

# Psychology of Sexual Orientation and Gender Diversity

## **“We Have Always Been Here”: A Multimethod, Multi-Informant Study Documenting Challenges and Strengths of Lakota LGBTQ2S+ Youth**

Katie M. Edwards, Bridget Diamond-Welch, Lenny Hayes, Jordan Catlett, Ramona Herrington, Alexander Farquhar-Leicester, Katelyn Coburn, Char Green-Maximo, April Matson, Lisa Schrader, Paige Hespe, Caroline Spitz, Kristen Hunt, and Caitlin Ryan

Online First Publication, April 25, 2024. <https://dx.doi.org/10.1037/sgd0000717>

### CITATION

Edwards, K. M., Diamond-Welch, B., Hayes, L., Catlett, J., Herrington, R., Farquhar-Leicester, A., Coburn, K., Green-Maximo, C., Matson, A., Schrader, L., Hespe, P., Spitz, C., Hunt, K., & Ryan, C. (2024). “We have always been here”: A multimethod, multi-informant study documenting challenges and strengths of Lakota LGBTQ2S+ youth.. *Psychology of Sexual Orientation and Gender Diversity*. Advance online publication. <https://dx.doi.org/10.1037/sgd0000717>

# “We Have Always Been Here”: A Multimethod, Multi-Informant Study Documenting Challenges and Strengths of Lakota LGBTQ2S+ Youth

Katie M. Edwards<sup>1</sup>, Bridget Diamond-Welch<sup>2</sup>, Lenny Hayes<sup>3</sup>, Jordan Catlett<sup>4</sup>, Ramona Herrington<sup>1, 5</sup>, Alexander Farquhar-Leicester<sup>1</sup>, Katelyn Coburn<sup>1</sup>, Char Green-Maximo<sup>6</sup>, April Matson<sup>6</sup>, Lisa Schrader<sup>5</sup>, Paige Hesse<sup>1</sup>, Caroline Spitz<sup>1</sup>, Kristen Hunt<sup>1</sup>, and Caitlin Ryan<sup>7</sup>

<sup>1</sup> University of Nebraska-Lincoln

<sup>2</sup> University of South Dakota

<sup>3</sup> Tate Topa Consulting, Minneapolis, Minnesota, United States

<sup>4</sup> Independent Consultant, Minneapolis, Minnesota, United States

<sup>5</sup> Oglala Sioux Tribe, Pine Ridge, South Dakota, United States

<sup>6</sup> South Dakota Urban Indian Health, Sioux Falls, South Dakota, United States

<sup>7</sup> Family Acceptance Project, San Francisco, California, United States

The purpose of the current study was to document challenges and strengths faced by Lakota lesbian, gay, bisexual, transgender, queer, Two-Spirit (LGBTQ2S+) youth and obtain input on types of initiatives that could be used to support the health and well-being of Lakota LGBTQ2S+ youth. Participants in this mixed-methods, multi-informant study included 36 Lakota LGBTQ2S+ youth who participated in a 3-day retreat that included surveys, talking circles, and arts-based activities. Additionally, 23 adults who work with or care for these youth participated in talking circles. Results suggested that whereas Lakota LGBTQ2S+ youth experienced myriad challenges (e.g., rejection, victimization, depression symptoms), they also reported moderate to high levels of strength/resilience (e.g., connection to culture, feelings of mattering to others). Lakota LGBTQ2S+ youth and adults who support them discussed the importance of community-wide and family-specific interventions to reduce rejecting behaviors and increase accepting behaviors, and youth discussed the desire for support groups. Adults felt that learning about the positive histories of Two-Spirit relatives in traditional Lakota culture would help to support community-wide acceptance of Lakota LGBTQ2S+ youth. Finally, youth reported positive perceptions of the 3-day retreat—especially opportunities for learning, connection, and support—which further underscores the need for culturally grounded, social-support and skills-based programming for Lakota LGBTQ2S+ youth. Results also highlight the need for initiatives that seek to change family and community norms to protect, accept, and celebrate Lakota LGBTQ2S+ peoples.

## Public Significance Statement

These findings shed important light on challenges and strengths faced by Lakota lesbian, gay, bisexual, transgender, queer, Two-Spirit (LGBTQ2S+) youth and obtain input on types of initiatives that could be used to support the health and well-being of Lakota LGBTQ2S+ youth. Findings highlight the urgent need for (a) affirming programs to help foster resilience among Indigenous LGBTQ2S+ youth; (b) culturally grounded, family-based programs to reduce family rejection and increase family acceptance of Indigenous LGBTQ2S+ youth; and (c) larger systems of oppression (e.g., structural racism, cisnormative and heteronormative practices, and policies) that drive health disparities among Indigenous LGBTQ2S+ youth.

**Keywords:** LGBTQ, Two-Spirit, Indigenous, strengths, resilience

Rather disparate bodies of literature suggest that (a) Indigenous compared to youth of other races/ethnicities (Harder et al., 2012; Kisely et al., 2017; Landers et al., 2017; Radford et al., 2022;

Warne et al., 2017) and (b) sexual and gender minority youth (SGMY), including SGMY of color (although rarely specific to Indigenous lesbian, gay, bisexual, transgender, queer, Two-Spirit

Katie M. Edwards  <https://orcid.org/0000-0003-1888-7386>

The funding for this project was provided by the University of Nebraska-Layman Award and Nebraska Tobacco Settlement Biomedical Research Development Funds. Wopila Tanka to all who made this work possible. The authors would like to express their deepest gratitude to the Lakota LGBTQ2S+

youth, and the adults who support them, who participated in this project. The authors would also like to thank each and every one, without whom this work would have not been possible. The authors have no conflicts of interest to disclose.

Correspondence concerning this article should be addressed to Katie M. Edwards, University of Nebraska Lincoln, HENZ, P.O. Box 880354, Lincoln, NE 68504, United States. Email: [katie.edwards@unl.edu](mailto:katie.edwards@unl.edu)

[LGBTQ2S+] youth<sup>1</sup>) experience myriad adversities compared to cisgender, heterosexual youth (Abreu & Kenny, 2018; Lucassen et al., 2017; McGeough & Sterzing, 2018; Toomey et al., 2017). Across these bodies of literature, adversities include mental health challenges (e.g., depression), sexual risk taking, homelessness, and experiences of violence including bias-based victimization, adverse childhood experiences (ACEs), bullying, teen dating violence, and self-directed violence (Abreu & Kenny, 2018; Edwards, Banyard, et al., 2021; Edwards, Scheer, et al., 2021; Harder et al., 2012; Kisely et al., 2017; Landers et al., 2017; Lucassen et al., 2017; McGeough & Sterzing, 2018; Radford et al., 2022; Toomey et al., 2017; Warne et al., 2017). Very little research has focused specifically on Indigenous LGBTQ2S+ youth, whose experiences with adversities are rooted in minority stress (Hendricks & Testa, 2012; Meyer, 2003; Tan et al., 2020; Testa et al., 2015) and the impact that colonization and myriad historical traumas have had on Indigenous cultures and peoples (Deer, 2015; Hunt, 2016; Iron Cloud Two Dogs, 2022; Ristock et al., 2010; Smith, 2003).

Lack of research specifically on challenges and strengths faced by Indigenous LGBTQ2S+ youth further marginalize one of the most silenced and structurally minoritized groups in the United States and hinders our ability to develop affirming, culturally grounded, strength-based initiatives for these youth. This project works toward visibility through focusing on challenges and strengths of Indigenous LGBTQ2S+ youth—specifically Lakota LGBTQ2S+ youth on a large, rural reservation in the Northern Great Plains.

We conducted formative research using mixed methods (i.e., surveys, talking circles, arts-based activities) and multiple informants (i.e., Lakota LGBTQ2S+ youth and adults who work with them/care for them) to document challenges and strengths experienced by Lakota LGBTQ2S+ youth to inform the development of programming to promote resilience. Data collection for Lakota LGBTQ2S+ youth was embedded within a larger 3-day retreat. As such, we also used qualitative data to assess the perceived impact of participating in the retreat.

## Theory and Historical Context

Theories of minority stress suggest that LGBTQ2S+ persons experience both distal (e.g., discrimination and victimization based on LGBTQ2S+ identities) and proximal (e.g., internalized homo/bi/transphobia, identity concealment) stressors that help explain why LGBTQ2S+ persons, compared to cisgender heterosexual persons, report higher rates of psychological and behavioral health problems as well as sexual and related forms of violence (Hendricks & Testa, 2012; Meyer, 2003; Tan et al., 2020; Testa et al., 2015). In addition to stressors based on LGBTQ2S+ identities, Indigenous LGBTQ2S+ youth face additional stressors related to racism (Edwards, Banyard, et al., 2021; Ross, 1998; Trent et al., 2019; Yusuf et al., 2022). Although not specific to Indigenous LGBTQ2S+ youth, research with SGMY of color more broadly shows that these youth experience higher rates of adversities and minority stressors than do white, non-Latinx SGMY (Toomey et al., 2017).

The wisdom of Traditional Knowledge Keepers informs us that Indigenous LGBTQ2S+ youths' experiences of identity-based stressors is rooted in colonization and multiple historical traumas (e.g., cultural genocide, forced placement in boarding schools) and have been exacerbated by modern-day colonialism and structural racism

(Hunt, 2016; Iron Cloud Two Dogs, 2022; Ristock et al., 2019). Prior to colonization, in many Indigenous communities in present-day United States and Canada, individuals who were Two-Spirit—an Indigenous concept that usually indicates that an individual houses both a masculine and a feminine spirit—held important and honorable roles (Hunt, 2016; Iron Cloud Two Dogs, 2022; Ristock et al., 2010; White Hawk, 2017). In some Indigenous communities and/or for some Indigenous people, Two-Spirit refers to all sexual and gender minorities (Ristock et al., 2010). Some Indigenous communities have specific terms in their languages for Two-Spirit (e.g., Lakota: *wĩŋkte*, Navajo: *nádleehé*, Mohave: *hwame*) as well as tribally specific spiritual, social, and cultural roles for Two-Spirit relatives (Hunt, 2016; Ristock et al., 2010). These roles included healers or medicine persons, teachers, knowledge keepers, foretellers of the future, artists, name givers, and holding of special roles at Sundance (Hunt, 2016; White Hawk, 2017).

