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Extraordinary Acts to “Show Up”: Conceptualizing Resilience of LGBTQ Youth

Kenta Asakura¹

Abstract
Sexual and gender diversity is an overlooked subject in resilience research. This study seeks to advance the conceptualization of resilience among lesbian, gay, bisexual, trans, and queer (LGBTQ) youth. Informed by social ecological theory of resilience, grounded theory analysis of interviews with service providers (n = 16) and LGBTQ youth (n = 19) yielded the following categories: (a) facing adversities across contexts, and (b) “doing well” while still in pain. LGBTQ youth face both general and LGBTQ-specific adversities. LGBTQ youth, even in a so-called “post-gay” era, remain challenged to navigate marginalization to maintain their well-being. Participants endorsed a context-dependent understanding of “doing well,” rather than using normative criteria of health (e.g., absence of psychopathologies). Although resilience is known as “ordinary magic,” this article alternatively proposes that resilience is LGBTQ youths’ extraordinary acts to “show up” every day to battle through adversities.

Keywords
LGBT issues, qualitative methods, resiliency

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The examination of risk and vulnerabilities has been the primary focus of research on lesbian, gay, bisexual, transgender (or trans), and queer (an inclusive term for non-heterosexualities) (LGBTQ) youth. LGBTQ youth are more likely to report depression (Clements-Nolle, Marx, & Katz, 2006), suicide risk (Haas et al., 2011), and substance abuse (Goldbach, Tanner-Smith, Bagwell, & Dunlap, 2014) than youth in general. The research focus on risk and vulnerabilities among LGBTQ youth successfully promoted the public awareness of the needs for service and policy provision (Russell, 2005). It is noteworthy that gender and sexuality are related but distinct concepts, and trans youth are likely presented with issues that are different from LGB youth. The Canadian study presented in this article nonetheless remains a focus on youth across the LGBTQ spectrum to stay consistent with how researchers, practitioners, and activists generally view LGBTQ as an aggregate community in the realm of marginalized identity (e.g., Higa et al., 2014).

The last decade of research on LGBTQ youth has seen a gradual expansion from its focus on risk to the resources associated with resilience, “positive adaptation in the context of risk or adversity” (Masten, 2014, p. 9). Much has been studied about resilient youth who experience poverty and racism (e.g., Clonan-Roy, Jacobs, & Nakkula, 2016; Kubiliene, Yan, Kumsa, & Burman, 2015; Ungar, Brown, Liebenberg, Cheung, & Levine, 2008). The inclusion of sexual and gender diversity as a source of adversity, however, is relatively new in resilience research and has left us with a paucity of knowledge about resilience among LGBTQ youth.

Resilience of LGBTQ youth is a burgeoning area of research, which has thus far focused predominantly on identifying protective or promotive factors (herein “resilience resources”) among LGB youth, while only a few studies have included trans youth samples. Overall, these studies, mostly conducted in the United States and Canada, suggest that there are both similarities (i.e., common factors) and differences (i.e., unique factors) in the ways in which LGBTQ youth and their cisgender (i.e., not transgender) heterosexual counterparts engage in the resilience processes. Several common resilience resources were identified, such as knowing a caring teacher (Eisenberg & Resnick, 2006; Konishi & Saewyc, 2014), family, and school connectedness (Eisenberg & Resnick, 2006; Konishi & Saewyc, 2014) for LGB youth, as well as school connectedness (Veale et al., 2015), social (Grossman, D’Augelli, & Frank, 2011), peer (Veale et al., 2015), and parental support (Simons, Schrager, Clark, Belzer, & Olson, 2013; Veale et al., 2015) for trans youth. Furthermore, several unique resilience resources have been identified for LGBTQ youth. These resources include friendship with other LGB peers (Ueno, 2005) and peer acceptance of homosexuality (Mustanski, Newcomb, & Garofalo, 2011) for LGB youth, while family acceptance of youths’ LGBTQ identities (Ryan,
Russell, Huebner, Diaz, & Sanchez, 2010; Travers et al., 2012) and the offering of school-based LGBTQ support groups (Hatzenbuehler, Birkett, Van Wagenen, & Meyer, 2014; Kosciw, Greytak, Bartkiewicz, Boesen, & Palmer, 2012) were identified as resilience resources for both LGB and trans youth.

