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PREVENTING THE VIOLENT (RE)VICTIMIZATION OF SEXUAL MINORITY  
POPULATIONS: THE ROLE OF SOCIAL SUPPORT NETWORKS

By

Bryan Charles Moore  
B.S., University of Louisville, 2011  
J.D., William & Mary Law School, 2014

A Dissertation  
Submitted to the Faculty of the  
College of Arts and Sciences of the University of Louisville  
in Partial Fulfillment of the Requirements  
for the Degree of

Doctor of Philosophy  
in Criminal Justice

Department of Criminal Justice  
University of Louisville  
Louisville, Kentucky

May 2024

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A Dissertation Approved on

March 27<sup>th</sup>, 2024

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## DEDICATION

This dissertation is dedicated to my parents,  
Tony Kipp Moore and Janice Faye Grisham Moore,  
without whom this would not have been possible.

## ACKNOWLEDGEMENTS

I would like to thank Dr. Viviana Andreescu for serving as both the chair of the committee for this dissertation and as a mentor for the past three years. I have learned a significant amount of invaluable knowledge from you, whether in class or working on scholarship. This dissertation would not have been possible without your keen and thorough insight and guidance.

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I would finally like to thank my mother, father, and sister who have supported me in innumerable ways throughout my life and God for providing me with the opportunity and capacity to pursue a career in which I hope to make a positive impact.

## ABSTRACT

### PREVENTING THE VIOLENT (RE)VICTIMIZATION OF SEXUAL MINORITY POPULATIONS: THE ROLE OF SOCIAL SUPPORT NETWORKS

Bryan Charles Moore

March 27, 2024

Every year, interpersonal violence affects an important segment of the world population, having deleterious effects on the victims, their families, and societies. Recent scholarship indicates that sexual and gender minority population groups are overrepresented among those who experience or have experienced verbal, psychological, physical, and/or sexual violence. Using an integrative approach, the current study links the past and the present to identify the contextual factors that may increase or decrease the sexual minorities' risk of violent victimization during adulthood. This dissertation uses as a theoretical framework Bronfenbrenner's (1977, 1979, 1994) social ecological model of human development as well as its subsequent adaptations to victimization research (Belsky, 1980; Grauerholz, 2000; Heise, 1998).

This dissertation examines why certain individuals tend to experience violent victimization over their life-course, while others' victimization experiences are limited solely to childhood/adolescence or adulthood. The analysis is based on data collected between 2016 and 2018 from a nationally representative sample of sexual minority adults (N = 1,507) in the United States (Krueger et al., 2020). This retrospective study examines



a special population group that is currently understudied in victimology and its results are useful in filling knowledge gaps in the existing literature on victimization.

Findings indicate that adverse childhood experiences and childhood victimization by parents, caregivers, peers, or others increase the likelihood of future victimization. While substance abuse in adulthood increases the risk of victimization in post-adolescence, social support from family and friends acts as a protective factor against victimization or revictimization in adulthood. Additionally, the proposed typology of victims (i.e., adolescence-limited victims; adulthood-limited victims; lifetime victims) indicates that sexual minorities who reported lifetime direct violent victimization were more likely to be individuals who did not grow up in intact families, were exposed in childhood to inter-parental violence, misused drugs, and alcohol later in life, and received diminished social support from family and friends. Moreover, the lifetime victims of violence were more likely to have a sexual identity other than homosexual and were between 27 and 60 years old. Compared to men, women were more likely to experience direct violent revictimization over their life span. The implications of the findings for research and practice and the study limitations are also discussed.

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## CHAPTER 1

### INTRODUCTION

Two decades ago, in his foreword to the World Health Organization (WHO) report on violence in the world, Nelson Mandela (2002) noted that “the twentieth century will be remembered as a century marked by violence” (p. ix). Nonetheless, in the twenty first century, violence continues to be a major social problem that negatively affects annually billions of people’s lives worldwide. Recent global estimates indicate that one billion children have experienced physical, sexual, or emotional violence in the past twelve months. One in three women have been subjected to physical and/or sexual violence at least once since they were 15 years old. In 2019, interpersonal violence accounted for 475,000 deaths (WHO, 2022, p. 2). While violence has long-term detrimental effects on the victims’ physical and mental health, it also places a heavy strain on local and national economies (Bureau of Justice Statistics, 2022; WHO, 2022).

Costs related to violence include both public funds such as the large amounts required annually to maintain the law enforcement, courts, and corrections systems as well as private funds, such as medical and related costs for the treatment of victims of crime. While it is impossible to calculate the exact cost of violent crime on society, in 2019, the estimated global impact of violence surpassed fourteen trillion dollars, representing approximately 10.5% of the world’s annual gross domestic product (Institute for Economics & Peace, 2021). Researchers studying the costs of crime have estimated

that 85% of all crime costs in the United States are due to violence. That means that of the estimated 2.6 trillion dollars of crime costs in 2017, violence was responsible for an estimated 2.2 trillion dollars (Miller et al., 2021).

Beyond these financial consequences, it is well known that victims of violence and their families are often subjected to serious physical, mental, and emotional harms. Inter alia, the consequences of an act of violence on an individual may extend far beyond the time the victimization occurred (Finkelhor et al., 2011). Another unfortunate reality is that some individuals are more likely to be victimized than others. Quantitative research suggests that some people who are members of marginalized and disadvantaged groups are often at a greater risk of violent victimization. This is especially true when an individual has “intersecting” marginalized or disadvantaged identities (Crenshaw, 1989, 1991). Recent National Crime Victimization Survey data indicate that sexual and gender minority adults, especially bisexual and transgender individuals, have an increased risk of violent victimization (Truman & Morgan, 2022). Recent data also show that compared to heterosexual youth, sexual and gender minority adolescents were more likely to report bullying, physical victimization, or being threatened with physical victimization (The Trevor Project, 2022).

To prevent and reduce future violent victimization, it is critical for scholars to better understand what characteristics have those individuals that face an increased risk of victimization. One relevant factor that should be considered refers to the individual’s life experiences. In particular, when examining life trajectories, it is important to look at the impact of adverse childhood experiences, including vicarious and direct violent victimization experiences in childhood and adolescence.

The violent victimization of children is common occurrence in the United States and it exists in multiple forms. A study based on data collected in the United States from a large, nationally representative sample of individuals under age 18 found that 37.3% of children and adolescents experienced at least one physical assault in the year prior to the administration of the survey. Approximately 1.4% of children experienced at least one sexual assault in the year preceding the survey. Moreover, 5% of children were physically abused, 9.3% of children were emotionally abused, and 5.1% of children were neglected by caregivers during the past 12 months (Finkelhor et al., 2015). The data suggest that violence and abuse do not occur in a vacuum. A large portion of the children experienced polyvictimization. Four out of ten children (40.9%) were exposed to more than one type of violence, crime, or abuse (Finkelhor et al., 2015).

Violent crime has a particularly marked effect on the health and wellbeing of young individuals who are still developing mentally, psychologically, and emotionally. The effect on a young person is even more pronounced when violence is frequently experienced or there are multiple types of violence experienced (Finkelhor et al., 2011, 2013). When violence and trauma is inflicted on an individual in early childhood and adolescence, it can put into motion trajectories that may potentially increase the likelihood of future negative life outcomes. Research has shown that individuals who are victimized in childhood or adolescence are more likely to be revictimized later in life (Finkelhor et al., 2007).

Revictimization is especially concerning because it suggests that an already vulnerable class, the victims, are at higher risk of future victimization. Yet, the underlying causes or revictimization are still understudied. There is an inadequate current



understanding in the literature of what actual impact initial violent victimization has on increasing the odds of an individual being violently victimized again at a later point in their life and what processes are responsible for that relationship. Questions remain that need to be addressed. Why are some children and adolescents who are violently victimized more likely to be revictimized in adulthood, but not others? Do life-course victims have common characteristics or shared experiences? Do individuals' behaviors contribute to their victimization? Are there ways to limit the future risk of revictimization? Using as a theoretical framework a socio-ecological model of human development, which considers the complex interactions between individuals and their social environments (Belsky, 1980; Bronfenbrenner, 1977, 1979, 1994; Grauerholz, 2000; Heise, 1998; Pittenger et al., 2016) the proposed study intends to address such questions. Specifically, using secondary data collected between March 2016 and March 2018 from a national sample (N =1,507) of cisgender, sexual minority adults (Krueger et al., 2020), the proposed dissertation plans to identify some of the factors (e.g., individual attributes, adverse childhood experiences, social support, involvement in risky behavior, generational status) that may increase or decrease the risk of violent victimization in adulthood.

In summary, although the literature shows that childhood victims of violence have an increased risk of revictimization later in life (Finkelhor et al., 2007; WHO, 2022), some of these victims are not revictimized in adulthood. The proposed retrospective study intends to identify the mechanisms that could prevent revictimization in adulthood. Even if the topic was covered in prior research (Mason et al., 2009; Papalia et al., 2021, Strøm et al., 2020), the number of studies that addressed the issue using multivariate

analyses and were based on national samples of sexual minority individuals is very small (e.g., Balsam et al., 2011; Heidt et al., 2005; Pantalone et al., 2014; Schneeberger et al., 2014). This study will contribute to the current limited literature on the violent victimization of sexual minority persons and will inform future programs and policies meant to prevent and reduce the violent victimization of persons belonging to vulnerable social minority groups.

## CHAPTER 2

### VIOLENCE AGAINST SEXUAL AND GENDER MINORITY POPULATIONS

Sexual and gender minority (SGM) youth and adult populations in the United States are subject to disproportionate levels of harassment and violent victimization compared to the general population (The Trevor Project, 2022; Truman & Morgan, 2022). This chapter will examine this issue in two sections. The first section will discuss the disproportionate rate of violent victimization experienced by SGM individuals. The second section will discuss the deleterious effects of violent victimization and discrimination on SGM youth.

#### *The Disproportionate Victimization of Sexual and Gender Minority Individuals*

The National Crime Victimization Survey (NCVS) is a survey that assesses rates and trends in victimization in the United States. It has been conducted annually by the U.S. Department of Justice's Bureau of Justice Statistics (BJS) since 1973. Per the BJS website, the NCVS is the "the nation's primary source of information on criminal victimization." The survey collects data from a representative sample of the U.S. population of approximately 240,000 individuals twelve years of age and older from approximately 150,000 households. In completing the survey, respondents report demographic information and information related to non-fatal violent and household property crime victimization that they have experienced (whether or not it was reported to the police.) Respondents are questioned on topics such as characteristics of the crime,

the crime location, and the offender and reasons they decided to report (or not report) the crime to the police (BJS, 2023).

While earlier research had often suggested that sexual and gender minority (SGM) individuals were more frequently victimized than their heterosexual peers, up until quite recently, comparative research into victimization of SGM individuals at the national level was difficult because the NCVS did not question any respondents about either their sexual orientation or gender identity prior to 2016 (Flores et al., 2020). In July 2016, the NCVS first began asking respondents 16 years of age and older to disclose their sexual orientation and gender identity. In regard to sexual orientation, the NCVS asks respondents, “Which of the following best represents how you think of yourself?” allowing for possible responses (which are given to the respondent) of either “lesbian or gay,” “straight, that is, not lesbian or gay,” “bisexual,” “something else,” “I don’t know the answer,” or “refused (to answer)” (Truman & Morgan, 2022). In regard to gender identity, the NCVS asks respondents a series of three questions. In the first question, the NCVS asks respondents, “What sex were you assigned at birth, on your original birth certificate?” In the second question, respondents are asked, “Do you currently consider yourself as male, female, or transgender?” The third question then asks the respondent to confirm their assigned sex at birth and how they currently identify. Possible response options are shown to interviewers for each of the three questions but are not given to the respondent. Individuals who report divergent responses as to their sex assigned at birth and their current identity are classified as transgender for terms of this survey (For a more precise explanation of transgender classification in the NCVS survey and its nuances, see Truman & Morgan, 2022).

Due to the addition of this series of questions related to sexual orientation and gender identity, researchers can now compare national victimization trends between sexual minorities and heterosexual individuals as well as gender minorities and cisgender individuals. An analysis of 2017-2020 NCVS data confirms the suspicions that SGM individuals are more frequently victimized at the national level in the United States and, often, at an alarmingly concerning degree (Truman & Morgan, 2022).

To begin examining the statistics, it is first worth noting the frequency of SGM individuals in the general population as this is necessary for calculations to determine what rate of victimization SGM individuals experience to compare to heterosexual individuals. According to the NCVS results (Truman & Morgan, 2022), between the years of 2017 and 2020, 1.35% of respondents 16 years of age and older self-identified as “gay or lesbian,” 0.71% self-identified as “bisexual,” 0.20% self-identified as “something else,” and 0.34% self-identified as “don’t know.” An additional 2.44% refused to answer and 94.94% self-identified as “straight.” In addition, approximately 0.11% of respondents identified as transgender.<sup>1</sup> Based on this information, it can be concluded that SGM persons represent approximately 5% of the United States population. These estimates are consistent with the results of national polling conducted by Gallup in 2020, which indicate that approximately 5.6% of adults in the United States self-identified as lesbian, gay, bisexual, or transgender in 2020 (Jones, 2022).

In NCVS, violent victimization encompasses cases of rape, sexual assault, robbery, aggravated assault, and simple assault. Analysis of the NCVS data collected

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<sup>1</sup> It is worth noting that the percentage of transgender individuals may overlap with the sexual orientation categories because while sexual orientation and gender identity are in some ways relevant to each other, they are not synonymous with each other. An individual can be of any gender identity and sexual orientation.

between 2017 and 2020 shows that SGM individuals reported higher levels of violent victimization than the general population. Compared to heterosexual individuals, gay males, lesbians, and bisexuals were more likely to be victims of violence. Among sexual minorities, bisexual individuals were at an especially increased risk for violent victimization (Truman & Morgan, 2022). Results indicate that between 2017 and 2020, 129.1 violent victimizations occurred per 1,000 bisexual individuals.<sup>2</sup> This is considerably higher than the 43.5 violent victimizations that occurred per 1,000 gay or lesbian individuals and the 19.0 violent victimizations that occurred per 1,000 heterosexual individuals. In regard to gender identity, transgender individuals were about 2.5 times as likely as cisgender<sup>3</sup> individuals to be violently victimized (51.5 victimizations per 1,000 trans individuals compared to 20.5 per 1,000 cisgender individuals).

The data make it very clear that SGM individuals are more likely to be violently victimized than heterosexual and cisgender individuals. As the Statistical Brief concluded,

During 2017-2020, the victimization-to-population ratio for persons who identified as lesbian or gay was 2.2, meaning that the percentage of violent victimizations for persons who identified as lesbians or gay (3.0%) was about two times the percentage of lesbians or gays in the population. The victimization-to-population ratio was 6.4 for bisexual persons who accounted for 0.7% of the population and 4.7% of violent victimizations and 0.9 for straight persons. The victimization-to-population ratio for transgender persons also exceeded their share of the population. Transgender persons accounted (for) 0.3% of violent victimizations during 2017-2020, for a ratio of 2.5 (Truman & Morgan, 2022, p. 2).

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<sup>2</sup> The rate of victimization for those who identified as “something else” was 106.2 per 1,000 individuals.

<sup>3</sup> Cisgender is a term used to describe a person whose gender identity corresponds to their sex assigned at birth.

Analysis of the 2017 to 2020 NCVS data shows similar trends for individual types of violent crimes as well. In regard to rape or sexual assault, bisexuals were about 18 times more likely to be victimized than heterosexuals and homosexual individuals were about twice as likely to be victimized than heterosexuals. The rates of rape or sexual assault victimizations per 1,000 individuals were 27.6, 3.1, and 1.5 for bisexuals, lesbians and gays, and heterosexuals, respectively. In regard to robbery, bisexuals were nearly nine times more likely to be victimized than heterosexuals and lesbians and gays were around 3.5 times more likely to be victimized than heterosexuals. The rates of robbery victimizations per 1,000 individuals were 15.7, 6.4, and 1.8 for bisexuals, lesbians and gays, and heterosexuals respectively. Regarding aggravated assault, bisexuals were nearly five times more likely to be victimized than heterosexuals with rates of aggravated assault victimizations per 1,000 individuals being 16.4 and 3.4 for bisexuals and heterosexuals, respectively (Truman & Morgan, 2022).

The NCVS distinguishes between domestic violence victimization and intimate-partner violence victimization. Domestic violence refers to acts of violence committed by either current or former intimate partners of the victim or acts of violence committed by family members of the victim. The NCVS classifies intimate partner violence (IPV) as only acts of violence committed by a current or former intimate partner of the victim. Thus, domestic violence is a more inclusive category (compared to IPV) with correspondingly higher rates of occurrence because it includes both violent acts committed by intimate partners in addition to acts of violence committed by family members of the victim.

Analysis of the 2017 to 2020 data revealed that bisexual individuals were nearly eight times more likely to be victims of domestic violence than heterosexuals. Lesbians and gays were around 2.5 times more likely to be victims of domestic violence than heterosexuals with rates of domestic violence victimizations per 1,000 individuals being 32.3, 10.3, and 4.2 for bisexuals, lesbians and gays, and heterosexuals, respectively. Similarly, bisexual individuals were over eight times more likely to be victims of IPV than heterosexuals. Bisexuals were victims of IPV at a rate of 20.9 per 1,000 individuals, while heterosexuals were victims of IPV at a rate of only 2.5 per 1,000 individuals (Truman & Morgan, 2022).