In this article, we will use the term “Two-Spirit” as described above. However, we want to be careful not to oversimplify this history. As a result of colonization and multiple historical traumas, many Indigenous people become disconnected from their languages, cultures, and positive Two-Spirit histories (Hunt, 2016; Ristock et al., 2010). Two-Spirit, as a term, only emerged in 1990 in reclamation of meaning and an attempt toward decolonizing notions of gender and sexuality (Walters et al., 2006). However, not all tribes or relatives identify with the term Two-Spirit as used here, as each has its own unique history and language—including some that already use the term Two-Spirit in alternate ways. We honor those differences while adopting the term Two-Spirit in this article as it is relevant to many Lakota relatives.

Colonization, cultural genocide, and forced placement in boarding schools also tore at the fabric of immediate and extended families, which are the foundation of most Indigenous societies. In traditional Indigenous communities, children are viewed as sacred. For example, in Lakota, *wakanyēja* (“children”) means “little sacred ones.” Mistreatment and abuse of children (including identity-based abuse and victimization) were rare if not nonexistent prior to colonization (Hawk Wing, 2022; Iron Cloud Two Dogs, 2022). Homo/bi/transphobia and other forms of violence and oppression within Indigenous communities, often referred to as lateral violence (Freire, 1973/1990; Whyman et al., 2021), are the direct result of colonization and cultural genocide (Driskill, 2004). Taken together, colonization and multiple historical traumas, as well as modern-day colonialism and structural racism, are important considerations when seeking to understand both challenges and strengths faced by Indigenous LGBTQ2S+ youth.

## Literature Review

A handful of studies have included data specifically on challenges of Indigenous LGBTQ2S+ youth. The 2022 National Survey on LGBTQ Youth Mental Health demonstrated that 55% of Indigenous LGBTQ2S+ youth and young adults, aged 13–24, considered suicide in the past year, with 21% of them attempting to die by suicide

<sup>1</sup> LGBTQ2S+ refers to lesbian, gay, bisexual, transgender, queer, two-spirit, and other SGMY youth. Two-Spirit is a term explored further below. Indigenous LGBTQ2S+ youth is the preferred phrase of our Indigenous partners, also coauthors on this article. Lakota LGBTQ2S+ is preferred when speaking specifically of the relatives in this study.

(The Trevor Project, 2022). In other analyses of this same data set, researchers found that risk of attempted suicide increased as other types of minority stressors (e.g., housing instability, discrimination, lack of family acceptance) increased (Green et al., 2022). This same study also found that Indigenous LGBTQ2S+ youth reported more minority stressors than other groups of LGBTQ2S+ youth (Green et al., 2022). Another study found that Indigenous bisexual youth had the highest odds of attempting suicide (Baiden et al., 2020) when compared to other sexual minority groups. Further, in a study of 400 Indigenous youth in a small city in the Northern Great Plains region of the United States, being a sexual minority was positively associated with dating violence victimization, bullying victimization, alcohol use, depressive symptoms, and suicidal ideation, and negatively associated with school mattering (Edwards, Banyard, et al., 2021). Research with Aboriginal LGBTQ2S+ youth in Canada found high rates of discrimination, violence, and homelessness (Hunt, 2016).

There is also a small body of literature with Indigenous LGBTQ2S+ adults documenting high rates of deleterious outcomes (e.g., depression, suicidality, substance abuse) associated with discrimination and violence across the lifespan, including childhood (Balsam et al., 2004; Evans-Campbell et al., 2012; Fieland et al., 2007; Hunt, 2016; James et al., 2016; Lehavot et al., 2010; Parker et al., 2017; Simoni et al., 2006; Walters et al., 2006; Zoccole et al., 2005). Importantly, research with Indigenous LGBTQ2S+ adults has also highlighted strengths. For example, in a study of 24 Aboriginal LGBTQ2S+ adults in Canada, resilience-promoting factors included feeling a sense of LGBTQ2S+ community, feeling pride in one's LGBTQ2S+ identities, and connection to one's Indigenous culture (e.g., learning about one's culture, participation in cultural activities such as ceremonies) (Ristock et al., 2010). Further, Hunt (2016), an Aboriginal scholar in Canada, argues that resilience among Two-Spirit peoples centers around resurgence of Indigenous gender roles, creating and enhancing Two-Spirit communities, reclaiming Two-Spirit roles and identities, and acknowledging Two-Spirit peoples within health research, practice, and policy. Research is needed to document strengths of Indigenous LGBTQ2S+ youth in the United States., specifically, so that this information can be used to inform practice and policy.

Despite a largely nonexistent body of empirical literature on challenges and strengths of Indigenous LGBTQ2S+ youth, there have been writings, presentations, and formalized discussions, largely in the grey literature, on how to support Indigenous LGBTQ2S+ youth that coincide with writings on resilience among Indigenous LGBTQ2S+ people (Hunt, 2016; National LGBTQ Task Force, 2017; Ristock et al., 2010; White Hawk, 2017). For example Indigenous practitioners and knowledge keepers suggests that tribal and state welfare organizations, schools, and community-based organizations that serve youth should create welcoming, affirming environments for Indigenous LGBTQ2S+ youth by educating, displaying affirming materials, creating awareness campaigns, forming inclusive and diverse boards, establishing mentoring programs, engaging same-sex families, providing support resources, creating policies and procedures, checking biases, and collecting data (Hayes, 2018; White Hawk, 2017). There are also publications on tribal resolutions and codes (e.g., nondiscrimination ordinances, school policies, and marriage equality) to support Indigenous LGBTQ2S+ people, including youth, in Indian country (National LGBTQ Task Force, 2017).

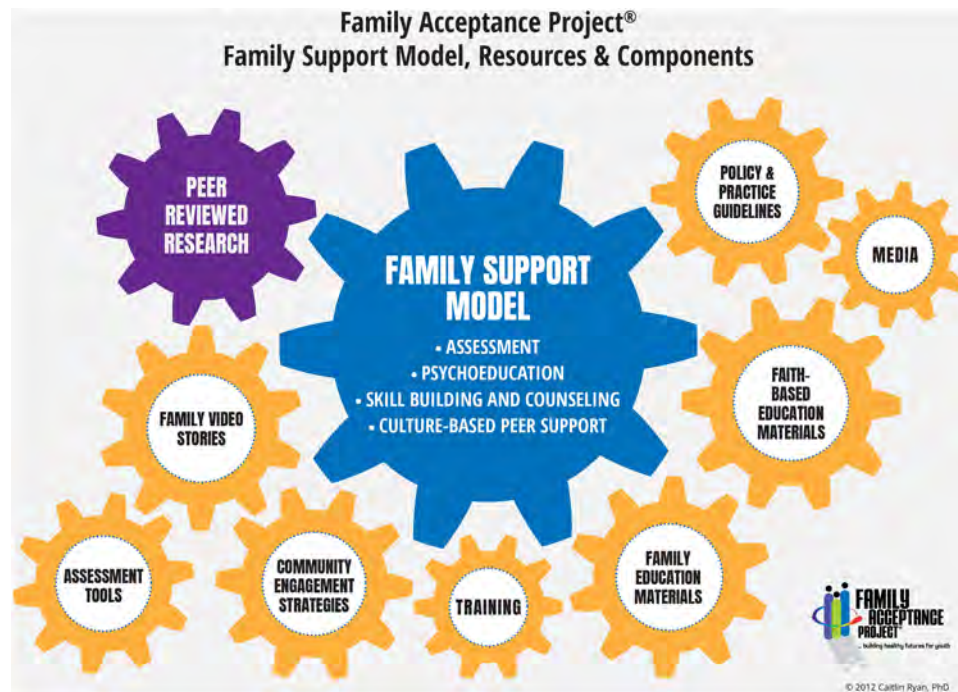
A key component across all of these recommendations is the importance of safe and affirming environments for Indigenous LGBTQ2S+ youth, which coincides with a growing body of research with SGMY (not specific to Indigenous LGBTQ2S+ youth) about the devastating impacts of peer and family rejection of SGMY (Gamarel et al., 2020; Munroe, 2018; Pariseau et al., 2019; Richter et al., 2017; Scheer et al., 2021; Testa et al., 2015; Willoughby et al., 2010). A growing body of literature highlights the critical role that families play in health for LGBTQ2S+ youth in general (Newcomb et al., 2019; Ryan et al., 2010). The Family Acceptance Project (FAP) is an evidence-based, comprehensive system (see Figure 1) that seeks to prevent deleterious outcomes and promote well-being for SGMY in the context of their families, cultures, and faith communities (Ryan, 2022). More specifically, FAP is designed to help ethnically, racially, and religiously diverse families to support and affirm their SGMY, thereby reducing SGMYs' behavioral, social, emotional, relational, and academic problems and promoting well-being (Ryan, 2022). In FAP's family support model, information is presented in ways that resonate with caregivers' cultural and religious values to help parents decrease rejecting behaviors associated with risk and increase supportive behaviors that help protect against negative health outcomes and support well-being (Fortuna et al., 2020; Ryan, 2010, 2014). Results from a pilot evaluation documented that program participation decreased family rejecting behaviors and increased support among parents and caregivers of SGMY that were referred by child protective services after being investigated for abuse and neglect (Ryan et al., 2018). Moreover, in two pilot studies of highly traumatized SGMY, inclusion of FAP family guidance components in one of the most widely used trauma recovery models (trauma-focused cognitive behavioral therapy) that included rejecting and unsupportive families resulted in a significant reduction in posttraumatic stress scores among SGMY from severe to either nonexistent or mild (Cohen & Ryan, 2021). To date, FAP has not been evaluated with samples of Indigenous families and their LGBTQ2S+ youth.

