide protection for Latine LGBTQ+ individuals is needed. With the current progression of the U.S. political climate, this population, alongside their individual groups (i.e., the whole Latin community and the whole LGBTQ+ community) are in danger to experience more discrimination and adversities with the upcoming change in policies. We have seen in recent years a record number of anti-LGBTQ bills being introduced and federal introductions of anti-immigration policies becoming more and more prevalent with the negative rhetoric from the Trump administration (Fernandez 2023; Wallace & Young 2018). In the beginning weeks of his second presidential term, President Trump has enacted numerous executive orders on

immigration regarding visa applications, asylum and refugee programs, and the limits of birthright citizenship (American Immigration Council 2025). As race, gender, and sexuality scholars continue their work and wait for datasets that account for the direct experiences of Latine LGBTQ+ people, we must advocate for their protection and security both within academia and general social settings.

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Appendices

Table 1. Descriptive Statistics

	Full Sample		**Latine**		**Black**		**White**	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Dependent Variable								
Psychological Distress	1.28	1.01	1.40	1.06	1.43	1.04	1.22	0.99
Key Independent Variables								
Race/Ethnicity								
White	0.65	0.47						
Latine	0.19	0.39						
Black	0.14	0.35						
Childhood Adversities								
Physical Abuse (PA)								
Once	0.07	0.26	0.08	0.27	0.10	0.30	0.06	0.24
More than once	0.21	0.41	0.29	0.45	0.27	0.44	0.17	0.38
Sexual Abuse (CSA)								
Once	0.09	0.29	0.11	0.31	0.11	0.32	0.08	0.28
More than once	0.23	0.42	0.30	0.46	0.29	0.45	0.19	0.39
Forced Sexual Touch (CFST)								
Once	0.09	0.29	0.11	0.32	0.12	0.33	0.08	0.27
More than once	0.18	0.38	0.25	0.43	0.25	0.43	0.14	0.35
Forced Sex (CFS)								
Once	0.05	0.21	0.07	0.26	0.06	0.23	0.04	0.19
More than once	0.10	0.30	0.13	0.33	0.17	0.38	0.08	0.27
Adult Adversities								
Physical Assault								
Once	0.14	0.35	0.14	0.35	0.11	0.32	0.15	0.36
Twice	0.09	0.28	0.09	0.29	0.09	0.29	0.08	0.26
Three or more	0.15	0.36	0.17	0.37	0.15	0.36	0.15	0.36
Robbery								
Once	0.22	0.41	0.22	0.42	0.24	0.42	0.22	0.41
Twice	0.11	0.32	0.08	0.27	0.11	0.32	0.12	0.33
Three or more	0.12	0.33	0.09	0.29	0.10	0.30	0.13	0.34
Attacked								
Once	0.13	0.34	0.15	0.36	0.14	0.35	0.12	0.33
Twice	0.04	0.21	0.05	0.22	0.06	0.24	0.03	0.19
Three or more	0.04	0.19	0.03	0.18	0.05	0.22	0.03	0.19
Controls								
Gender Identity								
Woman	0.48	0.49	0.43	0.49	0.58	0.49	0.48	0.49
Man	0.45	0.49	0.50	0.50	0.36	0.48	0.45	0.49
Non-Binary	0.06	0.24	0.06	0.24	0.05	0.21	0.06	0.24
Age	36.46	14.66	31.12	12.58	33.00	13.23	38.8`	14.98
Sexuality								
Lesbian	0.19	0.39	0.14	0.35	0.22	0.41	0.19	0.39
Gay	0.35	0.47	0.40	0.49	0.30	0.46	0.35	0.47
Bisexual	0.32	0.46	0.33	0.47	0.29	0.45	0.33	0.47
Queer	0.05	0.23	0.06	0.24	0.06	0.24	0.05	0.22
Other	0.06	0.24	0.04	0.21	0.10	0.30	0.05	0.23
Family Support	4.70	1.65	4.85	1.51	4.65	1.66	4.67	1.69

N	1,384	272	199	913

Source: Generations: A study of the life and health of LGB in changing society, 2016