Study Purpose

A critical review of resilience studies on LGBTQ youth points to a need for further conceptualization of key research constructs. Resilience research requires the presence of both (a) significant adversity and (b) positive adaptation (i.e., “doing well”) among its study samples (Fergus & Zimmerman, 2005). In resilience research, adversity is conceptualized as a situation or condition posed on and shared by a certain group of children that can exacerbate the risk for negative psychosocial outcomes, such as living in poverty or living with parental mental illness (e.g., Garmezy, Masten, & Tellegen, 1984; Werner & Smith, 1982). Most resilience studies on LGBTQ youth, however, did not explicate what adversities their study participants commonly experienced. Although there are some notable exceptions, such as those studies in the United States and Canada that defined adversity as experiences of stress (Doty, Willoughby, Lindahl, & Malik, 2010) or victimization (Konishi & Saewyc, 2014; Mustanski et al., 2011) due to being LGB, and bias-based prejudice and stress shared by trans youth of color (Singh, 2012), this relative absence of the conceptualization of adversity in past research is noteworthy and might reflect and potentially reinforce the public assumption that being LGBTQ in itself automatically poses vulnerabilities to youth. Furthermore, although World Health Organization (2006) now defines health rather broadly and holistically as “a state of complete physical, mental and social well-being and not merely the absence of disease” (p. 1), past research, using mostly population-based, quantitative datasets, has operationalized positive adaptation of LGBTQ youth as either the absence of psychopathologies (e.g., self-injury in Longo, Walls, & Wisneski, 2013) or the presence of socially desirable outcomes (e.g., academic success in Gastic & Johnson, 2009). Although these normative definitions of health might be just as important for LGBTQ youth, these pre-determined measures, normed ostensibly on cisgender heterosexual youth, might not sufficiently reflect how LGBTQ youth might view the notion of “doing well.”

Savin-Williams (2005), a prominent developmental psychologist in the area of LGBTQ youth, argued that American youth today live in the “post-gay” era in which sexual diversity has gained public acceptance and reached the point where contemporary “gay adolescents have the same developmental concerns, assets, and liabilities as heterosexual adolescents” (p. 222). On the contrary, empirical evidence from the United States and Canada shows that youth
experience family rejection (Ryan, Huebner, Diaz, & Sanchez, 2009), bullying, and violence (Taylor & Peter, 2011) for being LGBTQ. Provided that LGBTQ youth might experience their everyday realities differently from their cisgender, heterosexual peers, it might be premature to conclude that what we know about youth resilience in general can be transferred to LGBTQ youth in its entirety. This article used data from a larger study about resilience processes among LGBTQ youth in Toronto (Asakura, 2015) to address the paucity of robust conceptualization of resilience and its related constructs (i.e., adversity, positive adaptation). Research questions for this article were as follows:

**Research Question 1:** What are the common adversities experienced by LGBTQ youth?

**Research Question 2:** How do LGBTQ youth and adults around them define and understand positive adaptation among LGBTQ youth?

**Theoretical Framework**

This study used a social ecological theory of resilience (Ungar, 2004, 2011, 2012) as a guiding theoretical framework. This theory posits that resilience must be understood within a specific context, such as youths’ shared ethnoculture, and argues that what is considered as an adversity for youth in one context might not necessarily put youth in another context at risk. Similarly, what is a “healthy” or “positive” outcome in one context might not mean the same for those in another context. This theoretical understanding of resilience informed this study, in which participants’ perspectives and their socio-cultural and political contexts were examined.

**Method**

Detailed methodological descriptions of the larger study, from which this article drew from, can be found elsewhere (Asakura, 2015). The data related to the participants’ understanding of resilience and its related constructs (i.e., adversity, positive adaptation) were analyzed for this article. The study received approval from the University of Toronto Research Ethics Board.