Nevertheless, more recently, FAP released a version of its healthy futures poster series for Indigenous families and communities to support their Indigenous LGBTQ2S+ youth (Ryan, 2021; San Francisco State University, 2021). The posters, developed in consultation with Indigenous cultural consultants, depict how specific family rejecting behaviors (e.g., ridiculing their identity, not allowing them to wear clothes, including regalia, that express their gender identity) contribute to health risks (Ryan, 2021; San Francisco State University, 2021). The posters also show supportive behaviors, such as standing up for their Indigenous LGBTQ2S+ youth when others mistreat them because of their LGBTQ2S+ identities, which helps to protect against health risks and promote well-being (Ryan, 2021; San Francisco State University, 2021). To date, however, in depth feedback on FAP from Indigenous LGBTQ2S+ youth and the adults who take care of them/work with them has not been collected.

## Current Study

Using a mixed-methodological and multi-informant study, the purpose of the current study was to document challenges (Aim 1) and strengths (Aim 2) faced by Indigenous LGBTQ2S+ youth. Challenges, measured by surveys, included: depressive symptoms, alcohol use, ACEs, bullying, teen dating violence, internalized homo/bi/transphobia, and family rejection. Strengths, as measured by surveys, included: Indigenous cultural identity, mattering,

**Figure 1**  
*Family Acceptance Project Components*



*Note.* See the online article for the color version of this figure.

LGBTQ2S+ sense of community, hope for the future as an LGBTQ2S+ person, and sense of purpose. We selected these strengths given they were important to Indigenous community partners, and they aligned with the resilience portfolio model (Grych et al., 2015; Hamby et al., 2018; Hamby, Grych, & Banyard, 2018). We also obtained input on types of initiatives, including feedback on FAP, that will support health and well-being of Indigenous LGBTQ2S+ youth (Aim 3). Data collection for Indigenous LGBTQ2S+ youth were embedded within a larger 3-day retreat. As such, we asked youth several open-ended survey questions at the end of the retreat about their perceptions of the retreat and its impact on them (Aim 4). Given the dearth of literature and the exploratory, mixed methods nature of the research, we ventured no *a priori* hypotheses.

## Method

We collected data on large, rural reservation in the Northern Great Plains. Inclusion criteria required that youth identify as (a) Native/Indigenous, (b) LGBTQ2S+, and (c) be between the ages of 13 and 18. Inclusion criteria required that adults be 18 or over and take care of and/or work with Indigenous LGBTQ2S+ youth.

## Relatives<sup>2</sup>

The relatives who participated in this study included 36 Lakota youth who attended at least 1 day of the 3-day retreat, and 23 Lakota adults who attended one of two talking circles. In all, 59 Lakota relatives participated in this research study. Given that

participation in all elements of the study protocol were voluntary, there are some missing surveys and skipped questions. Sample size is reported with each statistic.

## Youth

The mean age of youth was 15.1 years ( $n = 31$ ;  $SD = 1.72$ ). Youth who identified their sex assigned at birth ( $n = 34$ ) self-reported as male (20.6%), female (76.5%), and intersex (2.9%). Regarding gender ( $n = 32$ ), most of the youth identified as girls (62.5%), followed by boys (21.9%), trans (6.3%), Two-Spirit (3.1%), nonbinary (3.1%), and gender queer (3.1%). Regarding sexual orientation ( $n = 25$ ), 34.8% identified as bisexual, 26.1% as pansexual, 13.0% as questioning, 8.7% as lesbian, 8.7% as queer, 4.3% as gay, and 4.3% as asexual. In the past year ( $n = 35$ ), 41.7% reported being in a “dating (casual, serious, etc.) and/or hook-up relationship.” It is important to note that two youths disclosed to researchers during the retreat that they were “not LGBTQ+” but there as allies with their friends who were LGBTQ2S+—and thus not qualified to be in the study. This is discussed further below.

## Adults

The mean age ( $n = 23$ ) of adults was 37.55 years ( $SD = 12.97$ ; range 20–71). Regarding gender ( $n = 22$ ), adults identified as women (87.0%), men (8.7%), and nonbinary (4.3%). All adults

<sup>2</sup> We prefer to use relatives instead of participants as it honors the importance of Lakota kinship and is more respectful.

( $n=23$ ) answered questions related to race and ethnicity and nearly all identified as Native/Indigenous (95.7%) with one identifying as Native Hawaiian or Pacific Islander (4.3%). All adults answered related to sexuality ( $n=23$ ). The majority of adults identified as heterosexual (56.5%), bisexual (34.8%), gay (4.3%), or self-identified (4.3%; and wrote in “woman”). Regarding income ( $n=22$ ), most adults (78.3%) reported an annual family income of less than \$10,000. Of note, the median household income on the reservation is \$34,526, and 48.2% of the population on the reservation lives below the poverty level for whom poverty status is determined (suggesting poverty rates are actually much higher than 48.2%).

## Procedures

All youth and adult relatives were recruited via fliers placed throughout the reservation, social media ads (including those boosted on Facebook and Instagram), radio announcements, and word-of-mouth. Recruitment information for youth stated that the research team wanted to hear from LGBTQ2S+ Native youth and that activities at the 3-day retreat included “surveys, arts and crafts, and talking circles.” Information on incentives and guardian permission were also included in the recruitment materials for youth as well as information on how to sign up. Recruitment materials for adults stated that researchers wanted to hear from adults (18+) “who worked with and/or take care of LGBTQ2S+ Native youth” and two options to participate in the project. Information on incentives were also included in the recruitment materials for adults as well as information on how to sign up.

Although interested relatives could call the project phone prior to the day of data collection to enroll, most relatives showed up on the day of data collection to enroll. Guardian permission was required for youth under 18 (who also provided assent), and youth who were 18 provided consent. Written consent was also required for adults (18+) who participated in the talking circles.

## Youth

Youth data collection activities were embedded within a larger retreat for youth that took place over 3 days (from 3 to 7 p.m. each day) during August 2022. Regarding attendance, 21 youth participated on Day 1, 34 youth participated on Day 2, and 23 youth participated on Day 3. Thirteen youth (34.2%) attended 1 day only, 11 youth (28.9%) attended 2 days, and 14 youth (36.8%) attended all 3 days. Each day the youth were provided with meals and snacks. Each session started with an icebreaker and started and ended with prayer and smudging. With the exception of a few activities (e.g., Q&A with LGBTQ2S+ adults, psychoeducational activities), discussion-based activities (e.g., talking circles, photovoice) were recorded and transcribed. Data collection efforts and activities as well as youth supervision were facilitated by Indigenous and non-Indigenous adults and LGBTQ2S+ adults and adult allies, including elders and Traditional Knowledge Keepers. Professional roles of adults included: action-oriented researchers, prevention specialists, a cultural outreach specialist, a certified social worker, and a counselor. Some of the adults were known to the youth in the community via their professional and/or cultural/spiritual roles. Youth received \$50 for each day they participated in the retreat and a digital camera. Data collection activities took place at the retreat. The overarching

goal of the retreat was to collect multiple forms of data to shed light on challenges and strengths of Indigenous LGBTQ2S+ youth in addition to providing them with a space to feel supported and affirmed. Community-specific resources were shared on a hand-out distributed to all relatives, and youth were encouraged to talk to adults there about specific needs they might have while understanding limits of confidentiality as mandated reporters.

Day 1 started with all youth going through the assent/consent process (as discussed above). When they finished this, they entered the research area and were invited to paint given the prompt “Wopila. Something I am grateful for.” Youth were invited to share their paintings with the group. Once all youth were cleared for participation, the group discussed agreements for engagement (e.g., listen, be respectful, keep information confidential), and the facilitators ensured that everyone understood the limits of confidentiality as adults were mandated reporters. Following this, they were introduced to photovoice, which is a strengths-focused, community-based participatory action research method that utilizes group discussion and photography to document a phenomenon and call to action among individuals of a shared identity or experience (Wang & Burris, 1997). We included photovoice in this study given we have used it in previous research with Indigenous youth and found it highly acceptable and impactful (Banyard et al., 2022; Edwards et al., 2022). Photos were discussed using the “showed” method (Gant et al., 2009; Lightfoot et al., 2019), which included: sharing what relatives saw in each photo, how they felt it related to their and others’ lives, why things are this way, and how they can educate others and create change about the issues they see represented in the photos. In our previous photovoice work with Indigenous youth, we found that the showed method facilitated meaningful and rich discussion. Each youth was provided with a camera and the rules of photovoice were explained (e.g., no pictures of faces). The youth selected the assignment for the next day of “What makes them feel safe and comforted.” They then participated in a talking circle which included questions about their challenges and strengths as Lakota LGBTQ2S+ youth. For example, they were asked “What are some of the challenges that LGBTQ2S+ Native youth face” and “What are ways that we can help LGBTQ2S+ Native American youth to be strong? Healthy? Happy? Have bright futures?” Guiding questions for talking circles were developed in partnership with Indigenous community partners.

Day 2 of the retreat started with consenting and assenting all new youth and having these new youth complete the pretest. Further, youth who were in attendance on Day 1 were asked to upload the photos for photovoice. As they completed paperwork, they moved into the study space where we invited them to create paintings of anything they wished to paint. There was a group reminder of the group agreements. The first data collection activity was a mask making activity. A facilitator showed a mask he had made that explored his Two-Spirit and Indigenous identities as other elements of himself. After youth created their masks, a recorded talking circles had them reflect on “What your mask represents” and asked questions such as: “How do you see yourself as an LGBTQ2S+ person? What impacts that?” and “How do you see yourself as a Native American person? What impacts that?” Following dinner, youth engaged in photovoice talking circles using the showed method.

Day 3 was arranged around four primary activities. After reviewing rules for the day, the group was split into three sections. The first, a fishbowl activity, had youth submit an anonymous question

that LGBTQ2S+ adults answered. Questions were focused on sexuality, gender, and Indigenous identity, but they were free to ask any questions they wanted. Conversations in the fishbowl were not recorded. The second section was a talking circle that reviewed the FAP posters. The youth were also asked to reflect on their past days' experience and answer questions such as: "What are your ideas for how to get other people in the community to accept and support LGBTQ2S+ Indigenous youth?" The third section was the photovoice session using the showed method. Finally, youth completed the postsurvey. The postretreat survey included open-ended questions such as "what did you like most about the past 3 days" and "how do you think participating in this project will impact your life?"

