



Non-heterosexual Youth

A Profile of Their Health and Wellbeing



Findings of **Youth2000**
A National Secondary School
Youth Health Survey



February 2005

**Non-heterosexual Youth:
A Profile of Their Health and Wellbeing; Data from Youth2000**

ISBN 0-476-01136-1 (printed version)
ISBN 0-476-01397-6 (electronic version)

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To be referenced as:

Le Brun C., Robinson E., Warren H., Watson P.D. (2004) Non-heterosexual Youth - A Profile of their Health and Wellbeing: Data from Youth2000. Auckland: The University of Auckland.

This report was funded by Out There, a joint Rainbow Youth and New Zealand AIDS Foundation project.

Report also available at website: www.youth2000.ac.nz and www.outthere.org.nz



FOREWORD FROM NZAF EXECUTIVE DIRECTOR

E ngā mātāwaka o te motu, tena koutou katoa,
Greetings to all of our different communities.

NZAF wishes to acknowledge the contribution of each and everyone of the non-heterosexual youth/rangatahi who have contributed to the survey in 2001. The ability to produce this report is only possible because of the courage and kaha of these young people in acknowledging issues of sexuality that are unlikely to receive consistent and comprehensive support from the adults around them.

NZAF and Rainbow Youth are delighted with the study as it provides Aotearoa/New Zealand with the first credible evidence-based information on non-heterosexual young people's experiences of their school, family/whanau and community. Not only is this a first for us, but it is also a first in many other countries in the world.

We are keen to see this study form the basis of more research and to influence policy and decision makers in respect to the safety, well-being and hau ora of our rangatahi/young people.

Hei konā mai me ngā mihi, with thanks for all who worked to make this possible.

Rachael Le Mesurier
Executive Director
New Zealand Aids Foundation



THE UNIVERSITY OF AUCKLAND
FACULTY OF MEDICAL AND
HEALTH SCIENCES

FOREWORD FROM RAINBOW YOUTH

Rainbow Youth is proud to be associated with this research. "Non-Heterosexual Youth: A Profile of their Health and Wellbeing" is groundbreaking research. It is the first comprehensive study of non-heterosexual identifying youth to occur in Aotearoa. The research gives a detailed snapshot of the health and wellbeing of Aotearoa's non-heterosexual youth.

In order to put in place effective strategies to improve outcomes for non-heterosexual youth it is necessary to have a comprehensive picture available of their health status in the current environment, this research provides that sorely needed insight.

"Non-Heterosexual Youth: A profile of their health and wellbeing" is the information which underpins the schools resource "Safety in Our Schools" produced by the Out There project, of which Rainbow Youth is co-owner with the New Zealand Aids Foundation.

The situation for non-heterosexual youth detailed in the research is bleak in a number of ways. Although unsettling, to Rainbow Youth these findings are sadly unsurprising. In our day to day work, Rainbow Youth sees first hand the human face of the statistics outlined in this research.

Finally, and perhaps the most important insight to be gained from this research is the diversity of the experiences of non-heterosexual youth and the necessity for strategies which acknowledge, cater to, nurture and celebrate it as the source of strength and pride it can and should be for all our young people.

Morgan Johns
Board Member
Rainbow Youth

THANKS

To all the taitamariki who participated in the survey.

To the many school staff, Principals and Boards of Trustees who helped us make this happen.

To the Adolescent Health Research Group, The University of Auckland who were the researchers responsible for Youth2000:

Terryann Clark, Simon Denny, Peter Watson.

Department of Paediatrics, Faculty of Medical and Health Sciences

Shanthi Ameratunga, Elizabeth Robinson, David Schaaf.

School of Population Health, Faculty of Medical and Health Sciences

Sue Crengle, Andrew Sporle.

Department of Māori and Pacific Health, Faculty of Medical and Health Sciences

Vivienne Adair, Robyn Dixon.

School of Education

Sally Merry.

Department of Psychiatry, Faculty of Medical and Health Sciences

To the project manager Di Smith and the project research assistants for your dedicated and professional work on this project.

