

Assessing Differences in Adverse Childhood Event Scores Between Transgender/Non-Binary Individuals and Cisgender Sexual Minorities from the San Antonio Strengthening Colors of Pride Project

Amy L. Stone, Phillip Schnarrs, Robert Salcido, Jr.

Adverse childhood experiences have a profound impact on health outcomes in adulthood.

Previous research on the topic has demonstrated that sexual minorities are more likely to report higher scores of adverse childhood experiences (ACEs) on average, compared to their heterosexual counterparts. Higher ACEs scores among sexual minorities likely contribute to the health disparities found in this population. This study interrogates the differences between ACEs scores in the transgender or non-binary members (TNB) of the sexual and gender minority (SGM) community. We argue that TNB adults report higher ACEs scores than their cisgender peers, largely due to the higher likelihood that tran and non-binary adults experienced negative adult-child interactions in their youth.

As part of a larger community-based participatory research (CBPR) study, 809 sexual and gender minorities responded to a short-survey screening potential candidates for and in-depth interview. Of those responding to the survey, $n = 637$ SGM completed the survey. A broad recruitment strategy was implemented that included social media, community outreach (e.g., SGM-related events; Gay PRIDE), and through leveraging the social networks of our community advisory board. This paper uses survey data that we collected in the summer and fall of 2018 as part of screening and recruiting SGM adults age 16 years old and up in San Antonio, TX, for a qualitative project on resilience and the social determinants of health. Between May and September 2018, we surveyed 809 SGM adults with paper and online surveys. Respondents ranged in age from 16 to 80 years old with an average age of 36 years old. In this study, 63% of the respondents identified as non-white, alone or in combination with another race; 53.5% of

adults identified as Hispanic, Latino, or Latina; 8% identified as Black or African-American; 4.5% identified as Native American. Within this sample, 123 respondents identified as having a gender identity that is not congruent with their sex assigned at birth.

The average ACE score was $x = 3.67$. However, TNB respondents reported having statistically significantly higher ACEs scores ($x = 4.09$) than their cisgender peers ($x = 3.57$, $p < .01$). These higher scores were magnified by racial disparities. Latinx respondents had higher ACEs ($x = 3.87$) than their non-Latinx SGM peers ($x = 3.48$), and Native American respondents had the highest average ACEs score ($x = 5.08$) compared to their non-Native peers ($x = 3.60$, $p < .01$). Non-white TNB respondents reporting the highest average ACEs score ($x = 4.65$) compared to non-white cisgender peers ($x = 3.6$, $p < .01$).

We account for the disparity in ACEs scores between TNB and cisgender respondents by the *type of* adverse childhood experiences TNB encounter. Specifically, TNB were more likely to report adverse experiences in their interactions with adults as children rather than issues stemming from parental mental illness or incarceration, suggesting childhood trauma experienced by TNB is linked to a more interpersonally mediated mechanism and opposed to a structural issue. Specifically, TNB respondents were statistically more likely to be regularly sworn at or humiliated by parents or adults in their household (64.7% vs. 48.9%), feel like no one in their family loved them (53.9% vs. 41.4%), more likely to not have enough to eat or feel like there was no one to protect them (22.5% vs. 13.5%). This finding confirms qualitative work on the stigmatization and punishment of gender non-conformity in childhood.