Sexual violence against lesbians, gays, bisexuals and transgenders

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Abstract
Sexual violence against lesbian, gay, bisexual, and transgender (LGBT) people is a public health problem that needs attention. It relates to the impact of physical, psychological, and social health including the risk of increasing cases of HIV/AIDS. The objective of this literature review is to identify the description of sexual violence against LGBT people. Search results on PubMed, ScienceDirect, and ProQuest found 527 articles associated with sexual violence against LGBT people. Seven articles met the inclusion criteria and were employed for this literature review. There were 5 themes which were discovered related to sexual violence against LGBT, encompassing the type and number of cases of sexual violence against LGBT; risk factors for sexual violence against LGBT people; perpetrators of sexual violence against LGBT; and the impact of sexual violence on LGBT people. In conclusion, cases of sexual violence against LGBT people tend to be higher than heterosexual groups. Sexual violence against LGBT is a complex problem and has an impact on the physical and mental health of victims. Thus, the implementation, utilization and success of programs related to the prevention and handling of sexual violence against LGBT groups need to be evaluated so that the program runs optimally.

Keywords: sexual violence; sexual harassment; LGBT; sexual minorities; literature review

Kekerasan seksual pada lesbian, gay, biseksual dan transgender

Abstrak
Kekerasan seksual pada lesbian, gay, biseksual, dan transgender (LGBT) merupakan masalah kesehatan masyarakat yang perlu mendapat perhatian. Hal tersebut berkaitan dengan dampak kesehatan fisik, psikologis, dan sosial termasuk risiko peningkatan kasus HIV/AIDS. Literature review ini bertujuan untuk mengetahui gambaran kekerasan seksual pada LGBT. Hasil pencarian di PubMed, ScienceDirect, dan ProQuest menemukan 527 artikel terkait kekerasan seksual pada LGBT. Tujuh artikel memenuhi kriteria inklusi dan digunakan untuk literature review ini. Ada 5 tema yang ditemukan terkait kekerasan seksual pada LGBT antara lain: jenis dan jumlah kasus kekerasan seksual pada LGBT; faktor risiko terjadinya kekerasan seksual pada LGBT; pelaku kekerasan seksual pada LGBT; dan dampak kekerasan seksual pada LGBT. Kasus kekerasan seksual pada LGBT cenderung lebih tinggi dibandingkan kelompok heteroseksual. Kekerasan seksual pada LGBT merupakan permasalahan yang kompleks dan berdampak pada kesehatan fisik dan mental korban. Implementasi, pemanfaatan dan keberhasilan program terkait pencegahan dan penanganan kekerasan seksual pada kelompok LGBT perlu di evaluasi agar program berjalan optimal.

Kata Kunci: kekerasan seksual; pelecehan seksual; LGBT; minoritas seksual; literature review

1. Introduction
Lesbian, gay, bisexual, and transgender (LGBT) are a sexual and gender minority group. They encounter more difficult problems in various aspects of life including mental and physical health, subjective well-being, employment, poverty, homelessness, and social exclusion than heterosexual groups (Perales & Todd, 2018; Siconolfi et al., 2021). LGBT groups are vulnerable to violence. They face many types of sexual violence and hate speech throughout their lives, from child sexual abuse to intimate partner sexual assault (Peitzmeier et al., 2015). Sexual violence is significantly associated with
HIV transmission as a result of various risky behaviors including Male Sex with Men (MSM), prostitution, drug use, history of detention or imprisonment, higher number of male sexual partners and unprotected anal sex (Finneran & Stephenson, 2013; Siconolfi et al., 2021; Stephenson et al., 2014; Xu et al., 2018). Gay and bisexual men are 1.9 and 2.3 times more likely to experience rape and sexual violence than heterosexual men, while MSM are 3 times more likely to experience rape (Anderson et al., 2017; Walters et al., 2013). The percentage of MSM who became victims of sexual violence ranged from 40.2% to 47.4% (Walters et al., 2013). This high percentage of sexual violence in LGB is triggered by their unique sexual orientation (Meyer et al., 2021; Orr et al., 2021).