In addition to being at greater risk of violent victimization overall, individual types of violent criminal victimization, and domestic and intimate partner violence, NCVS data reveals that SGM individuals in general and bisexuals in particular, are more likely to experience violent crime committed by a stranger, violent crime involving injury, and violent crime involving a weapon (Truman & Morgan, 2022). In regard to violence committed by persons unknown to the victims, bisexual individuals were over seven times more likely to be victimized than heterosexuals, while lesbians and gays were around three times more likely to be victims than heterosexuals. The rates of violence committed by strangers were 55.0, 23.4, and 7.6 per 1,000 persons for bisexuals, lesbians and gays, and heterosexuals, respectively. In regard to violent crime involving an injury, bisexual individuals were around 8.5 times more likely to be victims than heterosexuals and lesbians and gays were around 2.5 times more likely to be victims than heterosexuals, with rates of victimization (with injury) per 1,000 individuals being 35.7, 10.8, and 4.2 for bisexuals, lesbians and gays, and heterosexuals, respectively. In regard



to violent crime involving a weapon, bisexual individuals were over five times more likely to be victims than heterosexuals and homosexual persons were almost twice as likely to be victims than heterosexuals. The rates of victimizations (involving a weapon) per 1,000 individuals were 22.0, 7.9, and 4.2 for bisexuals, homosexuals, and heterosexuals, respectively (Truman & Morgan, 2022).

In their review of the literature, Felix et al. (2024) conclude that there is evidence indicating that sexual and gender minority individuals, especially trans and gender non-conforming individuals, are at higher risk of polyvictimization (experiencing multiple types of victimization) than heterosexual and cisgender individuals. The authors note that existing research indicates polyvictimization can lead to exacerbated negative outcomes in the lives of sexual and gender minorities. Relatedly, evidence also suggests there is an increased intersectional impact when multiple marginalization exists (for example, individuals who are members of both a racial and sexual or gender minority). The authors note that while there is existing research related to polyvictimization, it is currently an understudied area. Little research has been done related to polyvictimization among sexual and gender minorities. As such, there is insufficient literature to fully understand topics including what variables impact the risk of polyvictimization of sexual and gender minority individuals, how multiple relevant variables may have intersectional effects, and what impact polyvictimization has on negative life outcomes (Felix et al., 2024).

### ***The Bullying and Victimization of Sexual and Gender Minority Adolescents***

The Trevor Project's 2022 *National Survey on LGBTQ Youth Mental Health* collected data from a national sample of youth (N = 33, 993) in the United States who identified as being part of a sexual or gender minority (SGM) group. The respondents'

age varied from 13 to 24 years (The Trevor Project, 2022). Survey results indicated that SGM youth in the United States frequently experience or are threatened with physical harm and are discriminated against due to their minority status.

In regard to physical harm, 36% of respondents indicated that they had been physically harmed or threatened due to their sexual orientation or gender identity at some point in their lifetime. Almost one third (31%) of respondents indicated that at least once they had been physically harmed or threatened with violence due to their sexual orientation. Of the gender minority respondents (transgender and nonbinary), 37% indicated that they had been physically harmed or threatened due to their gender identity. Data also revealed that compared to non-victims, individuals who have been physically harmed or threatened with physical harm were three times more likely to report suicide attempts during the year preceding the survey (i.e., 29% of victims vs. 10% of non-victims attempted suicide; The Trevor Project, 2022).

The frequency at which SGM youth reported experiencing discrimination at some point in their lifetime was even higher. About three out of four respondents (73%) indicated that they had been discriminated against due to their sexual orientation or gender identity at least once in their life. Approximately 65% of respondents indicated that they had been discriminated against due to their sexual orientation. Among gender minority respondents (transgender and nonbinary), 71% indicated that at least once they had been discriminated against due to their gender identity. Individuals who experienced discrimination were also more likely to report suicide attempts. While 7% of respondents who never faced discrimination attempted suicide in the past year, 19% of respondents

who ever faced discrimination attempted suicide in the past year (The Trevor Project, 2022).

The survey also found evidence that increased social support by friends and family led to a reduction in suicide attempts. Similarly, respondents who reported living in a community accepting of LGBTQ people reported lower rates of suicide attempts. As Amit Paley, the CEO of the Trevor Project, summarized,

The fact that very simple things — like support from family and friends, seeing LGBTQ representation in media, and having your gender expression and pronouns respected — can have such a positive impact on the mental health of an LGBTQ young person is inspiring, and it should command more attention in conversations around suicide prevention and public debates around LGBTQ inclusion (The Trevor Project, 2022, p. 23).

Several recent studies have also demonstrated that SGM youth are at increased risk of violent victimization and bullying compared to their heterosexual and cisgender peers. Martin-Storey and Fish (2019) analyzed data from a longitudinal study of adolescents between the ages of nine and fifteen. The authors examined the incidence of victimization among sexual minority children and heterosexual children in three areas (i.e., self-reported victimization, teacher-reported victimization, and primary caregiver-reported victimization). According to youth self-reports and reports from teachers, sexual minority children are victimized at higher levels as early as eight or nine years of age. Similarly, Kahle (2020) found that SGM youth are at greater risk of bullying. Based on data from the 2013 *Youth Risk Behavioral System Survey* (YRBSS) conducted by the Centers for Disease Control (CDC), Kahle concluded that SGM high school students (grades nine through twelve) are at increased risk of bullying for all three types of victimization examined (i.e., traditional bullying, electronic bullying, and sexual orientation focused bullying). The results indicate that SGM high school students were

about twice as likely to experience traditional bullying and over eight times as likely to experience homophobic bullying than heterosexual and cisgender students (Kahle, 2020).

Consistent with the findings previously presented (The Trevor Project, 2022; Truman & Morgan, 2022), recent research has demonstrated that SGM youth are also at increased odds of sexual victimization and intimate-partner victimization. Williams and Gutierrez (2021) examined data collected from the 2019 YRBSS survey conducted by the CDC and found that SGM high school students (grades nine through twelve) were nearly three times more likely to experience forced sexual intercourse, over two times more likely to experience forced sexual violence, and over two times more likely to experience sexual dating violence than their heterosexual and cisgender peers. In each of these categories, SGM females were significantly more likely to experience victimization than males. In a similar study, based on data collected from the 2017 and 2019 YRBSS surveys, Hazelwood (2023) found that sexual minority students were more likely to experience both physical and sexual intimate partner violence than their heterosexual peers. Within this subgroup, bisexual students were more than twice as likely to experience sexual intimate partner violence than homosexual students.

Research related to the consequences of bullying and victimization of SGM youth has shown that the maltreatment of SGM youth leads to deleterious effects on the health and wellbeing of SGM youth. For instance, Goldbach et al. (2014) conducted a meta-analysis of existing studies examining the relationship between sexual minority status and adolescents' substance use. Their review of five relevant peer-reviewed studies found that research tends to show that one of the strongest predictors of substance use for sexual minority adolescents is victimization. There was a higher correlation between general

victimization of sexual minority youth and substance use, but there was also a correlation between sexuality-related victimization (such as homophobic teasing by peers) and substance use as well. Reisner et al. (2015) found a similar connection between bullying and the gender minority adolescents' substance use. Their analysis shows that gender minority adolescents were disproportionately exposed to bullying and harassment, which were associated with increased use of alcohol, marijuana, and nonmarijuana drug abuse.

Victimization and bullying of SGM youth can have serious mental health consequences as well. Gorse (2022) conducted a literature review examining risks and protective factors associated with suicide among SGM youth. The author concluded that a majority of SGM students in the United States experience school victimization and feel a lack of school support, which contributes to the SGM students' elevated levels of suicidal ideation, suicide attempts, and completed suicides. Gorse further noted that "school victimization contributes to lack of a sense of belonging, minority stress, depression, contraction of sexually transmitted diseases, non-suicidal self-injury, suicidal ideation, suicide planning, and suicide attempts" (Gorse, 2022, p. 21). As can be seen from these three studies regarding the effects of school victimization and bullying, school bullying and victimization has significant deleterious effects on the physical and mental health and general wellbeing of SGM youth. Given that the long-term detrimental effects of childhood and adolescence victimization experienced by gender and sexual minority population groups have been documented by research as well (Andreescu, 2023; Rimes et al., 2019; Rotondi, 2012; Trujillo et al., 2017), more research is needed to inform programs and policies meant to prevent and reduce the violent victimization of LGBTQ individuals.

## CHAPTER 3

### THEORETICAL FRAMEWORK AND LITERATURE REVIEW

During the past century, criminologists and other social scientists have developed a multitude of theories to explain individual variations in criminal offending or variations in crime rates at the community level. The number of criminological theories that can be used to explain variations in victimization at the individual level is, however, limited. Even though in the 1920s, Edwin Sutherland (1924) devoted to victims of crime an entire chapter of his influential book *Criminology*, the scientific study of victimization truly started in the 1940s. Its pioneers were the German criminologist Hans von Hentig and the Romanian criminal law scholar Benjamin Mendelsohn (van Dijk, 1999). In 1947, during a presentation he made at the Romanian Psychiatric Association conference in Bucharest, Mendelsohn coined the term victimology or the “science of the victim”. Both von Hentig (1941, 1948) and Mendelsohn (1956) created typologies of the victims, which considered the victim’s involvement in the criminal act (Andreescu, 2016). Although these early works were mainly descriptive, they influenced the development of fully articulated theories of victimization formulated by criminologists in the 1970s. These theories are the lifestyle exposure theory (Hindelang et al., 1978) and routine activity theory (Cohen & Felson, 1979). These theories perceive “victimization as a function of opportunity” (Wilcox, 2010, p. 985) and stress the role of the victim in the criminal act. They are theoretically framing most criminological research that focuses on victimization and at a limited extent inform the current dissertation.

According to the lifestyle exposure theory of victimization (Hindelang et al., in 1978, p. 24), the individuals' personal characteristics and their lifestyle or "routine daily activities," defined as both vocational and leisure activities, would be evaluated by a potential offender, playing an important role in the perpetrator's decision to victimize or not. Hindelang, Gottfredson and Garofalo (1978, pp. 251–264) argued that the risk of victimization increases with the amount of time one spends in public places especially at night, with the amount of time spent in public places with nonfamily members, and with increased exposure to criminal offenders. When analyzing victimization survey data, the authors observed that certain population groups (e.g., youth, males, the poor, singles, racial minorities) had higher rates of victimization than others. Additional analyses showed that by virtue of their lifestyle, these groups created opportunities for victimization. Further research generally showed a positive correlation between exposure to risk and actual victimization (Eigenberg & Garland, 2008).

Initially designed as a macro-level theory, the routine activity theory (Cohen & Felson, 1979) has been further applied to explain victimization risk across individuals (Wilcox, 2010). Similar to the lifestyle exposure theory, Cohen and Felson's (1979) routine activities theory states that a crime will occur if a motivated offender, a suitable target, and a lack of guardianship will converge in time and space. Each of these elements is necessary and has to be present at the same time and location for a criminal event to occur. Cohen and Felson (1979) argue that the legitimate activities individuals routinely engage in at home or away from home, such as work, leisure, or education, may place the potential victims in direct contact with predatory criminal events. When a motivated offender is present and capable guardians are absent, suitable targets are more likely to be

victimized (Cohen & Felson, 1979). Although the theory has traditionally been used to explain property crime victimization, routine activity theory has been also applied in studies that focused on predatory crimes such as rape, stalking, and sexual harassment.

Given the communalities shared by the “lifestyle exposure theory” (Hindelang et al., 1978) and the “routine activities theory” (Cohen & Felson, 1979), several studies integrated them into one single theory, which is known as the “lifestyle routine activities theory,” or “LRAT” (Engstrom, 2021; Pratt & Turanovic, 2016). Throughout the past four decades, LRAT has been studied, criticized, and reconceptualized extensively. Finkelhor and Asdigian (1996), for instance, brought attention to the shortcomings of LRAT as it was understood at the time of their writing. The authors noted that many individuals who are victimized are victimized at no fault of their own. Child victims, for example, have been victimized even if they did not engage in risky or delinquent lifestyles. Further, some individuals, such as women, may be at higher risk of sexual and violent victimization due to their gender and other innate characteristics that are not related to one’s lifestyles or risky behaviors. As the authors noted, “femaleness is not a routine activity. (...) Femaleness does not put women at differential risk of sexual assault by anything they do. Femaleness itself is a risk attribute” (Finkelhor & Asdigian, 1996, p. 5).

While acknowledging that certain environmental factors may “expose or protect victims from victimization,” Finkelhor and Asdigian’s (1996) revised model stressed the role played by individual attributes, which would increase one’s vulnerability to victimization, independent of any routine activities. According to the authors, individuals are more susceptible to victimization when their characteristics are congruent with the



offender's "needs, motives, or reactivities" (p. 6). Through "target congruence", the risk of victimization increases in one or more specific ways, such as target vulnerability, target gratifiability, or target antagonism. For instance, certain individuals (e.g., women, the elderly) may be targeted because they are perceived to be vulnerable or incapable to defend themselves or show resistance when attacked. Other potential victims might have attributes (e.g., sexual attraction, material wealth), the offender would find gratifying. Referring to target antagonism, Finkelhor and Asdigian (1996) noted that certain characteristics (e.g., race/ethnicity, sexual minority status or gender nonconformity) may stimulate the jealousy or the destructive impulses of a potential violent offender.

Although the reconceptualized form of the life exposure/routine activity theory offers a more detailed picture of the factors that may explain why certain individuals are victimized while others are not, Finkelhor and Asdigian's (1996) version of LRAT focuses extensively on the victim's individual characteristics, does not consider personal history factors or the impact of the social environment when explaining victimization, and has a limited ability to explain (re)victimization over the life course. To overcome these limitations, the proposed study will use a broader approach and will be theoretically informed by a socio-ecological model.

Since the late 1970s, when Bronfenbrenner (1977, 1979) introduced the ecological model as a theory of human development, the adapted ecological model has been frequently used to explain violent offending and violent victimization. Because it offers a better understanding of the multifaceted nature of violence (Dahlberg & Krug, 2002), the ecological framework has become one of the most widely applied approaches in violence research (Kim, 2023, p. 2083). In the early 2000s, the ecological model

informed the World Health Organization (WHO) report on global violence (Krug et al., 2002). The WHO's model has also been adopted by the Centers for Disease Control and Prevention (CDC) as a framework for violence prevention (CDC, 2022). As noted in the World Violence and Health Report produced by the World Health Organization,

No single factor explains why some individuals behave violently toward others or why violence is more prevalent in some communities than in others. Violence is the result of the complex interplay of individual, relationship, social, cultural, and environmental factors. Understanding how these factors are related to violence is one of the important steps in the public health approach to preventing violence (Dahlberg & Krug, 2002, p. 12).

### **Bronfenbrenner's Ecological Systems Theory of Human Development**

According to Bronfenbrenner (1977, 1979), human development is a result of an evolving interaction of the developing persons with their environment. The author defined development as "a lasting change in the way in which a person perceives and deals with his environment" (Bronfenbrenner, 1979, p. 3). In Bronfenbrenner's novel schema, the definition of the environment differs from earlier formulations not only in scope but also in content and structure. Specifically, "the ecological environment is conceived as a set of nested structures, each inside the next, like a set of Russian dolls. At the innermost level is the immediate setting containing the developing person" (Bronfenbrenner, 1979, p. 3). As Belsky (1980) noted, "Bronfenbrenner (1977, 1979) is concerned not so much with development per se but with the contexts in which development takes place" (p. 321).

Bronfenbrenner continued to develop and refine his ecological theory model to what is now known as the bioecological system theory model. The current bioecological

system theory model considers an individual's genetic attributes and biological characteristics in addition to ecological impacts on an individual's human development (Bronfenbrenner, 1994; Bronfenbrenner & Ceci, 1994). Even though Bronfenbrenner updated his original model, two key propositions of his theory remained unchanged (Bronfenbrenner, 1977, 1979, 1994).

The first proposition states that throughout the life course (and especially in early stages of an individual's life), human development occurs through an increasingly complex system of reciprocal interactions that individuals have with other individuals, objects, and symbols in their immediate environment. Examples of these types of interactions are communication and play with parents and other children, learning to read, and developing new skills. For effective human development, it is essential that these interactions occur routinely over extended periods of an individual's life. As these interactions become lasting patterns, they come to be referred to as proximal processes (Bronfenbrenner, 1994).

The second proposition states that proximal processes, vary in "form, power, content, and direction" among individuals (Bronfenbrenner, 1994, p. 38). These varying proximal processes are shaped by the individuals' characteristics and by their immediate and more remote social environments. Essentially, Bronfenbrenner states that human development is largely dependent on the lasting effect of an individual's proximal processes, which are impacted by both a variety of ecological influences and one's individual characteristics (Bronfenbrenner, 1994).

In sum, human development is shaped by complex interactions between individuals and their environments. As previously noted, in Bronfenbrenner's view, "the

ecological environment is conceived topologically as a nested arrangement of concentric structures, each contained within the next” (Bronfenbrenner, 1979, p. 22). These structures are referred to as five interrelated systems (i.e., microsystem, mesosystem, exosystem, macrosystem, and chronosystem). The microsystems, mesosystems, exosystems, and macrosystems consider the interaction between individuals in environmental settings at both the micro and macro levels (Bronfenbrenner, 1977, 1979). The fifth type of ecological influence (i.e., chronosystems) concerns the element of time (Bronfenbrenner, 1994).

The *microsystem* is defined as a “pattern of activities, social roles, and interpersonal relations experienced by the developing person in a given face-to-face setting with particular physical, social, and symbolic features that invite, permit, or inhibit engagement” (Bronfenbrenner, 1994, p. 39). A “setting” is defined as a place where people can readily engage in direct interactions. “The factors of activity, role, and interpersonal relation constitute the elements, or building blocks, of the microsystem” (Bronfenbrenner, 1979, p. 22). In short, in Bronfenbrenner’s model, microsystems refer to the lowest level of human interactions occurring in a specified setting, such as school, home, church, playgrounds, or the workplace. However, not all microsystems have lasting effects. There is a difference between a nurturing family where parents regularly spend quality time with their children and engage with them in healthy ways and a neglectful family where the children are often ignored. It is for this reason that the content and structure of microsystems need to be examined when assessing the impact of proximal processes on life-course outcomes (Bronfenbrenner, 1994).