**Recruitment and Participants**

First, service providers (SP; n = 16) were recruited through various local organizations (e.g., health care, social services, education) that work with LGBTQ youth. The inclusion criteria for SP were to (a) be older than the
maximum age limit of youth served in their respective organizations, (b) have worked with LGBTQ youth for at least 3 years, and (c) be as either a paid professional (e.g., social worker, health care provider) or a community volunteer. Of the 16 SP participants, three of them were volunteers. Most SP were White (n = 12), with the mean age of 44.5 (ranged from 25 to 69). All self-identified as LGBTQ (e.g., lesbians, gay men, trans men). Most were cisgender females (n = 11), whereas two cisgender males, two trans males, and one genderqueer also participated.

Although much of past research used variable-focused analyses (Masten, 2014) to quantitatively study discrete resilience resources (e.g., Ryan et al., 2010), a person-focused analysis (Masten, 2014) was used for this study to closely examine the lives of “resilient” LGBTQ youth and their social contexts. Using the “nomination” strategy recommended for a person-focused resilience study in a specific sociocultural context (Theron et al., 2011; Ungar et al., 2007), SP were asked to nominate youth who (a) self-identified as LGBTQ, (b) were ages 16 to 24, and (c) experienced significant adversities but are relatively “doing well.” Given that the study purpose was to explicate the constructs of resilience, no explicit markers of “significant adversities” or “doing well” were provided to openly elicit participants’ perspectives. Youth were also asked to nominate other “resilient” peers for the study. This resulted in 19 youth participants, with the mean age of 20.5 (ranged from 16 to 24). Youth used diverse LGBTQ identities, including lesbian, gay, bisexual, pansexual, queer, genderqueer, two-spirited, and trans. Their gender identities were also diverse, including cisgender female (n = 4), cisgender male (n = 3), trans-female (n = 1), trans-male (n = 5), and genderqueer (n = 6). Their racial identities included White (n = 8), Asian (n = 3), Black (n = 2), and mixed race, including Aboriginal heritage (n = 6). Although only three youth were born outside Canada, almost half of the youths (n = 9) identified as children of immigrants.

Data Collection and Analysis

All interviews with SP (n = 16) and youth (n = 19) were conducted by this researcher. Each interview lasted from 45 minutes to 2 hours 2 minutes. No honoraria were offered to paid SP, whereas CAN$20 honoraria were offered to volunteer SP and youth. The interview questions that generated the data used for this article are summarized in Table 1.

Coding methods from grounded theory methodology (Charmaz, 2006; Strauss & Corbin, 1990) were used for the simultaneous analysis of SP and youth data. After the interviews were recorded and transcribed verbatim, transcribed data were imported to Dedoose, a computer assisted qualitative
data analysis software, for coding. During initial, line-by-line coding (Charmaz, 2006), the interview data were labeled with discrete codes for inductive analysis. In focused coding (Charmaz, 2006), which is the next more conceptual level of coding, the data were organized based on which and how the initial codes would be grouped together to explain the larger data. For instance, 18 initial codes (e.g., experiencing transphobia, childhood abuse) that signified a variety of adversities resulted in the forming of the category of “facing adversities across contexts” and its associated three sub-categories. Although this process resulted in eight categories, this article focuses on two of these categories and the associated sub-categories, which are directly related to the purpose of this article (i.e., conceptualization of resilience and its related constructs). Constant comparative methods (Strauss & Corbin, 1998) were used to highlight both similarities and differences within and across cases (e.g., SP vs. youth, youth vs. youth). Data source triangulation of comparing SP and youth data, audit trail of the data analysis processes, thick description of participants’ experiences and social environments, and peer consultation were used to enhance trustworthiness (Marshall & Rossman, 2011).

Table 1. Semi-Structured Interview Guide.

