

A Developmental Perspective on Victimization Faced by Gender Nonconforming Youth

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Gender socialization begins very early in life. Research suggests that children learn gender labels in infancy (18–21 months; Zosuls, Ruble, Tamis-LeMonda, & Shrout, 2009), a process that is shaped by parental behavior (e.g., use of gender labels), expectations (e.g., expecting boys to have exceptional crawling ability; Mondschein, Adolph, & Tamis-LeMonda, 2000), and the creation of gender-typed environments (e.g., clothing, toys; Pomerleau, Bolduc, Malcuit, & Cossette, 1990). Gender socialization continues throughout the life span and involves multiple actors such as peers, teachers, family, strangers, and the media. It

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N. E. Hill (⊠) Graduate School of Education, Harvard University, Cambridge, MA, USA e-mail: hillna@gse.harvard.edu includes both positive reinforcement (e.g., social acceptance) for gender conforming behaviors and presentations and negative reinforcement (e.g., criticism, harassment, discrimination) for gender nonconformity. Children as young as age 2 have an idea of where they fit relative to other gender peers and, thus, may feel atypical if they believe that they are not like others of their own gender (Zosuls, Andrews, Martin, England, & Field, 2016; Zosuls, Ruble, & Tamis-Lemonda, 2014). In other words, gender socialization processes shape feelings of belonging beginning in toddlerhood.

The present chapter focuses on the myriad ways young people are victimized for exhibiting gender nonconformity. First, the gender socialization process and the roles of parents and peers are discussed. Subsequent sections focus on the nature of discrimination and victimization motivated by gender nonconformity and the particularly high risk of gender-related discrimination faced by sexual minority (i.e., individuals who identify as lesbian, gay, bisexual, queer, or other sexual orientation that is not heterosexual) and gender minority youth (i.e., those who identify as transgender, agender, gender fluid, or another category that is not cisgender) (see definitions in Table 25.1). Next, the negative outcomes associated with both gender nonconformity and gender conformity are described, followed by a review of literature on variation in experiences related

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Table 25.1 Definitions

Gender identity – a person's subjective sense of oneself as a gendered individual (e.g., male, female, or another gender entirely)

Gender role – the roles and behaviors deemed appropriate for a specific gender, determined by prevailing cultural norms

Gender expression (i.e., gender presentation) – outward expression of gender; can include how one looks (e.g., haircut, use of makeup), dresses, and acts (e.g., involvement in gender-specific activities or behaviors)

Gender nonconformity – degree to which one does not follow traditional gender roles or expression (e.g., feminine boys, masculine girls, androgynous individuals)

Gender typicality – degree to which one feels like a typical member of one's gender group

Gender contentedness – degree to which one is content or happy with one's gender group

Gender policing – the control and reinforcement of femininity and masculinity within a particular context

Gender labeling – sorting people on the basis of gender, aggregates characteristics and activities specific to each gender, and provides the basis for categorizing oneself

Birth-assigned sex – the sex one is assigned by a doctor at birth based on phenotypes (i.e., observable characteristics), primary sex characteristics (e.g., genitals, reproductive organs), and secondary sex characteristics (e.g., vocal pitch, body fat distribution)

Transgender – an identification category referring to someone whose gender identity is incongruent with one's birth-assigned sex

Cisgender – an identification category referring to someone whose gender identity is congruent with one's birth-assigned sex

Sexual minority^a – umbrella term used to refer to individuals who identify as lesbian, gay, bisexual, queer, or other sexual orientation category that is not heterosexual

Gender minority^a – umbrella term used to refer those who identify as transgender, agender, gender fluid, or another category that is not cisgender

Neutral socialization – natural and planned socialization processes that are neither inherently positive nor negative

Positive socialization – social learning involving pleasurable or exciting experiences

Negative socialization – the use of negative reinforcement, such as criticism or punishment, to convey lessons about how one should act

^aSexual and gender minority terminology was chosen as an alternative to acronyms such as LGB or LGBTQ to include the increasingly diverse terms used by individuals with minoritized sexual orientations and gender identities to gender nonconformity across birth-assigned sex. The chapter concludes with implications for intervention and policy, with an emphasis on school-based strategies.