The *mesosystem* is the second level of ecological systems that affects the proximal processes of a person's development. According to Bronfenbrenner (1994), the mesosystem "comprises the linkages and processes taking place between two or more settings containing the developing person" (p. 40). For a child, the mesosystem refers to interpersonal relationships with family members or the peer group. For an adult, the system refers to one's relationships with family members, co-workers, or with other individuals in various social environments. "A mesosystem is thus a system of microsystems. It is formed or extended whenever the developing person moves into a new setting" (Bronfenbrenner, 1979, p. 25).

The third level of the ecological systems discussed by Bronfenbrenner is the *exosystem*. An exosystem "refers to one or more settings that do not involve the developing person as an active participant, but in which events occur that affect, or are affected by what happens in the setting containing the developing person" (Bronfenbrenner, 1979, p. 25). The exosystem is similar, yet distinct from the mesosystem. Like the mesosystem, the exosystem considers the linkages and processes between microsystems, but "at least one does not contain the developing person" (Bronfenbrenner, 1994, p. 40). Bronfenbrenner noted that exosystems have a direct impact on the developing person's life even if there is no direct interaction between the developing person and a particular setting. For instance, the parent's workplace might impact the development of a child, even though the child never actually goes to the parent's workplace. Additionally, the parents' social networks and the influence of community on family functioning are exosystems that are particularly relevant to family processes because they may indirectly impact child development (Bronfenbrenner, 1994).

The fourth level of the ecological system discussed by Bronfenbrenner is the *macrosystem*. This is the largest level and also the most abstract. Bronfenbrenner (1994) refers to it as the “societal blueprint of a particular culture or subculture” (p. 40). This level encompasses the underlying exosystems, macrosystems, and microsystems and their cultural and subcultural characteristics. A macrosystem refers to the beliefs, customs, and ideals of a society or culture and may exist in formal ways such as laws, regulations, and rules, or more informally, such as everyday life practices and bodies of knowledge (Bronfenbrenner, 1977, 1994).

The *chronosystem* represents the final level of Bronfenbrenner’s (1994) ecological system. By considering the temporal dimension, which was not included when the model was originally formulated (Bronfenbrenner, 1977, 1979), Bronfenbrenner extended his ecological systems theory. Bronfenbrenner (1994) argues that not only individuals change as they age. Societal views change over time as well, and generations of individuals may be differentially affected by these macro-level changes.

Bronfenbrenner was not the only scholar who extended and/or revised the ecological theory of development. Belsky (1980), for instance, proposed a revised version of Bronfenbrenner’s (1977, 1979) work when describing the etiology of child maltreatment. Even though Belsky’s (1980) four-level model excludes the mesosystem and does not include the chronosystem, it adds an innermost level named *ontogenic development*. This first level of the ecological model refers to the individual-level attributes and the life history of the developing person.

While since the 1980s, several scholars have used different terms when labeling the nested levels of the ecological model, these more recent adaptations of the earlier

models (Belsky, 1980; Bronfenbrenner, 1979) continued to preserve “the notion of embedded levels of causality” when explaining variations in offending and/or victimization (Heise, 1998, p. 264). For example, the violence-prevention model used by the Centers for Disease Control and Prevention (2022) is a four-level social-ecological model that considers “the complex interplay between individual, relationship, community, and societal factors.”

### **Applying Ecological Systems Theory to Violent Victimization**

Following the introduction of the ecological systems theory model to psychological research in the area of human development, researchers began to see utility in applying the model to other areas of concern, such as violent offending and violent victimization. As previously noted, the ecological systems theoretical model was used as early as 1980 to explain child abuse and neglect (see Belsky, 1980). Throughout the 1980s and 1990s, the ecological model was applied to explore offending and victimization related to battery and domestic violence (Heise, 1998). Heise (1998) recognized that the ecological systems theory model was relevant to the study of violent victimization and abuse because by exploring the effects of various individual-level factors and of the way they interact, the theoretical model offers a more integrative perspective. The author called for greater utilization of ecological systems theory in gender-based violence research and like Belsky (1980) proposed a four-level theoretical framework when exploring gender-based abuse. Drawing on Belsky’s (1980) ecological model, Heise’s (1998) proposed model used four nested levels that grouped ontogenic factors as well as factors corresponding to microsystems, exosystems, and macrosystems to explain intimate partner violence against women. Based on her review of the literature,

Heise (1998) listed the factors at the four levels of inquiry that research showed were significant predictors of violence against women. It should be noted, however, that most of the selected predictors referred to ontogenic and situational factors at the micro-, exo-, and macro-system levels pertaining to the offender and not to the victim. Nonetheless, the author noted that at the ontogenic level, witnessing inter-parental violence as a child was a consistent predictor of intimate partner victimization for women. Moreover, at the exosystem level, a lack of social support from family and friends, as well as the women's isolation were listed as risk factors of victimization for women. The author also noted that the framework she proposed is "by no means definitive or complete, but it does provide an interesting heuristic tool for conceptualizing future research" (Heise, 1998, p. 282).

Also informed by Belsky's (1980) ecological model of child maltreatment and Heise's (1998) work, Grauerholz (2000) proposed a four-level hypothetical ecological model meant to explain sexual revictimization. At the ontogenic level, Grauerholz (2000), included initial sexual victimization in childhood and potential negative outcomes (e.g., substance misuse, low self-esteem, social isolation, running away from home, premarital pregnancy, stigmatization, etc.). The author also noted that growing up in a dysfunctional family, a broken family, or in a family characterized by a patriarchal structure, and with unsupportive parents constitute early family experiences that may be relevant factors related to sexual revictimization later in life.

At the microsystems level, Grauerholz (2000) included two categories as relevant factors: exposure risk (e.g., drug or alcohol use and involvement in deviant activities as coping mechanisms to the initial victimization that may expose the individual to higher



risk of victimization) and factors that may increase the risk of the perpetrator acting aggressively. Most of the factors included here resemble Finkelhor and Asdigian's (1996) concept of "target congruency" that has been presented earlier in this chapter. When viewed together, the two factors Grauerholz (2000) included at the microsystem level are consistent with the tenets of the lifestyle routine activities theory of victimization (Cohen & Felson, 1979; Finkelhor & Asdigian, 1996; Hindelang et al., 1978).

The risk factors of sexual revictimization listed at the exosystem level are lack of resources (e.g., low socioeconomic status; unsafe living conditions; early childbearing; single motherhood; divorce) and "lack of alternatives" due to weak family ties, lack of social support, and social isolation. Moreover, at the macrosystem level, Grauerholz (2000, p. 7) argues that a cultural tendency to blame the victim as well as the social construction of femininity as "good girl/bad girl" would increase the risk of revictimization for childhood victims of sexual abuse.

While the theoretical models inspired by Belsky's (1980) ecological model of child maltreatment included the impact of macrosystem-level factors (e.g., Grauerholz, 2000; Heise, 1998), recent meta-analyses (e.g., Kim, 2023; Spencer et al., 2019) based on violence research studies that framed their analyses in accordance with the ecological model's tenets discuss the interplay of only three levels of the ecological system (i.e., ontogenic/individual, microsystem, and exosystem). In her meta-analysis of the risk factors associated with intimate partner homicide perpetration and victimization, Kim (2023), for instance, noted that the effect of the macro-level factors could not be assessed because variables measuring the intimate partners' risks of lethal victimization or offending at the macrosystem level were not included in the reviewed studies. The next

section of the chapter will summarize the literature pertaining to various factors that may increase the risk of violent (re)victimization in adulthood at various levels of the ecological system.

### ***Individual / Ontogenic Risk Factors of Adult Victimization***

The ontogenic level refers to the potential victim's developmental history and defines what individuals bring to the nested social context as a result of their personal history. "Ontogenic factors refer to those features of an individual's developmental experience or personality that shape his or her response to microsystem and exosystem stressors" (Heise, 1998, p. 266). At this first level of the ecological system, adverse childhood experiences (e.g., growing up in a broken family; exposure to interparental violence; violent victimization by a parent; sexual victimization; peer victimization) were often considered potential risk markers of adult victimization (see Grauerholz, 2000). However, the negative long-term effects of childhood adversity were not always documented by research.

#### *Exposure to interparental violence in the family of origin*

Based on their examination of 52 studies that focused on intimate partner violence, Hotaling and Sugarman (1986) concluded that witnessing interparental violence as a child or adolescent was a significant risk marker of intimate partner victimization for women. However, in a later multivariate analysis of data from the National Crime Victimization Survey, Hotaling and Sugarman (1990) found that exposure to interparental violence did not differentiate female victims of intimate partner violence from their counterparts who did not report being assaulted by an intimate partner. Yet, Özkan et al. (2023) found that young adults who experienced inter-parental conflict in childhood

and adolescence were more likely to report psychological abuse by a dating partner. Similar results were reported by Paat and Markham (2019), who found that exposure to domestic violence in the family of origin was a significant predictor of physical victimization by a dating partner among college students who had been in heterosexual dating relationships that lasted at least one month. Additionally, Whitton et al.'s (2021) analysis of data collected from a sample (N= 308) of female adults belonging to sexual and gender minority groups (78% cisgender; 22% transgender) indicates that women who witnessed interparental violence were more likely to report intimate partner violent victimization. Messinger et al., (2021) also found in a sample of adult women (N = 457; 74% cisgender; 26% transgender) that witnessing interparental violence was significantly and positively associated with all forms of intimate partner violent victimization. Moreover, Spencer et al.'s (2019) meta-analysis shows that exposure to interparental violence has a significant effect on women's (Mean  $r = .20$ ;  $p < .05$ ) and males' intimate partner victimization (Mean  $r = .17$ ;  $p < .05$ ).

However, a recent analysis of data from a national sample of transgender individuals in the United States shows that exposure to interparental violence before age 18, was not a significant predictor of polyvictimization in adulthood (Andreescu, 2024). Nonetheless, the authors of a recent systematic review based on studies conducted mostly with college students, concluded that in 11 out of 17 studies (65%), exposure to interparental violence was a significant predictor of violent victimization in adulthood (Singh & Thomas, 2021). In sum, while exposure to violence in the family of origin is often a significant predictor of violent victimization in intimate relationships, the effect is

not consistent when referring to victimization events occurring outside of an intimate relationship.

*Childhood maltreatment by parents*

Family-interaction patterns play an important role in the ecological model of human development (Belsky, 1980; Bronfenbrenner, 1979). Freyd's (1996) betrayal trauma theory explains why childhood maltreatment may negatively impact the individuals' behavioral outcomes and may increase their risk of victimization later in life. According to Freyd (2008), "betrayal trauma occurs when the people or institutions on which a person depends for survival significantly violate that person's trust or well-being. Childhood physical, emotional, or sexual abuse perpetrated by a caregiver are examples of betrayal trauma" (p. 76). Gobin and Freyd (2009) noted that when the perpetrator of abuse is a parent, the victim faces a higher risk of revictimization in adulthood. It is argued that in order to cope with maltreatment by someone close, the victims would adopt maladaptive behaviors (e.g., substance misuse; risky sexual behavior) that would increase their risk of revictimization in adulthood (Andreescu, 2024).

Although exceptions exist, research findings generally show that individuals who have been childhood victims of verbal, psychological, and/or physical parental abuse are more likely to report victimization in adulthood. Hotaling and Sugarman (1986) noted that in nine out of thirteen studies (69%) included in their review, childhood victims of parental violence were more likely to report intimate partner violent victimization in adulthood. Using a sample of female college students (N = 551), Rich et al. (2005) found that respondents who reported maternal verbal abuse and parental physical abuse during childhood were more likely to report victimization by a dating partner. Paat and

Markham (2019), however, found that physical victimization by parents did not significantly increase the risk of physical victimization by a dating partner in a sample of American college students. It should be noted that the sample was not stratified by gender, which might have impacted the findings.

Nonetheless, Lindhorst et al. (2009) found that women who reported being verbally and physically abused by parents were more likely to report later in life intimate partner violent victimization. Similarly, Andersson et al. (2020) concluded that female victims of childhood emotional and physical abuse by parents were more likely to report sexual victimization in adulthood. Moreover, an analysis of data from a sample of cisgender and transgender females shows that those who reported parental verbal abuse and/or parental physical maltreatment were more likely to report intimate partner violent victimization in adulthood (Messinger et al., 2021). Additionally, a study based on survey data collected from a sample of homosexual men in Germany (N = 310) shows that respondents who reported being physically abused by parents were more likely to report severe sexual victimization in adulthood (Krahé et al., 2001). Andreescu (2024) also found that trans victims of parental physical violence were more likely to report polyvictimization in adulthood.

The authors of a recent systematic review of studies that examined risk and protective factors related to the revictimization of survivors of childhood sexual abuse found that most studies (five out of nine; 56%) that explored the long-term effect of childhood maltreatment concluded that childhood victimization was a significant predictor of sexual revictimization in adulthood (Scoglio et al., 2021). Spencer et al.'s (2019) meta-analysis also shows that both men and women who reported child abuse in

the family of origin were significantly more likely to be victims of intimate partner violence.

#### *Family-of-origin structure*

Bronfenbrenner (1979) frequently stressed the importance of the family structure when discussing the microsystem factors that may affect child development and acknowledged that developmental disturbance is manifested among children from single-parent families. Based on a review of empirical research, Bronfenbrenner (1979) concluded that parental separation and divorce disrupt the socialization processes in the parent-child dyad and significantly increase a child's risk of developing emotional and behavior problems, especially when the single parent does not have access to social support (Bronfenbrenner, 1979, pp. 74-79). In studies based on adults, the structure of one's family of origin becomes part of an individual's personal history and that is why it is seen here as an ontogenic level factor.

While several studies examined the impact of family structure on behavioral outcomes and/or victimization in childhood and adolescence (see Boccio et al., 2019; Stritzel et al., 2021; Turner et al., 2013; Wells & Rankin, 1991), a small number of studies also attempted to determine if individuals who did not grow up in intact families were more vulnerable to victimization in adulthood. Research findings show mixed effects. For instance, Paat and Markham (2019) noted that college students who grew up with both biological parents were significantly less likely to report physical victimization by a dating partner when compared to their counterparts who did not grow up in intact families. Yet, Andersson et al.'s findings show that women who grew up in foster care and those whose parents got divorced were not significantly more likely to report sexual

victimization in adulthood. On the other hand, men who experienced divorce in their family of origin were more likely to report sexual victimization in adulthood (Andersson et al., 2020).

#### *Childhood sexual victimization*

“Systematic reviews, meta-analyses, and single studies of specific populations consistently show that sexually abused children run a significantly higher risk of being revictimized in adolescence and adulthood” (Andersson et al., 2020, p. 3). These findings are consistent with psychological theoretical tenets stating that childhood sexual victimization is a traumatic event for children that may generate serious and persistent mental health problems, which in turn would increase the victims’ risk of revictimization in adolescence and adulthood (Arata, 2002; Messman-Moore & Long, 2003; Pittenger et al., 2016). For instance, a prospective longitudinal study conducted in Australia (N = 2,759) shows that victims of childhood sexual abuse experienced significantly higher rates of revictimization in adulthood, “with marked elevations in odds for interpersonal revictimization (i.e., sexual assault, physical assault, threats of violence, and stalking)” (Papalia et al., 2021, p. 74). The findings of a study conducted in Sweden and based on a large nationally representative sample of adults (N = 10,337) indicate that both men and women who reported childhood sexual victimization were more likely to be victims of sexual violence in adulthood (Andersson et al., 2020). Krahe and Berger (2017) also found in a sample of college students in Germany (N = 2,251) that both men and women with a history of child sexual abuse were more likely to report sexual victimization in early adulthood. Using data from a large sample of adult lesbian and bisexual women (N = 2,431), Morris and Balsam (2003) found that when compared to those who were not

sexually victimized during childhood or adolescence, childhood victims of sexual violence were significantly more likely to report sexual victimization in adulthood.

Additionally, Messinger et al. (2021) found in a sample of sexual and gender minority females that a history of childhood sexual abuse was a significant predictor of intimate partner violent victimization in adulthood. Similarly, Krahe et al. (2001) found in a sample of homosexual men that childhood sexual abuse was a significant predictor of adult sexual victimization. Moreover, an analysis based on a sample of homosexual men (N = 647) shows that males with a history of childhood sexual abuse were twice more likely to report physical victimization by a relationship partner than men without a history of child sexual abuse (Kalichman et al., 2004). Similarly, Pantalone et al. (2014) found in a sample of homosexual men (N = 171) that those who experienced childhood sexual abuse were significantly more likely to report emotional, physical, and sexual victimization in adulthood. Furthermore, childhood sexual victimization was significantly and positively associated with polyvictimization in adulthood in a sample of transgender individuals in the United States (Andreescu, 2024).

In sum, childhood victims of sexual abuse face a higher risk of sexual revictimization in adulthood, as documented by meta-analytical research (e.g., Walker et al., 2019) and a higher risk of non-sexual violent victimization as well. It is often argued that survivors of childhood sexual abuse are more vulnerable to revictimization because they “have an increased propensity for non-assertiveness when they are confronted with potential threatening situations” and also because “many of these survivors are socialized into a victim role early in life and may react more passively due to fear of violence or loss of affection/relationship status” (Walker & Wamser-Nanney, 2023, p. 2320).