Sexual violence against LGBT is a complex public health problem that needs joint attention and handling (Blondeel et al., 2018; Pega & Veale, 2015). This violence is associated with mental health problems as well as an increased risk of HIV/AIDS. Barriers to providing services to victims contribute to increasing the severity of the impact of violence on victims. This is due to the normalization of violence in society as well as the taboo assumption to discuss matters related to LGBT. Therefore, an understanding of violence, especially sexual violence against LGBT people, is needed to educate the public about the importance of this issue. This literature review aims to identify the description of sexual violence against LGBT.

2. Research Method

2.1. Literature Search Strategy

Based on Medical Subject Headings (MeSH), there are several terms related to sexual violence against LGBT that are used as keywords in this review. These keywords include: “sexual violence”, “sexual abuse”, “sexual assault”, “sexual harassment”, “intimate partner violence”, LGBT, LGB, lesbian, bisexual, transgender, homosexual, “women who have sex with women”, “men who have sex with man”. The Boolean operators “AND” and “OR” are used to increase the search scope. The search for articles related to sexual violence against LGBT was conducted in two databases, which are PubMed and ScienceDirect. The researcher uses a reference manager (ZOTERO) to help organize the articles used in the preparation of the literature review.

2.2. Article Selection

Reference manager (ZOTERO) is used to help organize the articles found. The process of selecting articles from deleting duplicates, selecting titles and abstracts, selecting full text, critical appraisal was performed by the author. The selection of articles was based on the inclusion criteria: English articles; published in 2012-2020; original research; discuss violence against LGBT. Exclusion criteria: non-English articles, not original research (review, systematic review, correspondence, newsletter).

2.3. Data Charting

The selected articles are summarized by title/author/year; country; destination; method; number of samples/participants; and results, as presented in Table 1.

3. Result and Discussion

The total articles found when searching the database were 527 articles. The same article was deleted (22) leaving 505 articles, the articles were then filtered by title and abstract according to the inclusion criteria (72) review articles/systematic review were excluded, 381 articles were irrelevant. The remaining fifty-two articles were accessed in full text and filtered (35 irrelevant articles were excluded), the remaining articles (17) were critically appraised (10 articles were excluded), so that the remaining 7 articles were used in this literature review (Table 1). The article search flow is shown in Figure 1.
### Table 1. Articles used in Literature Review