This research was supported by grant 00/208 from the Health Research Council of New Zealand and a grant-in-aid from Alcohol Advisory Council of New Zealand (ALAC). Thanks to Portables Plus and the Starship Foundation for support with the laptop computers.

This report was funded by Out There, a joint Rainbow Youth and New Zealand AIDS Foundation project. A big thank you to Amy Donovan from the Out There Project who provided so much support and feedback that enabled this report to come to fruition.

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SUMMARY



SUMMARY

This report provides a snapshot of non-heterosexual students who attend secondary school. This “school attending” population of adolescents is known to be healthier than those young people who have left school at younger ages or are not at school on the day of the health survey. This survey also did not include adolescents who may be home-schooled, attend correspondence schooling, small schools with rolls of less than fifty students or those who attend alternative education programmes.

General

In total 7.8% (701/8997) of the students surveyed identified as being sexually attracted to the same sex, both sexes, not sure or neither (non-heterosexual). The number of students who identified as attracted to the same or both sexes was similar to the number of students who identified as not sure or not attracted to either sexes. This data shows that one in twelve students in secondary schools in New Zealand identify as non-heterosexual. Therefore in an average class of thirty or so adolescents, it is likely that at least two of those students are not exclusively heterosexual.

The majority of students reported that they were thirteen or under when they first became aware of their same-sex attractions. For the students who had come out, over half reported that they had come out when aged thirteen or younger. This has significant implications for the age at which youth are provided with sexuality education on same-sex attractions and identities. Ideally, this education should match their developmental needs and be provided by the early years of secondary school.

Over two thirds of students that identified as same sex and both sex attracted had not come out to people close to them about their sexuality and for those that had come out, the majority did not come out to family members. Being aware that coming out is a process over time, it is important to consider what schools or communities can implement to assist these adolescents to normalise this process, supporting them in their decision to come out or not. For those adolescents whose process is at a stage where ‘hiding’ their sexuality is having a negative effect on their wellbeing, professionals and communities should have an awareness of the sexuality developmental process.

Continued focus on communication methods, such as posters and brochures that are youth orientated, support contacts advertised and easily accessed, that effectively target and reach this invisible group of adolescents to offer safe, confidential and empathic support is important.



Parents and Family

The relationship between adolescents and their parents is very significant to healthy youth development. The survey shows that the majority of non-heterosexual students believe their parents (or someone who acts as their parent) care about them, although many report that they did not feel close to their parents and they would like to have more time with them. Many non-heterosexual students reported that they had lied to their parents or people responsible for them about who they were with and their whereabouts.

In terms of broader family relationships, the majority of non-heterosexual students reported they were happy with relationships in their family. While the majority of these students report that they could talk about problems with family members, many reported that they could not. Some non-heterosexual students reported having run away from home overnight or spent the night away from home without permission.

Same sex and both sexes attracted students who had come out were more likely to talk about their problems with their family compared to those students who had not come out. However, a significant number of students who have come out were more likely to run away from home overnight and to spend the night away from home without permission, in comparison to those students who had not come out. Periods of stress and increased tension may occur when an adolescent comes out to their family. It is possible that these factors contribute to the higher rates of running away for those adolescents who have come out.

The findings above have significant implications for the safety and wellbeing for this group of adolescents. Increased awareness of potential risks need to be understood by schools, health services and professionals in order to offer appropriate support to both the adolescent and their family.

Schools

It is important that young people have other adults to whom they can turn for guidance and support and the majority of students in this survey felt that adults in their school cared about them. In terms of looking toward the future the majority of students had plans to continue their education or to look for employment after they left school. Areas of concern are that just over ten percent of non-heterosexual students felt that adults in their school did not care at all about them and one student in five reported that they did not feel part of their school.

Community

Communities that have access to material resources, believe in and care about the adolescent provide important protective factors for the adolescent. Many non-heterosexual students reported that they have a close friend they would feel comfortable talking to if they had a serious problem. Of concern however, is that many non-heterosexual students report that they do not have an adult outside of their family with whom to discuss serious problems. Many non-heterosexual students also reported that no one in their neighbourhood cares about how their life is going.