### *Peer victimization*

While the effects of peer victimization on children's and adolescents' well-being have been extensively examined, only a limited number of studies explored the potential long-term effects of bullying on violent victimization recorded during adulthood. Based on longitudinal data collected from a sample of 251 individuals that were surveyed from age 12 to age 22, Brendgen and Poulin (2018), found that those who reported being bullied at school were more likely to be revictimized at work by colleagues and/or supervisors. Similar findings were reported by Smith, Singer, Hoel, and Cooper (2003). Tyler and Schmitz (2021) also found in a sample of homeless individuals that included adolescents and young adults (N = 150) that those with a history of peer victimization were more likely to report recent physical and sexual victimization. Moreover, a study based on a large sample (N = 21,339) of Swiss army recruits in their early 20s, also found that compared to those who were never or were rarely victimized by peers, recruits who reported they had been bullied "rather often" between the ages of 6 and 11 were more likely to report violent victimization during the year preceding the survey (Staubli & Killias, 2011).

Similarly, a recent study based on data collected from a national sample of transgender individuals in the United States concluded that trans persons who were bullied by peers in childhood and adolescence were more likely to experience polyvictimization in adulthood (Andreescu, 2024). However, Andersson et al. (2020) found that when controlling for all the variables in the model, being bullied in childhood was no longer a significant predictor of adult sexual victimization for both men and women.

### *Microsystem Risk Factors of Victimization*

The microsystem refers to one's direct interactions with other individuals as well as to the subjective meanings assigned to these interactions (Heise, 1998, p. 269). As previously noted, in her theoretical ecological model meant to explain sexual revictimization, Grauerholz (2000) included two categories as relevant microsystem risk factors of revictimization. One of these factors (i.e., exposure risk) refers to substance misuse and involvement in deviant activities. Following Grauerholz (2000) and in accordance with the lifestyle exposure routine activities theory (Cohen & Felson, 1979; Hindelang et al., 1978), it can be argued that drug and alcohol misuse would increase not only the risk of sexual revictimization, but also the risk of violent victimization in general. As Walker and Wamser-Nanney (2023) noted, substance misuse has been identified as a key mechanism of revictimization because alcohol and/or drug consumption may alter the individuals' capacity to protect themselves when they are in potentially dangerous situations, increasing one's vulnerability to (re)victimization. Survivors of childhood maltreatment, especially survivors of childhood sexual abuse, often use drugs and alcohol to cope with trauma-related distress, which elevates their risk for revictimization in adulthood (Messman-Moore et al., 2015).

#### *Substance misuse*

Research frequently documented a positive link between alcohol consumption and aggressive behavior (Crane et al., 2016; Sontate et al., 2021). Although most studies of violent behavior focused on the perpetrators of violence and their lifestyles, researchers also examined the victims' contribution to their own victimization. Results of studies that tried to determine if the victims' substance misuse increased their risk of victimization

are, however, inconsistent. For instance, Stith et al.'s (2004) meta-analysis showed a small association between victims' lifestyle alcohol use and physical intimate partner violent (IPV) victimization. Capaldi et al.'s (2012) review of the literature also indicates that victims who used alcohol and drugs were more likely to report intimate partner violent victimization, with drug use showing the strongest relationship across individual studies. Similarly, Cafferky et al.'s (2018) meta-analysis shows a small to medium associations between intimate partner victimization and victims' lifestyle substance use ( $r = .21, p < .001$ ), lifestyle alcohol use ( $r = .18, p < .001$ ) and lifestyle drug use ( $r = .26, p < .001$ ). Additionally, Spencer et al.'s (2019) meta-analysis indicates that the victims' drug use and/or alcohol use are significant risk markers of IPV physical victimization for males and females. Moreover, a study that explored the correlates of revictimization in a sample of over 700 victims of intimate partner violence found significant positive associations between the victims' drug usage and minor and severe physical victimization by an intimate partner (Testa et al., 2003).

Additionally, Strøm et al. (2020) found that young adults in Norway who engaged in frequent binge drinking were more likely to report revictimization. Cusack et al. (2021) also found in a large sample of college students that rates of sexual assault revictimization were higher for those with reported an alcohol use disorder. Moreover, Seid et al. (2022) found that drug usage was a significant predictor of violent revictimization in a large sample of individuals treated for a substance use disorder.

However, the victims' excessive drinking was not a significant predictor of IPV victimization in Testa et al.'s (2003) study. Based on their extensive review of the literature, Hotaling and Sugarman (1986) also concluded that the female victims' alcohol

use was not a significant predictor of IPV victimization. Authors of more recent systematic reviews reached similar conclusions (Hébert et al., 2021). For instance, several studies found that the victims' alcohol and substance use did not impact variations in IPV victimization (Engstrom et al., 2008) or adult sexual victimization (Arata, 1999; Gidycz et al., 1995; Lindhorst et al., 2009; Messman-Moore & Long, 2002). A recent systematic review based on 25 studies that examined the risk factors of revictimization among survivors of childhood sexual abuse identified only four studies that examined the impact of the victims' substance misuse on revictimization. Two of these studies found that substance misuse increases the risk of revictimization, and two studies were not able to document significant associations between substance misuse and revictimization (Scoglio et al., 2021).

A small number of studies focused on the risk of factors of revictimization experienced by sexual minorities. For instance, Blackburn et al.'s (2023) recent meta-analysis identified 17 studies that examined sexual assault revictimization experienced by sexual minorities. Results showed that revictimization rates were high among sexual minority individuals (i.e., the pool rate of revictimization was 49.4%). Regarding substance misuse as a risk factor of adult victimization, results were mixed. While Sutton et al. (2022) did not find that adult sexual assault was related to problematic alcohol use in a sample of LGBTQ+ college students, McConnell and Messman-Moore (2018) concluded that hazardous drinking increased the risk of sexual assault victimization in a sample of bisexual women. Similarly, data from a sample of lesbian and bisexual women showed that heavy alcohol users were more likely to report experiences of adult sexual victimization (Hequembourg et al., 2013).

### *Exosystem Victimization-Related Factors*

The exosystem focuses on social structures of the victim's life, which can include both formal and informal social structures. Structures of the exosystem may include the victim's work environment, support systems, friendships, and other institutions with which the victim may have contact (Dutton & Goodman, 1995; Spencer et al., 2019). Although the variables included as indicators of the exosystem vary among studies that used or proposed an ecological approach when studying variations in violent victimization (see Heise, 1998; Kim, 2023), the extent of social support received by persons with high victimization risks was almost always considered. Investigations of the etiology of violent victimization have identified social support as an exosystem factor that may play a role in the victimization process through the influence it would exert on the microsystem. As Azimi and Daigle recently noted, the quality of interpersonal relationships influences one's life. While there is evidence that a lack of social support is linked to victimization, research also shows that individuals who lack social support are more likely to engage in risky lifestyle, which may increase one's risk of victimization (Azimi & Daigle, 2021).

#### *Social support system*

Even though several studies documented the positive role of social support systems as violence prevention mechanisms, findings are not always consistent. Whitton et al. (2021), for instance, found in a sample of sexual and gender minority individuals whose sex at birth was female, that those who had supportive families and friends were significantly less likely to report intimate partner violent victimization. An evaluation study that examined the impact of an advocacy intervention on revictimization among

female victims of intimate partner violence concluded that women with access to stronger social support systems were less likely to report intimate partner victimization two years post-intervention (Sullivan, 2000). Data from a sample of low-income women who were childhood victims of sexual violence showed that women who reported revictimization in adulthood also reported lower social support than women who were exclusively victimized in childhood or adulthood (Schumm et al., 2006). A longitudinal study based on data collected from women in rural Pakistan (N = 995) found that high social support from family, though not friends, decreased IPV severity one year later (Richardson et al., 2022). Using the Multidimensional Scale of Perceived Social Support, Dias et al. (2019) found in a multi-country study conducted in Europe that both male and female adults who experienced higher levels of physical assault and sexual coercion victimization by an intimate partner reported significantly lower levels of social support. Moreover, an analysis of data from a community sample in Norway, also showed that the risk of victimization in early adulthood decreased significantly for respondents who acknowledged social support (Strøm et al., 2020). Similar findings were reported by Hawn et al. (2018) who found that social support significantly decrease the risk of sexual assault revictimization for college students who were victims of sexual violence before they entered college.

A recent systematic review based on 18 studies that examined the association between childhood sexual victimization and physical, psychological, and sexual revictimization in romantic relationships in adulthood identified only one study that assessed the potential victimization prevention role of social support (Hébert et al., 2021). The study referenced by Hébert et al., (2021) was based on a sample of low-income

African American women (N = 362). Results showed that an increase in social support reduced the incidence of physical and non-physical IPV victimization (Bender et al., 2003).

Yet, using a national probability sample, Cazenave and Straus (1979) found that embeddedness in a network of family and friends reduced the intimate partner victimization reported by Black females but was not associated with less violence against the White women in the sample. Other studies also failed to show that perceived social support prevented sexual revictimization in adulthood (Lau & Kristensen, 2010; Mason et al., 2009; Mayall & Gold, 1995) or intimate partner violent victimization (Draucker, 1997; Engstrom et al., 2008). Moreover, results of a longitudinal study indicate that an increase in social support did not significantly prevent or reduce revictimization in a sample of young adults who reported being bullied early in their lives (Brendgen & Poulin, 2018).

### ***Macrosystem / Chronosystem Risk Factors of Victimization***

The macrosystem and the chronosystem represent the two final system parameters of Bronfenbrenner's (1994) ecological model of human development. As previously noted, when defining the macrosystem Bronfenbrenner (1994) noted that it consists of the overarching pattern of micro-, meso-, and exosystems characteristic of a given culture or subculture, with particular reference to the belief systems, bodies of knowledge, material resources, customs, life-styles, opportunity structures, hazards, and life course options that are embedded in each of these broader systems" (p.40). Although there is evidence that structural factors influence variations in violent victimization and offending, cultural norms that legitimate violence and institutional sexism, for instance,

“are constant, rather than variable features of social life” (Hotelling & Sugarman, 1986, p. 105). As a result, the risk factors of violent victimization at the macrosystem level could only be observed in multi-level studies, such as those that consider one’s country at a second level of the analysis (i.e., individuals are nested in larger geographic units that vary in terms of culture and belief systems).

Regarding the chronosystem, Bronfenbrenner (1994) noted that it “encompasses change or consistency over time not only in the characteristics of the person but also of the environment in which that person lives” (p. 40). In this respect, it can be argued that one’s age, specifically the generation a person belongs to would be able to capture the passage of time and how societal changes in attitudes and beliefs affected human interactions. In generation analysis, age cohorts are grouped, and each generation typically refers to groups of people born over a 15–20-year span. For instance, the Pew Research Center that conducts regularly generational analyses, classified individuals in five generations, such as the *Millennial Generation* (born after 1980), *Generation X* (born between 1965 and 1980), the *Baby Boom Generation* (born between 1946 and 1964), the *Silent Generation* (born between 1928 and 1945), and the *Greatest Generation* (born before 1928). It is argued that age cohorts allow researchers to “analyze changes in views over time; they can provide a way to understand how different formative experiences interact with the life cycle and aging process to shape people’s view of the world” (Pew Research Center, 2015). For individuals that belong to sexual and gender minority groups it is relevant to consider when they grew up and how their generation has been affected by changes in public attitudes toward LGBTQ persons and also by



legislative changes meant to ensure equal human rights for sexual and gender minority populations in the United States.

Nonetheless, the literature on violent victimization experienced by sexual and gender minority groups refers to recent experiences with victimization indicating that with age violent victimization is less frequent, as it is found in the general population (see Basile et al., 2023). For example, Bender and Lauritsen's (2021) recent analysis of data from the 2017-2018 National Crime Victimization surveys shows that the youngest cohort of sexual minority respondents (age 16 – 24) reported the highest incidence of violent victimization and serious violent victimization when compared to the oldest cohort (i.e., individuals 55 years old and older). To the author's knowledge, and as evidenced by recent meta-analyses based on victimization studies that used an ecological approach (e. g, Kim, 2023; Spencer et al., 2019), researchers did not explore potential inter-generational differences in violent victimization that occurred during childhood and adolescence years.

### **Current Study**

Informed by the ecological systems theory (Bronfenbrenner, 1979, 1994) and by further adaptations of the ecological model (Belsky, 1980; Grauerholz, 2000), the current study uses an integrated approach to explain variations in violent (re)victimization experienced by a national sample of individuals belonging to sexual minority groups. Given the structure of the data that will be used in this study and following prior research (see Kim, 2023 for a review), a three-level model will be used to examine the impact of ontogenic, microsystem, and exosystem, risk factors of violent victimization. The main objective of the analysis is to identify the circumstances that prevented the

revictimization in adulthood of individuals with a history of childhood and adolescence violent victimization.

In accordance with the theoretical predictions and prior research findings the following hypotheses are formulated:

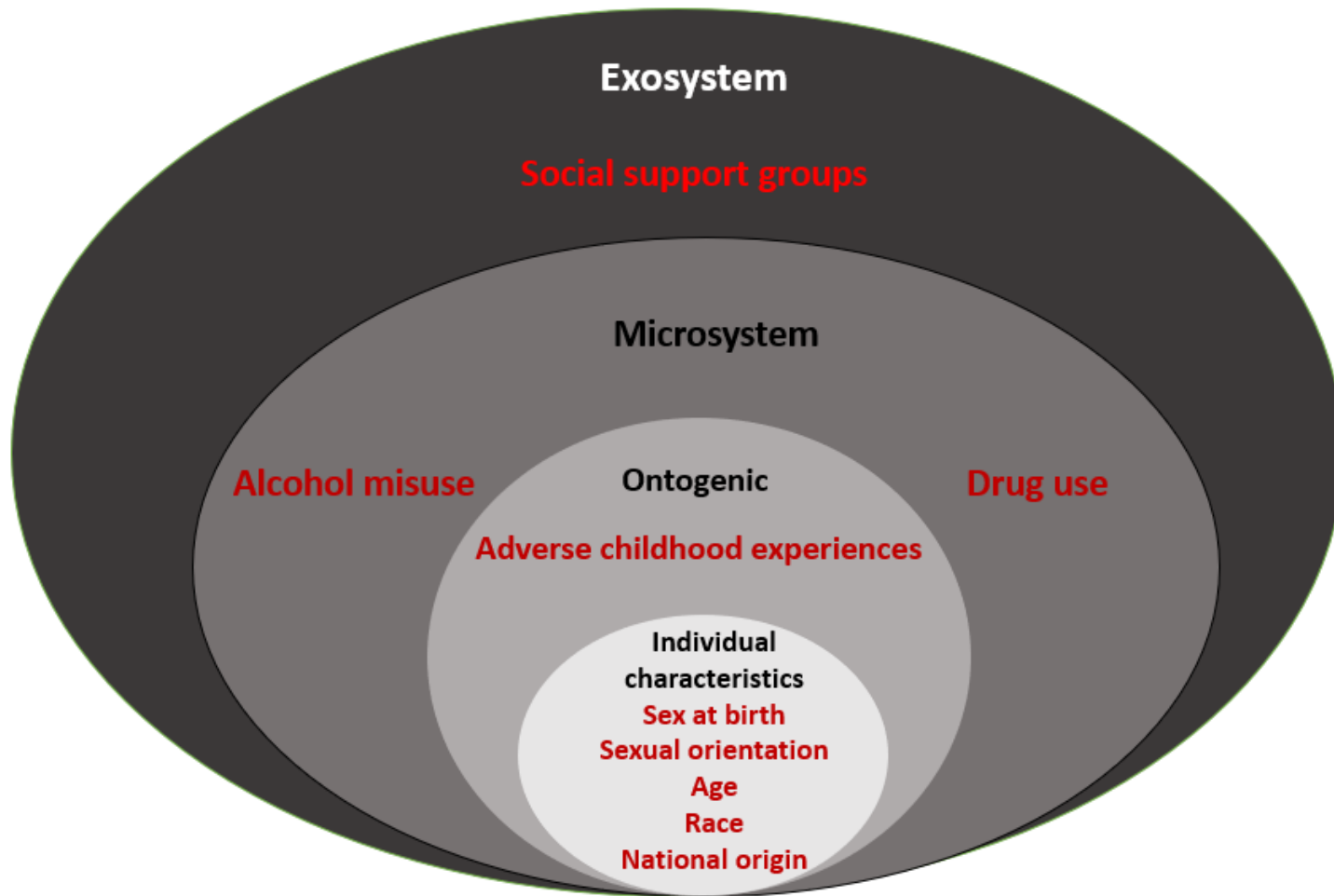
**H1.** Individuals with a childhood history of violent victimization and adverse childhood experiences are more likely to report revictimization in adulthood than their counterparts who were not victims of violence in childhood and adolescence.

**H2.** A risky lifestyle in adulthood (i.e., alcohol and drug misuse) will predict violent victimization in adulthood.

**H3.** High levels of perceived social support from family and friends will prevent violent victimization in adulthood.

It is also anticipated that one's age, sex at birth, sexual orientation, and national origin will differentiate adult victims of violence from those who were never victimized and from persons who experienced victimization exclusively during childhood or adolescence. Additionally, even though it is beyond the scope of the proposed study to examine the impact of the chronosystem risk factors of victimization, when interpreting the findings, the potential inter-generational differences in the respondents' personal experiences with victimization recorded before age 18 will be considered.

A graphical representation of the hypothetical ecological model that informs the current analysis is presented below (Figure 1).