<table>
<thead>
<tr>
<th>No</th>
<th>Title/Researcher/Year</th>
<th>Country/State</th>
<th>Objective and Method</th>
<th>Number of Samples/Participants</th>
<th>Result</th>
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| 1  | Correlates of Sexual Violence among Men Who Have Sex with Men in Tijuana, Mexico (Semple et al., 2017). | Mexico        | **Objective:** To investigate sexual victimization in men having sex with men (MSM). **Method:** Survey | 201 MSM 63.5% gay and 33% bisexual | • 39% of MSM experienced sexual assault in the past year, consisting of sexual harassment (11.9%), sexual harassment (11.9%), and forced sex (1.5%).  
• A higher intensity of sexual assault was associated with a history of sexual abuse as a child, more experience of homophobia in adults, higher symptoms of depression and hostility, and living apart from a partner. |
| 2  | Do Sexual Minorities Face Greater Risk for Sexual Harassment, Ever and at School, in Adolescence (Smith et al., 2020). | United States | **Objective:** To identify whether sexual minorities are more at risk than ordinary people for sexual harassment and have a history of sexual harassment as a teenager/high schooler. **Method:** Online survey | 2219 adults 6% LGB and other sexual minorities | • A history of sexual harassment or assault was reported by 95.0% of sexual minority women and 80.3% of heterosexual women (p < .001), and 77.3% of sexual minority men and 41.3% of heterosexual men (p .001).  
• Sexual minorities are at higher risk of experiencing non-physical sexual harassment (AOR 2.88; 95% CI 1.33, 6.20), physical sexual harassment (AOR 4.15; 95% CI 1.77, 9.77), and sexual assault (AOR 5.48; 95% CI 2.56, 11.73); comparison group: no harassment.  
• Minority groups also experienced physical sexual harassment in junior high and high school (AOR 2.67; 95% CI 1.30, 5.47). |
| 3  | Intimate Partner Violence and Sex among Young Men Who Have Sex with Men. (Stults et al., 2016). | United States | **Objective:** To investigate the relationship of intimate partner violence (IPV) with victimization and sexual behavior in young men who have sex with men. **Method:** Prospective cohort study | 528 young men who have sex with men | • IPV and victimization were associated with an increased likelihood of unprotected sex with (AOR 2.11; 95% CI 1.14–3.91) and (AOR 2.21; 95% CI 1.06–4.59), respectively. |
| 4  | The Effect of Trauma on Recent Inconsistent Condom Use among Young Black Gay and Bisexual Men (Miller et al., 2013). | United States | **Objective:** To investigate the effect of trauma on inconsistent condom use in young gay and bisexual black men. **Method:** Survey | 180 MSM (75% gay, 22% bisexual, and 3% other) | • 33% of MSM experienced sexual violence; 74% experienced at least one type of physical abuse, and 91% experienced at least one type of emotional abuse.  
• Sexual assault and the number of types of traumas experienced were associated with inconsistent condom use. |
| 5  | Depression in High School: Lesbian, Gay, and Bisexual Identity as a Moderator of Sexual Assault (Zeglin et al., 2020). | United States | **Objective:** To investigate the risk of depression in lesbians, gays and bisexuals with a history of sexual assault. **Method:** Survey | 3053 students including 189 (13.3%) gay and bisexual men and (413) (25.3%) lesbian and bisexual women | • LGB status increases the risk of depression 3 times compared to students with normal sexual orientation.  
• A history of sexual violence and sexual orientation were significantly associated with depression.  
• There was a significant relationship between sexual orientation and history of... |
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<td>6</td>
<td>Experiences of Sexual Harassment, Stalking, and Sexual Assault during Military Service Among LGBT and Non-LGBT Service Members (Schuyler et al., 2020).</td>
<td>United States</td>
<td>Objective: To investigate the experience of sexual harassment, stalking, and victimization of sexual violence in LGBT and non-LGBT members of the United States military during service. Method: Online survey</td>
<td>544 members of the United States military (LGB = 227, transgender = 56 transgender) or non-LGBT = 276</td>
<td>• Sexual harassment of LGB (80.7%) and transgender (83.9%). • LGB (38.6%) and transgender (30.4%) stalking. • Sexual assault in LGB (25.7%) and transgender (30.4%). • LGB identity was a significant predictor of sexual harassment (OR 4.14; 95% CI 2.21, 7.78); stalking (OR 1.98; 95% CI 1.27, 3.11); and sexual assault, OR 2.07; 95% CI (1.25, 3.41). • LGB identity and sex at birth were significantly associated with an increased risk of sexual harassment in LGB males compared to females (OR 0.34; 95% CI 0.13, 0.88).</td>
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<td>7</td>
<td>Sexual harassment among adolescents of different sexual orientations and gender identities (Mitchell et al., 2014).</td>
<td>United States</td>
<td>Objective: Know a. variety of models and types of harassment, b. impact of sexual harassment c. similarities and differences in experiences across groups across sexual orientations and gender identities Method: Online survey</td>
<td>5,907 internet users aged 13-18 years in United States of America.</td>
<td>• Sexual minority groups such as LGBT are more vulnerable to experiencing sexual harassment in person than online. • 23-72% of adolescents, experienced sexual harassment • Based on sexual orientation, the most cases of sexual harassment were lesbian/queer (72%), bisexual girls (66%), and gay/queer men (66%). • Based on gender identity, transgender youth reported the highest rate of sexual harassment at 81%. • Face-to-face sexual harassment is the most common form of violence. • The impact of sexual harassment: distress in the form of problems in learning, problems in friendship and family relationships; create a hostile environment; emergence of anger especially in bisexual and lesbian/queer girls (50 %), 65% of other gender/gender non-conforming, and 63% of transgender youth. Adolescents with high social support and self-esteem are less likely to experience sexual harassment.</td>
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3.1. Article Characteristics

The seven articles used in this literature review were all from the Americas, the majority from the United States 6 (85.7%) and the rest from Mexico 1 (14.28%). Three articles discuss sexual violence against LGBT youth (articles 2, 3, 5, 7). One article discusses sexual violence against LGBT military members (article 6), 1 article discusses online sexual harassment against LGBT people (articles 2, 7). Three articles focus on sexual violence against gays (articles 1, 3), gay and bisexual (articles 4), LGB (articles 5), LGBT (articles 6 and 7). Based on the results of the thematic analysis, there are 3 themes found in this literature review, including: the type and number of cases of sexual violence against LGBT people; risk factors for sexual violence against LGBT people; perpetrators of sexual violence against LGBT; and the impact of sexual violence on LGBT.