<table>
<thead>
<tr>
<th>Interview questions (SP)</th>
<th>Interview questions (youth)</th>
</tr>
</thead>
<tbody>
<tr>
<td>“What do you think are adversities commonly experienced by today’s LGBTQ youth? How do you think that they are experiencing such adversities?”</td>
<td>“Resilience is generally understood as ‘doing well in the face of adversity.’ You have been invited to participate in this study because someone else thought that you were a ‘resilient’ youth. What is your understanding of how someone thought that you were a ‘resilient’ LGBTQ youth?”</td>
</tr>
<tr>
<td>‘What does ‘doing well’ look like for LGBTQ youth? How do you know that LGBTQ youth are ‘doing well’ despite their experience of significant adversity? What kind of indicators do you have to know that LGBTQ youth are ‘doing well’?”</td>
<td>“Thinking about yourself and your LGBTQ peers, what do you think are challenges or difficulties LGBTQ youth are experiencing? Can you tell me how you and/or your peers have experienced these challenges?”</td>
</tr>
<tr>
<td><strong>“What does ‘doing well’ mean to you and other LGBTQ youth? How can others in your life (e.g., adults, friends) be assured that you are ‘doing well’ despite challenges?”</strong></td>
<td><strong>“Resilience is generally understood as ‘doing well in the face of adversity.’ You have been invited to participate in this study because someone else thought that you were a ‘resilient’ youth. What is your understanding of how someone thought that you were a ‘resilient’ LGBTQ youth?”</strong></td>
</tr>
</tbody>
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*Note.* SP = service provider; LGBTQ = lesbian, gay, bisexual, trans, and queer.
Results

This section reports the following categories: (a) facing adversities across contexts, and (b) “doing well” while still in pain. Results of this study offer insight into a myriad of adversities and the criterion of positive adaptation to develop a conceptualization of resilience that accounts for the lived experiences and social environments of LGBTQ youth. SP excerpts are identified by the letters “SP” followed by a number assigned to each participant (e.g., SP07), while the letter “Y” and a number are used for youth excerpts (e.g., Y11). To protect the privacy of participants recruited from a small, marginalized subset of the general population, demographic information is provided only when it is relevant and necessary for the explanations of the data.

Facing Adversities Across Contexts

Lived experiences of LGBTQ youth are in some ways very much like any other youth and in other ways are very much unique to being LGBTQ. Facing adversities across contexts signifies that LGBTQ youth experience both general and LGBTQ-specific adversities across time (current and earlier childhood) and contexts (homes, schools, communities). Three emergent sub-categories are reported in this section: (a) early childhood experience, (b) family acceptance–rejection of youths’ emerging LGBTQ identities, and (c) social marginalization in schools and communities.

Just like any other youth, LGBTQ youth in this study reported a range of early childhood experiences. Some had relatively easier upbringings and family relationships, whereas for others, childhood consisted of poverty, abuse, family violence, and out-of-home care. For most youths, however, childhood was neither all positive nor all negative, and their life circumstances changed over time. Although one youth recalled “a really happy childhood” and “didn’t have . . . any abuse or hardship” as a young child, he then saw significant changes as a result of immigration: “Suddenly when we came to Canada . . . [saw] our family struggling with money . . . our parents fighting” (Y09). Another youth lived under extreme poverty as a child:

My father worked at CAN$14 an hour. We were broke and go on for months at a time not eating a lot besides rice. We moved around a lot because we weren’t able to hold onto any of our homes. (Y14)