**Figure 1. An Adapted Socio-Ecological Model for Analyzing the Victimization of Sexual Minorities**

## CHAPTER 4

### METHODOLOGY

#### **Data Source and Sampling Design**

The source of the data used in the current study is the first wave (survey one of three) of a longitudinal study (The Generations Study) funded primarily by a grant from the National Institute of Child Health and Human Development (NICHD) and supplemental grants from the National Institutes of Health (NIH), Office of Behavioral and Social Sciences Research (OBSSR) and the Office of Research on Women's Health (ORWH). The principal investigator of *The Generations Study* was Ilan Meyer, Ph.D. at the Williams Institute at the University of California Los Angeles (UCLA). The Generations Study was designed to examine health and well-being across three different generations (age groups) of non-transgender sexual minorities (Krueger et al., 2020).

Recruiting and surveying of participants for the study was completed by Gallup. Participants were first recruited by Gallup beginning in March 2016. Recruitment was done in two phases. First, respondents to Gallup's Daily Tracking Survey, which is conducted 350 days a year on a national probability sample of 1,000 adults 18 years old or older, were asked if they identified as lesbian, gay, bisexual, or transgender. If respondents indicated they were either lesbian, gay, bisexual, or transgender (LGBT), they qualified for potential consideration during the second phase of recruitment. In the second phase of recruitment, respondents were assessed for sexual orientation, gender

identity, and other relevant factors to determine if they qualified for all relevant criteria to be eligible for the study (Krueger et al., 2020). It should be noted that respondents were eligible for the study if they were sexual minorities (and not transgender); were between 18 and 60 years old; were Black, Latino, White, or multiracial; completed at least 6<sup>th</sup> grade; and could speak English well enough to complete the phone interview in English.

Respondents who were found to be eligible for the study were then invited to be part of the *Generations* study and were sent an email link to a survey questionnaire administered by Gallup. Respondents were sent a \$25 Amazon gift card (by email) or \$25 cash (by mail) for their participation in the study. Respondents were given informed consent paperwork prior to completing the surveys. Respondents were asked to complete two follow-up interviews annually over the next two years (both would qualify for the same incentive as the original survey) (Krueger et al., 2020).

The original baseline sample for wave 1, which is analyzed in the current study, was created between March 2016 and March 2017. In this time period, over 360,000 respondents were screened by Gallup. Of those screened, approximately 3.5% identified as LGBT. Approximately 27.5% of those identified as LGBT were determined to be eligible for the study. Approximately 80% of those eligible for the study agreed to participate and approximately 48% actually completed the study, for a participation rate of approximately 39% (1,369 respondents). The recruitment period was extended from April 2017 to March 2018 to oversample racial and ethnic minority respondents. Almost two hundred respondents (N=194) were recruited in this period. After removing 45 respondents who were found to have been incorrectly screened for age and/or gender identity criteria, the final baseline sample size was 1,518, which included 1,331 from the

original sample and 187 from the enhancement sample (Krueger et al., 2020). Based on additional screening, eleven respondents who declared their sexual identify as heterosexual were removed from the sample. The analysis was conducted on a sample of 1, 507 respondents who belonged to various sexual minority groups.

## **Measures**

### ***Dependent Variable***

*Violent victimization in adulthood.* The dependent variable is based on a question that asked respondents to indicate if they experienced violent victimization in adulthood (i.e., “Since the age of 18 how often were you hit, beaten, physically attacked, or sexually assaulted?”). The original Likert-type responses (1. Never; 2. Once; 3. Twice; 4. More than twice) have been recoded and respondents who said they were never victimized were coded zero, while those who experienced violent victimization at least once since age 18 have been coded 1.

### ***Independent Variables***

As previously noted, it is anticipated that adverse childhood experiences and risky behaviors in adulthood will increase the risk of (re)victimization in adulthood. Conversely, an increase in social support in adulthood is expected to act as “guardianship” and lower the risk of (re)victimization in adulthood.

### ***Ontogenic level factors: Adverse childhood experiences***

*Exposure to interparental violence.* This variable is based on a question that asks, “Before age 18, how often did your parents or adults in your home ever slap, hit, kick, punch or beat each other up?” Possible responses were ordinal in nature (“never,” “once,”

“more than once”). Answers have been dichotomized and respondents who witnessed inter-parental violence at least once were coded 1, while the others were coded zero.

*Parental verbal abuse.* The variable is based on a single questionnaire item (“Before 18 years of age, how often did a parent or adult in your home ever swear at you, insult, or put you down?”) with three response options (1: never; 2: once; 3: more than once). Respondents who said they were insulted or put down by a parent more than once were coded 1 and the others were coded zero.

*Parental physical abuse.* The variable is based on a question that asks, “Before age 18, how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way?” Respondents were instructed to not include spanking. Respondents who said they were never victims of parental physical violence were coded zero, while those who reported physical victimization by parents were coded 1.

*Family disruption.* This variable is based on a question that asks, “Before age 18, were your parents separated or divorced?” Possible responses are categorical (“yes,” “no,” and “parents were never married.”) Respondents who answered that their parents were separated, divorced, or never married were coded 1. Respondents who answered that during their childhood/adolescence their parents were married were coded 0.

*Childhood sexual victimization.* This composite measure (summative scale) is based on three questionnaire items (“How often did anyone at least 5 years older than you, or an adult, ever touch you sexually?”, “How often did anyone at least 5 years older than you, or an adult, try to make you touch them sexually?”, and “How often did anyone at least 5 years older than you, or an adult, force you to have sex?”). At each question, respondents who said they were never sexually victimized were coded zero, while those

who experienced any of the unwanted sexual acts at least once were coded 1. The variable takes values from 0 to 3 and has good internal consistency (Cronbach's Alpha = .872).

*Bullying victimization.* This variable is based on a question that asks, "How often, if ever, were you bullied before 18 years old?" This is an ordinal-level variable that takes values from 1 (never) to 4 (often).

### ***Microsystem level factors: Risky lifestyles in adulthood***

*Alcohol usage (binge drinking).* This variable is based on one question (i.e., "How often do you have six or more alcoholic drinks on one occasion?"). Possible responses are ordinal ("never", "less than monthly", "monthly", "weekly", and "daily or almost daily"). Originally, the variable took values from 1 (respondent never engages in binge drinking) to 5 (respondent engages in binge drinking daily or almost daily). The variable has been recoded and answers have been dichotomized. Respondents who reported never engaging in binge drinking were coded as 0 and respondents who reported binge drinking behavior were coded as 1.

*Drug usage.* This variable is based on a question that asks, "How often do you use drugs other than alcohol?" Respondents were coded on scale from 1 to 5. Those who responded "never" were coded 1, those who responded "monthly or less" were coded 2, those who responded "2-4 times a month" were coded 3, those who responded "2-3 times a week" were coded 4, and those who responded "4 or more times a week" were coded 5.

### ***Exosystem level factors***

*Social support* from friends and family in adulthood. This variable is a composite measure based on 12 questions designed to measure how respondents perceive they are



supported by friends and family. The items used in this index asked respondent to tell how strongly they agreed or disagreed with the following statements: “There is a special person who is around when I am in need”; “There is a special person with whom I can share my joys and sorrows”; “My family really tries to help me”; “I get the emotional help and support I need from my family”; “I have a special person who is a real source of comfort to me”; “My friends really try to help me”; “I can count on my friends when things go wrong”; “I can talk about my problems with my family”; “I have friends with whom I can share my joys and sorrows”; “There is a special person in my life who cares about my feelings”; “My family is willing to help me make decisions”; “I can talk about my problems with my friends”. Each item takes values from 1 (very strongly disagree) to 7 (very strongly agree). The measure (mean scores) is unidimensional and has good internal consistency (Alpha = .925).

### ***Control Measures***

*Sex assigned at birth* is a dichotomous variable coded 0 if the respondent’s sex at birth was male and 1 for respondents who reported they were designated as female at birth.

*Sexual orientation* is a series of three dummy variables (i.e., “bisexual” = 1, other = 0; “homosexual (gay, lesbian, and same-gender loving)” = 1, other = 0; “other gender identifications than bisexual or homosexual” = 1, other = 0).

*Generation* is a series of three dummy variables (i.e., “younger generation” = 1, other = 0; “middle generation” = 1, other = 0; “older generation = 1, other = 0).

Respondents in the younger generation were 18 to 26 years old when surveyed, those in the middle generation varied in age from 27 to 49 years, and the older generation

included respondents who were between 50 to 60 years old. Respondents belonging to the “middle generation” represent the reference category in the multivariate statistical models.

*Immigrant origin* is a dichotomous variable coded 0 if the respondent’s parents were both born in the United States and 1 if the at least one of the respondent’s parents was foreign born.

*Race/ethnicity* is a dichotomous variable coded 0 if the respondent’s reported race/ethnicity was non-Hispanic white and 1 if the respondent belonged to a racial/ethnic minority group.

### **Analytic Strategy**

First, univariate analyses were conducted and descriptive statistics (i.e., mean, standard deviation, and range) for all the measures included in the multivariate statistical models were reported. Bivariate analyses (e.g., bivariate correlations) and multivariate analyses were further conducted. Given the structure of the dependent variable and the main objective of the analysis, binomial logistic regression was used to identify the factors more likely to differentiate the LGB adult victims of violence from their counterparts who did not experience violent victimization in adulthood. Additionally, bivariate analysis and multivariate analysis (multinomial logistic regression) were conducted to differentiate between respondents who reported violent revictimization in adulthood and respondents who reported victimization solely during adolescence, solely during adulthood or were never victims of violence.

## CHAPTER 5

### RESULTS

This chapter presents the results of the quantitative analyses conducted in this study. Univariate, bivariate, and multivariate analyses were conducted to analyze the data. The univariate data analysis was used to describe the sample of sexual minority respondents. The bivariate analysis presents the correlations between the dependent variable, *violent victimization in adulthood*, and the independent variables. This allowed the researcher to determine if independent variables had a relationship with the dependent variable and, if so, what the strength of that relationship was. The correlation matrix shows the inter-correlations among independent variables as well. Additionally, binomial logistic regression was used to identify the factors more likely to predict violent victimization in adulthood. Listwise deletion has been used in the analyses presented here. The proportion of missing values varied from 0% to approximately 3%.

## Predictors of Violent Victimization in Adulthood

### *Descriptive Statistics*

Table 1 presents the descriptive statistics (frequencies, means, standard deviations, and ranges) for each variable to be used in multivariate analyses. Regarding the socio-demographic characteristics of the sample, it can be noticed that the sample is relatively balanced in terms of sex at birth (54% female; 46% male). Regarding one's sexual orientation, most respondents (55%) declared being homosexual (gay," "lesbian," or "same-gender loving"), about one-third of respondents reported being bisexual (33%) and 12% identified as having a sexual orientation other than homosexual or bisexual. (e.g., asexual, pansexual, queer, etc.).

The respondents' ages varied from 18 to 60 years old (Mean = 36.48; SD = 14.70). The largest portion of respondents (44%) belonged to the younger generation (age 18 to 26), 25% were part of the middle generation (age 27 to 49), and 31% were 50 years of age or older. While most respondents (81%) did not have an immediate immigrant background, approximately one in five respondents (19%) reported that at least one of their parents was born outside of the United States. Slightly over one-third (35%) of respondents reported that they were racial or ethnic minorities.

Regarding the dependent variable, *violent victimization in adulthood*, results indicate that a substantial portion of respondents (40%) reported being violently victimized since age 18. An analysis of the responses to questions related to variables at the ontogenic level indicates that respondents were frequently subject to abuse or adverse experiences in childhood and/or adolescence. Prior to age 18, over one third of those interviewed (37%) were exposed to interparental violence and four out of ten respondents

(43%) did not grow up in intact families. Most respondents (69%) reported that they been verbally abused by parents during childhood/adolescence and about four out of ten (41%) reported they had been physically victimized by parents.

Although most respondents (59.3%) were not child victims of sexual violence, four out of ten respondents (38%) reported being touched sexually and 33% said they were forced to touch sexually an adult or a person five years older than the respondent. About one in five respondents (21%) were forced to have sex with an adult or with someone five years older than the respondent at least once. Overall, 40.7% of the sample experienced at least one type of sexual victimization during childhood/adolescence and 19.3% of respondents were victims of all three types of sexual violence included in the original survey.

Regarding bullying victimization (Mean = 2.85, SD = 1.03), only 14.7% of respondents said they had “never” been bullied before they turned 18. Additional analyses show that most respondents (67%) have been bullied at least sometimes during their childhood/adolescence (i.e., 34.8% reported “sometimes” being bullied, and 32.7% of respondents reported “often” being bullied before age 18).

Univariate analyses of variables at the microsystem level indicate that substance misuse during adulthood was not uncommon among study participants. While analyses show that a majority of respondents (51%) report never engaging in binge drinking, nearly half of respondents (49%) do report binge drinking behavior at least on one occasion.

**Table 1. Descriptive Statistics**

<b>Variable</b>	<b>N</b>	<b>Range</b>	<b>Freq.</b>	<b>Mean</b>	<b>SD</b>
Violent victimization in adulthood	1,492	0 – 1	40%		
Exposure to interparental violence	1,507	0 – 1	37%		
Parental verbal abuse	1,507	0 – 1	69%		
Parental physical abuse	1,507	0 – 1	41%		
Family disruption	1,491	0 – 1	43%		
Childhood sexual victimization (Index)	1,507	0 – 3		.92	1.22
Sexually touched by another	1,507	0 – 1	38%		
Forced to sexually touch another	1,507	0 – 1	33%		
Forced to have sex	1,507	0 – 1	21%		
Bullying victimization	1,488	1 – 4		2.85	1.03
Alcohol use (binge drinking)	1,495	0 – 1	49%		
Drug use	1,488	1 – 5		1.90	1.38
Social support	1,463	1 – 7		5.20	1.30
Sex assigned at birth (Female)	1,485	0 – 1	54%		
Sexual orientation (Homosexual)	1,507	0 – 1	55%		
Sexual orientation (Bisexual)	1,507	0 – 1	33%		
Sexual orientation (Other)	1,507	0 – 1	12%		
Generation (Younger)	1,507	0 – 1	44%		
Generation (Middle)	1,507	0 – 1	25%		
Generation (Older)	1,507	0 – 1	31%		
Immigrant Origin	1,507	0 – 1	19%		
Race/ethnicity (Non-white)	1,507	0 – 1	35%		

Even though frequency analysis of data related to use of drugs other than alcohol reveals that most respondents (60.5%) acknowledged never using illegal drugs, 16% of the sample declared using drugs every week (e. g., 4.9% report using drugs “2-3 times per week,” and 11.4% report using drugs “4 times a week or more often”).

At the exosystem level, the level of perceived social support from family and friends is slightly above average. On a scale from 1 (low social support) to 7 (very high social support), the average score (Mean = 5.19; SD = 1.31) is slightly higher than 4, the mid-point of the scale interval. This indicates respondents generally perceive positive social support from their friends and family.

### ***Bivariate Correlations***

Table 2 presents the results of the bivariate analysis. The bivariate correlations included in table 2 show both the strength of the relationship between the dependent variable, *violent victimization in adulthood*, and each of the independent variables being studied as well as the strength of association among independent variables. Bivariate analysis of the overall sample, as hypothesized, found statistically significant relationships between the dependent variable and the independent variable for all but two variables (*immigrant origin* and *race/ethnicity*).

Each of the independent variables at the ontogenic level was found to be positively and significantly related to *violent victimization in adulthood*. The strength of these relationships ranged from weak to moderately low. The correlation coefficients show that those who experienced *childhood sexual victimization* ( $r = .28$ ;  $p < .001$ ), *parental physical abuse* ( $r = .22$ ;  $p < .001$ ), *exposure to interparental violence* ( $r = .22$ ;  $p$

< .01), *parental verbal abuse* ( $r = .18$ ;  $p < .001$ ), *bullying victimization* ( $r = .15$ ;  $p < .01$ ), and *family disruption* ( $r = .13$ ;  $p < .001$ ) were more likely to report being victimized in adulthood.

At the microsystem level, *drug use* was found to be positively and significantly related ( $r = .13$ ;  $p < .001$ ) to *violent victimization in adulthood*. Results indicate that there is a positive, yet weak relationship between *alcohol use (binge drinking)* and *violent victimization in adulthood* ( $r = .07$ ;  $p < .001$ ). Additionally, as hypothesized, at the exosystem level, the respondents' level of perceived *social support* was found to be negatively and significantly related ( $r = -.10$ ;  $p < .001$ ) to *violent victimization in adulthood*. Results indicate that the strength of each of the relationships at the microsystem and exosystem level appears to be relatively weak.

In regard to *assigned sex at birth*, results indicate a positive and significant relationship ( $r = .10$ ;  $p < .001$ ) between sex and *violent victimization in adulthood*, with females reporting being more frequent victimized than males. In regard to *sexual orientation*, results indicate that homosexual individuals were less likely to be victims of *violent victimization in adulthood* than other sexual minority individuals, including both bisexuals and those who identified as "other sexual minority" ( $r = -.11$ ;  $p < .001$ ). In regard to *generation*, results of the analyses indicate that younger individuals were less likely to report violent victimization in adulthood than individuals in the middle-age and older generation cohorts ( $r = -.09$ ;  $p < .001$ ). Finally, results of the analyses failed to find a significant relationship between either *immigrant origin* ( $r = -.03$ ;  $p = .200$ ) and *race/ethnicity* ( $r = -.01$ ;  $p = .579$ ) and *violent victimization in adulthood*. This indicates that respondents who had one or more parents who were immigrants to the U.S. or who



were racial or ethnic minorities were not significantly less likely to report violent victimization in adulthood than natives and non-Hispanic White respondents, respectively.