3.2. Types and Number of Cases of Sexual Violence against LGBT

The types of sexual violence found from the results of this review are: sexual harassment, sexual assault, stalking (Mitchell et al., 2014; Schuyler et al., 2020; Smith et al., 2020). The number of cases of violence in general among MSM was 33%, while a history of sexual harassment or assault was reported by 95.0% lesbian (sexual minority women) and 77.3% gay (sexual minority men) (p .001) (Semple et al., 2017; Smith et al., 2020).
3.3. Sexual Harassment

According to Smith et. al, (2020) sexual harassment is divided into 2 groups, which are:

1) “Non-physically aggressive sexual harassment” (NPSH)/non-physically aggressive sexual harassment is frequently verbal or cyber-harassment, for instance, “unwanted catcalling and sexting. “Sexting” is the activity of sending, receiving, or forwarding sexually explicit messages, pictures, photos or videos to others using digital technology (Cooper et al., 2016; Mitchell et al., 2014; Raine et al., 2020; Reed et al., 2019). “Catcalling,” for example calling someone with a sexual name, whistling or winking, is usually done by a stranger (Fisher et al., 2019).

2) “Physically aggressive sexual harassment (PSH)/physically aggressive sexual harassment, for example touching certain body parts without permission and stalking.

Sexual minorities are 4 times more likely to experience physical sexual harassment and almost 3 times to experience non-physical sexual harassment (Smith et al., 2020). Mitchell et al., (2014), categorizes sexual harassment in several modes, which are: face-to-face, online, text messages and cell phone modes. Sexual minority groups such as LGBT are more prone to experience sexual harassment in person than online, but if they are grouped into digital technology-based sexual harassment modes (online, text messages and cell phones), there are more cases of sexual harassment facilitated by digital technology than face-to-face modes (Mitchell et al., 2014). The rapid development of digital technology in the industrial era 4.0 has led to the proliferation of accessible digital platforms. It has the potential to increase sexual harassment in the digital realm, especially for LGBT people. The COVID-19 pandemic is also a factor that can contribute to increasing sexual harassment in the digital realm, where restrictions on community activities make people spend more time using digital facilities than face-to-face.

Mitchell et.al, (2014) divides the types of sexual harassment in sexual minority groups according to the most data into 8 groups, which are: mocking or making sexual comments (246); requesting sexual information (178); asking for sexual activity (120); showing or sending comments, sexually suggestive messages/images (111); touched, gripped, pinched (100); deliberately teasing (101); spreading sexual rumors (91); blocked/terrorized (65). Based on gender identity, transgender is a sexual minority group with the highest number of sexual harassments ranging from 81%-83% (Mitchell et al., 2014; Schuyler et al., 2020).

The results of the research by Powell et.al., (2020) revealed that transgender is the group that experiences the most digital sexual violence. Types of digital sexual violence experienced by transgender participants included: physical threats (10%); long-term harassment (13.3%); spreading disgrace (23.3%); sexually harassed (56.7%); posting offensive/degrading messages about gender (60.0%) and sexuality (63.3%); sexual acts against their avatar or game character (33.3%); become a victim of spreading rumors (66.7%) or spreading lies about them (63.3%). In fact, research has also found that participants may experience four or more subtypes of digital abuse (40.0%) (Powell et al., 2020). The amount of harassment experienced by sexual minority groups, especially transgender groups, will certainly affect their mental health. Social support, psychological counseling, are very much needed to improve the mental health of sexual minority groups.