Table 2. Ordinal Logistic Regressions on Psychological Distress by Lifetime Adversities and Race/Ethnicity

	Model 1		Model 2		Model 3		Model 4		Model 5	
Main Effects	β	(SE)	β	(SE)	β	(SE)	β	(SE)	β	(SE)
Childhood Adversities										
Physical Abuse (CPA)	0.165**	(0.063)	0.229**	(0.086)					0.122	(0.089)
Sexual Abuse (CST)	-0.103	(0.111)	-0.078	(0.146)					-0.092	(0.147)
Forced Sexual Touch (CFST)	0.276*	(0.123)	0.265	(0.171)					0.196	(0.172)
Forced Sex (CFS)	0.145	(0.108)	0.203	(0.153)					0.144	(0.158)
Adult Adversity										
Physical Assault (PA)					0.250***	(0.051)	0.308***	(0.068)	0.226***	(0.072)
Robbery					0.120*	(0.057)	0.044	(0.074)	0.036	(0.075)
Attacked					0.045	(0.078)	0.049	(0.121)	0.028	(0.125)
Race & Ethnicity (ref. White)										
Black	0.060	(0.149)	0.008	(0.209)	0.189	(0.148)	0.389	(0.222)	0.231	(0.251)
Latine	-0.123	(0.133)	-0.049	(0.185)	-0.036	(0.130)	0.278	(0.185)	0.246	(0.212)
Controls										
Perceived Familial Support									-0.172***	(0.032)
Gender Identity (ref. Women)										
Men	-0.271	(0.164)	-0.278	(0.166)	-0.185	(0.164)	-0.195	(0.166)	-0.242	(0.170)
Non-Binary	0.749**	(0.230)	0.710**	(0.230)	0.742**	(0.231)	0.720**	(0.235)	0.657**	(0.239)
Sexuality (ref. Lesbian)										
Gay	0.247	(0.212)	0.262	(0.214)	0.143	(0.212)	0.196	(0.215)	0.262	(0.219)
Bisexual	0.637***	(0.158)	0.627***	(0.160)	0.500***	(0.158)	0.543***	(0.161)	0.566***	(0.163)
Queer	0.356	(0.244)	0.375	(0.247)	0.150	(0.246)	0.226	(0.250)	0.322	(0.254)
Other	0.337	(0.247)	0.343	(0.250)	0.239	(0.250)	0.306	(0.254)	0.232	(0.259)
Age	-0.075**	(0.028)	-0.074**	(0.028)	-0.085**	(0.028)	-0.081**	(0.029)	-0.083**	(0.029)
Age Squared	0.000	(0.000)	0.000	(0.000)	0.000	(0.000)	0.000	(0.000)	0.000	(0.000)
N	1,384									
AIC	3,473.563		3,492.836		3,448.670		3,468.164		3,455.345	
BIC	3,562.520		3,686.447		3,532.394		3,677.473		3,795.473	

Standard errors in parentheses

Source: Generations: A study of the life and health of LGB in changing society, 2016

* $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$

Table 3. Ordinal Logistic Regressions on Psychological Distress by Lifetime Adversities &Race/Ethnicity (*Interactions*)