Gender Socialization Across the Life Span

Gender has three primary components that change across development, including physical, internal/sensate, and social/cultural (c.f. Price & Skolnik, 2017 for a review). The present chapter will focus primarily on the social/cultural aspects of gender that involve behaviors one uses to communicate gender identity to others, such as gender expression, gender role, and gender presentation. Gender presentation may or may not be strongly related to one's gender identity and can vary based on the social expectations and pressures one experiences to conform to the gender associated with birth-assigned sex (i.e., the sex one is assigned at birth based upon phenotypes). The interplay between socialization and gender development has been well documented in theoretical literature, and empirical work on this relationship is quickly emerging.

Social Cognitive Theories of Gender Development

While there are multiple theories of gender development, such as essentialist, developmental, and biological, the current chapter utilizes social cognitive theories. Social cognitive theories posit that gender development is a process of socialization whereby gender identity develops through the direct (e.g., verbal messages about how boys and girls should behave) and indirect (e.g., parental modeling of gender appropriate behavior) influence of others (Brinkman, Rabenstein, Rosén, & Zimmerman, 2014; Price & Skolnik, 2017; West & Zimmerman, 1987). These theories of gender development built upon earlier cognitive models of gender development posit that personal factors, such as biological predisposition and enviinfluences, ronmental impact gender development (Bussey & Bandura, 1999). These theories have been elaborated on by authors who have further emphasized the importance of environment and socialization (c.f. Bandura & Bussey, 2004; Martin, Ruble, & Szkrybalo, 2002, 2004 for reviews) and the role of the child as an interactive agent in gender development (Brinkman et al., 2014; Olson & Dweck, 2008). More nuanced and empirically supported theories that emphasize the role of peer socialization have also been established (e.g., Egan & Perry, 2001). Theories of gender socialization are supported by a growing body of research on the influence of gender socialization on gender identity development, as well as research indicating that gender norms and socialization are dependent on culture. For instance, studies indicate that non-Western, more religious, and male individuals tend to be less accepting of gender nonconformity (Collier, Bos, Merry, & Sandfort, 2013) and that gender nonconformity is related to depression across cultures (Cook, Sandfort, Nel, & Rich, 2013). While a review of the intersection between gender nonconformity and other social locations (e.g., race, ethnicity, religion) is beyond the scope of the present chapter, an important body of research has examined gender nonconformity in diverse (Chmielewski, Belmonte, Fine, & Stoudt, 2016; Zosuls et al., 2014) and specific ethnic groups (Cook et al., 2013; Sandfort, Melendez, & Diaz, 2007).

Neutral, Positive, and Negative Methods of Gender Socialization

Research on gender socialization broadly suggests that a variety of neutral (e.g., presence of others), positive (e.g., popularity), and negative (e.g., prejudice) social forces shape development. Neutral methods of socialization can be defined as a combination of natural and planned socialization processes that are neither inherently positive nor negative. Natural socialization refers to the process that occurs when infants discover and interact with the world around them, and planned socialization involves intentional teaching by others. Positive socialization refers to social learning involving pleasurable or exciting experiences, as well as being positively reinforced by others (e.g., through praise). Negative socialization can be defined as the use of negative reinforcement, such as criticism or punishment, to convey lessons about how one should act. The current section will review neutral, positive, and negative forms of socialization in the general population, with a focus on the roles of parents and peers, though it is important to acknowledge the important role of broader institutional and contextual forms of socialization (e.g., media; c.f. Blakemore, Berenbaum, & Liben, 2009 for a review). After reviewing studies on representative and population-based samples of youth (i.e., individuals age 25 and below; Interagency Working Group on Youth Programs, 2016), a review of research on victimization faced by sexual and gender minority youth will be included, as these youths face the highest risk of experiencing aggression related to gender presentation.