The same youth, however, also fondly remembered his childhood because of the close family relationship, and his family connectedness remained critical for his continued positive outlook on life: “A lot of bad things happened to my family, but my family has always been a strong undercurrent.”
Although LGBTQ youth can have a range of early childhood experiences just like any other youth, their social environments diverged from youth in general when others perceived them as LGBTQ or youth acknowledged their own emerging LGBTQ identities. The nature of youths’ early childhood (e.g., positive, negative) did not predict the family reactions to their emerging LGBTQ identities (e.g., acceptance, rejection). Youth reported varied family reactions to their LGBTQ identities, ranging from complete rejection to full acceptance. For some youth, families played a positive role in supporting their LGBTQ identities: “My sexuality . . . wasn’t really an issue. I was lucky” (Y15); “My parents were extremely progressive and they never genderized my toys and let me do, wear, or be whatever I wanted” (Y14). On the other end of the spectrum, one gay male youth reported a difficult family relationship since his “coming out”: “My dad’s first response was, ‘we should have never come to Canada’ . . . [As] the oldest son, [my parents have] lots of high hopes. ‘We sacrificed our resources . . . so you can have a good future’” (Y02).

Family rejection of youths’ LGBTQ identities occurs through physical and/or emotional means: “Often youth either run away or are kicked out. Or ‘frozen out,’ where . . . youth felt like they had no choice but to leave because they couldn’t stay under the rules that the parents had set” (SP06). In fact, youth interviews revealed a range of ways such family rejection took place, from the silencing of the topic to verbal, physical, and even sexual assault. Although most youth experienced family rejection, some nonetheless chose to stay and face the difficulties with their families and others ended up leaving home. A close look at the youth data, however, did not reveal a clear-cut relationship between the type of family rejection outcomes (e.g., leaving home, staying connected) and youths’ self-reported current well-being. Furthermore, family attitudes toward youths’ LGBTQ identities might not remain constant. One 22-year-old youth who felt that there was no choice but to move out of home at age 17 when he came out as trans observed the changes in his family attitudes over time:

My father and I didn’t speak for about 4 years. There were a couple of times when we tried to reconcile. But when he learned that I was planning on medically transitioning and . . . starting testosterone and a top surgery, we stopped talking again. But over the last year, he has apologized and wants to work things out. (Y10)

Family acceptance–rejection does not occur in a vacuum, it resides within larger social contexts. Participants highlighted how pervasive anti-LGBTQ attitudes remain in schools and communities. Homophobia and transphobia were reported to take place in many forms (e.g., verbal, physical, sexual,
cyber) and threaten youths’ safety in schools and communities: “In my Grade 10 civics class, one kid [said], ‘if my brother was gay, I’d beat him up.’ But the teachers didn’t do anything about it” (Y01); “[I was] experiencing such hate from people online and I didn’t even feel safe going to school . . . I did not know who was saying this stuff” (Y03). Positive changes in schools were also reported. Most youth reported the presence of gay–straight alliances in their schools, which is one of the well-known resilience resources for LGBTQ youth (Hatzenbuehler et al., 2014). Some had teachers who interrupted anti-LGBTQ comments and behaviors in schools. Some who had difficulties in regular classrooms had successful experiences attending a classroom designed for LGBTQ students. 

Although homophobia remains pervasive and affects LGB youth, the data revealed extensive prejudice, discrimination, and violence trans youth experienced on a daily basis. In fact, each of the 12 youth who did not identify as cisgender emphasized safety concerns associated with the public bathroom use. One SP who has worked extensively with trans youth used public bathrooms, which are generally divided into two genders (male and female), as an example of how transphobia plays out and negatively affects youth:

Public bathrooms are a source of fear . . . Not just for trans but for anyone (that) doesn’t fit the [binary gender] norms . . . If they’re seen as not fitting the [binary gender] norms, those bathrooms are a location of abuse, harassment, and tremendous fear . . . Every time you need to take care of physical need, you have to risk facing danger. (SP12)

In addition to public bathrooms, trans youth reported discriminations in larger social institutions, such as health care, housing, and employment sectors. One trans-male who sought medical transitions recalled traumatizing experiences with a medical provider:

(I was) scrutinized . . . I was constantly fighting . . . just to prove that I identified as male though I had previously identified that way for years . . . I learned . . . that the medical system was not safe . . . it was help being disguised as help but it was actually making me feel worse about myself. (Y03)

Another trans youth with a university degree shared employment-related discrimination: “My biggest barrier (is) finding a job . . . because this is where I experience the most discrimination . . . I don’t even get a job interview . . . unless it’s at a queer organization” (Y8).