## Adults

Adult participation occurred on Day 2 (afternoon) and Day 3 (night) of the youth retreats in August 2022. The adult talking circles happened after youth had left for the day. Talking circles included a total of 23 adults (eight in one talking circles and 15 in another talking circles). After going through informed consent processes, participants filled out paper/pen surveys (measures discussed below). Talking circles started and ended with a prayer and smudging. Relatives were served a meal and received \$50. Community-specific resources were shared on a handout distributed to all relatives.

The talking circles were facilitated by a nonbinary, queer Indigenous adult and a cisgender, heterosexual woman Lakota elder who is a caregiver to LGBTQ2S+ young people. Semistructured interview scripts asked questions related to social messaging about LGBTQ2S+ people, their challenges and strengths, treatment by community, what supports are needed, and how we can change attitudes. The participants also discussed their perceptions of the FAP materials. Example questions include: "How have colonization and historical traumas impacted how others view and treat LGBTQ2S+ Indigenous American youth?" and "What are your ideas for how to get other people in the community to accept and support LGBTQ2S+ Native American youth?"

The research protocols were approved by the University of Nebraska Lincoln's Institutional Review Board as well as the Tribe's Research Review Board. The publication of this article was also approved by the Tribe's Research Review Board. The Tribe owns the data.

## Measures

The following section includes the list of scales and items in the survey instrument provided to the Lakota youth. Given that participation in all elements of the study were voluntary, not all youth completed the survey and some items had missing data. To maintain as much data as possible, scales were normalized by the number of items completed. The section below indicates when a normalized scale was created. Table 1 provides the sample size by question, percent or mean (*SD*), and range for each item and/or scale.

### Adverse Childhood Experiences

This measure was developed by the authors using other commonly used instruments of ACEs (Bethell et al., 2017) to be inclusive of all possible ACEs. For information on the development of this measure and psychometrics, see Waterman et al. (2023). In other words, Waterman et al. took items from existing measures of ACEs so that we would have a list of all possible ACEs; we used

**Table 1**

*Descriptive Statistics for Challenges and Strengths Reported by Lakota LGBTQ2S+ Youth*

Constructs of interest	% or <i>M</i> ( <i>SD</i> )	Range
<b>Challenges</b>		
Adverse childhood experiences	12.7	1.0–29.0
Bullying victimization	51.5%	N/A
Teen dating violence victimization	63.6%	N/A
Family rejection	0.6 (0.7)	0.0–2.0
Internalized homo/bi/transphobia	0.8 (0.5)	0.0–2.3
Depressive symptoms	63.6%	N/A
Alcohol use	17.6%	N/A
<b>Strengths/resilience</b>		
Connection to culture	2.2 (0.50)	1.0–3.0
Social support	1.6 (0.8)	0.0–3.0
Sense of purpose	1.6 (0.8)	0.0–3.0
Hope for the future	1.9 (0.5)	0.0–2.6
Family acceptance	1.17(0.5)	0.0–2.25
Matter to community	88.3%	N/A
Matter to family	87.9%	N/A
LGBTQ2S+ role models	68.7%	N/A
LGBTQ2S+ community belonging	82.1%	N/A

*Note.* LGBTQ2S+ = lesbian, gay, bisexual, transgender, queer, Two-Spirit; NA = not available.

this measure in the current study. Binary response options included *yes* (1) or *no* (0). A total score was created to represent the number of ACEs experienced by youth ranging from 0 to 29. Youth who did not answer all ACEs items were not given a composite score.

### Teen Dating Violence Victimization

The Measure of Adolescent Relationship Harassment and Abuse (MARSHA) victimization scale is comprised of 33 items across six subscales (i.e., social control, physical abuse, sexual abuse, isolation, cyber control, and intimidation) (Rothman et al., 2022). In addition, five sexual and gender minority (SGM)-specific victimization items were added using the same response options and scoring procedure. These items were drawn from the SGM-Specific intimate partner violence (IPV) Tactics Scale (Dyar et al., 2021). Among a sample of diverse youth, the MARSHA victimization scale and its subscales demonstrated strong, positive correlations with the Conflict in Adolescent Dating Relationship Inventory and its respective subscales (Exner-Cortens, 2018). Furthermore, the MARSHA victimization scale showed positive correlations with anxiety and depression (Rothman et al., 2022). Among a sample of SGM individuals, the SGM-Specific IPV Tactics Scale demonstrated positive correlations with other types of IPV (e.g., psychological, physical, sexual; Dyar et al., 2021). For the present study, the time frame was within the past year, and items were rated using a binary response option: *yes* = 1 and *no* = 0. Youth were coded as either no teen dating violence victimization in the past year or any teen dating violence victimization in the past year.

### Bullying, Alcohol Use, and Depressive Symptoms

Single item indicators from the 2019 National Youth Risk Behavior Survey (YRBS) (Centers for Disease Control and Prevention, 2020) were used to measure past year bullying victimization, past year alcohol use, and past year depressive symptoms. Response options for each item were *no* (0) and *yes* (1).

### ***Internalized Homo/Bi/Transphobia***

A shortened version used in previous research with LGBTQ2S+ youth (Watson et al., 2020) of the Internalized Homonegativity Scale (Mohr & Fassinger, 2000) was used to capture internalized homo/bi/transphobia. Youth responded to the five-item questions on a scale ranging from *strongly disagree* (0) to *strongly agree* (3). Items were summed and then divided by the number answer to create a possible range of 0–3, with higher scores indicative of greater internalized homo/bi/transphobia.

### ***Family Rejection and Acceptance***

Family rejection and acceptance were measured using eight items (four rejecting, four accepting) adapted from measures created by the FAP (Ryan et al., 2009) and adapted in subsequent research (Watson et al., 2020). Youth responded to the items questions on a scale ranging from *never* (0) to *often* (3). Items were summed and then divided by the number of items answered to create a total possible range of 0–3, with higher scores on one subscale indicative of greater family rejection and the other indicative of greater family acceptance.

### ***Connection to Culture***

A previously adapted version of the orthogonal cultural identification measure (Oetting & Beauvais, 1991) was used to capture the degree to which youth felt a sense of connection to their Indigenous culture (Waterman et al., 2023). Youth responded to the seven items on a 4-point Likert scale, with 0 = *not at all* and 3 = *a lot*. Items were summed and then divided by the number of items completed for a possible range of 0–3, with higher scores indicative of greater connection to culture.

### ***Mattering***

Two items were adapted from the YRBS (Centers for Disease Control and Prevention, 2020) to assess mattering to one's community and mattering to one's family. Response options for each item were *no* (0) and *yes* (1).

### ***Purpose***

Six items from the Purpose Scale (Hamby et al., 2015) were used to assess youth's sense of purpose in life. Response options ranged from *not true about me* (0) to *mostly true about me* (3). Items were summed and then divided by the number of items answered for a possible range of 0–3, with higher scores indicative of greater sense of purpose.

### ***Hope for the Future***

Five items were adapted from previous research with queer youth (Watson et al., 2020) to assess hope for the future as an LGBTQ2S+ person. Response options ranged from *definitely no* (0) to *definitely yes* (3). Items were summed and then divided by the number of items answered for a possible range of 0–3 with higher scores indicative of greater hope for the future.

### ***Social Support***

The Social Support Received measure (Hamby et al., 2018) includes five items ranging from *not true* (0) to *mostly true* (3). The measure has

demonstrated positive correlations with other indicators of social ecology (i.e., social support and school climate) and positive correlations with subjective well-being and health-related quality of life in a sample of adolescents (Hamby et al., 2019). Items were summed and then divided by the number of items answered for a possible range of 0–3, with higher scores indicative of greater social support.

## **Data Analyses**

Given the dearth of literature on the topic and the exploratory nature of the study, we used reflexive thematic analysis to analyze the qualitative data (Braun & Clarke, 2006, 2012). Katie M. Edwards (who was present at data collection) and Katelyn Coburn (who was not present at data collection) each individually read the verbatim transcripts of the youth and adult talking circles as well as the open-ended survey responses to familiarize and immerse themselves in the data. They each reread the data several times and independently identified initial codes, using an inductive approach, that captured meaningful ideas present in the data. Then, Katie M. Edwards and Katelyn Coburn met to discuss how the identified codes mapped across each transcript and the open-ended survey responses. In this discussion, Katie M. Edwards and Katelyn Coburn organized the codes into potential themes. Next, to further refine the themes, Katie M. Edwards drafted the results section, and Katelyn Coburn read and refined the results going back to the data throughout this process to ensure the themes were clearly defined and representative of patterns across the data. Finally, the authors who were present for all or most of the data collection met to review and refine the qualitative results together. All authors also provided input during various iterations of the coding process and paper. Themes for youth and adults were very similar and are thus presented in an integrated manner in the results section. Images of youths' artwork (obtained with their permission) were selected by all coauthors to include in this article as representative of the emergent themes. Regarding quantitative data, descriptive statistics (e.g., percentages) were used when reporting the extent to which Lakota LGBTQ2S+ youth reported specific challenges and strengths (Aims 1 and 2). Given the small sample size and descriptive purpose of the study, we did not conduct inferential analyses.

## **Results**

### **Aim 1 (Challenges)**

#### ***Youth Survey Data***

All youth reported at least one ACE with a mean of 12.7 ACEs. Over half the sample reported bullying victimization, and a similar number of dating Lakota LGBTQ2S+ youth reported teen dating violence victimization in the past year. On average, youth disagreed with items assessing internalized homo/bi/transphobia as well as family rejection, although there was variability with some youth reporting high levels of both. Finally, nearly one in five youth reported past year alcohol use, and over half reported depressive symptoms in the past year.

#### ***Youth and Adult Qualitative Data***

Rejection from multiple sources (e.g., family members, school environments) and sexual orientation gender identity and expression (SOGIE)-based bullying from peers were challenges reported by Lakota LGBTQ2S+ youth. More specifically, Lakota LGBTQ2S+

youth stated that they would get “made fun of” and other youth “will put you down.” Adults also observed these behaviors (e.g., “I would feel sorry for some because I know they are like that, and then the kids shove them away.”). Further, SOGIE-based bullying seemed to be especially pervasive for gender minority youth. One youth said: “None of them really understood me and half the teachers were really homophobic when I wanted to go by a specific name. It really got kind of depressing because I wanted to be out there. It got really hard because I kept changing looks.” See Figure 2 for a representation of SOGIE-based bullying depicted by a Lakota LGBTQ2S+ youth.