Neutral forms of socialization Gender socialization begins in infancy and is typically shaped by caregiver behaviors such as praise, the use of gender-specific pronouns, and the choice of child's clothing. Early research on these processes indicate that parents communicate gender roles in a multitude of ways, such as through the creation of gender-stereotyped environments and differing expectations and play behaviors across genders. For example, experimental studies indicate that adults interacting with infants introduced as a girl were more likely to use "feminine" toys, such as dolls and domestic items, and when playing with infants introduced as a boy used "masculine" toys, including tools and cars, and encouraged more motor activity (Bell & Carver, 1980; Culp, Cook, & Housley, 1983; Sidorowicz & Lunney, 1980). Mirroring other studies, adults endorse different behaviors across genders, such as encouraging more exploration, aggressive and rough-and-tumble play, and adult dress-up for

boys, compared to girls (Fagot, 1978; Smith & Daglish, 1977). Similarly, girls typically have a smaller variety of toys and boys typically have more toys that encourage motor development (Bradbard, 1985; O'Brien & Huston, 1985). These results suggest that boys and girls are socialized into highly differentiated roles very early in life that impact gender identity development, as well as other crucial facets of development including motor skills and activity-specific self-efficacy (Pomerleau et al., 1990). These findings are particularly important because there are no reliable baseline gender differences in many important domains typically associated with gender (e.g., crawling ability, spatial reasoning; Joh, 2016; Mondschein et al., 2000) and that beliefs and expectations resulting from genderspecific socialization can have a negative impact on mental health (Schleider & Weisz, 2016; Zalta & Chambless, 2012).

Peer gender socialization is associated with gender identity development and expression. For instance, the presence of others impacts young children's gendered play. More specifically, young children's play becomes more gender atypical (e.g., girls playing with toy cars) when they believe they are alone (Maccoby, 1990; Serbin, Connor, Burchardt, & Citron, 1979). Similarly, preschool age children befriend samesex children with similar levels of gender-typed behaviors and children appear to become more similar to peers in gender-typed behaviors over just a few months (Martin et al., 2013). Similar to younger children, middle-school age youth choose friends with similar levels of gender typicality (i.e., degree to which one feels like a typical member of one's gender group) and gender contentedness (i.e., being content with one's gender group), and biases about gender are influenced by peers (Kornienko, Santos, Martin, & Granger, 2016). One's attitudes about the other gender become more similar to friends' attitudes over time.

Positive forms of peer socialization In addition to the benefits associated with gender conforming behaviors encouraged by parents, research suggests that gender conformity is salient in peer environments and interactions. For instance, peer popularity among elementary-age youth was strongly related to gender conformity, suggesting that social rewards are a strong motivator for gender conforming behaviors (Adler, Kless, & Adler, 1992). Likewise, similarity to own-gender peers was found to be positively related to own-gender friendships in a subsample of fourth graders (Zosuls et al., 2016). Also, seventh and eighth graders with higher levels of gender contentedness had more friendships (Kornienko et al., 2016). The positive association between social power (e.g., popularity, social acceptance) and gender conformity appears to extend across early development, as it also been found in samples of adolescents (Vaillancourt, Hymel, & Patricia, 2003) and young adults (Buchanan & McDougall, 2017). A notable study of high school students recently found that gender conformity is a stronger predictor of social acceptance compared to sexual orientation (Horn, 2007). More specifically, straight, gay, and lesbian youth who were gender conforming were rated more favorably by peers compared to those who were less gender conforming, irrespective of sexual orientation.

Taken together, gender conformity plays a strong role in multiple facets of social acceptance across peer and family contexts. Similarly, there is a growing body of literature on negative forms of socialization, including discrimination and victimization. The following section will review literature on negative experiences gender nonconforming youth face.