Based on sexual orientation, the percentage of sexual harassment among lesbians, gays, bisexuals (LGB) ranges from 66%-80.7% with the most cases of sexual harassment being lesbian/queer (72%), bisexual girls (66%), and gay/queer men (66%) (Mitchell et al., 2014; Schuyler et al., 2020). A higher intensity of sexual violence is associated with a history of sexual abuse as a child (Semple et al., 2017). Minority groups nearly doubled the risk of experiencing physical sexual harassment during junior and senior high school (AOR 2.67; 95% CI 1.30, 5.47) (Smith et al., 2020). Sexual harassment generally occurs in childhood (before the age of 18 years) which is 21% even 70% of sexual assaults occur when the respondent is 12 years old or younger (Miller et al., 2013; Semple et al., 2017).
3.4. Stalking

Stalking is the unwanted and/or repeated surveillance of another individual or group of people (Harvey et al., 2014). This behavior is closely related to supervisory activities that are conducted directly or indirectly and tend to be harassing and threatening. LGB (38.6%) and transgender (30.4%) stalking (Schuyler et al., 2020). This result is higher than the results of a previous study which showed that 15% of the 1,116 samples had experienced stalking, but only about a quarter of them reported it to the police (Langenderfer-Magruder et al., 2020). The forms of stalking according to Walters et al., (2013) include: 61.7% stalking at home or work (61.7%); receiving unwanted messages such as text and voice messages (55.3%); receiving unwanted phone calls including hang-ups (54.5%), female victims of stalkers were watched, followed, or spied on with listening devices, cameras, or global positioning system (GPS) devices (49.7%). The forms of stalking of male victims included: receiving unwanted phone calls (58.2%); receiving unwanted messages (56.7%); being approached by the perpetrator (47.7%), and being watched, followed, or spied on with a hearing aid or other device (32.2%) (Walters et al., 2013).

3.5. Sexual Assault

Sexual assault or also known as rape is unwanted sexual contact in the form of forced sexual interaction in oral, anal, or vaginal sexual intercourse (Mellins et al., 2017; Smith et al., 2020). The risk of sexual assault increased up to 5 times in the sexual minority group compared to the heterosexual group (AOR 5.48; 95% CI 2.56, 11.73). Sexual assault in LGB and transgender was 25.7% and 30.4% (Schuyler et al., 2020; Smith et al., 2020). Types of sexual assault on gay and bisexual men included sexual harassment (11.9%) and forced sex (1.5%).

The number of cases of sexual violence against LGBT that are revealed does not necessarily indicate the actual number of cases in the field. This is because of the stigma and discrimination against same-sex relationships, which can lead to a greater fear of humiliation and criticism of them as victims. They are reluctant to report the violence they experience because they keep their sexual orientation a secret (Finneran et al., 2012).

3.6. Risk factors for sexual violence against LGBT

Some of the predictors that were significantly associated with LGBT sexual violence were found in this literature review, including: LGB identity and gender, history of childhood sexual abuse, experience of homophobia as an adult, depression, hostility symptoms, and choice of residence (Schuyler et al., 2020; Semple et al., 2017). LGB identity increased 4-fold risk of being sexually harassed and 2-fold increased risk of stalking or sexual assault. LGB identity and sex at birth were significantly associated with an increased risk of sexual harassment, especially in males (Schuyler et al., 2020). The results of previous studies have shown that sexual minority status and gender determine the type of assault risk (Menning & Holtzman, 2014).

Internalized homophobia in the form of homophobic victimization has a negative impact on LGBT mental health. Homophobic victimization can lead to depression, anxiety, panic, mood swings, drug abuse, comorbidity with two or more psychological disorders, self-harm or violence against others and even plans and suicide attempts (Chard et al., 2015; Finneran & Stephenson, 2013; Stoloff et al., 2013; Ybarra et al., 2015). Homophobic victimization can take various forms such as physical action, ostracism, giving offensive nicknames and also acts of homophobic intimidation through digital platforms in the form of hate speech and cyberbullying (Elipe et al., 2018; Pace et al., 2020).