Emotional Health

This study shows high rates of emotional distress for a number of students. Almost one quarter of non-heterosexual students reported a significant number of depressive symptoms. Nearly one third of non-heterosexual students were unsure or thought it unlikely that they will live to the age of twenty five and over ten percent of all non-heterosexual students reported that they had attempted suicide in the twelve months prior to participating in the survey.

Substance Use

This study reveals concerning rates of continued substance use. Around two in ten non-heterosexual students report ever using party drugs. Over ten percent of non-heterosexual students smoke cigarettes daily and use marijuana weekly. Nearly one third of non-heterosexual students reported binge drinking at least once in the last four weeks.

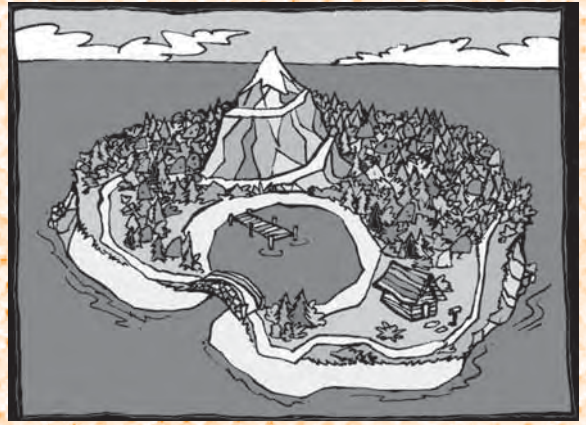
Safety and Bullying

Adolescents that experience victimisation or bullying may have lower self esteem, mental health concerns such as depression and anxiety and possibly lower academic achievement. Nearly ten percent of non-heterosexual students did not feel safe at school most or all of the time and almost a quarter of non-heterosexual students reported that they sometimes felt safe. So while the majority of non-heterosexual students report they feel safe in school all or most of the time, a concerning number of students reported they did not.

Over ten percent of non-heterosexual students reported they were bullied at least once a week. Furthermore almost half of the non-heterosexual students report that they have been hit or physically harmed by another person on purpose, once or twice or three or more times during the last twelve months.

For findings related specifically to coming out, over half of those same sex and both sexes attracted students, who had come out reported they had been bullied at least once in the past year. For those who have not come out the numbers are even more concerning as two students out of three reported they had been bullied in the past year.





ABOUT THE SURVEY



INTRODUCTION

The Adolescent Health Research Group (AHRG) was established in 1998 with the aim of improving the health and well being of New Zealand's youth. To support that aim, the AHRG developed and administered the Youth2000 survey in 2001. In total 9699 students from 114 New Zealand secondary schools participated. During the latter half of 2003, the AHRG was approached by the Out There project for the purpose of analysing non-heterosexual data from the Youth2000 Survey. Largely the data analysed in this report is based on sexual attraction awareness of non-heterosexual students and some data associations specifically about same sex and both sex attraction students, coming out, emotional health and family.

ABOUT THE SURVEY

Methodology

The survey questionnaire was developed in consultation with key stakeholders, including young people, youth health providers and researchers, schools, Māori and Pacific community leaders and government agencies. Having identified a range of risk behaviours, risk and protective factors and being mindful of New Zealand youths diverse ethnic backgrounds, eight domains were identified; ethnicity, home, school, neighbourhood and spirituality, health (including emotional wellbeing), food and activities, sexuality, substance use and injuries and violence.

In response to computer technology becoming more accessible and affordable, a team was commissioned to design and develop a multimedia computer assisted self-administered interview (M-CASI) that was youth orientated and 'user friendly'. M-CASI allowed for questions to be heard over headphones as well as displayed on the laptop computer screen. The respondent could elect to not continue the questionnaire at any time, choose to skip questions and they were reminded about the confidential, voluntary and anonymous nature of their answers. The respondent entered their answer directly into the computer from which the results were automatically coded and then stored onto floppy disks for analysis.