In addition to experiencing LGBTQ-specific marginalization, other marginal social locations (e.g., being a person of color, newcomer) also affect
many youth. Like the general youth population in Toronto (City of Toronto, 2013), LGBTQ youth come from diverse backgrounds of race, class, gender, and other social locations. Canada is a new home for many LGBTQ youth who sought political asylum from their home countries that criminalize LGBTQ citizens (Lee & Brotman, 2011). A SP who works extensively with LGBTQ youth who migrated to Canada on their own to seek physical and/or psychological safety offered insight into these youths’ complex experience of marginalization:

[For LGBTQ refugee youth] the immigration officer is probably the first person they come out to . . . And having to go through the process of proving that you’re queer or trans [to have their refugee claim approved] is quite stressful and difficult. And you come with a hope that you can be yourself. But when you walk down the street and someone says something racist. And that’s really heartbreaking. (SP16)

“Doing Well” While Still in Pain

The category of “doing well while still in pain” highlights the emotional pain deeply felt in the stories of youth participants. Even though these youth were nominated for their resilience and saw themselves to be relatively doing well, they emphasized their continued struggles with various psychosocial vulnerabilities, such as school absence, relationship difficulties, struggles with depression and anxiety, past suicide attempts, poverty, and lack of stable housing. Although some youth named a “turning point” (e.g., leaving home, attending college) and its positive influence for their well-being as often reported in general youth resilience literature (e.g., Werner & Smith, 1982), a close data analysis confirmed that these turning points alone did not dramatically enhance youths’ well-being. Although a turning point might have opened up more opportunities and contributed to positive changes among these resilient youth, youth nonetheless continued to experience adversities and struggle every day.

SP and youth both articulated the association between youths’ psychosocial vulnerabilities and their experiences of marginalization across families, schools, and/or communities that are “not going away tomorrow” (SP09). One lesbian youth, for instance, explained her mental health within the context of her experiences of marginalization: “My social anxiety is really affected by social norms (of) gender and sexuality and how I really felt like a misfit based on that . . . that ‘oh, I’m different than these people . . . I’m different and perceived as wrong and not as good’” (Y01). This sentiment was corroborated by a queer woman of color: “It was the queer thing. It was the
Muslim thing. It was the ‘not fitting in’ . . . coming out and losing faith . . . It was so much going on that it just caused me to be really depressed” (Y6).

Transphobia threatens the well-being of trans and gender non-conforming youth. The youth who experienced prejudice and discrimination within the health care system stressed how impactful transphobia can be on one’s sense of self: “[I learned that] trans is . . . bad . . . Any time someone thought I was trans, I said no . . . because being cis(gender) is safe and being trans is dangerous. I’m still unlearning that” (Y03). Other trans and gender non-conforming youth shed light on the accumulated impact on their well-being when one’s gender is not respected by others (i.e., “misgendering”):

[Being misgendered] is like a bee buzzing around your head. I had an entire day where someone kept referring to me as a girl . . . It got to the point . . . there were way too many bees around me and I broke down. (Y12)

“Every time [teachers misgender me] I have to walk out of the classroom because I get really upset. I missed almost half my semester because I couldn’t bring myself to go to class because I’m being consistently [misgendered]” (Y7).

SP and youth both endorsed a context-dependent understanding of “doing well.” Being resilient and LGBTQ means that youth continue to “show up every day” (SP01), “[being] able to get out of bed” (SP10), and “having hope for the future” (SP05), knowing that they must continue to struggle to exist within their marginalized lived realities. The following story about a youth who experienced daily harassment and bullying shows a context-dependent relationship between adversity and positive adaptation: “[The youth] would often threat suicide, [so that she can] go into the youth jail for a night or two (because) it was safer there” (SP06). One SP who works with trans youth further elaborated this contextual understanding:

For [trans] youth I work with, just being able to get out there every day is “doing well.” Just being able to navigate the world every day is doing well. And when I see them coming to the groups, that’s doing well because they are getting themselves out there. (SP16)