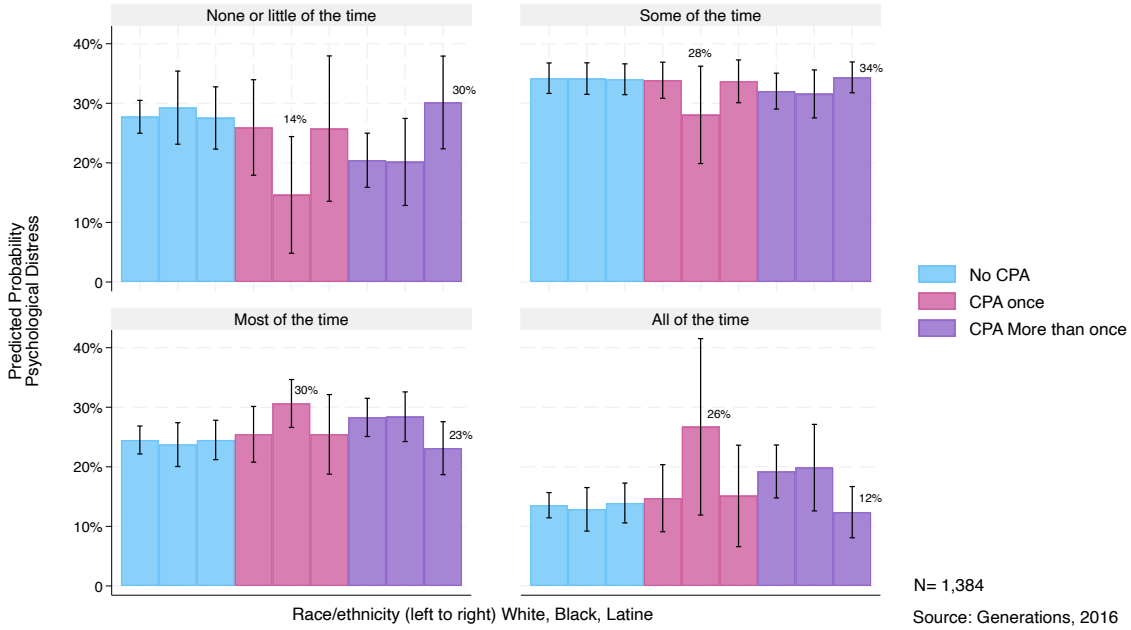
	Model 2		Model 4		Model 5	
Interactions	β	(SE)	β	(SE)	β	(SE)
Black x CPA						
Once	0.093	(0.543)			0.771	(0.539)
More than once	0.113	(0.351)			-0.080	(0.375)
Latine x CPA						
Once	0.000	(0.470)			-0.099	(0.491)
More than once	-0.606	(0.310)			-0.546	(0.325)
Black x CST						
Once	-0.225	(0.656)			-0.423	(0.657)
More than once	-1.070	(0.620)			-1.248	(0.653)
Latine x CST						
Once	-0.194	(0.524)			-0.235	(0.553)
More than once	0.878	(0.558)			0.860	(0.577)
Black x CFST						
Once	0.189	(0.660)			0.457	(0.661)
More than once	0.749	(0.663)			1.150	(0.681)
Latine x CFST						
Once	0.338	(0.537)			0.436	(0.556)
More than once	-0.703	(0.637)			-0.542	(0.652)
Black x CFS						
Once	0.150	(0.696)			-0.102	(0.714)
More than once	0.158	(0.599)			0.021	(0.622)
Latine x CFS						
Once	0.562	(0.570)			0.716	(0.586)
More than once	-0.450	(0.541)			-0.314	(0.557)
Black x PA						
Once			-0.553	(0.476)	-0.619	(0.485)
Twice			0.647	(0.533)	1.019	(0.557)
Three or more			-0.669	(0.473)	-0.230	(0.514)
Latine x PA						
Once			-0.603	(0.393)	-0.716	(0.414)
Twice			-0.041	(0.483)	0.163	(0.503)
Three or more			-0.179	(0.406)	-0.050	(0.434)
Black x Robbery						
Once			-0.682	(0.393)	-0.642	(0.403)
Twice			-0.159	(0.495)	-0.243	(0.504)
Three or more			0.842	(0.587)	0.704	(0.598)
Latine x Robbery						
Once			-0.547	(0.350)	-0.561	(0.359)
Twice			-0.337	(0.499)	-0.367	(0.524)
Three or more			0.622	(0.513)	0.479	(0.531)
Black x Attacked						
Once			-0.443	(0.455)	-0.216	(0.459)
Twice			0.301	(0.722)	0.173	(0.737)
Three or more			0.625	(0.765)	0.361	(0.799)
Latine x Attacked						
Once			-0.255	(0.405)	-0.249	(0.418)
Twice			-0.563	(0.605)	-0.579	(0.613)
Three or more			-1.128	(0.780)	-1.063	(0.799)
N			1,384			
AIC	3,492.836		3,468.164		3,455.345	
BIC	3,686.447		3,677.473		3,795.473	