Pilot Study

During 1999, 110 students aged between 12 and 18 years participated in the pilot study and 98 of those students subsequently participated in 14 focus groups to discuss their experiences of using the M-CASI. The findings of the pilot study found that overall using M-CASI as a survey tool would be feasible and acceptable and that students found using laptop multimedia computer technology was acceptable and enjoyable (Watson; 2001: Robinson; 2002).



National Survey

Funding from a further Health Research Council grant enabled the AHRG to administer the large scale national survey in 2001. Additional support was provided by the Starship Foundation, Portables Plus and the Alcohol Advisory Council of New Zealand (ALAC). A project team was employed and surveying took place in schools between March and October 2001.

Ethical approval for this study was obtained from The University of Auckland Human Subjects Ethics Committee. Informed consent was obtained from all participating schools and all participating students. Information about the survey was sent out to all families of students who were invited to participate in the survey (Adolescent Health Research Group; 2003).

Schools

One hundred and thirty three schools were randomly selected and invited to participate in the survey. These schools were selected from 389 schools throughout New Zealand that had 50 or more students enrolled in Years 9 to 13. Of those selected, 114 schools agreed to participate in the survey and were geographically spread from Kaitaia to Invercargill.

Of the participating schools, 70.2% (80/114) were state funded, 23.7% (27/114) were state integrated (previously private, now receiving state funding to deliver New Zealand Curriculum) and 6.1% (7/114) were private. Almost one third of schools (32.5%) were situated in a rural setting (Adolescent Health Research Group; 2003).

Students

Those students that had limited English language skills, were fee paying non-New Zealand residents or had a disability that prevented them from being able to complete the M-CASI laptop computer questionnaire were ineligible to participate. In consultation with school staff and study administrators, 15% of Year 9 to Year 12 students from each school were randomly selected from the school roll and invited to participate. Invited students totaled 12,934 and three quarters of those (9,699) consented to participate in the survey, which represents 4.0% of the total 2001 New Zealand secondary school roll. If students from the selected list were away on the day of the survey, students from a reserve list were invited to participate. Reasons why students did not participate in the survey are not fully known. Some students were reported as sick on the day 28% (908/3235) and a few students 2.5% (81/3235) reported to survey or school staff that they did not want to participate.



Are the Results Accurate?

The survey provides accurate predictions of population prevalences of a wide range of health risk behaviours, protective factors, health status and service utilization indicators. In order to increase the accuracy of the survey results the AHRG undertook several steps. The survey included a very large number of students from communities throughout New Zealand. The students and schools were invited to participate after a random selection. As many adolescents are concerned about with whom their personal information may be shared, the AHRG ensured students' data was kept anonymous and reassured that their participation was voluntary. The survey teams were trained and used consistent guidelines to administer the survey. The analysis of the survey was conducted using appropriate statistical techniques by a large multidisciplinary research team. The research team was supported by wider advisory groups that included Māori and Pacific community leaders, young people, researchers, youth health and development practitioners and policymakers.

The survey has some limitations. The survey questionnaire was only completed by students present at secondary schools on the day of the survey and therefore does not provide data on all young people. This "school attending" population of adolescents is known to be healthier than those young people who have left school at younger ages or are not at school on the day of a health survey. This survey also did not include adolescents who may be home-schooled, attend correspondence schooling, small schools with rolls of less than 50 students or those who attend alternative education programs.

A small number of students provided a non-response to particular questions such as "I don't want to answer this question". Although likely to be small, the potential bias for non-response questions is not known. It is likely that some students were dishonest either by over reporting or under reporting particular health behaviours, however, previous studies as well as the pilot study suggests this issue is small and unlikely to significantly alter the results. Where students answered questions with clearly an impossible outcome (for example they said they had all ten serious illnesses listed) the results were excluded from that particular analysis. Finally computer problems caused a small number of data files to be unusable (Adolescent Health Research Group; 2003).



