



Exploring Risk and Protective Factors of Self-Injury Engagement among Sexual and Gender Minority Youth

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ABSTRACT

Sexual and Gender Minority (SGM) youth have been identified as a high-risk group for the engagement of nonsuicidal self-injury (NSSI). NSSI represents a critical mental health issue, as it has been associated with numerous negative health outcomes, including anxiety, depression, suicide risk, and substance use. However, there has been little research in understanding the nature of self-injury among SGM youth, despite the fact that SGM youth are more likely to engage in this behaviour. Thus, this research study explores the demographics of SGM youth who self-injure, risk-taking behaviours associated with the engagement of NSSI, and risk and protective factors that influence NSSI engagement. The data included $N=121$ SGM youth between the ages of 12 and 29. Participants completed a battery of questionnaires, which measured various stressors, risk-taking behaviours (including NSSI), and protective/ resilience factors that may influence their engagement of NSSI. Results revealed that those who identify as bisexual, female, or between the ages of 15-17 years of age were the most likely to engage in NSSI. Furthermore, those who engaged in NSSI were more likely to have more negative perceptions of themselves, and were more likely to engage in other risk behaviours. Contrary, those who refrained from NSSI were more likely to have positive self-perceptions, and were more likely to have a stronger social support system, which may have acted as protective factors against the engagement of NSSI. The results of this study have important implications for informing prevention and intervention initiatives for NSSI and work with SGM youth.

BACKGROUND

- NSSI prevalence rates among adolescents and young adults range from 14-24%. Considering NSSI behaviours are associated with numerous physical and mental health risks, it represents a critical mental health issue (Heath et al., 2009; Klonsky et al., 2011; Swannell et al., 2014)
- Understanding risk factors for NSSI can help inform prediction and intervention efforts. Common risk factors for NSSI include youth who experience more negative emotions (depression, anxiety), have a difficult time regulating their emotions, those who are dissatisfied with their interpersonal relationships, and/ or bullied/ victimized (Fox et al., 2015; Kress et al., 2012; Turner et al., 2016)
- SGM youth have been identified as a key demographic of those who self-injure, but research has sparsely investigated this demographic and their relationship with NSSI (Klonsky et al., 2014; Sornberger et al., 2013)
 - Minority stress theory suggests that SGM youth experience specific stressors (stigma, prejudice, discrimination, victimization) that can make them more prone to engaging in risk-taking behaviours (Goldbach, Fisher, & Dunlap, 2015; Meyer, 2003)
- Although SGM youth are more at-risk for engaging in NSSI, it is important to consider that the majority of SGM youth are resilient and do not engage in NSSI (Muehlenkamp et al., 2015)
 - Resilient youth who display positive outcomes often possess individual traits (e.g., strong emotion regulation abilities) and/ or have protective factors in the environment (e.g., supportive family) (Greene & Britton, 2014). Thus it is important to investigate whether these protective factors can also protect against NSSI engagement.

This is the first study to investigate the relationship between NSSI and SGM youth, that takes into consideration risk factors and protective factors that may influence engagement.