Negative Socialization by Parents and Peers

Parents In contrast to the affirming behaviors exhibited by parents of gender conforming children, gender nonconformity can illicit discomfort and attempts to change or stop behaviors by parents (Beard & Bakeman, 2000). It is possible that these behaviors are shaped by parents' biases about sexual orientation, as research indicates that parents tend to associate gender nonconformity with homosexuality (Sandnabba & Ahlberg, 1999). Parental acceptance and gender nonconformity are negatively related (van Beusekom & Bos, 2015), and parents tend to hold negative assumptions and expectations about their gender nonconforming children, such as that gender nonconforming youth will not be psychologically well-adjusted, though these negative beliefs appear to be much more relevant for gender nonconforming boys than girls (Kane, 2006; Sandnabba & Ahlberg, 1999). Similarly, parents who negatively responded to their children's gender nonconformity utilized a variety of methods as early as age 4 to discourage gender nonconforming behaviors, including telling children to change their behavior, punishing or restricting activities, and sending them to counseling (D'Augelli, Grossman, & Starks, 2006). Parents' discomfort with their child's gender nonconforming behavior may increase the likelihood of parbeing abusive. Notably, ents gender nonconformity is a predictor of both child abuse and PTSD (Roberts, Rosario, Corliss, Koenen, & Austin, 2012).

Peers Peer reactions to gender nonconformity change across development and become more pronounced over time. By middle childhood, cognitive development allows children to make social comparisons (e.g., between boys and girls), abstracted attributes of self (e.g., felt sense of gender typicality), and the ability to imagine what the collective is thinking about oneself (Yunger, Carver, & Perry, 2004). Self-attributions and beliefs about others' attributions become more salient in preadolescence and have a significant effect on self-esteem (Egan & Perry, 2001). As such, harassment and victimization related to gender nonconformity increases with age, as adolescents' sense of an imaginary audience heightens and gender roles become more strict (Ma'ayan, 2003).

Developmental trajectories of peer maltreatment motivated by gender expression have been identified and are often driven by gender policing, or the reinforcement of femininity and masculinity, which experts argue as particularly salient in peer environments (Epstein, 1997; Hill & Lynch, 1983). For instance, among kindergarten and 2nd and 4th grade children, the relationship negative relations between gender typicality and peer maltreatment was stronger for older youth compared to kindergarteners (Zosuls et al., 2016). This is consistent with research showing that as youth get older, they tend to increase their identification with their own gender and decrease identification with the other gender. In other words, gender conforming beliefs appear to increase across development (Martin, Andrews, England, Zosuls, & Ruble, 2017).

Such harassment also shapes gender identity expression. For example, peer harassment predicted reduced gender atypicality, longitudinally across elementary school (Lee & Troop-Gordon, 2011). A qualitative study of 10-13-year-olds confirmed that youths were aware of the consequences, such as gender prejudice, for gender nonconforming behavior, and that these consequences shaped gender expression (Brinkman 2014). et al., Consequently, gender nonconforming youths tend to experience less peer acceptance (Horn, 2007), and peer acceptance partially mediates the relationship between gender nonconformity and low self-worth (Smith & Leaper, 2006). Notably, gender nonconforming youth who felt accepted by their peers did not differ from gender conforming youth in self-worth (Smith & Leaper, 2006). Taken together, peer interactions are integral to psychosocial outcomes associated with gender conformity and directly impact gender expression in diverse and normative samples of youth. These findings have important implications for sexual and gender minority youth, subgroups of youth who face a particularly high risk of genderrelated victimization.

Risk of Gender-Related Victimization in Sexual and Gender Minority Youth

A growing body of research has examined the role of gender nonconformity in victimization faced by both sexual and gender minority youth. Lesbians and gay men are more gender nonconforming compared to heterosexual individuals in both childhood and adulthood (Bailey, Kim, Hills, & Linsenmeier, 1997; Lippa, 2005). Among sexual minority youth, those who are more gender nonconforming experience more victimization across school, home, and community environments (Pilkington & D'Augelli, 1995). Likewise, many gender nonconforming youth are perceived as lesbian, gay, or bisexual by peers and thus are at risk for victimization related to homophobia, in addition to transphobia (D'Augelli et al., 2006; Friedman, Koeske, Silvestre, Korr, & Sites, 2006). The intersection between sexual orientation and gender nonconformity has important implications for mental health. Gender nonconformity is related to depression, longitudinally, among sexual minority individuals, but not their heterosexual counterparts (Li, Pollitt, & Russell, 2016).