Youth rejected the normative definitions of positive adaptation such as the absence of psychopathologies and school success. As evidenced by the choice of phrases such as “still struggling” (Y08), “battling through” (Y12), “still fighting” (Y09), and “[having] your head above water” (Y15), youth underlined their experience of pain associated with courageously working through adversity. For one youth (Y07) who had used “cutting” as a coping skill for a
long time, for instance, cutting sometimes comes back unexpectedly when anti-LGBTQ discriminations occur on a seemingly normal day. Another youth (Y05) stressed that “doing well” is not about eliminating stress, depression, or anxiety but about knowing when support is needed and taking active steps to take care of the self. Similarly, although one youth prefaced that “it’s hard to see myself as resilient when you’re constantly fighting and constantly having to survive,” the importance of celebrating the act of “showing up” as extraordinary was emphasized: “I congratulate myself for going to school . . . and work[ing]. When I look at others doing that, I would be like, ‘that’s awesome, that’s amazing!’ But most of the time I still feel the weight of trauma” (Y03).

Discussion and Conclusion

The goal of this study was to advance the conceptualization of resilience among LGBTQ youth and its related constructs. The results illuminated that (a) LGBTQ youth are subject to both general (to all youth) and unique (to LGBTQ youth) adversities across time, and (b) the notion of “doing well” (i.e., positive adaptation) among LGBTQ youth should be recognized within the context of their marginalized experiences. The results corroborate the minority stress model (Meyer, 2003), which suggests that the stress of living as a sexual and/or gender “minority” sets apart the everyday realities of LGBTQ youth from those of youth in general. Participants’ articulation of the plausible association between their individual-level vulnerabilities (e.g., mental health) and the stress associated with their marginal social locations suggests the need to re-conceptualize LGBTQ youths’ individual-level vulnerabilities as a structural issue. Although the unit of analysis of homophobia/transphobia is the individual who discriminates against LGBTQ people, these terms do not fully account for the social structures that produce such individual- and interpersonal-level attitudes and behaviors.

The concept of hetero- and cis-normativity (Bauer et al., 2009) might offer an alternative language to homophobia/transphobia and better account for the structural barriers to the well-being of LGBTQ youth. Hetero-cis-normativity signifies a social ideology that privileges and sustains heterosexuality, binary gender (i.e., only male or female), and its alignment with one’s biological sex as the norms (Weiss, 2001). Because it is embedded in our everyday language and practices, hetero-cis-normativity can operate across many social institutions (e.g., schools, medicine) and perpetuate homophobic and transphobic bullying, violence, and discrimination (Bauer et al., 2009; Ward & Schneider, 2009). LGBTQ Canadians are now afforded full legal rights and protection on the basis of their sexual orientation and gender identities. Ontario, for instance, legalized same-sex marriage over 10 years ago (Woodford,
Newman, Brotman, & Ryan, 2010) and more recently included transgender identity in its human rights legislation in 2012 (Ontario Human Rights Commission, 2014). Despite these political advances, the ongoing psychosocial struggles stressed by the youth participants also raise the question of to what extent we have actually reached the “post-gay” era (Savin-Williams, 2005). In addition to policy-focused work, it is equally essential for SP to challenge hetero-cis-normativity through public education and advocate for equitable and accessible services for LGBTQ youth (Asakura, 2016). The adoption of all gender public bathrooms is one very concrete example that SP can support to afford greater safety among those who do not fit in the gender binaries (Asakura, 2016; Seelman, 2014).