Lakota LGBTQ2S+ youth also discussed the ways in which some adults—including teachers, caregivers, and elders—could be “homophobic” and “not approving” of their SOGIE and engaged in behaviors rejecting of their SOGIE. Youth discussed the ways in which some adults felt that “gays should not be in the community” and that “it is wrong to be gay.” Youth and adults also discussed anticipated rejection, which often led to identity concealment. For example, one adult said: “I think she did not want to tell him just because he always put her on a pedestal. She was always doing good, getting good grades. I think she was just scared to disappoint him.”

Further, some adults in the community were perceived as using culture to justify their beliefs (e.g., “Tunkasila<sup>3</sup> did not make people that way.”). However, adults talked about colonization and cultural

genocide in relation to what informs the rejection of Lakota LGBTQ2S+ youth. For example, one adult said: “Because the reality of it is everything that we are dealing with now is a product of what was brought to us in the boarding schools, through all of that trauma.” Adults shared about the history and importance of the *winkte* that truly traditional relatives were accepting of Lakota LGBTQ2S+ youth, and that Christianity stripped away the traditional roles of Two-Spirit relatives. One adult shared: “They *winkte* named kids, and they pierced their ears, and they had their own role. And then after the Christians, I guess, came over, then they said that it is wrong to be that. But who are they to tell us what’s wrong when we lived a spiritual, natural life? Every day of our lives, we were spiritual. They came and they said that.”

Youth and adult relatives also shared myths that some people in the community held such as people become LGBTQ2S+ because “something happened in your life” and that “LGBTQ + people are pedophiles.” Youth and adults also expressed the invisibility of Lakota LGBTQ2S+ youth: “Especially when the majority of events still only really portray or acknowledge straight couples, straight monogamous couples. There’s still very little representation.”

Lakota LGBTQ2S+ youth and adults also discussed the impacts of rejection and bullying including being “depressed” and “suicidal” and using “drugs and alcohol” because “people internalize it.” One youth talked about the loss of her friends to suicide because “they were getting made fun of because they were gay” and went on to talk about how “they’re in a better place.” Despite this, adults felt that things were getting better over time and that “people are coming out more” and that while “it is kind of harder for adults to accept it than kids,” “kids are more open minded. Kids nowadays are more accepting of other kids...a bunch of straight kids accept their gay friends and have gay friends that are girls that want to be boys, boys want to be girls. It is kids nowadays that is going to change the perspective of everything.”

## Aim 2 (Strengths)

### Youth Survey Data

In general, youth reported high levels of strength and resilience. More specifically, over 80% of Lakota LGBTQ2S+ youth reported mattering to the community, mattering to family, and having LGBTQ2S+ role models. Over 80% reported feeling like they belonged to an LGBTQ2S+ community. Whereas on average there were relatively high levels of connection to culture, there were, on average, moderate levels of social support, sense of purpose, and hope for the future. It is important to note, however, that there was variability in strengths/resilience variables suggesting that some youth reported low levels of connection to culture, social support, sense of purpose, and hope for the future. For example, while family acceptance was higher than family rejection, it was still only midrange.

### Youth and Adult Qualitative Data

Feeling pride in one’s SOGIE was seen as a strength of Lakota LGBTQ2S+ youth. For example, when asked about strengths, one youth said, “I am proud that I am Bi.” Similarly, an adult said: “Them loving themselves or being okay with being out.”

**Figure 2**  
*Bullying of Lakota LGBTQ2S+ Youth*



*Note.* Mask reads (from left to right): “fat, ugly, idiot.” LGBTQ2S+ = lesbian, gay, bisexual, transgender, queer, Two-Spirit. Photo by Lakota LGBTQ2S+ youth participant.

<sup>3</sup> Tunkasila refers to great mystery or great spirit.

Resistance to negative messages about LGBTQ2S+ people was also seen as a strength of Lakota LGBTQ2S+ youth. For example, youth talked about the importance of “being yourself” and that “love is love” despite what youth may hear otherwise (see Figure 3). Similarly, adults spoke of Lakota LGBTQ2S+ youths’ resistance. For example, one adult said: “My daughter, she goes around protesting.” Another adult said: “They (must) live in defiance of everything. It (takes) a lot of strength, a lot of just perseverance.”

Lakota LGBTQ2S+ youth also discussed the things that brought them comfort and the ways in which they coped. Positive self-talk was one approach, as demonstrated by this quote: “I remind myself, I am not asking for much, I am just asking them to accept (me).” Social support was also mentioned, for example: “hanging out with friends.” Another major source of comfort, which was discussed in detail by Lakota LGBTQ2S+ youth, was nature and being outside. One youth said: “Just watching sunsets with people is a really calming activity, and getting away from social media.” Youth talked about how being outside in nature allowed them to “be alone. To think. To get your mind off things.” For some youth it was an empowering and safe space to be: “I feel all emotions. When I am outside I just want to change the world.” Lakota LGBTQ2S+ youth, while recognizing the importance of being outside or doing other activities (e.g., reading)

alone, also talked about how “being alone for some people is unsafe” and that “isolation can lead to you hurting yourself or harming yourself or harming others” (Figures 4 and 5 reflect these discussions).

### Aim 3 (Programming/FAP)

Lakota LGBTQ2S+ youth spoke about the need for programming to target other people to decrease rejecting actions and increase accepting behaviors as well as programming, such as support groups, to specifically support them. Youth wanted others to “ask (their) pronouns and use (them).” Youth felt like there should be “consequences” for other individuals especially at school for people who bullied them because of their SOGIE. One youth stated: Those who partake in that homophobic behavior (should) actually have a consequence for that, rather just “do not do it again” or “just behave.” Adults discussed the importance of hosting “workshops” and “trainings” that focus on “teaching people that (being LGBTQ2S+) is not a horrible thing” and “how to accept (LGBTQ2S+ relatives).” Adults said that food and payment would be good incentives to ensure high attendance. Adults also spoke a bit about the needs for larger systems change, specifically “confronting... bills, antitrans bills, do not say gay kind of stuff.”

**Figure 3**

*Resistance of Lakota LGBTQ2S+ Youth*



*Note.* Sign reads “be yourself” and has a handprint and a heart depicted above the words. LGBTQ2S+ = lesbian, gay, bisexual, transgender, queer, Two-Spirit. Photo by Lakota LGBTQ2S+ youth participant. See the online article for the color version of this figure.

**Figure 4**

*The Power of Being Outside for Lakota LGBTQ2S+ Youth*



*Note.* LGBTQ2S+ = lesbian, gay, bisexual, transgender, queer, Two-Spirit. Photo by Lakota LGBTQ2S+ youth participant. See the online article for the color version of this figure.

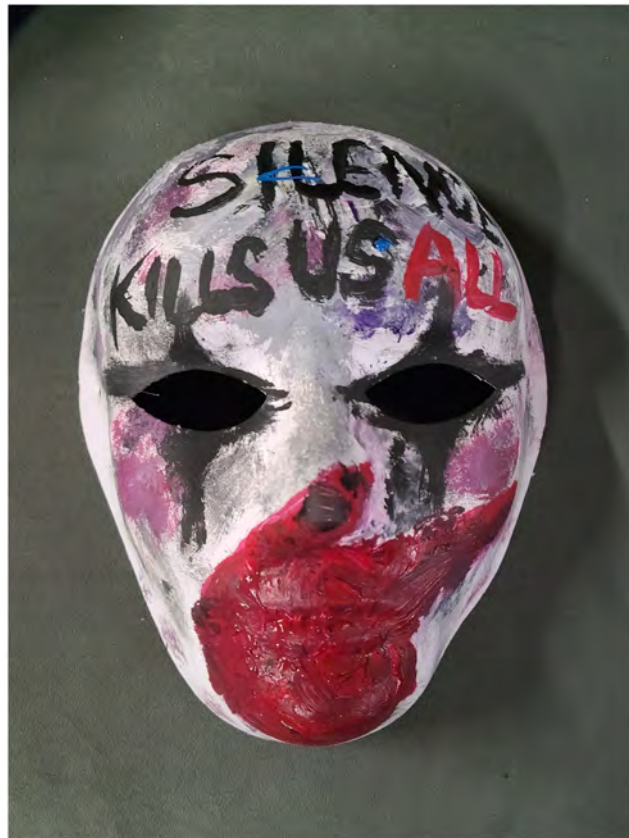
**Figure 5***Reading and Other Solitary Activities*

*Note.* LGBTQ2S+ = lesbian, gay, bisexual, transgender, queer, Two-Spirit. Photo by Lakota LGBTQ2S+ youth participant. See the online article for the color version of this figure.

Specific to FAP, Lakota LGBTQ2S+ youth and adults found it to be highly acceptable and perceived it as being something potentially impactful in their communities. Youth commented that FAP “could help (adults) understand” and “give adults a clear mindset of what they should and should not say to you LGBTQ (teens).” Lakota LGBTQ2S+ youth especially liked the components of FAP that focused on caregivers’ advocating for their LGBTQ2S+ youth (e.g., “I like the one where it says to require other family members to treat your child with respect.”). A recurring theme was Lakota LGBTQ2S+ youth desire for others to stand up for them. As one Lakota LGBTQ2S+ youth stated: “If you see something bad, somebody who is supposed to protect you doing something bad you are supposed to say something. You should feel safe no matter where you are. If a person says they are supposed to protect you, that’s what they’re supposed to be doing. If you keep silent about the people who say they protect us and are not doing that, you are just as bad as them” (see Figure 6). Adults also perceived FAP to be acceptable and impactful. They felt like the FAP “essentially tackles a lot of the stuff we talked about.” And that the FAP posters specifically should be in “schools and community centers... hospitals, jails.”

In addition to efforts to reduce rejecting and increase accepting behaviors in others, youth talked about the need for “support groups” for themselves, specifically groups that “help them come out,” “(allow them to be) able to be yourself around people” and “talk to them and support them” as well as spaces where “nobody will make fun of you.” Youth also commented that support groups/safe spaces should have “art activities” and the presence of LGBTQ2S+ adults since it can be comforting “knowing that there are adults like us.”