Parent Victimization

The majority of transgender youth reported that parents reacted negatively to their child's gender expression, including calling them "tomboy" or "sissy" and telling children they needed counseling for sexual orientation or gender identity (Grossman, D'Augelli, Howell, & Hubbard, 2005). Gender nonconformity and physical and verbal abuse by parents were positively related in the Grossman et al. study. Similarly, gender nonconformity was associated with an elevated risk of physical, psychological, and sexual abuse by parents, as well as PTSD, based on a longitudinal nationally representative sample (Roberts et al., 2012). Gender nonconformity predicted increased risk of PTSD even after adjusting for sexual orientation. Taken together, gender nonconformity confers increased risk for multiple forms of parental victimization and associated negative mental health outcomes, irrespective of sexual orientation. However, there appears to be important gender differences associated with child abuse and gender nonconformity (see under *Differences Across Birth-Assigned Sex*).

Peer Victimization

Higher gender nonconformity is associated with more rejection and verbal, physical, and sexual assault by peers (Hidalgo, Kuhns, Kwon, Mustanski, & Garofalo, 2015; Landolt, Bartholomew, Saffrey, Oram, & Perlman, 2004; Sandfort et al., 2007; Toomey, Ryan, Diaz, Card, & Russell, 2010). Likewise, there are higher rates of peer victimization (e.g., verbal, sexual, and physical) and poorer psychosocial outcomes among sexual and gender minority youth (D'Augelli, 2002; D'Augelli et al., 2006; Kosciw, 2009; Meyer, Greytak, & Diaz, 2003: O'Shaughnessy, Russell, Heck, Calhoun, & Laub, 2004). Victimization in school due to perceived or actual sexual minority status fully mediated the relationship between adolescent gender nonconformity and later psychosocial adjustment, including depression and life satisfaction (Toomey et al., 2010). Similarly, homophobic victimization is the mechanism by which gender nonconforming individuals' mental health is negatively impacted among gay men (Sandfort et al., 2007). In other words, the poor psychosocial outcomes associated with gender nonconformity may be best understood as resulting from homophobic and/or gender-related victimization.

Negative Sequelae Associated with Gender Nonconformity and Conformity

Both gender nonconformity and conformity are associated with negative outcomes above and beyond those associated with victimization. Theorists have long argued that high levgender els of either conformity or nonconformity can have negative implications for adjustment, though these views have changed somewhat over time (Martin et al., 2017). The current section reviews literature and research on negative sequelae associated with high levels of gender nonconformity and conformity (i.e., either side of the gender conformity spectrum) and concludes with a discussion of differences in maltreatment and outcomes across birth-assigned sex.

Gender Nonconformity and Maladjustment

In addition to the psychiatric sequelae (e.g., PTSD, suicidality) associated with the increased risk for child abuse that gender nonconforming individuals face (Hidalgo et al., 2015; Roberts et al., 2012), there are negative psychological (e.g., depression, low wellbeing, suicidality; Friedman et al., 2006; Navarro, Larrañaga, & Yubero, 2016; Roberts, Rosario, Slopen, Calzo, & Austin, 2013) and social (e.g., bullying others, aggressive behaviors; Navarro et al., 2016; Pauletti, Cooper, & Perry, 2014) risks as well. Gender nonconforming youth also experience additional distress resulting from the internalization of gender-related standards. A useful theoretical framework for understanding this process is minority stress theory, which posits that the excess in prevalence of mental health disorders in sexual minorities results from their stressful social environment, which is characterized by prejudice, discrimination, and stigma (Meyer, 2003). Minority stress encapsulates both explicit discrimination experiences and psychological processes and behaviors associated with oppressive environments, such as internalized homophobia, chronic vigilance to rejection or victimization, and attempts to conceal one's sexual orientation. In sum, gender nonconforming individuals face an increased risk of both gender-related victimization and its negative impact and distress associated with internalized prejudice.