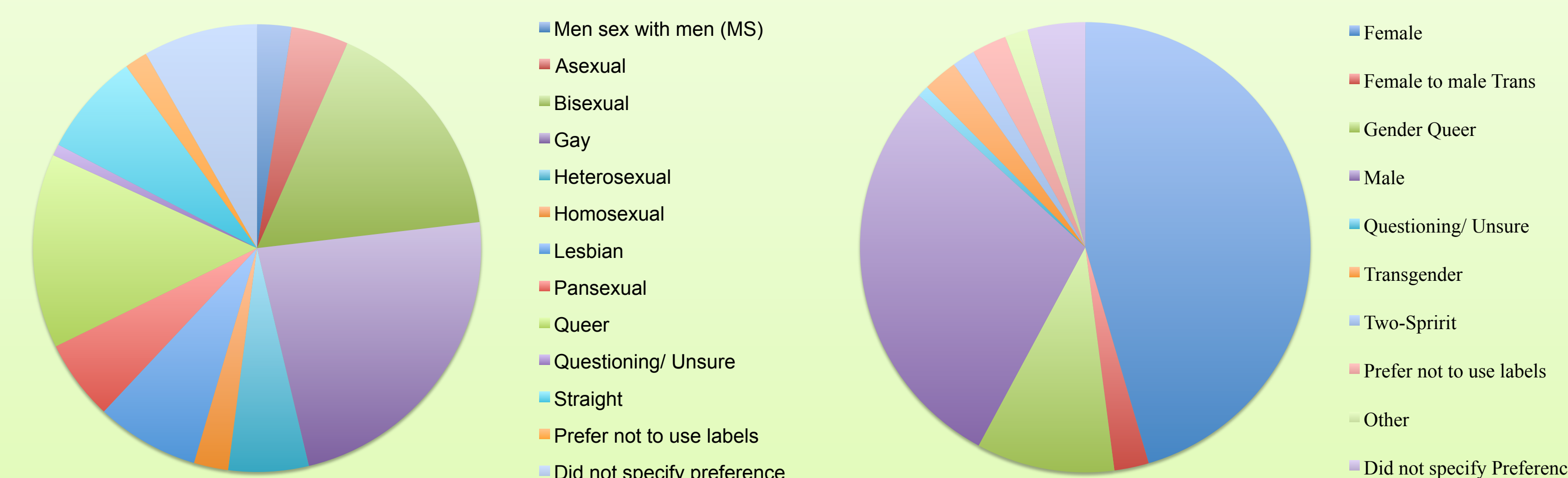
STUDY QUESTIONS

- Who is most likely to self-injure?
- What are the SGM risk factors for NSSI engagement?
- What are the protective/ resilient factors that protect against NSSI?

METHODS

Participants:

- $N=121$ SGM youth, ages 12-29
- Age: 11.4% 12-14 years, 38.2% 15-17 years, 20.3% 18-22 years, and 23.6% 23-29 years
- Ethnicity: 69.1% White/ Caucasian, 12.2% Multi-racial, 4.9% Chinese, 3.3% Aboriginal, 3.3% Other



Measures:

- SGM Resilience Survey was developed by Grace and colleagues in 2014. There are two components: Risk Survey and Resilience Survey. Each survey can be divided into 3 categories: (1) self-reported feelings and behaviours, (2) social support, (3) community support

Risk Survey:

"I get sick easily"
"I get sad or depressed"
"I skip school"
"I use alcohol to cope"

"I have at least one parent who does not support me"
"Other youth have bullied me online"

"I have trouble finding a family doctor who is comfortable and willing to help LGBTQ people"

Resilience Survey:

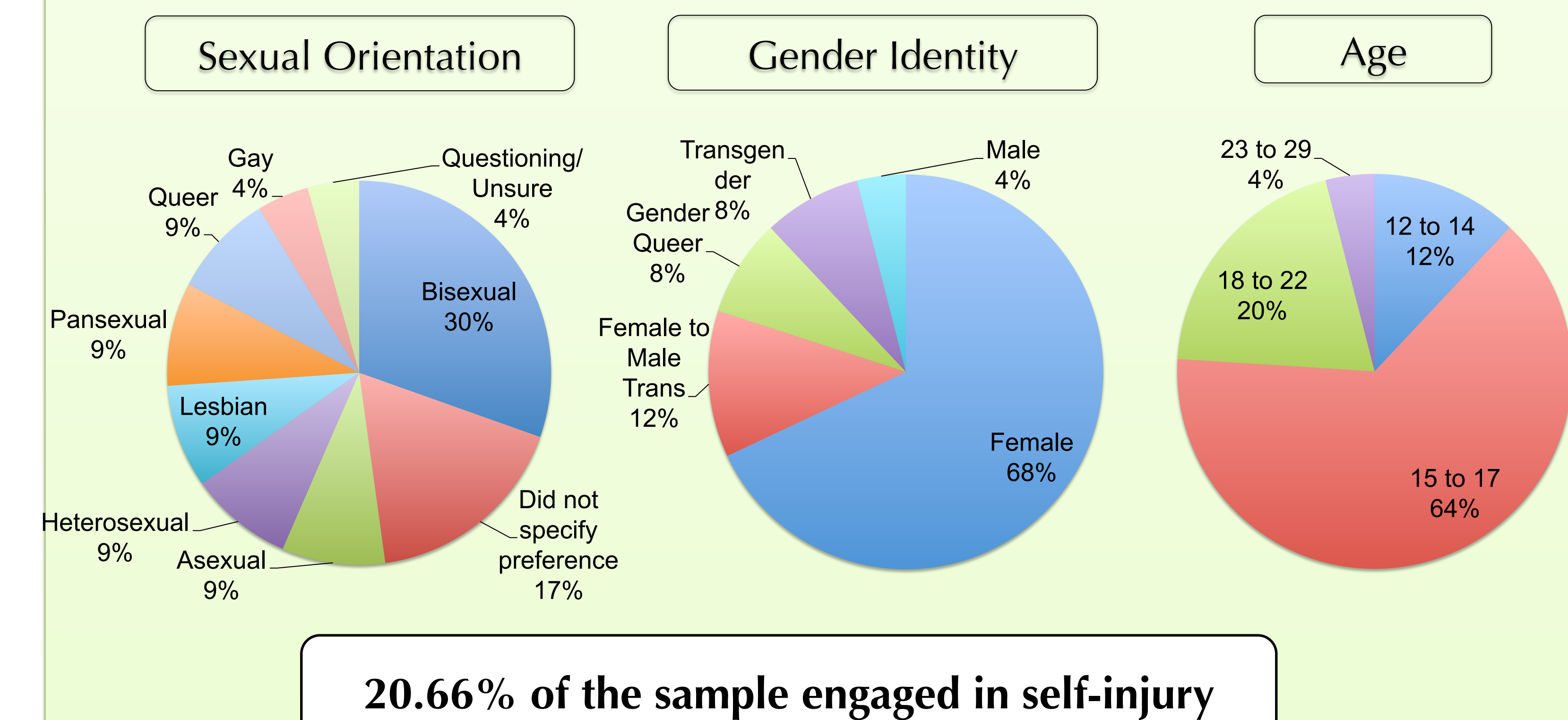
"I am happy"
"I am hopeful"
"I can deal with a setback when I have one"

