G8.3 Conwy 1 Thursday 6 December 9.00-11.00

The Role of Stigma in Partner Violence: A Social Psychological and Ecological Perspective (0191)

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The purpose of this proposed presentation is to describe a recently created, novel theoretical model—the multi-level sexual stigma model of intimate partner violence (MLSSM-IPV)—that seeks to explain the role of sexual stigma in increasing risk for experiences of IPV among sexual minority (lesbian, gay, bisexual, and other sexual minority [LGB+]) college students. In the proposed presentation we will briefly review literature on IPV among LGB+ college students, describe the MLSSM-IPV, provide preliminary evidence to support the MLSSM-IPV, and discuss future plans to rigorously evaluate the MLSSM-IPV.

Research consistently documents the concerning rates of intimate partner violence, which includes physical, sexual, and psychological violence occurring within the context of romantic or sexual relationships¹. IPV is especially pervasive among young adult populations, including college students²-⁴. Furthermore, IPV is more common among sexual minority (lesbian, gay, bisexual, and other sexual minority [LGB+]) students than heterosexual students, and preliminary research suggests that LGB+ IPV victims may experience worse adjustment than heterosexual IPV victims²-5-10. Research supports multiple contributing processes to higher rates of IPV and poor adjustment among sexual minority IPV victims including issues resulting from experiences of sexual stigma (e.g., discriminatory and non-inclusive policies, overt discriminatory experiences)^{8,11,12}. Despite these empirical findings, the scientific study of IPV among LGB+ individuals lacks strong theoretical underpinnings.

Guided by social psychological perspectives (i.e., Herek's unified sexual stigma conceptual framework 13-16 and Hatzenbuehler's psychological mediation framework 17), we propose a novel model—the multi-level sexual stigma model of IPV (MLSSM-IPV) that incorporates the role of institutional (i.e., structural) and individual-level (i.e., enacted, felt, and internalized) sexual stigma in increasing risk for IPV experiences among LGB+ students via multiple social psychological mediation pathways. More specifically, the model includes the following hypotheses: (1) universities with higher levels of structural sexual stigma (as evidenced by discriminatory practices and policies) will have higher rates of individual-level stigma among heterosexual staff/faculty/administrators and students, as well as higher rates of IPV victimization and perpetration among LGB+ individuals; (2) individual-level stigma among LGB+ students will be predicted by both structural stigma and individual level-stigma among heterosexual staff/faculty/administrators and students; and (3) emotion regulation difficulties, poor social support, hazardous drinking, and psychological distress will mediate the relationship between sexual stigma and IPV experiences among LGB+ individuals.

Across several studies conducted by this research team, findings provide some preliminary support for the MLSSM-IPV. For example, Edwards and Littleton⁵ examined structural stigma in a national sample of LGB+ young adults from over 100 U.S. colleges

and universities. Results showed that LGB+ students generally thought their campuses were low in readiness to address IPV; that is, students felt that their campuses could do more to address IPV and provide IPV services specific to LGB+ college students. Perceptions of greater campus readiness to address IPV among LGB+ college students was significantly and positively related to perception of a more favorable LGB+ campus climate and a greater sense of campus community. Additionally, greater sense of community was marginally related to lower levels of IPV victimization and perpetration. In other pilot research, Edwards documented emergent themes from interviews with LGB+ IPV victims centered around the intersection of marginalized social identities and barriers to disclosure, lack of resources on college campuses and in broader communities for LGB+ survivors of IPV, lack of acknowledgement within the LGB+ community and broader communities regarding IPV among LGB+ individuals, and variability across communities regarding community readiness to address IPV among LGB+ individuals¹⁸. LGB+ victims also noted the non-inclusive and heterosexist language in educational and awareness programming on campuses. With regards to individuallevel stigma. Edwards sampled 391 college students currently in same-sex relationships across the U.S. and found that physical IPV perpetration was related to identity concealment (often the result of felt stigma) and self-sexual stigma; sexual IPV perpetration was related to self-sexual stigma 10. Sexual stigma also was positively related to IPV victimization experiences $\frac{10}{2}$.

In order to rigorously evaluate the MLSSM-IPV, we intend to conduct a longitudinal survey (via an online platform) with LGB+ and heterosexual students (*N*=23,739) and faculty, staff, and administrators (*N*=7,731) across 15 U.S. institutions of higher education with pre-established variability in structural sexual stigma to test the previously described pathways. A 6-month follow-up survey will be conducted with students in order to examine how sexual stigma and hypothesized mediators prospectively predict IPV experiences. We will also examine how victim gender identification, perpetrator gender identification, and other demographic variables moderate the various pathways tested in the MLSSM-IPV. Additionally, we will evaluate these mediated models in the prediction of no IPV, IPV victimization only, IPV perpetration only, and bidirectional IPV.

Identification and elucidation of stigma-related factors operating at structural and individual-levels and the longitudinal impact of these factors on IPV experiences among LGB+ college students can be directly used to inform prevention, intervention, and policy efforts on campuses across the U.S. and potentially in a global context as well. Possible extensions of the MLSSM-IPV to other types of communities (e.g., universities in other countries, geographic communities as opposed to college campus communities) and other stigmatized populations (e.g., gender minorities, racial minorities) will also be discussed.

References

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