In summary, results of the bivariate analyses were supportive of all three hypotheses. Adverse childhood experiences (hypothesis #1), especially sexual victimization, had long term negative impacts on respondents, predicting victimization in adulthood. Risky lifestyle choices such as drug and alcohol misuse also predicted victimization in adulthood, as anticipated by hypothesis #2. Hypothesis #3 was also supported by the results. Although relatively weak, findings indicate there exists a negative and significant relationship between *social support* and *violent victimization in adulthood*. As predicted, this indicates perceived *social support* has a significant protective effect against violence. While the majority of the variables were found to have significant relationships with *violent victimization in adulthood*, there were two exceptions. Results indicated that *immigration origin* and *race/ethnicity*, do not appear to differentiate adult victims of violence from those who did not report violent victimization in adulthood. It can also be observed that the highest correlation coefficient was .47, suggesting that multicollinearity is not going to be an issue.

**Table 2. Intercorrelation Matrix**

15															1															
14															1	.29**														
13															1	.14**	.19**													
12															1	-.32**	-.02	.00												
11															1	-.36**	.11**	-.05	.01											
10															1	.03	.02	.01	.02	.01										
9															1	-.04	-.01	-.12**	.11**	.03	.06*									
8															1	.20**	.03	-.06*	-.07**	.14**	.04	.05								
7															1	.02	.08**	-.11**	-.09**	-.10**	.12**	-.02	-.05							
6															1	.11**	-.03*	.11**	-.06**	.13**	-.05	-.13**	.04	.16**						
5															1	.23**	.07**	.09**	.10**	-.03	.03	-.08**	.16**	.02	.23**					
4															1	.19**	.26**	.19**	.00	.12**	-.13**	.03	-.05	-.06*	.07*	.10**				
3															1	.43**	.16**	.19**	.28**	.03	.10**	-.15**	.01	-.08**	.05*	.01	.06*			
2															1	.36**	.47**	.36**	.30**	.16**	.00	.09**	-.08**	.03	-.03	.00	.04	.18**		
1															1	.22**	.18**	.22**	.13**	.28**	.15**	.07**	.13**	-.10**	.10**	-.11**	-.09**	-.03	-.01	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15															

\*p < .05; \*\*p<.01.1= Violent victimization in adulthood; 2= Exposure to interparental violence; 3 = Parental verbal abuse; 4 = Parental physical abuse; 5= family disruption. 6= Sexual victimization; 7= Bullying victimization; 8= Binge drinking; 9= Drug use; 10=Social support; 11=Female; 12=Homosexual; 13=Young; 14=Immigrant origin; 15= Racial/ethnic minority

### ***Binomial Logistic Regression***

Table 3 presents the results of the binomial logistic regression analysis used to examine which independent variables were more likely to have a statistically significant impact (whether positive or negative) on violent victimization in adulthood. As anticipated by the bivariate analysis, collinearity diagnostics indicate that multicollinearity is not problematic. Allison (1999) explains that a variance inflation factor (VIF) might be a cause for concern when its value is higher than 4.000. The highest VIF value in the current analysis is 1.795.

Results were generally supportive of the hypothesis stating that adverse childhood experiences and childhood trauma at the ontogenic level would increase the risk of violent victimization in adulthood. In fact, four out of six of these independent variables examined in the binomial logistic regression at the ontogenic level were found to indicate such a positive relationship at a statistically significant level ( $p < .05$ ). Respondents who reported *childhood sexual victimization* and *physical abuse by their parents* were significantly more likely to report *violent victimization in adulthood*, respectively (OR = 1.394,  $p < .001$ ) and (OR = 1.424,  $p = .012$ ) than those who did not experience sexual victimization in childhood or were not physically abused by parents. Additionally, the odds of being victimized in adulthood were 48% higher for respondents who reported *exposure to interparental violence* than they were for those who did not witness parents fighting (OR = 1.483,  $p = .006$ ). Being a victim of *bullying in childhood* increased the odds of victimization in adulthood by 24% (OR = 1.235,  $p < .001$ ). When controlling for all variables in the model, neither *family disruption* (OR = 1.208,  $p = .160$ ) nor *parental*

*verbal abuse* (OR = 1.424,  $p = .073$ ) were found to significantly affect the risk of *violent victimization in adulthood*.

As hypothesized, at the microsystem level, findings show that substance misuse appears to be a significant predictor of *violent victimization in adulthood*. Results indicate that with each unit increase in frequency of *drug use* reported, the odds of *violent victimization in adulthood* increased by approximately 15% (OR = 1.147,  $p = .002$ ). Moreover, individuals who reported participating in *binge drinking* had 43% higher odds of being violently victimized in adulthood than those who did not report binge drinking (OR = 1.427,  $p = .004$ ).

The proposed hypothesis at the exosystem level was also supported by the results of the binomial logistic regression analysis. As hypothesized, there was a significant negative relationship between perceived *social support* and risk of *violent victimization in adulthood*. For each unit increase in perceived *social support*, the risk of *violent victimization in adulthood* decreased by approximately 9% (OR = .907,  $p = .035$ ).

Additionally, findings show a strong positive and significant relationship between *sex assigned at birth* and *violent victimization in adulthood*. Specifically, results indicate that the odds of females reporting violent victimization in adulthood are approximately 37% higher than they are for males (OR = 1.365,  $p = 0.18$ ). In regard to *generation*, results indicate that the odds of younger individuals reporting violent victimization in adulthood are approximately 43% lower than they are for middle-aged individuals (OR = .566,  $p < .001$ ). Results indicate that the likelihood of being victimized in adulthood is similar for people in the middle and older generations. Individuals who reported having a bisexual *sexual orientation* (OR = 1.443  $p = .013$ ) or having a sexual orientation other

than bisexual or homosexual (OR = 1.848,  $p = .002$ ) had significantly higher odds of reporting violent victimization in adulthood than respondents who reported they were homosexual. It can be noticed that when compared to homosexuals, the odds of violent victimization in adulthood are almost twice higher for “other sexual minorities” than they are for “bisexuals” (85% vs. 44%).

As anticipated by the results of the bivariate analysis, those with *immigrant background* (OR = .903,  $p = .526$ ), and respondents who were members of *racial/ethnic* minority groups (OR = .791,  $p = .092$ ) did not appear to be at greater or lower risk of *violent victimization in adulthood* when compared to respondents without immediate immigrant background or non-Hispanic white respondents, respectively.

**Table 3. Logit Estimates of Violent Victimization in Adulthood.**

Variable	B	SE	P	OR
Exposure to interparental violence	.394	.144	.006	1.483**
Parental verbal abuse	.272	.151	.073	1.312
Parental physical abuse	.353	.140	.012	1.424*
Family disruption	.189	.135	.160	1.208
Childhood sexual victimization	.332	.053	<.001	1.394***
Bullying victimization	.211	.063	<.001	1.235***
Alcohol use (binge drinking)	.356	.124	.004	1.427**
Drug use	.137	.044	.002	1.147**
Social support	-.098	.046	.035	.907*
Sex assigned at birth (Female)	.311	.132	.018	1.365*
Sexual orientation (Bisexual)	.367	.148	.013	1.443*
Sexual orientation (Other)	.615	.201	.002	1.848**
Generation (Younger)	-.569	.155	<.001	.566***
Generation (Older)	.122	.169	.470	1.130
Immigrant Origin	-.102	.162	.526	.903
Race/ethnicity (Non-white)	-.235	.139	.092	.791
Constant	-1.875	.372	<.001	.153***

Model  $\chi^2 = 249.827^{***}$

Pseudo  $R^2$  (Nagelkerke) = .217

N = 1,428

\* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ . B = logistic regression coefficient; SE = standard error; OR = odds ratio.

## **Inter-group Comparisons in Violent Victimization**

As previously noted, the present study also attempts to identify the individual and contextual level factors more likely to differentiate life-course victims from those who never experienced victimization and from those whose violent victimization was limited to childhood or adolescence. In order to answer the research question, respondents were classified into four groups and a typology of victims was created. The first group was formed of those respondents who, over the life course, did not report any kind of direct violent victimization, such as parental verbal and/or physical abuse, sexual victimization in childhood, bullying victimization in childhood, or sexual and/or violent victimization in adulthood. In the overall sample, there were 245 respondents who did not report direct violent victimization over the life course. The percentage of non-victims (16%) is relatively low mainly because a substantial proportion of the study participants reported parental verbal abuse (69%) and only 33% of those surveyed said they were never or were rarely victims of bullying in childhood or adolescence. A second group included respondents who were victims of violence solely during childhood. Those who did not experience revictimization during adulthood (N= 660) represent approximately 44% of the overall sample. The third group includes respondents who reported direct violent victimization over the life course (N= 542). They represent about 36% of the sample. A small group of respondents (N = 59) reported victimization solely during adulthood. They represent 4% of the overall sample.

To reiterate, the main objective of the analyses presented in this section of the dissertation is to identify the factors that increase the risk of revictimization in adulthood

and to see what circumstances and individual traits appear to offer protection against violent victimization over the life course. Previous multivariate analyses (see Table 3) showed that childhood victimization increases the risk of revictimization in adulthood. However, adult victimization is not limited to childhood victims of violence. The additional analyses presented in this section will show what factors increase the risk of victimization in adulthood for those who were not childhood victims of verbal, physical, or sexual violence.

First, bivariate analyses were conducted to determine if the identified groups differ in terms of exposure to inter-parental violence in childhood, the structure of the family of origin, substance misuse in adulthood, perceived social support, sex at birth, sexual orientation, age, immigrant origin, and racial/ethnic minority status. Results are presented in tables 4 and 5. Second, multinomial logistic regression was conducted to see what victims have in common and what factors predict victimization at different stages of one's life. The results of the multivariate analyses are presented in table 6.

### ***Bivariate Correlations***

As previously noted, bivariate analyses were conducted to determine if the identified four groups of victims and non-victims differ in terms of life circumstances, behavior during adulthood, and sociodemographic characteristics, when the effect of other variables is not considered. Tables 4 and 5 present the results of the bivariate analyses (contingency tables and ANOVA). Findings show that all selected predictors are significantly associated with the dependent variable.

Results included in table 4 indicate that *exposure to interparental violence* and *violent victimization throughout the life course* are not independent of each other ( $\chi^2 =$



199.521,  $p < .001$ ). The strength of the association between the two variables is moderate ( $\Phi = .364$ ,  $p < .001$ ). Data indicate that individuals who were exposed to interparental violence were much more likely to be violently victimized throughout their lifetime. While around one-fourth of individuals who were not exposed to interparental violence reported that they were non-victims (24.9%), only 1.8% of individuals who were exposed to interparental violence reported that they were non-victims. Additionally, the percentage of those exposed to inter-parental violence (52.1%) who reported life-course victimization was about two times higher than the percentage of their counterparts who did not witness inter-parental fights (26.4%).

Similarly, results show that *family disruption* and *violent victimization throughout the life course* are significantly related ( $\chi^2 = 44.754$ ,  $p < .001$ ). Yet the strength of the association is not particularly high ( $\Phi = .173$ ,  $p < .001$ ). Individuals who reported that their parents were married prior to age 18 were less likely to report violent victimization throughout their lifetime than individuals who reported their parents were not married (including divorced, separated, or never married). Twice as many respondents who reported their parents were married reported that they were non-victims of violence (20.9%) than individuals whose parents were not married (10.4%). Individuals who reported their parents were not married were also more likely to report being revictimized (44%) than individuals who reported their parents were married (30.4%).

*Victimization throughout the life course* was found to not be independent of *binge drinking* ( $\chi^2 = 10.855$ ,  $p = .013$ ). *Binge drinking* has a moderate relationship with *violent victimization throughout the life course* ( $\Phi = .364$ ,  $p = .013$ ). Individuals who reported that they engaged in binge drinking were more likely to be revictimized (38.7%) than

individuals who reported they did not engage in binge drinking (33.9%). Individuals who reported engaging in binge drinking were about two times more frequently victimized in adulthood only (5.2%) than individuals who did not report binge drinking (2.8%).

*Drug use and violent victimization throughout the life course* are significantly related as well ( $\chi^2 = 55.724, p < .001$ ). Compared to alcohol misuse, the association between drug use in adulthood and the dependent variable is less strong, but it is significant ( $\Phi = .194, p < .001$ ). It can be observed that those who reported adulthood-limited victimization or life-course victimization were more likely to report using drugs at least a few times a week. For instance, while 3.7% of those who never used drugs reported victimization in adulthood, the percentage of the most frequent drug users who reported being victimized in adulthood, but not in childhood (7%) was almost twice higher. Moreover, while 31% of non-users reported life-course victimization, the proportion of their counterparts who were frequent drug users is much higher (i.e., 55% used drugs 2-3 times a week; 44% used drugs at least four times a week). Furthermore, if 19% of non-users were never victimized, only 4% of the most frequent drug users were never victims of violence.

Victimization was not found to be independent of *sex at birth*, ( $\chi^2 = 14.739, p = .002$ ), though the association between the two variables is relatively low ( $\Phi = .100, p < .01$ ). Females were approximately equally represented as part of the revictimized (40.7%) and victimized only in childhood categories (40.5%), whereas males were more often victimized in childhood only (46.4%) than they were life-course victims (31.4%). This suggests that males are more frequently targeted for violence as children and adolescents than they are later in life. The same cannot be said about females, who, when compared

to males, are more often part of the group who experienced revictimization during adulthood.

In terms of age, significant inter-group differences can be identified as well ( $\chi^2 = 17.311$ ,  $p = .008$ ). However, the strength of the relationship is relatively low ( $\Phi = .107$ ;  $p = .008$ ). Members of the younger *generation* were more likely to be non-victims (18.1%) than members of the middle (15.7%) and older generations (14.2%). It can also be observed that the percentage of those who reported solely adulthood victimization systematically increases with age from 2.9% to 4.3% to 5.1%.

Regarding *sexual orientation*, results indicate that victimization is not independent of one's sexual identity ( $\chi^2 = 25.813$ ,  $p < .001$ ). The strength of the association between the two variables is not very high ( $\Phi = .131$ ,  $p < .001$ ). Homosexuals are less likely to report being revictimized (30.5%) than bisexuals (43.0%) and individuals reporting another sexual orientation (42.2%). Homosexuals are more likely to be non-victims (17.6%) than bisexuals (14.2%) and individuals reporting another sexual orientation (15.6%). When victimized, homosexuals are more likely to report only childhood victimization (47.4%) than bisexuals (40.0%) and individuals reporting another sexual orientation (37.8%).

*Immigrant origin* also appears to have an impact on the likelihood of victimization throughout the life course ( $\chi^2 = 9.369$ ,  $p = .025$ ), though it is a rather weak relationship ( $\Phi = .079$ ,  $p = .025$ ). While life-course victimization is reported by similar proportions of respondents (36% vs. 35%) and the percentage of non-victims is not much different when groups differentiated by immigrant background are compared (17% vs. 14%), it can be noticed that the percentage of those who reported solely victimization in

adulthood is three times higher (4.5% vs. 1.4%) among those whose parents were foreign-born. Moreover, individuals whose parents were immigrants were less likely to report victimization only in childhood (43%) than individuals whose parents were not immigrants (49%).

Bivariate analyses indicate that violent victimization is not independent of race/ethnicity ( $\chi^2 = 15.195$ ,  $p = .002$ ). However, the association between the two variables is relatively weak ( $\Phi = .100$ ;  $p = .002$ ). While in both groups differentiated by race/ethnicity about the same percentage (36%) reported life-course victimization, it can be noticed that the proportion of non-victims is much higher among white respondents (18%) than it is among racial/ethnic minorities (13%). Moreover, those who reported childhood-limited victimization are more likely to be minority respondents (49%) than they are White respondents (41%).

**Table 4. Contingency Table Lifetime Violent Victimization Trajectory Groups (N = 1,506)**

	N	Non-victim (N=245)	Victim in childhood only (N=660)	Victim in adulthood only (N=59)	Victim in both childhood and adulthood (N=542)	Chi Sq. (Phi)
<i>Interparental violence</i>						199.521*** (.364***)
Not exposed	944	24.9%	43.1%	5.6%	26.4%	
Exposed	562	1.8%	45.0%	1.1%	52.1%	
<i>Family disruption</i>						44.754*** (.173***)
Married parents	853	20.9%	44.3%	4.5%	30.4%	
Non-married parents	637	10.4%	42.4%	3.3%	44.0%	
<i>Binge drinking</i>						199.521*** (.364***)
Doesn't binge drink	757	17.2%	46.1%	2.8%	33.9%	
Does binge drink	737	15.6%	40.6%	5.2%	38.7%	
<i>Drug use</i>						55.724*** (.194***)
Never	899	19.4%	45.6%	3.7%	31.4%	
Once a month or less	252	13.5%	42.9%	3.2%	40.5%	
2-4 times a month	91	23.1%	31.9%	3.3%	41.8%	
2-3 times a week	74	10.8%	29.7%	4.1%	55.4%	
4x a week or more often	171	4.1%	45.0%	7.0%	43.9%	
<i>Sex at birth</i>						14.739** (.100**)
Female	796	14.7%	40.7%	4.1%	40.5%	
Male	688	18.6%	46.4%	3.6%	31.4%	
<i>Sexual orientation</i>						25.813*** (.131***)
Homosexual	833	17.6%	47.4%	4.4%	30.5%	
Bisexual	493	14.2%	40.0%	2.8%	43.0%	
Other	180	15.6%	37.8%	4.4%	42.2%	
<i>Generation</i>						17.311** .107**
Younger	664	18.1%	46.7%	2.9%	32.4%	
Middle	369	15.7%	37.7%	4.3%	42.3%	
Older	473	14.2%	44.6%	5.1%	36.2%	
<i>Immigrant origin</i>						9.369* (.079*)
Immigrant parents	1,215	16.8%	42.6%	4.5%	36.1%	
Non-immigrant parents	291	14.1%	49.1%	1.4%	35.4%	
<i>Race/ethnicity</i>						15.195** (.100**)
White	976	18.2%	41.3%	4.7%	35.8%	
Minority	530	12.6%	48.5%	2.5%	36.4%	

\*p &lt; .05, \*\*p &lt; .01; \*\*\*p &lt; .001.