Standard errors in parentheses

Source: Generations: A study of the life and health of LGB in changing society, 2016

* $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$

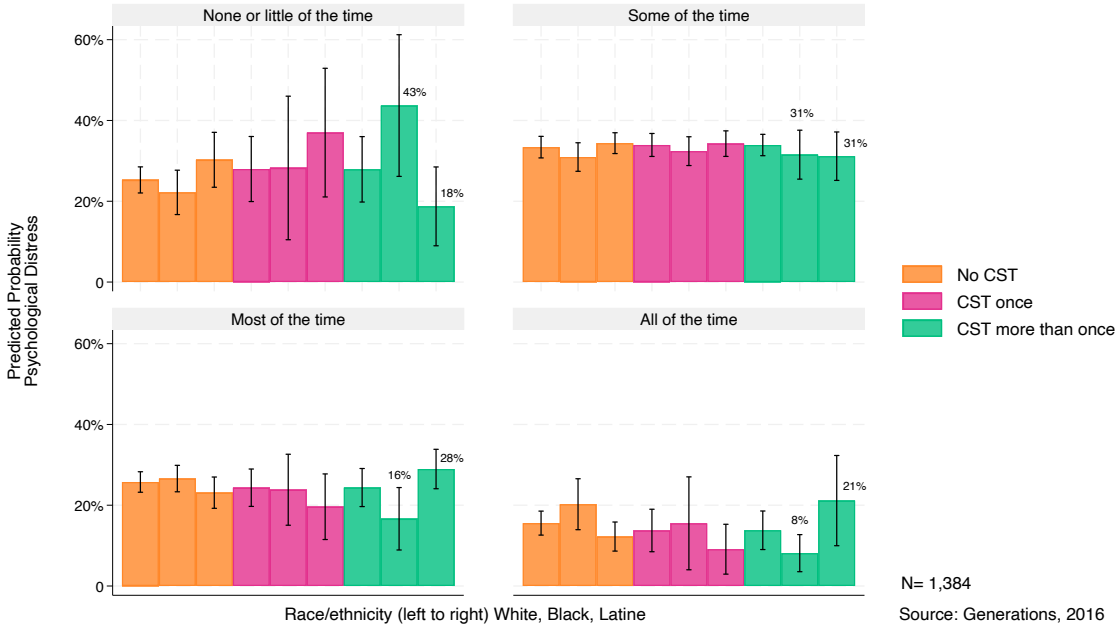
Figure 1. Predictive margins of childhood physical abuse (CPA) and race/ethnicity