Adults also spoke about their role in supporting Lakota LGBTQ2S+ youth; one adult said: “I talk to everyone, especially kids, that try to hide it. I talk to kids who fight depression. They are too scared to come forward and be open about it even though it is accepted everywhere. Mainly, they are too scared to tell their family or their friends, especially their friends. But I just think that having groups like this, it will have a better impact on how to treat and how to work with

**Figure 6***Calls for Adults to Protect Lakota LGBTQ2S+ Youth*

*Note.* Mask reads “silence kills us all.” LGBTQ2S+ = lesbian, gay, bisexual, transgender, queer, Two-Spirit. Photo by Lakota LGBTQ2S+ youth participant. See the online article for the color version of this figure.

kids that are like them, like me.” Another adult said, “I think just continuously be supportive and try to answer their questions the best... being positive and trying to help them find their way, whatever that may be, straight, gay, binary, nonbinary. Because we love them, we just try to help them” Adults also felt like both youth and adults needed to learn more about “our history, even more about how important wíŋkte were for our people.” Adults believed that not only would teaching relatives about the history of the wíŋkte help adults to be less rejecting and more accepting of Lakota LGBTQ2S+ youth, but that “teaching our youth that (would make) a lot more of them would come out.”

#### **Aim 4 (Retreat Impact)**

##### *Youth Qualitative Data*

Youth commented on how in addition to liking the activities and food, they liked the “support” and “that everyone was really accepting.” Youth commented on the ways in which the retreat has or would positively impact them. Youth commented on how they learned new information (e.g., “I learned my gender does not need to align with my expression”), how the retreat impacted them intrapersonally (e.g., “feel happy,” “it will help me accept myself for who

I am,” “I learned I do not have to sacrifice my culture to be comfortable with my gender and sexuality”), how the retreat impacted them interpersonally (e.g., “I feel like I can help a lot of youth”), and how they thought other Lakota LGBTQ2S+ youth should experience a similar retreat. Youth also commented on how they especially liked the adults who facilitated the retreat (e.g., “you were inspiring,” “you guys are really amazing people”). Although most youth said “nothing” when asked what they liked least about the retreat, a few youth commented on the survey length and questions, the group being too large, and heterosexual, cisgender youth pretending to be LGBTQ2S+ so they could come to the retreat.

## Discussion

Results suggested that whereas Lakota LGBTQ2S+ youth experienced myriad challenges (e.g., rejection, victimization, depression symptoms), they also reported high levels of strength/resilience (e.g., connection to culture, feelings of mattering to others). This study extends previous research with SGMY more broadly (Abreu & Kenny, 2018; Lucassen et al., 2017; McGeough & Sterzing, 2018; Toomey et al., 2017) and highlights both universal risk and protective factors as well as population-specific risk and protective factors for Lakota LGBTQ2S+ youth. Although we did not conduct inferential analyses in the current study given the small sample size, it is reasonable to hypothesize that protective factors such as connection to culture, family acceptance, and sense of LGBTQS+ community would serve as protective factors for challenges such as depression and suicidality, which are disproportionately high among Lakota LGBTQ2S+ youth (The Trevor Project, 2022).

It is also worth noting that ACEs and other forms of victimization were alarmingly high in this sample, underscoring the urgency for comprehensive, culturally grounded prevention and response efforts. Although the extent to which victimization reported by youth was SOGIE-based is unknown, calls from adults to teach community members about the positive histories of Two-Spirit relatives in traditional Indigenous cultures may help to support community-wide acceptance of Indigenous LGBTQ2S+ youth and reduce SOGIE-based victimization. Evidence-based, violence-specific prevention strategies (e.g., bystander intervention) and family-based interventions, such as FAP, are also likely needed to help prevent victimization and deleterious outcomes (e.g., depression, suicidality) among Indigenous LGBTQ2S+ youth, which is also supported by talking circle and talking circles data from both youth and adults in the current study. There was an overwhelming sentiment among both youth and adult relatives in the study that adults should protect Lakota LGBTQ2S+ youth as sacred, which aligns with the Lakota Oyates’ emphasis on children as “little sacred ones” (wakanyēja). At the same time, Lakota LGBTQ2S+ youth consistently said that support groups were also something that they needed, as well as ongoing opportunities for learning, connection, and support, which they felt that the retreat provided them. Finally, while programming that focuses on individuals, families, and communities is urgently needed, so too are efforts that address systemic racism and poverty that disproportionately impact Indigenous communities and are inextricably linked to experiences of violence and rejection, including lateral violence against Indigenous LGBTQ2S+ relatives (Jaber et al., 2023; Whyman et al., 2021).

Several limitations should be noted. First, the findings are specific to the Lakota Oyate (people) and may not generalize to other

Indigenous communities. However, while scant, other data sources with Indigenous LGBTQ2S+ youth highlight high rates of minority stressors and deleterious outcomes among Indigenous LGBTQ2S+ youth (Baiden et al., 2020; Green et al., 2022; The Trevor Project, 2022). Nevertheless, future research is needed to document the challenges and strengths of Indigenous LGBTQ2S+ youth in other tribal nations and other Indigenous youth living off of tribal and trust lands. Second, the sample size was relatively small, which precluded us from conducting inferential analyses and may also impact generalizability. Third, because guardian permission was required to participate, youth who were not out to their guardian and likely experiencing high levels of minority stressors would not have been able to participate. Fourth, although Indigenous community partners were highly involved in the development of the data collection methods, we did not have any prior input from youth. Finally, given that self-identification was the only requirement for participation, a few youths did identify as LGBTQ2S+ to participate and then later revealed they did not identify as LGBTQ2S+. To the best of our recollection these were two of the youth who self-selected out completing surveys, limiting their impact on data collection.

Future research should more carefully screen for participation and use larger sample sizes of Indigenous LGBTQ2S+ youth. It would also be important to include those who are not out. Including these youth would likely require waivers of guardian consent. Finally, given that the majority of the sample were cisgender sexual minority Indigenous girls, future research is needed to examine more thoroughly experiences of cisgender sexual minority Indigenous boys, as well as trans and gender diverse Indigenous youth.

Despite the limitations, this first ever study to comprehensively document challenges and strengths of Indigenous LGBTQ2S+ youth using a multimethod, multi-informant study underscores the need for (a) culturally grounded, social support and skills-based programming for Indigenous LGBTQ2S+ youth, (b) initiatives that change family and community norms to accept and celebrate LGBTQ2S+ peoples, and (c) larger structural efforts to reduce racism and poverty in Indigenous communities. Existing programs such as FAP that exist alongside larger structural efforts may be impactful in helping to reduce deleterious outcomes among Indigenous LGBTQ2S+ youth and support their overall positive youth development. As the words of a Two-Spirit relative in this study reminds us—“we have always been here.” We must work hard to ensure the revitalization of positive histories of Two-Spirit relatives and support, celebrate, and protect the LGBTQ2S+ wakanyēja (little sacred ones).

## References

- Abreu, R. L., & Kenny, M. C. (2018). Cyberbullying and LGBTQ youth: A systematic literature review and recommendations for prevention and intervention. *Journal of Child & Adolescent Trauma*, 11(1), 81–97. <https://doi.org/10.1007/s40653-017-0175-7>
- Baiden, P., LaBrenz, C. A., Asiedua-Baiden, G., & Muehlenkamp, J. J. (2020). Examining the intersection of race/ethnicity and sexual orientation on suicidal ideation and suicide attempt among adolescents: Findings from the 2017 Youth Risk Behavior Survey. *Journal of Psychiatric Research*, 125, 13–20. <https://doi.org/10.1016/j.jpsychires.2020.02.029>
- Balsam, K. F., Huang, B., Fieland, K. C., Simoni, J. M., & Walters, K. L. (2004). Culture, trauma, and wellness: A comparison of heterosexual and lesbian, gay, bisexual, and two-spirit Native Americans. *Cultural Diversity and Ethnic Minority Psychology*, 10(3), 287–301. <https://doi.org/10.1037/1099-9809.10.3.287>