Table 5 presents the results of the ANOVA analysis, conducted to determine if there are inter-group differences in the means of social support. Even though all four groups of respondents had an average level of social support above the mid-point of the scale interval and large inter-group variations in social support are not present, it can be noticed that those who were never victims of violence reported the highest level of perceived social support (Mean = 5.53, SD = 1.21), while those who experienced revictimization in adulthood had the lowest level of social support (Mean = 5.04, SD = 1.30). Results of the ANOVA analysis indicate that at least one group of those included in the analysis had on average a level of social support significantly different from the average level of social support reported by the other three groups of respondents ( $F = 8.129$ ;  $p < .001$ ). When the effect of other variables is not considered, Tukey's Honest Significant Difference (HSD) post-hoc test indicates that there are significant differences in means of social support between non-victims and life-course victims (mean difference = .4878;  $p < .001$ ) and between non-victims and those who have been victimized solely in childhood (mean difference = .3107;  $p = .008$ ). Among the victims, significant differences in social support were not identified at  $p < .05$ .

**Table 5. Inter-group Differences in Perceived Social Support**

<b>Victimization groups</b>	<b>Mean social support</b>	<b>SD</b>	<b>F</b>	<b>p</b>
Non-victims	5.5281	1.21	8.129	< .001
Victims in childhood only	5.2174	1.26		
Victims in adulthood only	5.1076	1.71		
Life-course victims	5.0403	1.29		
<b>Post-hoc tests /Tukey's HSD</b>	<b>Differences in means</b>	<b>SE</b>		<b>p</b>
Non-victims vs. childhood victims	.3108**	.09		.008
Non-victims vs. adulthood victims	.4205	.19		.127
Non-victims vs. life-course victims	.4879***	.09		<.001
Life-course victims vs. childhood victims	-.1771	.08		.09
Life-course victims vs. adulthood victims	-.0673	.18		.983
Childhood victims vs. adulthood victims	.1098	.18		.930

***Multinomial Logistic Regression***

A multivariate analysis was carried out to identify the factors that distinguish the four groups of individuals who had different lifetime victimization trajectories (i.e., non-victims, individuals who were victimized solely in childhood or adolescence, individuals who were victimized solely in adulthood, and life-course victims / individuals who were victimized both in childhood or adolescence and adulthood). Table 6 presents the results of the multinomial logistic regression, where life-course victims were used in the model as the reference category.

Several variables differentiated the non-victims group from the life-course victims. Model 1 (Table 6) compares respondents who did not report direct violent victimization with those who were victimized both in childhood/adolescence and later in life. Non-victims of violence had much lower odds of being exposed to interparental violence than those who experienced violent victimization in childhood and adulthood. Compared to those who experienced life-course victimization, the odds of non-victims being exposed violence in the family of origin were approximately 96% lower (OR = .043,  $p < .001$ ). Non-victims were also more likely to grow up with married parents. The non-victims' odds of living in non-intact families were about 35% lower than they were for life-course victims (OR = .647,  $p = .026$ ). Non-victims were significantly less likely to use drugs in adulthood than life-course victims of violence (OR = .736,  $p < .001$ ).

As predicted by the bivariate analyses (see Table 5), non-victims benefitted from higher social support than life-course victims of violence (OR = 1.298,  $p < .001$ ) Additionally, when compared to life-course victims, non-victims were more likely to be part of the younger generation (OR = 2.314,  $p < .001$ ), homosexual (OR = 1.685,  $p = .009$ ), and less likely to be female (OR = .441,  $p = .017$ ).

Model 2 (table 6) presents the characteristics of those who were childhood victims of violence in comparison with life-course victims. When compared to life-course victims, the odds of being exposed to inter-parental violence were approximately 43% lower (OR = .568,  $p < .001$ ) for those victimized only during childhood [or adolescence-limited victims, to paraphrase Moffitt (1993)]. The odds of living with divorced, separated, or unmarried parents were 24% lower for adolescence-limited victims than they were for life-course victims (OR = .760,  $p = .044$ ). When compared to life-course



victims, adolescence-limited victims were less likely to misuse drugs in adulthood (OR = .880,  $p = .005$ ) and they benefitted from higher levels of social support from friends and family (OR = 1.106,  $p = .034$ ). Compared to life-course victims, adolescence-limited victims were also less likely to be female (OR = .764,  $p = .045$ ) and they were more likely to be homosexual (OR = 1.685,  $p = .009$ ) and younger (OR = 1.910,  $p < .001$ ). Model 1 and Model 2 (Table 6) also show that when controlling for the other variables in the equation, alcohol misuse, immigrant background, and race/ethnicity did not differentiate life-course victims from non-victims or adolescence-limited victims.

In many respects, the profile of adolescence-limited victims resembles the profile of those who did not report violent victimization over the life course (i.e., non-victims). In both subgroups (non-victims and adolescence-limited victims), out of ten selected predictors, the same seven predictors had significant effects and the direction of the effects was the same. To summarize, when compared to life-course victims, non-victims and adolescence-limited victims were more likely to grow up in intact families, they were less exposed to inter-parental violence, and they benefitted from more social support in adulthood. Additionally, they tended to be young, male, and homosexual. Conversely, those who were revictimized in adulthood were more likely to experience in childhood/adolescence inter-parental violence and family disruption, they received lower social support from family and friends in adulthood, and they were more likely to engage in risky lifestyles, such as drug use. Additionally, results show that females, middle-age and older adults, bisexual and “other” sexual minorities had an increased risk of revictimization in adulthood than males, younger respondents, and homosexuals, respectively.

Model 3 (Table 6) compares adult victims of violence with life-course victims. Those who were victims of violence solely in adulthood, were exposed to inter-parental violence less often than those victimized both in childhood and adulthood (OR = .113,  $p < .001$ ). When compared to life-course victims, adulthood-limited victims of violence were approximately twice as likely to be gay (OR = 2.117,  $p = .029$ ) than bisexual or another sexual minority. The structure of the family of origin, gender, age, substance misuse, immigrant background, and social support did not significantly differentiate adult victims from those who reported life-time victimization. Data suggest that adulthood-limited victims of violence have more characteristics in common with the group of life-course victims than they have differences.

In sum, the data indicate that non-victims and childhood-limited victims share many characteristics, while adulthood-limited victims and life-course-persistent victims [to paraphrase Moffitt (1993)] tend to have similar profiles.

**Table 6. Logit Estimates of Violent Victimization (Life Time)**

Variable	Model 1			Model 2			Model 3		
	<i>Non-victims vs. revictimized victims</i>			<i>Childhood limited victims vs. revictimized victims</i>			<i>Adulthood limited victims vs. revictimized victims</i>		
	B	SE	OR	B	SE	OR	B	SE	OR
Interparental violence	-3.156***	.360	.043	-.566***	.134	.568	-2.183***	.458	.113
Family disruption	-.435*	.196	.647	-.275*	.136	.760	.006	.322	1.006
Binge drinking	-.179	.178	.836	-.229	.128	.795	.473	.313	1.605
Drug use	-.307***	.075	.736	-.128**	.045	.880	.126	.096	1.134
Social support	.260***	.071	1.298	.101*	.047	1.106	.014	.106	1.014
Sex at birth (Female)	-.441*	.184	.643	-.269*	.134	.764	.150	.317	1.162
Sex. orientation (Homo.)	.522**	.198	1.685	.564***	.142	1.757	.750*	.343	2.117
Immigrant origin	-.150	.238	.861	.048	.163	1.049	-.970	.551	.379
Generation (Younger)	.839***	.194	2.314	.647***	.139	1.910	-.031	.340	.969
Race (Minority)	.059	.205	1.060	.193	.140	.711	-.193	.368	.824
Constant	-1.089*	.455		-.123	.310		-2.577***	.734	
Model $\chi^2$ (df = 30)						356.946***			
Pseudo R <sup>2</sup> (Nagelkerke)						.245			
N = 1,506									

\*p< .05; \*\*p< .01; \*\*\*p< .001, 2-tail test.

Note: B = logistic regression coefficient; SE = standard error of the estimate; OR = odds ratio.

## CHAPTER 6

### DISCUSSION AND CONCLUSIONS

#### **Discussion of Findings**

The prevalence of violent victimization among sexual minorities in the United States is very high. In the overall national sample, during the life course, only 16% of respondents did not report any type of verbal, physical, or sexual violence and 36% of those interviewed reported direct violent victimization both before and after they turned eighteen. The present dissertation sought to examine a set of factors influencing violent victimization among sexual minority individuals using an adapted socio-ecological model as its theoretical framework. The main objectives of the current study were twofold: to determine which individual-level characteristics and contextual factors impacted the risk of violent victimization in adulthood and to identify some of the factors that differentiate sexual minority groups that had various life-course victimization trajectories. The intention was to uncover why some individuals were revictimized in adulthood, while other childhood victims were not. Additionally, the analysis sought to determine why some of those who did not report direct violent victimization in childhood or adolescence became victims of violence in adulthood. This section will discuss the findings of the current study and how they relate to existing research and the previously presented hypotheses.

In accordance with the socio-ecological theoretical perspective (Bronfenbrenner, 1979, 1994) and its adaptation to victimization research (Belsky, 1980; Grauerholz, 2000), the study proposed an integrated model that examined the interplay of ontogenic, microsystem, and exosystem factors to explain variations in violent victimization in adulthood in a national sample of sexual minorities. For the most part, results are consistent with the theoretical predictions and demonstrate that the socio-ecological model offers viable explanations when attempting to determine what contextual factors increase one's risk of victimization and which ones appear to have violence-protective effects.

In terms of personal characteristics, seen here as exogenous variables that are not influenced by social circumstances and are innate human traits, results generally reproduce the findings of studies that did not take into account the simultaneous effects of other potential correlates of violent victimization. For example, results indicate that when controlling for all the variables in the model, females belonging to sexual minority groups experienced violent victimization in adulthood more often than their male counterparts did. This finding is consistent with Bender and Lauritsen's (2021) recent analysis showing that during the year preceding the survey, both lesbian and bisexual females reported a higher incidence of violent victimization than homosexual males and bisexual males, respectively. Findings also show that compared to homosexuals, bisexual persons and those who reported a sexual identity other than homosexual, or bisexual have a significantly higher risk of victimization. This is consistent with prior research showing that bisexual individuals are more likely to be victimized than homosexual individuals (Bender & Lauritsen, 2021; Truman & Morgan, 2022). However, more research is

needed to determine why women belonging to sexual minority groups and why sexual minorities other than homosexuals are more vulnerable to violent victimization than their male and gay counterparts, respectively.

Although recent research found that past-year violent victimization was less likely to be reported by LGB individuals 55 years old and older than by younger sexual minorities (Bender & Lauritsen, 2021), in the sample used in this study, younger respondents were less frequently victims of violence than their middle-age and older counterparts. Given the fact that this was a retrospective study that asked respondents to report their lifetime experiences with victimization, it is not surprising that persons belonging to the younger generation reported lower levels of victimization in adulthood than older adults did. Victimization is cumulative. Individuals who are older have had more time to experience victimization because they have been adults longer than younger individuals.

Despite recent research findings showing that LGB persons belonging to racial/ethnic minority groups were less often victims of violence than their non-Hispanic White counterparts (e.g., Bender & Lauritsen, 2021), results indicate that when controlling for several contextual factors, race/ethnicity does not appear to be a significant predictor of violent victimization. It should be noted that other authors also found that when contextual factors were considered, race/ethnicity was no longer a significant predictor of violent victimization in adulthood (Elliott & Briere, 1992; Hoffman et al., 2017; Kalof, 2000).

### ***Ontogenic Level: Adverse Childhood Experiences***

As previously noted, the ontogenic level refers to the individual's developmental history and defines what individuals bring to the nested social context as a result of their personal history of direct and/or indirect victimization. Specifically, the current study hypothesized that individuals who experienced childhood adversity would be more likely to report violent (re)victimization in adulthood. Results of the multivariate analysis indicate that four of the six measures of childhood adversity included in the analysis are significantly and positively related to violent victimization in adulthood. Consistent with prior research, *exposure to interparental violence* in the family of origin (Hotaling & Sugarman, 1986; Spencer et al., 2019; Whitton et al., 2021) and *direct physical victimization* by parents (Andreescu, 2024; Hotaling & Sugarman, 1986; Krahe et al., 2001) are both significant predictors of victimization in adulthood.

Additionally, findings indicate that *childhood sexual victimization* increased the risk of violent victimization in adulthood for sexual minority individuals as many studies based on community samples (Andersson et al.'s, 2020; Krahe & Berger, 2017; Papalia et al., 2021; see also the meta-analysis by Walker et al., 2019) or samples drawn from sexual and/or gender minority populations also found (Andreescu, 2024; Blackburn et al., 2023; Krahe et al., 2001; Messinger et al., 2021; Morris & Balsam, 2003; Patalone, 2014). Similarly, findings show that bullying victimization in childhood and adolescence significantly increased the risk of violent victimization in adulthood, as other researchers also found (Andreescu, 2024; Brendgen & Poulin, 2018; Smith et al., 2003; Staubli & Killias, 2011; Tyler & Schmitz, 2021). On the other hand, results indicate that growing up in non-intact families does not appear to have long-term negative effects on LGB

persons, at least regarding violent victimization in adulthood. Although the number of studies that explored the effect of family structure on victimization in adulthood is very small, a similar conclusion was drawn by other researchers as well (Andersson et al., 2020).

Different from the theoretical predictions and prior research findings (e.g., Lindhorst et al., 2009; Messinger et al., 2021; Rich et al., 2005), but consistent with the results of a study based on a national sample of transgender individuals in the United States (Andreescu, 2024), the analysis showed that those who were verbally abused by parents did not report a significantly higher incidence of violent victimization later in life when compared to respondents who did not acknowledge verbal victimization by parents. However, it should be noted that in the overall sample, the proportion of those who said they were insulted or put down by a parent more than once was relatively high (69%). The original response options (i.e., never, once, more than once) did not allow the researcher to consider the frequency and severity of verbal victimization in childhood, which might have impacted the results. Future research should verify the stability of this finding.

#### ***Microsystem Level Factors: Risky Lifestyles in Adulthood***

Following Grauerholz (2000), the proposed hypothetical ecological model that informed the analysis presented in this study, considered at the microsystem level one's involvement in risky behaviors (i.e., binge drinking and illicit drug use) as potential correlates of victimization. Results of the binomial logistic regression analyses indicate that there was a positive relationship between both *binge drinking* and *drug use* and violent victimization in adulthood. Results show that individuals who participated in



binge drinking had increased odds of violent victimization in adulthood. Similarly, the odds of violent victimization in adulthood increased significantly with more frequent illicit drug use.

These results are consistent with the framework of life-style routine activities theory stating that individuals who are involved in risky lifestyles are more vulnerable to victimization because they have a diminished capacity to protect themselves and because they are more likely to be exposed to motivated offenders (Cohen & Felson, 1979; Finkelhor & Asdigian, 1996; Hindelang et al., 1978). Findings are congruent with prior research that also documented a significant positive relationship between substance misuse and violent victimization (Cafferky et al., 2018; Capaldi et al., 2012; Seid et al., 2022; Stith et al., 2004; Strøm et al., 2020; Testa et al., 2003). Moreover, existing research specifically focused on sexual and gender minorities has produced similar results, suggesting that sexual minorities who engage in substance misuse have an increased risk of violent victimization in adulthood (Blackburn et al., 2023; Hequemberg et al., 2013; McConnell & Messman-Moore, 2018).

***Exosystem Level: Perceived Social Support***

As previously noted, the exosystem focuses on the social structures of the victim's life. Structures of the exosystem may include support systems, such as strong family ties and friendships (Dutton & Goodman, 1995; Spencer et al., 2019). In line with prior victimization research informed by the ecological model, the current study hypothesized that *perceived social support* in adulthood would serve as a protective factor against violent victimization in adulthood. Results indicate that there was a significant negative relationship between perceived social support and violent victimization in adulthood.

Consistent with prior research findings (Bender et al., 2003; Dias et al., 2019; Hawn et al., 2018; Richardson et al., 2022; Schumm et al., 2006; Strøm et al., 2020; Sullivan, 2000; Whitton et al., 2021), violent victimization in adulthood decreases significantly with an increase in social support. In summary, findings indicate that for sexual minorities, social support from family and friends is indeed a violence protective factor.

### ***Toward a Typology of Victims of Direct Violence***

Since the late 1940s, victimologists have proposed various typologies of victims (e.g., Hentig, 1948; Mendelsohn, 1976; Sellin & Wolfgang, 1964; Silverman, 1974; Wolfgang & Singer, 1978; Young-Rifai, 1982), which “(implicitly or explicitly) pertain to the realm of criminal law” (Landau & Freeman-Longo, 1990, p. 270). More recently, given the limitations of previous typologies identified by several victimologists, Landau and Freeman-Longo (1990) proposed a classification of victims that covered the multidimensional aspects of victimization. Nonetheless, inspired by Moffitt’s (1993)<sup>4</sup> dual taxonomy of offenders, this dissertation proposed a simpler typology of victims according to the major developmental stages in one’s life – childhood/adolescence and adulthood. In short, the period in one’s life when direct victimization occurred was the sole criterion that guided the division of victims into three categories (childhood-limited victims, adulthood-limited victims, and lifetime victims).