Interpreting the Data

This survey is cross-sectional, that is it provides a snapshot of the health and wellbeing of young people at one point in time. The survey data is able to examine associations between different questionnaire items but did not collect data on individuals over time and therefore is limited in its ability to examine cause and effect relationships.

The terminology used in this report, specifically 'heterosexual' and 'non-heterosexual' is acknowledged as not ideal. The students in this survey were asked who they were sexually attracted to and offered the options as shown in the table below to select from.

Which of the following are you sexually attracted to...?	The opposite sex (e.g. male – female)	The same sex (e.g. male to male or female to female)	Both sexes (e.g. male and female)	Not sure	Neither
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Heterosexual means 'a person who is sexually attracted to members of the opposite sex' (Colman; 2001) and students who selected the 'opposite sex' option have been termed 'heterosexual', by the authors, for the purpose of this report.

Students who selected the alternative options of 'same sex', 'both sex', 'not sure' and 'neither' have been termed 'non-heterosexual'. Combining the 'same sex', 'both sexes', 'not sure' and 'neither' data into one category increases analytic power, enhancing the ability to be confident in the accuracy of the estimates of behaviours and outcomes.

Those students who selected the 'neither' response were included into the 'non-heterosexual' category. For some adolescents reasons for the 'neither' response may be because they fall into the early adolescence range, which generally marks the transition from childhood to adulthood (Garnets; 2003) and is typically the period for the onset of puberty (Garnets; 2003). For most adolescents, the changes of puberty, both hormonally and physically, increase sexual feelings, thoughts and behaviours (D'Augelli; 2001). Sexual attraction however, is one factor of many to the overall sexual identity development and formation. How the adolescent view themselves as a sexual being, occurs throughout the decade or so of adolescence, in context to their environment, cognitive development and other developmental factors, including peers and family (D'Augelli; 2001).

The survey asked the student to whom they are sexually attracted, rather than in terms of labeling their sexual attraction as heterosexual, gay, lesbian, bisexual or asexual. While an increasing number of adolescents will describe themselves as lesbian, gay or bisexual, a greater number of students will report same-sex attractions, fantasies or experiences (D'Augelli; 2001). Words such as lesbian, gay, homosexual or bisexual can provoke strong emotions and it is considered that many adolescents will be reluctant to self identify with those descriptions due to the societal culture of homophobia, possibly resulting in under reporting (D'Augelli; 2001). This can occur regardless of the level of anonymity offered to the participant.



Finally, the data in this report cannot be compared to the 'Early Findings of Youth2000' report or any other report from Youth2000 that includes all adolescents who identify as heterosexual and non-heterosexual. Comparative findings between heterosexual and non-heterosexual young people will be presented in future reports. Should there be any queries or questions please contact the authors or the Adolescent Health Research Group.





BACKGROUND



ADOLESCENT DEVELOPMENT

The developmental processes for adolescents occur through various stages and levels, over a sustained period of years. The years of when a person is an adolescent can vary, depending on the young person's individual development, societal classifications and categorisation and familial expectations and/or cultural backgrounds. Generally early adolescence ranges from 10 – 14 years, middle adolescence from 15 – 17 years and late adolescence 18 – 20 years (Zuszcak; 1999). An adolescent will experience changes in their cognitive, physical, biological, sexual, psychological and psychosocial functioning. Often these changes occur out of synchronisation with their peers and physical changes can be particularly evident to the adolescent themselves as well as others. The adolescent may spend a considerable amount of effort to fit in with peers. Increased familial conflict may occur as the adolescent matures to more independent behaviour and an increasing sense of self. Furthermore, adolescence is a period where young people will partake in increased risky behaviour for example substance use, unsafe sex practices or risky driving. All these issues inevitably influence adolescents' decisions and choices; how they conduct themselves, how they create themselves to others and their self perception.