Gender Conformity and Maladjustment

In the 1960s, theorists believed that adjustment was maximized if one conformed to traditional gender role expectations (c.f. Lurye, Zosuls, & Ruble, 2008 for a review). In her seminal work, Bem and Lewis (1975) outlined the consequences of strong adherence to traditional gender norms, arguing that it would promote negative adjustment and behavioral inflexibility. Subsequent research on the relationship between androgynous gender identity (i.e., comprising both masculine and feminine characteristics) and well-being was conflicting (Martin et al., 2017) and resulted in new measurements of gender identity. The most novel and commonly studied conceptualization of gender identity includes measures of gender labeling, typicality, contentedness, felt pressure to conform, and intergroup bias (Egan & Perry, 2001). Of these constructs, gender typicality is considered integral to gender identity for youth older than 10 years old (Egan & Perry, 2001; Yunger et al., 2004).

Newer studies examining this multifaceted conception of gender identity have shown that felt gender typicality is associated with psychological adjustment, such as self-esteem and the number of own-gender friends (c.f. Martin et al., 2017 for a review), and that gender atypicality, especially when paired with pressure to conform to one's own gender, is related to poor psychosocial outcomes (Egan & Perry, 2001). In contrast, higher levels of gender typicality are related to more negative views of the other gender (Martin et al., 2017) and a higher likelihood of perpetrating bullying (Buchanan & McDougall, 2017; Vaillancourt et al., 2003). However, among gender typical youth, felt pressure for gender conformity from peers and parents is more harmful than gender typicality itself (Egan & Perry, 2001). Taken together, the socialization processes associated with gender typicality and atypicality, such as social pressure, are integral to well-being, and high levels of gender conformity or nonconformity can have negative implications for psychosocial adjustment. This is consistent with minority stress theory, as it highlights the interactive role of social and internal processes as it relates to well-being among gender minorities.

Differences Across Birth-Assigned Sex

Studies on gender conformity are consistent with theoretical and empirical work on gender role development in males. More specifically, the gender role strain paradigm purports that (1) failure to fulfill gender role expectations (i.e., gender role discrepancy) has psychological consequences; (2) even when social expectations are met, the process of socialization can be traumatic and negatively impactful (i.e., gender role trauma); and (3) successful fulfillment of male-specific gender expectations can have negative consequences because many traditionally male characteristics have inherent negative side effects (i.e., male gender role dysfunction) such as poor health practices and impaired social networks (Pleck, 1995). These facets of gender role strain have been supported in a variety of empirical studies (c.f. Pleck, 1995 for a review) and appear to differ across birth-assigned sex.

There are higher rates of victimization and stronger negative outcomes for gender nonconforming boys compared to girls. Compared to gender typical boys, gender atypical boys were much more likely to experience parental rejection and verbal homophobic victimization and had higher levels of both depression and PTSD (D'Augelli et al., 2006). The higher rates of parental rejection are particularly important because acceptance of gender nonconformity by fathers was protective for boys, but not girls (van Beusekom & Bos, 2015). In other words, acceptance from fathers mediated the relationship between gender nonconformity and psychological distress and anxiety for boys. Boys are more often victimized for nontraditional gender expression and sexual orientation compared to girls, based on nationally representative samples of youth (Kosciw et al., 2009; Poteat & Espelage, 2007) and sexual and gender minority youth (D'Augelli, Pilkington, & Hershberger, 2002; Kosciw & Diaz, 2005).

The vulnerability to victimization that gender nonconforming boys face has long-term consequences. For instance, a retrospective study of adults indicated that men with higher levels of gender nonconformity were more likely to experience family-perpetrated trauma that, in turn, predicted higher rates of sexual victimization (Bos, de Haas, & Kuyper, 2016). Similarly, men who identified as both gay and "effeminate" were more likely to experience childhood sexual abuse compared to gender conforming gay men and reported higher rates of mental distress among that were attributable to experiences of homophobia in both childhood and adulthood (Sandfort et al., 2007).