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<sup>4</sup> Based on a thorough analysis of data collected from the longitudinal *Dunedin Multidisciplinary Health and Development Study*, Terrie Moffitt (1993) proposed a developmental taxonomy that classified offenders into two groups: the “life-course persistent” group of offenders whose antisocial behavior started early in life and continued over their life course and the “adolescence-limited” offenders who manifested antisocial behavior solely during their teenage years. Moffitt’s work was not referenced earlier in this dissertation because her taxonomy and seminal theory did not refer to victims of crime. The current study only borrowed from Moffitt the labels used to differentiate the three groups of victims included in the typology of victims proposed here.

Despite the limitations of the current study, this classification allowed the researcher to see what individual-level characteristics and contextual factors at various levels of the ecological model tended to be associated with victimization over the life span. To reiterate, findings suggest that when compared to childhood victims who did not experience revictimization in adulthood, lifetime victims of direct violence were more likely to be individuals who did not grow up in intact families, were exposed in childhood to inter-parental violence, misused drugs and alcohol in adulthood, and received diminished social support in adulthood. Additionally, the lifetime victims were more likely to have a sexual identity other than homosexual and were between 27 and 60 years old. Moreover, compared to men, women were more likely to experience direct violent revictimization over their life span.

The proposed classification also permitted the researcher to determine what characteristics had those who did not experience direct violent victimization in childhood but became victims of violence in adulthood, information that was not captured in the first set of multivariate analyses included in this study. Additional analyses (see Appendix A) suggest that compared to childhood-limited victims, those who were victimized solely later in life were more likely to engage in binge drinking and illegal drug use. Compared to childhood-limited victims, adulthood-limited victims did not have a significantly lower level of social support, but they had a lifestyle that increased victimization risks, as the lifestyle routine activities framework would predict (Cohen & Felson, 1979; Finkelhor & Asdigian, 1996; Hindelang et al., 1978) and other researchers found as well (Blackburn et al., 2023; Cafferky et al., 2018; Capaldi et al., 2012;

Hequembourg et al., 2013; McConnell & Messman-Moore, 2018; Seid et al., 2022; Stith et al., 2004; Strøm et al., 2020; Testa et al., 2003).

However, given the fact that adulthood-limited victims of violence represent only 4.7% of the victims of direct violence, results should be cautiously interpreted, and future research should verify the accuracy of these findings. Nevertheless, the proposed typology provides useful information that can inform programs and policies meant to prevent the victimization and revictimization of sexual minority population groups in adulthood. Yet before discussing the implications of the findings, the study limitations should be noted.

### **Limitations and Recommendations for Future Research**

Even though the dissertation made important contributions to the limited literature on the violent victimization of the sexual minorities, the study has several limitations that future research should overcome. As the current study is based on a secondary data analysis, only variables included in the original dataset could be utilized and potential important predictors of victimization could not be used because they were not available. For instance, research has shown that there are overlaps between victimization and offending (see Berg & Mulford, 2020). However, survey respondents were not questioned about their involvement in violence perpetration or bullying behavior. Consequently, any relationship between victimization and offending could not be considered in this study.

Stronger research could be conducted by looking at a greater range of variables at each environmental level of the socio-ecological model, especially when questions are crafted in a nuanced manner to assess concepts appropriately. In the current study,

existing questions were used as proxies rather than individually designed questions that could better measure the variables in question. Due to the fact that this study was only able to address topics covered in the secondary data set, there are additional variables that might explain variations in victimization and could not be accounted for because the original survey did not collect the information. For instance, survey items did not specifically address the relationship respondents believed existed between their sexuality and victimization. Survey items were also limited in their examination of social factors and their influence on violent victimization. Targeted items that would allow for a more in-depth look at the social factors such as discrimination and stigma against sexual-minority individuals that exist at the higher environmental levels (i.e., the exosystem and macrosystem) would be worthy of inclusion in future research.

Additionally, as is always the case with self-reported data, there is the potential that individuals could have given responses that are inconsistent with actual lifetime events and experiences. This is a retrospective study, and it is known that individuals can forget events and details over time (as well as repress traumatic memories). Individuals may additionally have exhibited an element of response desirability bias and may have given untruthful answers, in either a way that they thought “they should” answer the questions or in a way that made them more comfortable answering the questions.

As this study is informed by an adapted socio-ecological theory model, it is also worth noting that there are limitations when this type of research is conducted. Specifically, research based on socio-ecological models is known to perform better at lower environmental levels than it does at higher levels of the social environment (Kim, 2023). Future research could be strengthened by using variables that account for more

abstract, wider environmental levels such as macrosystems and chronosystems that this study could not adequately address.

### **Study Implications**

This study can serve as an example of the increasing utility of socio-ecological models in criminal justice research. While previous use of ecological models in the study of victimization have been generally limited to the study of child abuse and intimate-partner victimization, this study demonstrates how such models can be more widely applied to other areas of victimization. In particular, the analysis presented here showed that when examining victimization in adulthood it is important to consider not only one's routine activities and risky lifestyles but also the impact of victimization experiences recorded in childhood and adolescence that preceded behavioral outcomes in adulthood. As previously noted, there are benefits of using more comprehensive models that include factors at varying environmental levels and this study highlights the utility of socio-ecological models in victimization research.

As the results were generally consistent with prior research findings indicating sexual-minority individuals experience a high degree of violence throughout the lifetime, it is clear that there is a need for additional systematic research on what factors affect victimization of sexual-minority individuals. Further research will allow lawmakers to enact laws and policies meant to prevent and respond to the violent victimization of vulnerable population groups, such as sexual and gender minority individuals. Recent policy has been enacted at the federal level intended to better protect sexual-minority individuals from harm. For instance, the Biden administration has pledged to undertake actions to increase collaboration between communities and appropriate organizations,

such as law enforcement agencies, to create a safer environment for LGBTQ people. Efforts to reduce stigma and educate the public, through avenues such as preventing “book banning” on content related to sexuality and gender identity is one avenue that the administration intends to affect positive change. Additionally, the administration is working on targeted efforts to protect young LGBTQ individuals (especially those highly vulnerable such as the homeless or those in foster care) from potential abuse, in particular via enacting policies that are affirming and inclusive of sexual and gender minority individuals (The White House, 2023).

While such policy has been proposed at the federal level to better protect sexual and gender minority youth, it is readily apparent that more needs to be done. The results of the current study support the hypothesis that childhood and adolescent violent victimization and adverse childhood experiences increase the risk of victimization in adulthood. The results of the study indicate that victimization limited to adulthood was relatively uncommon, as most victims were either victims solely in childhood or were victimized as both children and adults. In line with previous literature, this indicates that childhood violence and adverse childhood experiences are quite common among sexual-minority individuals. Due to the prevalence of childhood victimization, particularly in the family of origin, it is important that law and policy be used to both prevent such experiences from happening and to properly address and treat youth who have been victimized.

As the Office of Planning, Research, & Evaluation (OPRE) reports, research has found that effective “home visiting” programs are at least somewhat beneficial to families in a variety of areas including having a protective effect against youth victimization

(OPRE, 2024). Home visit programs are useful in assessing the needs of families, educating and supporting parents, and connecting families to needed resources in the community. They are particularly useful when they target homes with young children (OPRE, 2024).

Beyond providing the necessary resources to conduct appropriate home visits of at-risk families, it is important that all families are better equipped to provide “safe, stable, nurturing relationships” to support healthy childhood development, especially among LGBT children who are at increased risk of victimization (Cooke-Daniels & Taggart, 2020). Research has shown that the presence of even one supportive and accepting adult or even one positive role model in the life of LGBT youth can be protective against childhood victimization. As such, greater efforts to educate the public on parenting and child abuse are needed. Such efforts need to be inclusive and affirming of LGBT identities and designed to address stereotypes and stigmas that are harmful to sexual-minority individuals (Cooke-Daniels & Taggart, 2020).

This dissertation also has implications for designing treatment programs for individuals who were victimized or had adverse experiences in childhood. While this study is not linear in nature, results do indicate that individuals who were victimized in childhood were more likely to report violent revictimization during adulthood. Research suggests that trauma-informed care is an effective tool in treating sexual and gender minority individuals who experience victimization in childhood (Sciolla, 2017). Sexual and gender minority individuals are known to be at increased risk of childhood trauma, which has deleterious effects over the life course. Research further indicates that structural stigmas (i.e., homophobia and transphobia) may not only enable abuse, but



amplify the effects of abuse on sexual and gender minority children. As such, it is important that trauma-informed healthcare that addresses disparities and social factors relevant to the LGBTQ victims be provided. Further, for trauma-informed care to be able to provide a beneficial effect, healthcare needs should be addressed both at the individual victim level and at the population level (Sciolla, 2017).

Findings indicate that binge drinking and illicit substance use are not uncommon among sexual-minority adults. And the results of this dissertation show that violent victimization in adulthood was more likely to be reported by individuals who engaged in substance misuse. Therefore, it is important that law and policy be used to educate individuals on the potential risks of substance misuse and to provide proper care to individuals with substance abuse disorders. An example of a practical measure that could be taken to help in these efforts is better educating healthcare providers about the risks of substance use by sexual and gender minorities. To address this issue, healthcare providers could use substance screening tests when individuals provide information indicating they are at risk of substance misuse (Kaner et al., 2018; U.S. Preventive Services Task Force, 2018). Moreover, several studies demonstrated that educational programs conducted by healthcare providers with those affected by substance use disorders could be effective in reducing substance misuse. Although further research to determine what accompanying interventions are useful and how to successfully implement them is needed, there is evidence that brief interventions initiated by healthcare providers have a positive effect on reducing substance abuse (Kaner et al., 2018; National Academy of Sciences, Engineering, & Medicine, 2020; U.S. Preventive Task Force, 2018).

Yet research also showed that there are barriers that discourage sexual and gender minority individuals from seeking such treatment (Kaner et al., 2018; National Academy of Sciences, Engineering, & Medicine, 2020; U.S. Preventive Task Force, 2018). Research suggests that for substance use treatment to be effective, it is important that treatment of individuals with substance use disorders be designed to be “culturally responsive to the needs and experiences of marginalized populations” (Ware et al., 2023, p. 1). Positive results regarding treatment of sexual and gender minority individuals have been demonstrated by treatment programs that provide LGBT-tailored programs that engage in community outreach about the availability of such services. Although limited, research suggests that treatment programs are more likely to be successful when programming is tailored in an intersectional manner. There is some evidence indicating that programs designed to comprehensively address a variety of social factors relevant to marginalized or disadvantaged individuals with substance use disorder are more likely to be effective (Ware et al., 2023).

Yet further research is needed. In their recent review of the literature, researchers from the National Academies of Sciences, Engineering, and Medicine (NASEM) contended that there is a large research gap in the area of treating sexual and gender minority individuals with substance use disorders. These researchers noted that while some research exists on the topic, information regarding useful programs meant to prevent and deter substance misuse by LGBTQ persons is limited and much is still unknown (NASEM, 2020). Further research is necessary to help inform scholars on a variety of issues related to the prevention and treatment of substance use disorders. Areas that should be further explored should refer to the benefits that are achieved by using

minority-stress and sexual and gender identity tailored programs, should examine the impact of inequities that affect sexual and gender minorities, and should identify the factors that increase the risk of substance abuse and those that offer protection against it (NASEM, 2020).

Finally, as results of the current study support the hypothesis that perceived social support decreases the risk of violent victimization in adulthood, it is important that efforts be taken to help sexual minority individuals build positive and strong social support systems. Strengthening the support systems of LGBT individuals can be accomplished, in part, by increasing the public's exposure to accurate, positive information related to LGBT individuals. It is quite likely that placing a greater emphasis on educating the public on matters related to sexual and gender identity could be useful in dispelling anti-LGBT stigma and misinformation. More specifically, it is likely that educating individuals on the normalcy of sexual and gender minority individuals (as well as on the reality of the litany of issues they may face) could increase the likelihood of LGBT individuals being accepted and included by family and peers. Results of research that analyzed the effects of social support on young adults' wellbeing indicate that individuals who felt accepted by family and friends when they openly disclosed their non-normative sexual/gender identity were more likely to report positive life outcomes and good quality of life (Snapp et al., 2015). Additionally, research indicates that positive representations of LGBT issues in the media can be impactful. Members of sexual and gender minority groups who are exposed to books and magazines that address LGBTQ issues are more likely to have constructive developmental experiences, which may be attributable to

increases in one's self-esteem, sense of self, and sense of belonging to the larger LGBT community (Snapp et al., 2015).

Considering Snapp et al.'s (2015) research in conjunction with the findings of the current study has implications for policy that can have a positive effect in preventing violent victimization of sexual minority individuals. Using proven, effective methods that increase social support should be a priority. Many of these approaches include educating people about the realities of living as sexual and gender minority individuals, which in turn can increase public acceptance and understanding. Additionally, group programming such as the creation of student alliances and LGBT community centers should be further supported and promoted to allow individuals to express their identities while strengthening their bonds with other sexual and gender minority individuals (Snapp et al., 2015). Research has recently shown that access to positive social support online can have similar effects. Going beyond directly encouraging higher levels of social support, education both in the formal school setting and exposure to positive representations of LGBT individuals in media should be encouraged. Rather than banning or restricting books and media related to LGBT content, accurate and positive representations of LGBT life should be more readily available for the general population (Snapp et al., 2015).

## **Conclusion**

The current study aimed to use a socio-ecological framework of analysis to identify characteristics at varying levels of the social environment that increase the likelihood of victimization of sexual minority individuals and distinguish groups of

individuals who had different victimization experiences throughout their life course. A specific goal of this research was to identify ways to prevent and reduce the (re)victimization of sexual minorities in adulthood.

Results of the quantitative analysis were supportive of each of the current study's proposed hypotheses. As a result, the study is able to conclude the following:

1. Sexual minority individuals who experienced childhood victimization and endured adverse childhood experiences were generally more likely to experience violent victimization in adulthood.
2. Sexual minority individuals who engaged in risky behaviors such as binge drinking and illicit substance misuse as adults were generally more vulnerable to violent victimization in adulthood.
3. Social support likely served as a protective factor against victimization of sexual minority adults. That is to say that individuals who perceived they had higher levels of support from friends and family as adults were less likely to be violently victimized in adulthood.

While the current study does have some known limitations, there are important ideas that can be taken away. This dissertation demonstrates the applicability of the socio-ecological framework to a wider range of victimization research. The current study identified the contextual and individual-level factors that increased the sexual minorities' vulnerability to victimization and offered a starting point for future research. Yet future research should be more directly customized to verify the stability of the findings presented here. Specifically, future studies should place an emphasis on crafting survey instruments that would permit a more accurate operationalization of the relevant concepts

at each environmental level rather than using proxy measures derived from secondary data sets. In doing so, studies will be able to ensure that research is more precisely tailored to specifically analyze the impact relevant circumstances have upon victimization.

The results of the current study have important policy implications. It is clear from this research that law and policy makers should make serious efforts to prevent childhood violent victimization and institute viable treatment programs for individuals who experienced childhood traumatic events, such as sexual, physical, and emotional abuse. Policy should be designed to discourage one's involvement in risky behavior, such as substance abuse, which appears to increase the sexual minority individuals' risk of violent victimization. Moreover, at the macrosystem level, legislation and public policies should be formulated to protect LGBT youth and adults' rights, increase their access to affirming homes, schools, and work places, and support the formation of safe spaces for social networking, so sexual and gender minority individuals could receive the social support they need. Programs, training, and content promoting awareness of issues relevant to sexual and gender minority individuals should be an area of emphasis for future scholars and policy makers.

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APPENDIX A

**Table 7. Logit estimates of adulthood-limited victimization versus childhood-limited victimization.**

<b>Variable</b>	<b>B</b>	<b>SE</b>	<b>OR</b>	<b>p</b>
Interparental violence	-1.617	.459	.198***	<. 001
Family disruption	.283	.320	1.326	.377
Binge drinking	.708	.310	2.029*	.022
Drug use	.265	.096	1.290**	.008
Social support	-.085	.106	.918	.418
Sex at birth (female)	.420	.313	1.522	.179
Sexual identity (homosexual)	.191	.340	1.210	.575
Immigrant origin	-1.017	.547	.362	.063
Generation (Younger)	-.688	.335	.502*	.040
Race (Minority)	-.384	.364	.681	.292
Constant	-2.468	.729***		
Model Chi-sq.	359.727			
Pseudo R <sup>2</sup> (Nagelkerke)	.245			
N = 1,506				

\*p< .05; \*\*p< .01; \*\*\*p< .001

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## **SCHOLARLY WRITINGS**

### **Peer-reviewed journal articles**

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<https://doi.org/10.1007/s10612-024-09755-7>

## **CONFERENCE PRESENTATIONS**

November 2023                      **Bryan C. Moore** and Viviana Andreescu. Collateral Consequences of Incarceration: Transgender Inmates' Experiences with Physical and Sexual Victimization. American Society of Criminology 78<sup>th</sup> Annual Meeting 2023, Philadelphia, PA.

## **PROFESSIONAL DEVELOPMENT**

Kentucky Law Update 2023, *Kentucky Bar Association*  
Kentucky Law Update 2022, *Kentucky Bar Association*  
Kentucky Law Update 2021, *Kentucky Bar Association*  
Kentucky Law Update 2020, *Kentucky Bar Association*  
Kentucky Law Update 2019, *Kentucky Bar Association*  
Kentucky Prosecutors Conference 2018, *Unified Prosecutorial System*  
Federal & State Law Update 2017, *Kentucky School Boards Association*  
State Legislative Updates 2016, *Legislative Research Commission*  
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## **PROFESSIONAL AFFILIATIONS**

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