Ideally healthy youth development would see adolescence as a transition period into adulthood where they can learn how to participate as workers, be responsible members of society, enjoy a sense of belonging with peers and family, have learnt how to make decisions based on a self formed value system, be introspective about themselves and others and have a capacity to enjoy life (Resnick; 2000).

SEXUAL IDENTITY DEVELOPMENT

The development and formation of an individual's sexual identity is broad and extensive with many theories and various factors that characterise this process. Briefly, for the purpose of this report, sexual identity development includes awareness of sexual attraction to others and continues until the individual has integrated their sexual identity into their sense of self (Maugen; 2002). Adolescents who identify as gay, lesbian or bi-sexual, or are unsure of their sexual orientation, experience the same angsts and triumphs as any other adolescent. All adolescents are developing an individual sense of identity and those who are beginning to or do identify as attracted to the same sex or both sexes also go through a unique process by which they acknowledge their sexual orientation (Westheimer; 2002). These two processes are almost inseparable (Westheimer; 2002).

For gay, lesbian, bisexual or unsure adolescents, acknowledging their sexual identity usually occurs in environments that are heterosexist and homophobic. Heterosexism creates social pressures (D'Augelli; 2001) and refers to discrimination based on sexual orientation (Rothblum; 1996). For individuals who are attracted to the same sex or both sexes, or who identify as gay



or lesbian need to redefine or discard the heterosexist expectations and roles (D'Augelli; 2001). The word homophobia is used to describe irrational emotions such as hatred and anger, triggered in people who fear homosexuals (Rothblum; 1996). External homophobia is used to describe the hatred, anger and fear when directed to others. Shildo (1994), as cited by Garnets (2003), defines internalised homophobia as "a set of negative attitudes and affects toward homosexuality in other persons and toward homosexual features in oneself".

Other milestones of sexual identity development include first sexual experiences and self-labeling of identity (Maguen; 2002). Identity integration may or may not include disclosure of sexual identity. Disclosure is often referred to as 'coming out'. There is however a distinction between 'disclosure' and 'coming out'. Disclosure is the act of telling someone else about being gay, lesbian or bisexual. Coming out is a process that occurs over the lifespan and refers to the individual exploring the definition of what it means to be gay or lesbian, understanding that they are different from peers, and involvement with others who are like themselves, usually within gay and lesbian cultures (D'Augelli; 2001). Individuals may elect to not disclose in order to protect themselves and avoid homophobic reactions and stigma (D'Augelli; 2001). Relationships with friends and family can therefore be based in part on fabrications and the creation of a 'false self' occurs (D'Augelli; 2001). The creation of a 'false self' can cause withdrawal, feelings of isolation and mental health problems (Maguen; 2002). Others may try to deny or alter homosexual feelings/behaviour (Garofalo; 2001).

Connection with family is considered a protective factor for adolescents. This connection and family support can be jeopardised possibly temporarily or long term should the young person disclose their sexuality to family or their sexuality is 'discovered' rather than disclosure by choice. Connection and support may be reduced, ranging from the withdrawal of emotional support to the removal of fundamental living resources such as accommodation, food and money (D'Augelli; 2001).

Consequently the sexual identity development process for young people who are attracted to the same sex or both sexes is unique to that of heterosexual youth and the process can affect the young person's sense of self, self esteem and impact on other areas of development as they transition into adulthood.



RESILIENCY, RISK AND PROTECTIVE FACTORS

The resiliency framework views risk and protective factors within three domains, the young person as an individual, their family and the society in which they live in. Resiliency is the process whereby a person withstands or endures stress. Risk and protective factors are individual, family and social characteristics that can enhance, diminish or negate the potential negative outcome from stressful or risky situations. For example an adolescent that experiences bullying in the form of name calling and physical abuse will handle this experience according to their self-concept, locus of control and personal skills. Also fundamental are the resources and risk and protective factors within the family and the community which will contribute to the outcome for the young person (Werner; 1993).