A history of sexual abuse as a child had the most significant relationship to the respondent's experience of sexual violence in the past year (Semple et al., 2017). The results of previous studies show a similar situation where children who are victims of sexual abuse, almost half also become
victims of sexual abuse after they grow up (Pantalone et al., 2015). This phenomenon is often known as sexual revictimization. The risk of sexual re-victimization is 3-5 times higher in women with a history of sexual violence as a child compared to women who did not experience sexual violence as a child (Godbout et al., 2019; Pereda et al., 2016). This revictimization is not only caused by a single factor, but by several factors that may be interrelated, which are individual characteristics, experiences and environmental factors. Sex education for children is one of the efforts that can be performed to prevent sexual abuse of children.

3.7. Perpetrators of Sexual Violence against LGBT

The results of this review show that sexual violence in adults is mostly carried out by strangers, while in adolescents, it is carried out by family (40%), peers (14%) and sexual partners (9%) (Miller et al., 2013; Semple et al., 2017). The sexual violence experienced by respondents as children (before 18 years) is actually mostly carried out by the closest people, who are male relatives, most often cousins or uncles (Semple et al., 2017).

3.8. Perpetrators of Sexual Violence against LGBT

Sexual violence in the LGBT community is a public health problem that needs attention. Sexual violence is associated with mental disorders and physical health outcomes, including increased susceptibility to HIV/STI infection (Hladik et al., 2012; Rusow et al., 2014). The impacts of sexual violence found in this review include: distress in the form of problems in learning; problems in friendship and family relationships; create a hostile environment; emergence of resentment; angry; less confident; worry; depression; increase unprotected sex; HIV/AIDS risk (Miller et al., 2013; Mitchell et al., 2014; Semple et al., 2017; Smith et al., 2020; Zeglin et al., 2020). LGB status increased the risk of depression 3 times compared to students with normal sexual orientation. A history of sexual violence and sexual orientation were significantly associated with the occurrence of depression. There is a significant relationship between sexual orientation and history of sexual violence among male students. Male students who have a history of sexual violence have a 5-fold higher risk of experiencing depression than male students who do not have a history of violence. The results of previous studies showed that almost half of children who were victims of sexual abuse also became victims of sexual abuse after they grew up (Pantalone et al., 2015).

A history of sexual abuse is associated with increased psychological distress, increased levels of alcohol and drug abuse, financial difficulties and an increased risk of suicide (Rusow et al., 2014). Boys with a history of childhood abuse are more at risk for drug abuse; have a history of sexually transmitted infections; have more male sexual partners; experience more psychological stress; and had more unprotected sex with men (Tomori et al., 2016; Xu et al., 2018). The results of this study are in accordance with the results of a review in which IPV was associated with an increase in the frequency of unprotected sex in oral and anal sex (Miller et al., 2013; Stults et al., 2016). Overall, victims who reported experiencing IPV were twice as likely to engage in multiple times of unprotected receptive anal sex (Stults et al., 2016). In this review, the number of HIV-positive respondents during the initial test was 18% (N=35) and 8.0% with a positive initial syphilis test (Semple et al., 2017). Oral and anal sex without a condom in LGBT couples is a sexual behavior that provides the highest risk for transmission of HIV/AIDS and STIs.

Health facility services, especially those related to mental health services, can be utilized by LGBT victims of violence to overcome the impacts that arise due to the violence they experience. In fact, it is difficult for the LGBT group to access these services due to the heteronormative attitude imposed by health workers, leading to discrimination in health services for LGBT people (Alencar Albuquerque et al., 2016). Research on evaluating the implementation of programs related to preventing and handling
violence against LGBT needs to be conducted, hence, these services can be accessed optimally by minority groups.

4. Conclusion

Cases of sexual violence against LGBT people tend to be higher than heterosexual groups. Sexual violence against LGBT is a complex problem, and has an impact not only on the physical and mental health of victims but also on public health, especially the increase in the transmission of HIV/AIDS. Prevention and handling programs for violence and HIV/AIDS can be in the form of HIV/AIDS prevention programs, sex education programs for children and socio-emotional programs that are able to improve mental health and reduce the risk of becoming victims and reduce the impact that occurs. The implementation, utilization and success of the program for the LGBT group needs to be evaluated so that the program runs more optimally.

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