Furthermore, results suggested that the notion of “doing well” among LGBTQ youth be contextually recognized within their everyday experiences of hetero-cis-normativity. Observing the five decades of resilience research on marginalized youth, Masten (2014) coined the term “ordinary magic” to suggest that resilience is made of assets and resources that are ordinarily available to youth, such as parental and social support. As shown in previous resilience studies on LGBTQ youth (e.g., Veale et al., 2015), many of the ordinary resources are certainly essential in protecting youth from risk or promoting their well-being. This study additionally offers empirical evidence that these ordinary resources might not be readily available for many LGBTQ youth within hetero-cis-normative discourses, which restrict the ways in which families, schools, and communities can fully support LGBTQ youth. Until we can actualize the kind of society in which all families can accept sexual and gender diversity among their children, a contextual understanding of positive adaptation (i.e., doing well while “still struggling” and “battling through”) might be more favorable than using a normative definition of health in conceptualizing resilience of LGBTQ youth. Given that it is often the ordinary resources that are the very sources of pain, this study emphasizes how extraordinary it is that many LGBTQ youth choose to “show up” for life and “battle through” the myriad of adversities.

This qualitative study suggests a greater need for incorporating LGBTQ youth and SP as important knowledge holders to advance resilience research. Overall, participants problematized the normative definitions of health (e.g., absence of psychopathologies, presence of socially desirable outcomes) as a primary way to measure LGBTQ youths’ resilience, while these normative measures of health have been predominantly used in youth resilience research (Masten, 2014; Ungar, 2011). More qualitative studies, especially of longitudinal design and person-focused analysis (Masten, 2014), have the potential to add more nuances and complexities to this body of knowledge developed predominantly in quantitative research.
LGBTQ youth are most likely not the only youth population that experiences pain emphasized in this article. Cisgender and heterosexual youth also have painful experiences rooted in marginalization, for instance, racism (Kubiliene et al., 2015), poverty, and cultural disintegration (Ungar et al., 2008). Given its study focus on LGBTQ youth, this study attended to youths’ shared experiences and contexts specific to being LGBTQ. These results based on diverse youth certainly imply a greater need to account for other forms of oppression, such as racism and colonialism, in studying LGBTQ youth and resilience. In fact, this corroborates past research that reported correlations between LGBTQ youths’ experience of family acceptance–rejection and the demographic characteristics of both youth (Ryan et al., 2009) and families (Ryan et al., 2010), such as youths’ gender, family immigration status and religion. In this small qualitative study, however, it was not possible for this author to explicate to what extent the pain articulated by youth were directly related to being LGBTQ and/or youths’ any other marginalized identities. Although all youth, including racialized participants, are challenged to navigate hetero-cis-normativity, there remains unknown about how and to what extent other forms of oppression (e.g., racism, colonialism) might intersect with hetero-cis-normativity to produce differential experiences for LGBTQ youth from diverse demographics. Combining the social ecological theory of resilience (Ungar, 2011, 2012) with intersectionality theory (Mehrotra, 2010), which posits that multiple forms of oppression operate not separately but rather simultaneously, might offer an additional analytic lens for future research on marginalized LGBTQ youth.

The study has several other limitations. Although youths’ involvement with SP often extended beyond being service users (e.g., youth advisor, trainer), those who do not engage these agencies were nonetheless excluded from the study. Youth who are not connected to services might have different relationships with adversities and perspectives about “doing well” from the participants. Furthermore, the nomination method might have limited the diversity of perspectives among participants, as it is plausible that the nominators chose youth who shared similar perspectives to theirs. The results of this small-scale qualitative study are grounded in the experiences of youth in an LGBTQ-resource-affluent urban area in Canada. These youth had access to legal rights and protection as well as LGBTQ-specific services that might not be available to youth in other regions. Until a similar, comparison study (e.g., vs. the United States) is done, transferring these results to other geographic contexts should be done cautiously.

Overall, this qualitative study adds to research on risk and resilience by conceptualizing hetero-cis-normativity as a source of adversity and highlighting the relative scarce of “ordinary” resources available to support the
well-being of LGBTQ youth. The study suggests a greater need for research and practice that address hetero-cis-normative ideology even in places where LGBTQ youth have access to rights and protection. Attending to how such social institutions and practices structurally affect LGBTQ youth allows us to better support their extraordinary acts to “show up” every day and “battle through” adversities.

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