



# REMODELING ADOLESCENT RISK FOR SEXUAL VIOLENCE:

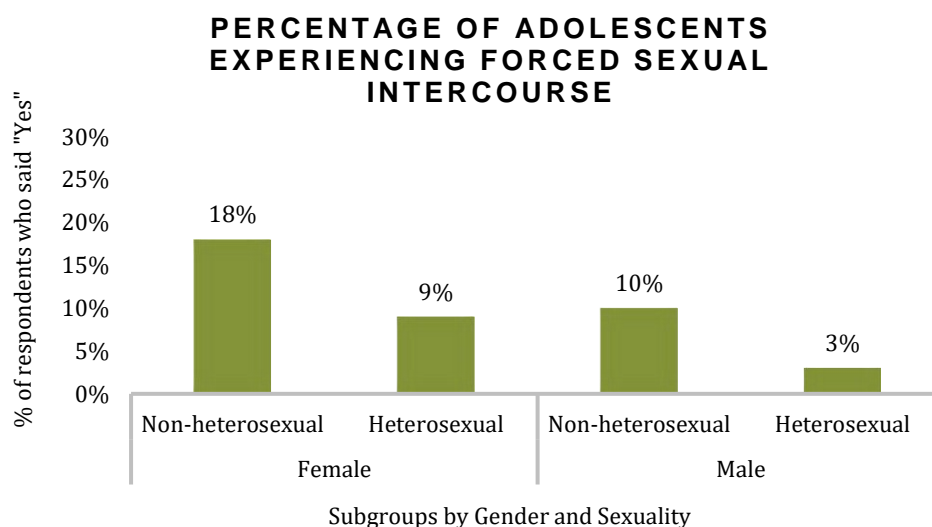
A CSCH Brief by Corona Zhang

## Youth Risk Behavior Survey

Every two years, the CDC conducts the Youth Risk Behavior Survey (YRBS) in order to monitor health risk behaviors in American high school students.<sup>1</sup> Teens answer a variety of questions about health behaviors—like eating vegetables or smoking marijuana—and then data are used to discern what health outcomes may be associated with these same behaviors across the teen years and later as adults. For this brief, YRBS data from 2015 were analyzed to explore which groups of adolescents are at highest risk of experiencing sexual violence.<sup>2</sup>

## Key Findings about Adolescent Experiences of Sexual Violence

- Non-heterosexual (i.e. lesbian, gay, bisexual) adolescents were approximately **three times** more likely to experience forced sexual intercourse than heterosexual adolescents.
- Consistent with previous studies,<sup>3</sup> non-heterosexual female adolescents reported experiencing the most forced sexual intercourse whereas heterosexual males reported experiencing the least. Current findings suggested that:
  - Non-heterosexual male adolescents were **over three times** more likely to experience forced sexual intercourse than heterosexual male adolescents.
  - Non-heterosexual female adolescents were **two times** more likely to experience forced sexual intercourse than heterosexual female adolescents.



Despite findings that suggest a need for prevention efforts targeting non-heterosexual groups, primary prevention curricula often focus on females as the at-risk group. For example, the CDC's 2019 *Sexual Violence: Fast Facts* page acknowledges that “all genders, sexual orientations, and ages” are vulnerable to sexual violence. However, the CDC's *STOP SV* model focuses on “mobilizing men and boys as allies” and “empowering... girls and women,” without attention to sexual minorities as another at-risk group.<sup>4</sup>

Resources with limited scope exclude the intersectional and specific needs of non-heterosexual people. Given that people identifying as non-heterosexual experience higher rates of depression, suicide and substance use than people identifying as heterosexual, as children *and* as adults,<sup>5 6</sup> there are critical unmet needs.

## Implications

- Adolescents identifying as non-heterosexual – and particularly non-heterosexual males, are a high-risk subgroup for sexual violence.
- Primary prevention efforts should reconsider their depiction of females as the only group at risk for sexual violence to ensure all adolescents understand critical issues and feel valid in their experiences.
- In addition to strengthening non-heterosexual inclusivity in primary prevention, targeted interventions for non-heterosexual groups are needed that can be effectively delivered across school and community contexts.

## Additional Information

Centers for Disease Control and Prevention (2018, March). Lesbian, Gay, Bisexual, and Transgender Health. Available at <https://www.cdc.gov/lgbthealth/>

Human Rights Campaign's “2018 LGBTQ Youth Report”: An effort by the HRC and UConn researchers to document the experiences of American LGBTQ youth.  
<https://assets2.hrc.org/files/assets/resources/2018-YouthReport-NoVid.pdf>

Male Survivor, a website with resources for adult male survivors of child sexual abuse and their loved ones: <https://malesurvivor.org/survivors-speaking-out/>

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<sup>1</sup> Centers for Disease Control and Prevention. (2015). Youth Risk Behavior Survey Data. Available at: [www.cdc.gov/yrbbs](http://www.cdc.gov/yrbbs).

<sup>2</sup> Zhang, C. (2019) *Sexual Identity and Forced Sexual Intercourse in American Adolescents and the Influence of Gender*. Unpublished manuscript.

<sup>3</sup> Friedman, M. S., Marshal, M. P., Guadamuz, T. E., Wei, C., Wong, C. F., Saewyc, E. M., & Stall, R. (2011). A Meta-Analysis of Disparities in Childhood Sexual Abuse, Parental Physical Abuse, and Peer Victimization Among Sexual Minority and Sexual Nonminority Individuals. *American Journal of Public Health*, 101(8), 1481–1494. DOI: <https://doi.org/10.2105/AJPH.2009.190009>

<sup>4</sup> Centers for Disease Control and Prevention (2019, March). Violence Prevention: Fast Facts. Available at <https://www.cdc.gov/violenceprevention/sexualviolence/fastfact.html>

<sup>5</sup> Kann L., Olsen E.O., McManus T., Harris, W.A., Shanklin, S.L., Flint, K.H.... Zaza, S. (2016). Sexual Identity, Sex of Sexual Contacts, and Health-Related Behaviors Among Students in Grades 9-12 – United States and Selected Sites, 2015. *MMWR Surveillance Summaries*, 65(9), 1-202.

<sup>6</sup> Walters, M.L., Chen, J. & Breiding, M.J. (2013). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Findings on Victimization by Sexual Orientation. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.