N= 1,384

Source: Generations, 2016

Figure 2. Predictive margins of child sexual touch (CST) and race/ethnicity



N= 1,384

Source: Generations, 2016

Figure 3. Predictive margins of robbery and race/ethnicity

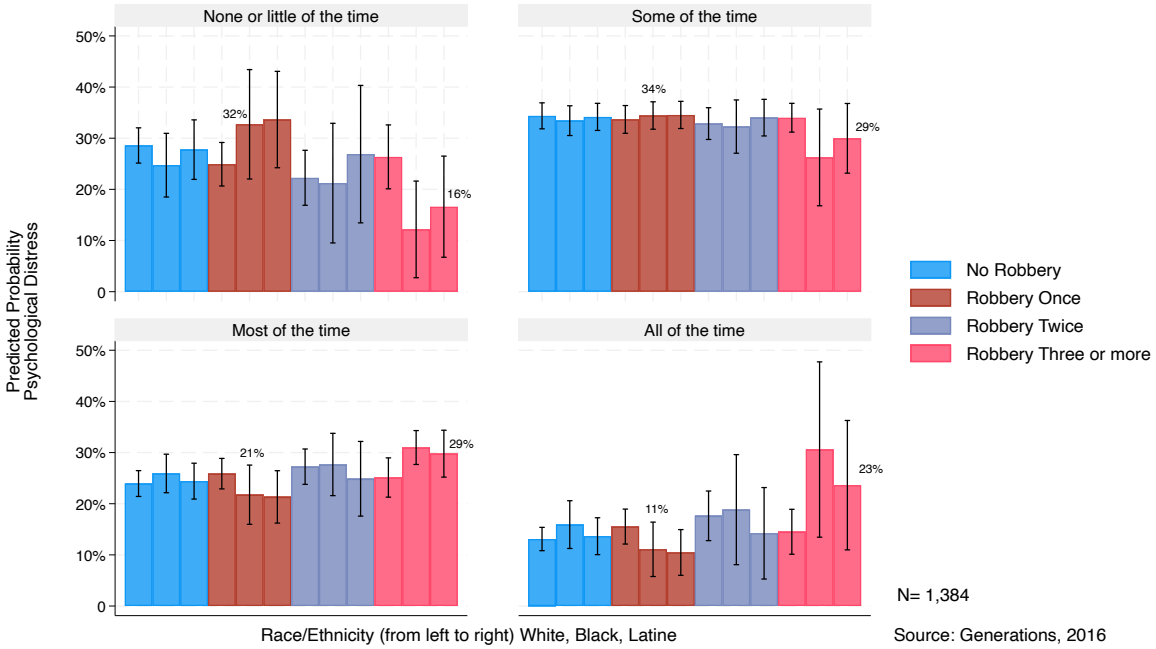
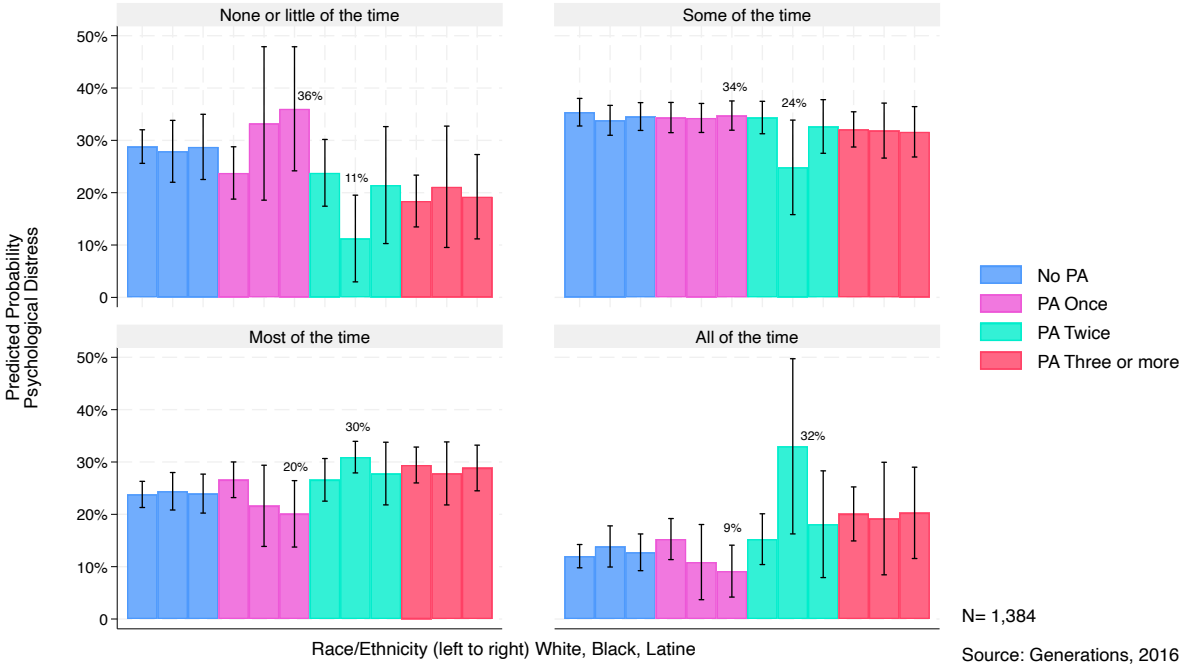


Figure. 4 Predictive margins psychical assault (PA) and race/ethnicity



N= 1,384

Source: Generations, 2016