Examples of individual protective factors include intelligence, sociability, positive temperament, communication skills and personal attributes such as self efficacy, sense of humour, hopefulness and strategies to cope with stress or change. Family protective factors include connectedness to other family members and being valued within a warm encouraging environment. Adolescents spend considerable time in school, therefore having supportive peers, positive teachers and being successful, be that academically or not, is viewed as an important social protective factor. Other important social protective factors include the neighbourhood or community that the adolescent lives within. A community that has material resources available, understands and believes the adolescent's level of stress and is non punitive are further protective mechanisms (Olsson; 2003).





RESULTS



DEMOGRAPHIC FEATURES OF STUDENTS BY SEXUAL ATTRACTION

Students

From the total 9,699 students that agreed to take part in the Youth2000 survey, 8997 students (92.7%) responded to the question 'who are they sexually attracted to?' and were prompted to select from the options as shown below. Table 1 below shows most students (92.2%, 8296/8997) identified as being exclusively sexually attracted to the opposite sex (heterosexual). In total 7.8% (701/8997) of the students surveyed identified as being sexually attracted to the same sex, both sexes, not sure or neither (non-heterosexual).

Table 1.

Which of the following are you sexually attracted to...?	The opposite sex (e.g. male – female)	The same sex (e.g. male to male or female to female)	Both sexes (e.g. male and female)	Not sure	Neither
Number	8296	68	277	206	150
Percentage	92.2%	0.7%	3.1%	2.3%	1.7%

Table 2 shows there were similar percentages of non heterosexual students across the different age groups surveyed.

**Table 2. Sexual attraction of students by age
N = 8997**

Age	Heterosexual		Non-heterosexual	
	N	% Confidence Intervals (95% CI)	N	% Confidence Intervals (95% CI)
≤ 13	1701	89.4 (87.5, 91.3)	201	10.6 (8.6, 12.5)
14	1976	92.3 (90.8, 93.6)	166	7.7 (6.3, 9.1)
15	1927	93.8 (92.4, 95.2)	129	6.2 (4.7, 7.5)
16	1546	93.2 (91.7, 94.5)	111	6.8 (5.4, 8.2)
≥ 17	1146	92.1 (89.6, 94.6)	94	7.9 (5.3, 10.3)

Gender

In the Youth2000 survey more females than males participated, reflecting the gender distribution of the schools sampled. As table 3 shows in this survey there were also more female than male students, who identified as non-heterosexual.

**Table 3. Gender distribution of students
N=8997**

	Heterosexual		Non-heterosexual	
	N	%	N	%
Female	4510	92.1	389	7.9
Male	3786	92.4	312	7.6
Total Female and Male Students	8296	92.2	701	7.8



Ethnicity

The participants were asked with which ethnic groups they identified. Students were able to select as many ethnic groups that they felt applied. The census prioritisation method was used to classify participants into ethnic groups. Table 4 below shows that students who identified with the Pacific or Asian group were more likely to identify as non-heterosexual, (17.1% and 15.0% respectively). New Zealand European students were least likely to identify as non-heterosexual (4.8%).

Table 4. Ethnicity distribution of students
N = 8911

Ethnicity	Heterosexual		Non-heterosexual	
	N	% Confidence Intervals (95% CI)	N	% Confidence Intervals (95% CI)
Māori	1971	90.6 (89.1, 92.0)	207	9.4 (7.9, 10.8)
Pacific	548	82.9 (79.0, 86.7)	115	17.1 (13.2, 20.9)
Asian	531	85.0 (82.3, 87.7)	93	15.0 (12.3, 17.6)
Other	350	90.9 (87.6, 94.1)	36	9.1 (5.9, 12.3)
NZ European	4816	95.2 (94.4, 95.8)	244	4.8 (4.1, 5.5)

Decile

Deciles are used to determine how much state funding a school will receive. The lower a school's decile is, the more funding they will receive. A school's decile is determined by the number of students that attend the school from low socio-economic communities. Deciles are calculated after each census and based on some of the following factors:

- Household income
- Occupation
- Household crowding
- Educational qualifications
- Income Support

More information about Deciles is available from the Ministry of Education website www.minedu.govt.nz

Table 5 shows that students that attended schools with a decile rating from one to three were the most likely to identify as non-heterosexual (15.5%).