"I am close to those I consider family"
"I am able to build friendships and relationships"

"My faith community accepts and supports me"
"Being part of a GSA has really helped me"

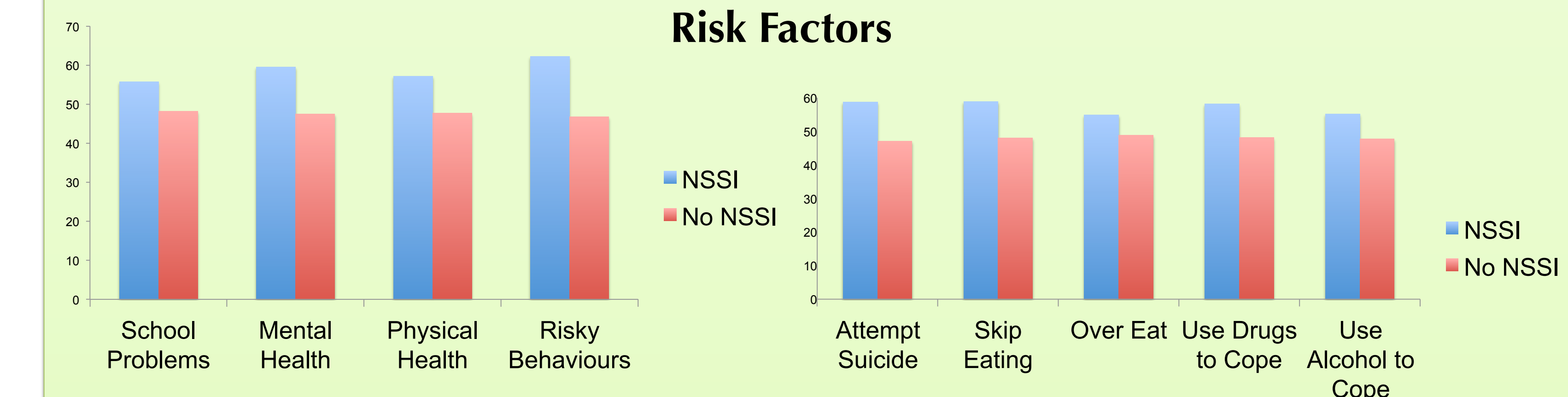
FINDINGS

Who Self-Injures?

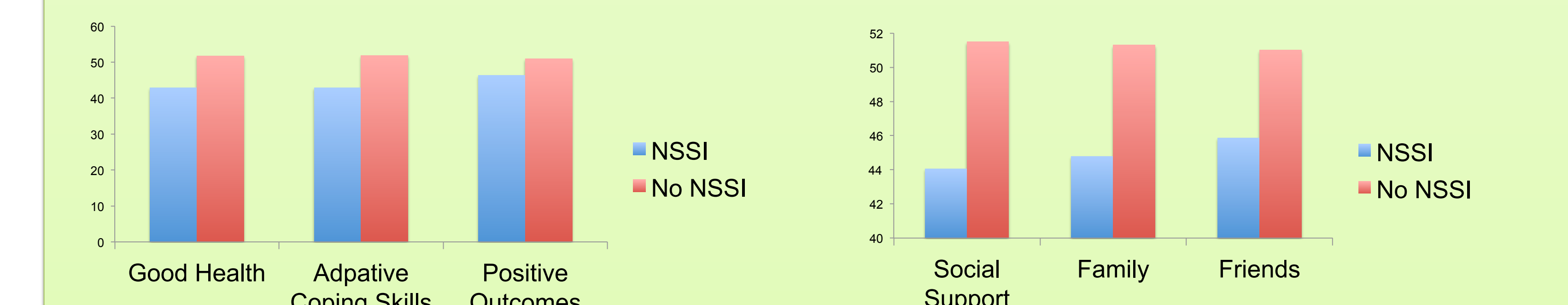


20.66% of the sample engaged in self-injury

Risk Factors



Resilient/ Protective Factors



All results displayed are significant at the 0.05 level. Community risk factors and community protective factors did not significantly influence NSSI engagement.

IMPLICATIONS

- This is one of the first studies to look at resilience and protective factors associated with NSSI engagement.
 - SGM youth who were most likely to engage in NSSI were bisexual, female, and/ or between 15 and 17 years of age. They were also more likely to have issues with school, mental health, physical health, and engage in risky behaviours.
 - SGM who did not engage in NSSI were more likely to report good health, adaptive coping skills, experience positive outcomes, and had stronger social support.
- The results of this study can inform **both** intervention and prevention initiatives.