- Banyard, V., Edwards, K., Herrington, R., Hopfauf, S., Simon, B., & Shroll, L. (2022). Using photovoice to understand and amplify youth voices to prevent sexual and relationship violence. *Journal of Community Psychology*, 50(1), 90–110. <https://doi.org/10.1002/jcop.22495>
- Bethell, C. D., Carle, A., Hudziak, J., Gombojav, N., Powers, K., Wade, R., & Braveman, P. (2017). Methods to assess adverse childhood experiences of children and families: Toward approaches to promote child well-being in policy and practice. *Academic Pediatrics*, 17(7S), S51–S69. <https://doi.org/10.1016/j.acap.2017.04.161>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp0630a>
- Braun, V., & Clarke, V. (2012). Thematic analysis. In H. Cooper (Ed.), *APA handbook of research methods in psychology* (Vol. 2, pp. 57–71). American Psychological Association. <https://doi.org/10.1037/13620-004>
- Centers for Disease Control and Prevention. (2020). *2019 youth risk behavior surveillance system results*. U.S. Department of Health & Human Services. <https://www.cdc.gov/healthyyouth/data/yrbs/index.htm>
- Cohen, J. A., & Ryan, C. (2021). The trauma-focused CBT and Family Acceptance Project: An integrated framework for children and youth. *Psychiatr Times*. <https://www.psychiatristimes.com/view/the-trauma-focused-cbt-and-family-acceptance-project>
- Deer, S. (2015). *The beginning and end of rape: Confronting sexual violence in Native America*. University of Minnesota Press. <https://www.jstor.org/stable/10.5749/j.ctt17w8gfr>
- Driskill, Q. L. (2004). Stolen from our bodies: First nations two-spirits/queers and the journey to a sovereign erotic. *Studies in American Indian Literatures*, 16(2), 50–64. <https://doi.org/10.1353/ail.2004.0020>
- Dyar, C., Messinger, A. M., Newcomb, M. E., Byck, G. R., Dunlap, P., & Whitton, S. W. (2021). Development and initial validation of three culturally sensitive measures of intimate partner violence for sexual and gender minority populations. *Journal of Interpersonal Violence*, 36(15–16), NP8824–NP8851. <https://doi.org/10.1177/0886260519846856>
- Edwards, K. M., Banyard, V. L., Leader Charge, L., Kollar, L. M., & Fortson, B. (2021). Experiences and correlates of violence among American Indian and Alaska Native youth: A brief report. *Journal of Interpersonal Violence*, 36(23–24), 11808–11821. <https://doi.org/10.1177/0886260520983273>
- Edwards, K. M., Herrington, R., Edwards, M., Banyard, V., Mullet, N., Hopfauf, S., Simon, B., & Waterman, E. A. (2022). Using intergenerational photovoice to understand family strengths among Native American children and their caregivers. *Journal of Community Psychology*, 50(8), 3625–3639. <https://doi.org/10.1002/jcop.22860>
- Edwards, K. M., Scheer, J. R., Littleton, H., & Mullet, N. (2021). Preventing adverse childhood experiences among sexual and gender minority youth: A call to action. *Journal of Gay & Lesbian Mental Health*, 25(4), 355–357. <https://doi.org/10.1080/19359705.2021.1932662>
- Evans-Campbell, T., Walters, K. L., Pearson, C. R., & Campbell, C. D. (2012). Indian Boarding school experience, substance use, and mental health among urban two-spirit American Indian/Alaska Natives. *The American Journal of Drug and Alcohol Abuse*, 38(5), 421–427. <https://doi.org/10.3109/00952990.2012.701358>
- Exner-Cortens, D. (2018). Measuring adolescent dating violence. In D. A. Wolfe & J. R. Temple (Eds.), *Adolescent dating violence: Theory, research, and prevention* (pp. 315–340). Elsevier. <https://doi.org/10.1016/B978-0-12-811797-2.00013-X>
- Fieland, K. C., Walters, K. L., & Simoni, J. M. (2007). Determinants of health among two-spirit American Indians and Alaska Natives. In I. H. Meyer & M. E. Northridge (Eds.), *The health of sexual minorities: Public health perspectives on lesbian, gay, bisexual and transgender populations* (pp. 268–300). Springer. [https://doi.org/10.1007/978-0-387-31334-4\\_11](https://doi.org/10.1007/978-0-387-31334-4_11)
- Fortuna, L. R., Ryan, C., & Telingator, C. (2020). Faith, acceptance, and mental health: Working with religiously and culturally diverse families of LGBTQ youth. *Journal of the American Academy of Child and Adolescent Psychiatry*, 59(10), S348. <https://doi.org/10.1016/j.jaac.2020.07.855>
- Freire, P. (1973/1990). *Pedagogy of the oppressed*. Penguin Books. <https://envs.ucsc.edu/internships/internship-readings/freire-pedagogy-of-the-oppressed.pdf>
- Gamarel, K. E., Watson, R. J., Mouzoon, R., Wheldon, C. W., Fish, J. N., & Fleischer, N. L. (2020). Family rejection and cigarette smoking among sexual and gender minority adolescents in the USA. *International Journal of Behavioral Medicine*, 27(2), 179–187. <https://doi.org/10.1007/s12529-019-09846-8>
- Gant, L. M., Shimshock, K., Allen-Meares, P., Smith, L., Miller, P., Hollingsworth, L. A., & Shanks, T. (2009). Effects of photovoice: Civic engagement among older youth in urban communities. *Journal of Community Practice*, 17(4), 358–376. <https://doi.org/10.1080/10705420903300074>
- Green, A. E., Price, M. N., & Dorison, S. H. (2022). Cumulative minority stress and suicide risk among LGBTQ youth. *American Journal of Community Psychology*, 69(1–2), 157–168. <https://doi.org/10.1002/ajcp.12553>
- Grych, J., Hamby, S. L., & Banyard, V. L. (2015). The resilience portfolio model: Understanding healthy adaptation in victims of violence. *Psychology of Violence*, 5(4), 343–354. <https://doi.org/10.1037/a0039671>
- Hamby, S., Grych, J., & Banyard, V. L. (2015). *Life paths research measurement packet*. <https://www.lifepathsresearch.org/strengths-measures/>
- Hamby, S., Grych, J., & Banyard, V. (2018). Resilience portfolios and poly-strengths: Identifying protective factors associated with thriving after adversity. *Psychology of Violence*, 8(2), 172–183. <https://doi.org/10.1037/vio0000135>
- Hamby, S., Taylor, E., Smith, A., & Blount, Z. (2018). *Resilience portfolio questionnaire manual: Scales for youth*. Life Paths Research Center. <https://doi.org/10.13140/RG.2.2.27296.74243>
- Hamby, S., Taylor, E., Smith, A., Mitchell, K., Jones, L., & Newlin, C. (2019). New measures to assess the social ecology of youth: A mixed-methods study. *Journal of Community Psychology*, 47(7), 1666–1681. <https://doi.org/10.1002/jcop.22220>
- Harder, H. G., Rash, J., Holyk, T., Jovel, E., & Harder, K. (2012). Indigenous youth suicide: A systematic review of the literature. *Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health*, 10(1), 125–142. <https://www.pimatisiwin.com/online/wp-content/uploads/2012/07/10HarderNew.pdf>
- Hawk Wing, P. (2022). *Personal communication, Lakota elder and spiritual leader (traditional knowledge keeper)*.
- Hayes, L. (2018). *Creating safe & welcoming spaces for two-spirit/native LGBTQ+ youth*. Capacity Building: Center for Tribes. <https://tribalinformationexchange.org/wp-content/uploads/2020/04/SafeandWelcomingSpacesWebinarHandout.pdf>
- Hendricks, M. L., & Testa, R. J. (2012). A conceptual framework for clinical work with transgender and gender nonconforming clients: An adaptation of the minority stress model. *Professional Psychology: Research and Practice*, 43(5), 460–467. <https://doi.org/10.1037/a0029597>
- Hunt, S. (2016). *An introduction to the health of two-spirit people: Historical, contemporary and emergent issues*. National Collaborating Centre for Aboriginal Health. <https://www.ccsa-nccah.ca/docs/emerging/RPT-HealthTwoSpirit-Hunt-EN.pdf>
- Iron Cloud Two Dogs, E. (2022). *Personal communication, Lakota elder and spiritual leader (traditional knowledge keeper)*.
- Jaber, L., Stirbys, C., Scott, J., & Foong, E. (2023). Indigenous women's experiences of lateral violence: A systematic literature review. *Trauma, Violence, & Abuse*, 24(3), 1763–1776. <https://doi.org/10.1177/15248380221077316>
- James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. A. (2016). *The report of the 2015 U.S. transgender survey*. National Center for Transgender Equality. <https://www.ustransurvey.org/reports>
- Kisely, S., Alichniewicz, K. K., Black, E. B., Siskind, D., Spurling, G., & Toombs, M. (2017). The prevalence of depression and anxiety disorders in indigenous people of the Americas: A systematic review and meta-