Taken together, gender nonconforming boys are at risk for higher levels of varying kinds of victimization, including abuse in the family and homophobic bullying and poor mental health across the life span. The relative risk faced by boys, compared to girls, may be best explained by the pervasive overvaluing of masculinity and the devaluing of women and associated "feminine" behaviors, characteristics, and presentations. This is consistent with research indicating that gender nonconformity is more prevalent in women compared to men (Bos et al., 2016) and that boys are granted less freedom in gender expression compared to girls (Savin-Williams & Cohen, 2015). It should be noted, however, that girls are also more likely to be victimized if they are gender nonconforming (Zosuls et al., 2016) and thus attempts at reducing or preventing such victimization should be aimed at youth of all genders.

Implications for Intervention and Policy

School-Based Methods

Existing youth victimization intervention and prevention programs such as anti-bullying programs rarely address issues of identity, discrimination, or bias. As such, we know little about the effectiveness of identity-based victimization interventions. Acknowledging this, antibullying research could be fruitfully integrated with that on prejudice reduction among youth (Brinkman, 2015). Thus, the current section includes literature on interventions and policies aimed at addressing bullying, prejudice, and homophobic victimization, as each of these bodies of work have strong implications for reducing and addressing victimization motivated by gender nonconformity in youth. Given that youth in the United States spend the vast majority of their time in school, it is essential that intervention and policy aimed at reducing the occurrence of victimization and its negative effects be specific to schools. Likewise, the vast majority of research in this area focuses on school climates and school-based intervention. As such, the current section will provide policies and implications specific to the school environment.

School-based policy, prevention, and reduction strategies There are empirically grounded strategies that schools can use to improve perceived safety in schools for sexual and gender minority youth (O'Shaughnessy et al., 2004). These include:

 Establish and widely publicize harassment policy that explicitly addresses sexual orientation and gender (e.g., gender identity, appearance, and behavior). Such policies should also outline and consistently implement specific disciplinary actions for those who perpetrate identity-based bullying or harassment (Ttofi & Farrington, 2012). Harassment policies may also involve targeting vulnerable groups for intervention and assessment, for example, in health monitoring surveys, during guidance counselor visits, and in school climate surveys (Kosciw, Greytak, Bartkiewicz, Boesen, & Palmer, 2011; Russell, Sinclair, Poteat, & Koenig, 2012).

- 2. Train teachers and staff to intervene when they observe harassment related to sexual orientation or gender presentation. This should also involve providing special attention to targeted students (e.g., sexual minority students), such as having teachers provide regular checkins, and learning and implementing intervention techniques that extend beyond showing sympathy.
- Establish and/or support sexual minority and gender minority support groups (e.g., gender and sexuality acceptance groups; Kosciw et al., 2009; Marx & Kettrey, 2016; Toomey, McGuire, & Russell, 2012).
- 4. Ensure that students know where to go for support and information about gender identity and sexual orientation. Likewise, it is important for school personnel to openly support and offer help to students with marginalized identities. Schools should train support staff (e.g., school social workers, guidance counselors) on the prevalence and risks associated with victimization motivated by gender identity, as well as appropriate referrals they can make for victimized students.
- 5. Include curriculum involving sexual and gender minorities and information about gender identity and sexual orientation (Toomey et al., 2012). In addition, pedagogy should incorporate class discussions of prejudice and harassment, as research suggests that simply expressing positive attitudes about marginalized identities is not sufficient in combatting bias (Aboud & Fenwick, 1999).

An important guide produced by collaborators from the National Center for Lesbian Rights and Gender Spectrum, the Human Rights Campaign, the American Civil Liberties Union, and the National Educational Association also provides recommendations for creating a safe and affirming environment for gender minority students (Orr et al., 2015). While reviewing all of the recommendations is beyond the scope of this chapter, some essential components include:

- Create a uniform school records system that allows students and families to provide preferred names and pronouns. This system should be separate from the records system associated with state reporting to maintain student privacy.
- School staff should consistently use a student's preferred name and pronouns.
- Provide students with restrooms and locker rooms consistent with their¹ gender identity.
- 4. Allow students to play on sports teams and engage in other sex-segregated activities (e.g., health and physical education class) in a manner consistent with their gender identity.

