

NJPA Graduate Student Initiated Research Awards:

Application of Minority Stress and Suicide Models in Bisexual versus Gay/Lesbian Young

Adults

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Application of Minority Stress and Suicide Models in Bisexual versus Gay/Lesbian Young Adults

Suicide is a significant public health concern in sexual minority populations (King et al, 2008; Koh & Ross, 2016). Several frameworks have been developed to explain suicide risk in the general population, including the Interpersonal Theory (IPT, Joiner, 2005) and the Clinical Model (Mann et al., 1999). Separately, other researchers have also utilized the minority stress model (Meyer, 2003) to explain the greater suicide risk in sexual minorities, which posits that stressors unique to sexual minority status increase risk for adverse outcomes. While both suicidological and minority stress models have been used to explain suicide risk in different populations, only one study to date has integrated them to understand suicide risk in sexual minorities (Plöderl et al., 2014).

Furthermore, very little research has examined suicide risk in the bisexual subgroup, despite consistent findings of greater mental health disparities in this population. Compared to other groups, bisexual individuals report engaging in more self-injurious behaviors (Kerr, Saturri, & Peters, 2013) and are more likely to endorse recent suicidality (Conron, Mimiaga, & Landers, 2010). Bisexual individuals also face unique stressors distinct from those experienced by other sexual minority individuals, including more hostility, pressure to change their sexual orientation, dismissal of their sexual orientation, and dating discrimination (Bostwick & Hequembourg, 2014).

Unfortunately, past research has examined different suicidological frameworks in isolation and has rarely examined unique risk factors in bisexual individuals despite unique stressors and elevated risk. As a result, we have a limited understanding of why sexual minorities are at increased risk for suicide or ways to tailor existing interventions. This is particularly

important in the young adult period, in which the percentage of adults having serious thoughts of suicide is at its highest (NIMH, 2016). To address these gaps, the current study aims to integrate multiple frameworks for understanding suicidal ideation in sexual minority young adults, as well as extend this research to the understudied bisexual subgroup.

Method

Participants

Participants will consist of 500 English-speaking sexual minority young adults ages 18-29 residing in the United States. Half of the sample will be required to identify as bisexual and half of the sample as gay or lesbian. Participants will be recruited for a longitudinal internet-based study through Amazon Mechanical Turk (MTurk), an online venue where individuals can participate in online opportunities for nominal payments. Sample demographics from MTurk have been demonstrated to be more diverse than convenience samples.

Procedure

The proposed study will use a longitudinal internet-based design. A pre-screen questionnaire will confirm participant age and sexual orientation. Study participation will begin with consenting procedures. Then, participants will complete a Qualtrics-based 30-minute battery of self-report questionnaires on suicidal ideation, minority stress, and factors related to established suicidological models. After two months, they will be contacted using their unique de-identified MTurk user code to complete the same survey. This time period was chosen to minimize attrition, and past research has found that day-to-day variability in suicidal ideation is the norm rather than the exception (Witte et al., 2006). Participants will be compensated \$1 for the baseline survey and an additional \$3 for completing the survey at 2-month follow-up.

Although the risk of acutely suicidal participants in this study is relatively low, a specialized page will pop-up upon completion of the survey. On this page, participants will be provided with a variety of resources (e.g., 24-hour crisis hotline phone numbers) and they will be strongly encouraged to reach out for help if they are experiencing crisis. A previous study in our lab used this approach in managing possible suicide risk in an MTurk study that recruited individuals who engaged in self-injury and assessed risk behaviors.

Measures

Self-report measures will assess demographics, minority stress (e.g., Lesbian, Gay, and Bisexual Identity Scale), psychological risk factors for suicidality (e.g., Interpersonal Needs Questionnaire), and suicidal ideation and behavior (Beck Scale for Suicide Ideation).

Results

Hypotheses, Data Analysis, and Anticipated Results

The first aim of the study is to integrate suicidological models (IPT and Clinical Model) and Minority Stress Model to understand risk factors related to suicidal ideation among sexual minorities. Based on prior research (Plöderl et al., 2014), I hypothesize that factors included in each of the models will uniquely predict subsequent suicidal ideation. Regression analyses will examine whether risk factors at baseline predict suicidal ideation at follow-up, controlling for baseline suicidal ideation and gender.

The second specific aim of the study is to explore whether risk factors differ between bisexual young adults and gay/lesbian young adults. I hypothesize that risk factors will predict suicidal ideation for both groups, with the bisexual subgroup showing significantly stronger associations due to lack of protective factors such as less connectedness to the LGBTQ

community. Moderation analyses using SPSS Process Macro will test whether associations differ between subgroups, controlling for gender.

Discussion

Feasibility and Need for Funding

NJPA support would be solely used for participant compensation. Based on typical MTurk compensation, participants will be paid \$1 for the baseline survey and \$3 for follow-up, which totals \$2000 for a sample of 500. This funding would allow this dissertation to be completed and support my goal to continue conducting research on suicide prevention in sexual minorities.

Implications

The current study will be one of the few studies to examine established suicidological models in sexual minority individuals and integrate them with minority stress models. These findings will contribute to a more integrated framework for understanding the development of suicide risk in sexual minority individuals, a group which exhibits elevated suicide risk. Furthermore, this study will be the first to extend this research to bisexual young adults, an even more understudied group which remains stigmatized even among sexual minorities. Therefore, the results will help tailor existing prevention and intervention efforts and develop new strategies to better serve sexual minorities, including the bisexual subgroup.

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