- analysis. *Journal of Psychiatric Research*, 84, 137–152. <https://doi.org/10.1016/j.jpsychires.2016.09.032>
- Landers, A. L., Bellamy, J. L., Danes, S. M., & Hawk, S. W. (2017). Internalizing and externalizing behavioral problems of American Indian children in the child welfare system. *Children and Youth Services Review*, 81(1), 413–421. <https://doi.org/10.1016/j.childyouth.2017.08.014>
- Lehavot, K., Walters, K. L., & Simoni, J. M. (2010). Abuse, mastery, and health among lesbian, bisexual, and two-spirit American Indian and Alaska Native women. *Psychology of Violence*, 1(S), 53–67. <https://doi.org/10.1037/2152-0828.1.S.53>
- Lightfoot, A. F., Thatcher, K., Simán, F. M., Eng, E., Merino, Y., Thomas, T., Coyne-Beasley, T., & Chapman, M. V. (2019). “What I wish my doctor knew about my life”: Using photovoice with immigrant Latino adolescents to explore barriers to healthcare. *Qualitative Social Work*, 18(1), 60–80. <https://doi.org/10.1177/1473325017704034>
- Lucassen, M. F., Stasiak, K., Samra, R., Frampton, C. M., & Merry, S. N. (2017). Sexual minority youth and depressive symptoms or depressive disorder: A systematic review and meta-analysis of population-based studies. *Australian & New Zealand Journal of Psychiatry*, 51(8), 774–787. <https://doi.org/10.1177/0004867417713664>
- McGeough, B. L., & Sterzing, P. R. (2018). A systematic review of family victimization experiences among sexual minority youth. *The Journal of Primary Prevention*, 39(5), 491–528. <https://doi.org/10.1007/s10935-018-0523-x>
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, 129(5), 674–697. <https://doi.org/10.1037/0033-2909.129.5.674>
- Mohr, J., & Fassinger, R. (2000). Measuring dimensions of lesbian and gay male experience. *Measurement and Evaluation in Counseling and Development*, 33(2), 66–90.
- Munroe, M. K. (2018). *Contributions of peer rejection and family discord to internalizing and externalizing symptoms among trans children*. Miami University. [https://rave.ohiolink.edu/etdc/view?acc\\_num=miami1529687647156337](https://rave.ohiolink.edu/etdc/view?acc_num=miami1529687647156337)
- National LGBTQ Task Force. (2017). *Tribal equity toolkit 3.0: Tribal resolutions and codes to support two spirit & LGBTQ justice in Indian country*. <https://www.thetaskforce.org/wp-content/uploads/2014/09/TET3.0.pdf>
- Newcomb, M. E., LaSala, M. C., Bouris, A., Mustanski, B., Prado, G., Schrager, S. M., & Huebner, D. M. (2019). The influence of families on LGBTQ youth health: A call to action for innovation in research and intervention development. *LGBT Health*, 6(4), 139–145. <https://doi.org/10.1089/lgbt.2018.0157>
- Oetting, E. R., & Beauvais, F. (1991). Orthogonal cultural identification theory: The cultural identification of minority adolescents. *International Journal of the Addictions*, 25(5), 655–685. <https://doi.org/10.3109/10826089109077265>
- Pariseau, E. M., Chevalier, L., Long, K. A., Clapham, R., Edwards-Leeper, L., & Tishelman, A. C. (2019). The relationship between family acceptance-rejection and transgender youth psychosocial functioning. *Clinical Practice in Pediatric Psychology*, 7(3), 267–277. <https://doi.org/10.1037/cpp0000291>
- Parker, M., Duran, B., & Walters, K. (2017). The relationship between bias-related victimization and generalized anxiety disorder among American Indian and Alaska Native lesbian, gay, bisexual, transgender, two-spirit community members. *International Journal of Indigenous Health*, 12(2), 64–83. <https://doi.org/10.18357/ijih122201717785>
- Radford, A., Toombs, E., Zugic, K., Boles, K., Lund, J., & Mushquash, C. J. (2022). Examining adverse childhood experiences (ACEs) within indigenous populations: A systematic review. *Journal of Child & Adolescent Trauma*, 15(2), 401–421. <https://doi.org/10.1007/s40653-021-00393-7>
- Richter, B. E., Lindahl, K. M., & Malik, N. M. (2017). Examining ethnic differences in parental rejection of LGB youth sexual identity. *Journal of Family Psychology*, 31(2), 244–249. <https://doi.org/10.1037/fam0000235>
- Ristock, J. L., Zoccolle, A., & Passante, L. (2010). *Aboriginal two-spirit and LGBTQ migration, mobility, and health research project: Winnipeg final report*. OUT Saskatoon. <https://www.rainbowhealthontario.ca/wp-content/uploads/2010/12/Two-Spirit-Migration.pdf>
- Ristock, J. L., Zoccolle, A., Passante, L., & Potskin, J. (2019). Impacts of colonization on Indigenous Two-Spirit/LGBTQ Canadians’ experiences of migration, mobility and relationship violence. *Sexualities*, 22(5–6), 767–784. <https://doi.org/10.1177/1363460716681474>
- Ross, L. (1998). *Inventing the savage: The social construction of native American criminality* (1st ed.). University of Texas Press.
- Rothman, E. F., Cuevas, C. A., Mumford, E. A., Bahrami, E., & Taylor, B. G. (2022). The psychometric properties of the Measure of Adolescent Relationship Harassment and Abuse (MARSHA) with a nationally representative sample of US youth. *Journal of Interpersonal Violence*, 37(11–12), NP9712–NP9737. <https://doi.org/10.1177/0886260520985480>
- Ryan, C. (2010). Engaging families to support lesbian, gay, bisexual, and transgender youth: The Family Acceptance Project. *Prev Res*, 17(4), 11–13. <https://eric.ed.gov/?id=EJ906333>
- Ryan, C. (2014). Generating a revolution in prevention, wellness, and care for LGBT children and youth. *Temp Pol & Civ Rts L Rev*, 23(2), 331–344. <https://heinonline.org/HOL/P?h=hein.journals/tempcr23&i=353>
- Ryan, C. (2021). *Family behaviors that increase your LGBTQ child’s risk for health & mental health problems—for American Indian families & communities*. Family Acceptance Project, Marian Wright Edelman Institute, San Francisco State University. <https://familyproject.sfsu.edu/posters>
- Ryan, C. (2022). *Family acceptance project*. San Francisco State University. <https://familyproject.sfsu.edu/>
- Ryan, C., Huebner, D., Diaz, R. M., & Sanchez, J. (2009). Family rejection as a predictor of negative health outcomes in white and Latino lesbian, gay, and bisexual young adults. *Pediatrics*, 123(1), 346–352. <https://doi.org/10.1542/peds.2007-3524>
- Ryan, C., Russell, S. T., Huebner, D., Diaz, R., & Sanchez, J. (2010). Family acceptance in adolescence and the health of LGBT young adults. *Journal of Child and Adolescent Psychiatric Nursing*, 23(4), 205–213. <https://doi.org/10.1111/j.1744-6171.2010.00246.x>
- Ryan, C., Sampson, M., Fullenkamp, J., & Peterson, J. (2018). *Integrating the family acceptance project’s family support model into family group decision-making to increase family support for LGBTQ children & youth to prevent placement in foster care*. Society for Social Work and Research Annual Conference, Washington, DC. <https://sswr.confex.com/sswr/2018/webprogram/Paper32338.html>
- San Francisco State University. (2021). *Family Acceptance Project releases poster series for American Indian families & communities to help families to support their LGBTQ/two spirit children to reduce risk and increase well-being*. <https://familyproject.sfsu.edu/family-acceptance-project-releases-poster-series-american-indian-families-communities-help-families>
- Scheer, J. R., Edwards, K. M., Helminen, E. C., & Watson, R. J. (2021). Victimization typologies among a large national sample of sexual and gender minority adolescents. *LGBT Health*, 8(8), 507–518. <https://doi.org/10.1089/lgbt.2021.0024>
- Simoni, J. M., Walters, K. L., Balsam, K. F., & Meyers, S. B. (2006). Victimization, substance use, and HIV risk behaviors among gay/bisexual/Two-Spirit and heterosexual American Indian men in New York city. *American Journal of Public Health*, 96(12), 2240–2245. <https://doi.org/10.2105/AJPH.2004.054056>
- Smith, A. (2003). Not an Indian tradition: The sexual colonization of Native peoples. *Hypatia*, 18(2), 70–85. <https://doi.org/10.1111/j.1527-2001.2003.tb00802.x>
- Tan, K. K., Trehame, G. J., Ellis, S. J., Schmidt, J. M., & Veale, J. F. (2020). Gender minority stress: A critical review. *Journal of Homosexuality*, 67(10), 1471–1489. <https://doi.org/10.1080/00918369.2019.1591789>
- Testa, R. J., Habarth, J., Peta, J., Balsam, K., & Bockting, W. (2015). Development of the gender minority stress and resilience measure.

- Psychology of Sexual Orientation and Gender Diversity*, 2(1), 65–77. <https://doi.org/10.1037/sgd0000081>
- The Trevor Project. (2022). *2022 National survey on LGBTQ youth mental health*. [https://www.thetrevorproject.org/survey-2022/assets/static/trevor01\\_2022survey\\_final.pdf](https://www.thetrevorproject.org/survey-2022/assets/static/trevor01_2022survey_final.pdf)
- Toomey, R. B., Huynh, V. W., Jones, S. K., Lee, S., & Revels-Macalinao, M. (2017). Sexual minority youth of color: A content analysis and critical review of the literature. *Journal of Gay & Lesbian Mental Health*, 21(1), 3–31. <https://doi.org/10.1080/19359705.2016.1217499>
- Trent, M., Dooley, D. G., Dougé, J., Cavanaugh, R. M., Lacroix, A. E., Fanburg, J., Rahmandar, M. H., Hornberger, L. L., Schneider, M. B., Yen, S., Chilton, L. A., Green, A. E., Dilley, K. J., Gutierrez, J. R., Duffee, J. H., Keane, V. A., Krugman, S. D., McKelvey, C. D., Linton, J. M., ... Wallace, S. B. (2019). The impact of racism on child and adolescent health. *Pediatrics*, 144(2), Article e20191765. <https://doi.org/10.1542/peds.2019-1765>
- Walters, K. L., Evans-Campbell, T., Simoni, J. M., Ronquillo, T., & Bhuyan, R. (2006). My Spirit in My Heart: Identity experiences and challenges among American Indian Two-Spirit women. *Journal of Lesbian Studies*, 10(1–2), 125–149. [https://doi.org/10.1300/J155v10n01\\_07](https://doi.org/10.1300/J155v10n01_07)
- Wang, C., & Burris, M. A. (1997). Photovoice: Concept, methodology, and use for participatory needs assessment. *Health Education & Behavior*, 24(3), 369–387. <https://doi.org/10.1177/109019819702400309>
- Warne, D., Dulacki, K., Spurlock, M., Meath, T., Davis, M. M., Wright, B., & McConnell, K. J. (2017). Adverse childhood experiences (ACE) among American Indians in South Dakota and associations with mental health conditions, alcohol use, and smoking. *Journal of Health Care for the Poor and Underserved*, 28(4), 1559–1577. <https://doi.org/10.1353/hpu.2017.0133>
- Waterman, E. A., Edwards, K. M., Mullet, N., Herrington, R., Hopfauf, S., Trujillo, P., Even-Aberle, N., & Wheeler, L. (2023). Rates of recent adverse childhood experiences among indigenous children. *Journal of Child & Adolescent Trauma*. Advance online publication. <https://doi.org/10.1007/s40653-023-00587-1>
- Watson, R. J., Wheldon, C. W., & Puhl, R. M. (2020). Evidence of diverse identities in a large national sample of sexual and gender minority adolescents. *Journal of Research on Adolescence*, 30(S2), 431–442. <https://doi.org/10.1111/jora.12488>
- White Hawk, S. H. L. (2017). *Understanding and reclaiming our Two-Spirit relatives*. Tribal Information Exchange. <https://tribalinformationexchange.org/files/resources/twospiritpresentationhayeswhitehawk.pdf>
- Whyman, T., Adams, K., Carter, A., & Jobson, L. (2021). Lateral violence in indigenous peoples. *Australian Psychologist*, 56(1), 1–14. <https://doi.org/10.1080/00050067.2021.1893595>
- Willoughby, B. L., Doty, N. D., & Malik, N. M. (2010). Victimization, family rejection, and outcomes of gay, lesbian, and bisexual young people: The role of negative GLB identity. *Journal of GLBT Family Studies*, 6(4), 403–424. <https://doi.org/10.1080/1550428X.2010.511085>
- Yusuf, H. E., Copeland-Linder, N., Young, A. S., Matson, P. A., & Trent, M. (2022). The impact of racism on the health and wellbeing of Black Indigenous and other youth of color (BIPOC youth). *Child and Adolescent Psychiatric Clinics of North America*, 31(2), 261–275. <https://doi.org/10.1016/j.chc.2021.11.005>
- Zoccole, A., Ristock, J., & Barlow, K. (2005). *Addressing homophobia in relation to HIV/AIDS in Aboriginal communities: Final report of the environmental scan 2004-05*. Canadian Aboriginal AIDS Network. [https://www.2spirits.com/PDFFolder/CAAN\\_homophobia\\_Report.pdf](https://www.2spirits.com/PDFFolder/CAAN_homophobia_Report.pdf)

Received January 22, 2023

Revision received January 21, 2024

Accepted January 25, 2024 ■