School-based interventions for bullying and prejudice Multiple meta-analytic reviews have concluded that anti-bullying interventions are only marginally effective in reducing bullying behaviors (Ferguson, Miguel, Kilburn, & Sanchez, 2007; Ttofi & Farrington, 2012). A recent systematic review of interventions specific to stigma-based bullying (i.e., identitybased bullying; bias-based bullying; defined as bullying motivated by stigma) similarly described a wide array of outcomes and concluded that there is a dearth of interventions addressing sex/gender (Earnshaw et al., 2018). More successful programs tend to focus on youth who are at risk of being violent (Ferguson et al., 2007) and tend be long-term and intensive (Farrington & Ttofi, 2009). Further, parent involvement enhances the effectiveness of both prevention and intervention strategies aimed at reducing bullying (Ayers, Wagaman, Geiger, Bermudez-Parsai, & Hedberg, 2012; Ttofi & Farrington, 2012). A recent meta-analysis indicated that the most effective programs for prejudice reduction in adolescents involve intergroup contact, as well as the encouragement of perspective-taking and empathy (Beelmann & Heinemann, 2014). In sum, interventions targeting the reduction of identity-based victimization may be most effective if they:

- Target youth at risk for bullying gender minorities, such as highly gender typical youth and youth who have negative views of the other gender (Buchanan & McDougall, 2017; Vaillancourt et al., 2003)
- 2. Involve parents through parent psychoeducation and training (Ttofi & Farrington, 2011)
- Are both long-term and intensive for both students and teachers (e.g., 270 days or more for students; Ttofi & Farrington, 2011)
- 4. Teach and encourage perspective-taking and empathy (Beelmann & Heinemann, 2014)

Methods for Families and Parents

Although the protective role of parental support in the context of homophobic or gender-related victimization may be less important than school climate factors (Espelage, Aragon, Birkett, & Koenig, 2008; Poteat, Mereish, DiGiovanni, & Koenig, 2011), family acceptance is related to better mental and physical health in gender and sexual minority youth (Ryan, Russell, Huebner, Diaz, & Sanchez, 2010). Implications from research examining the positive impact of family acceptance include the reduction of a variety of abusive behaviors for family members of gender and sexual minority youth (e.g., hitting, verbal harassment) as well as the following recommendations (Ryan et al., 2010):

- 1. Talk with your youth about their sexual orientation and identity.
- 2. Support your youth's identity even though you may feel uncomfortable.

¹The gender-neutral pronoun "their" is used to refer to students of varying gender identities.

- Require other family members to respect your youth.
- 4. Connect your youth with an adult role model.
- Work to make your religious or spiritual community welcoming to gender and sexual minorities.
- 6. Welcome your youth's gender and sexual minority friends and partners.
- 7. Support your youth's gender expression.
- 8. Believe that your youth can have a happy future as a sexual and/or gender minority adult.

Summary and Key Points

Despite the growth of research on victimization faced by gender nonconforming youth, there remains a paucity of literature on relevant policy, prevention, and intervention. Gender nonconforming youth face a significant risk of physical, sexual, and emotional victimization by multiple actors and are thus more likely to experience negative psychosocial outcomes. As such, additional research is needed to understand the best preventative interventions, in addition to effective methods of helping victims. Such research should involve the development, implementation, and examination of novel bullying prevention and intervention programs utilizing the empirically grounded methods outlined above.

While the increase in work in this domain suggests that our society may be increasingly responsive to these issues, more transgender people are being victimized and murdered than ever before (Human Rights Campaign, 2017). Given the social and contextual roots of discrimination and bias-related aggression, policy and intervention should be aimed at changing the cultural landscape, in addition to providing help and services for gender nonconforming youth and sexual minorities. Addressing these gaps will necessarily involve the implementation of policies in schools and other community spaces that protect the rights of gender and sexual minority youth. The multifaceted nature of oppression faced by these youths necessitates policies addressing multiple actors, including parents, teachers, administrators, and mental healthcare providers. In sum, the implementation of empirically supported programs and policies that increase safety for gender nonconforming youth in multiple environments, and through multiple support systems, is critical for reducing the harm faced by this targeted population.

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