Table 5. Decile grouping distribution
N = 9011

Decile	Heterosexual		Non-heterosexual	
	N	% Confidence Intervals (95% CI)	N	% Confidence Intervals (95% CI)
1 - 3	1083	84.5 (80.8, 88.2)	205	15.5 (11.9, 18.9)
4 - 7	3981	92.7 (91.1, 94.2)	301	7.3 (5.7, 8.8)
8 - 10	3244	94.4 (93.2, 95.4)	197	5.6 (4.6, 6.6)



DEMOGRAPHIC FEATURES OF NON-HETEROSEXUAL STUDENTS

The following findings are the results of analyses of the 701 students who identify as sexually attracted to the same sex, both sexes, neither sex, or as not sure.

Age

Adolescents enter secondary school at Year 9 usually when they are 12 or 13 years old. Students can leave secondary school voluntarily when they turn 16. Therefore data from this survey would be most representative of 14 and 15 year old students.

Table 6 shows that of all the non-heterosexual students, those aged 13 and under were the largest group (28.7%), compared to students aged 14 (23.7%), aged 15 (18.4%), aged 16 (15.8%) and students aged 17 and over (13.4%).

Table 6.
Age distribution of non-heterosexual Students
N=701

Age	Frequency	Percentage
≤ 13	201	28.7
14	166	23.7
15	129	18.4
16	111	15.8
≥ 17	94	13.4

Gender

In the Youth2000 survey more females (55.5%) than males (44.5%) participated, reflecting the gender distribution of the schools sampled. Similarly, as tables 7 and 8 show, there was also more female than male non-heterosexual students.

Table 7.
Age distribution of non-heterosexual female students
N=389

Age	Frequency	Percentage
≤ 13	114	29.3
14	79	20.3
15	75	19.3
16	62	15.9
≥ 17	59	15.2

Table 8.
Age distribution of non-heterosexual male students
N=312

Age	Frequency	Percentage
≤ 13	87	27.9
14	87	27.9
15	54	17.3
16	49	15.7
≥ 17	35	11.2



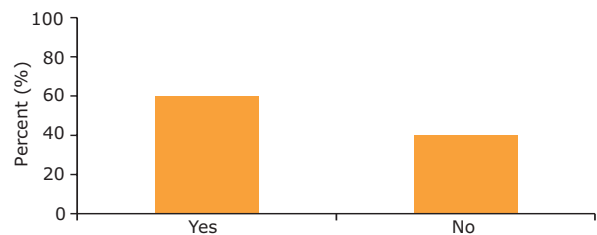
HOME AND FAMILY

Families that provide warmth, nurturing and reasonable boundaries for the adolescent are providing an important protective mechanism for the young person. The higher these factors are and the level of connectedness the adolescent has with the family the more likely the adolescent will develop a healthy sense of self and individuality (McLaren: 2002).

Students were asked questions about their family and their perceptions of themselves within their family.

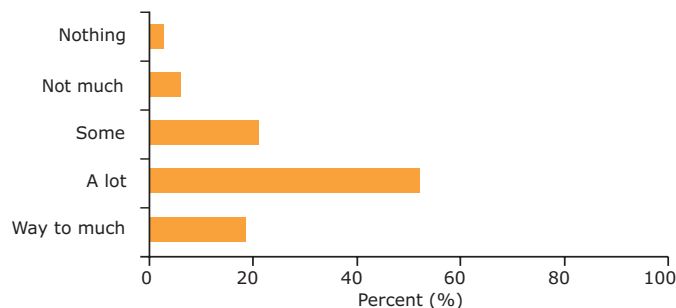
Figure 1 shows that a significant number of students felt they could talk about their problems with anyone in their family (60.0%). The balance of students (40.0%) felt they could not discuss their problems with anyone in their family.

Figure 1. Do you talk about your problems with anyone in your family?



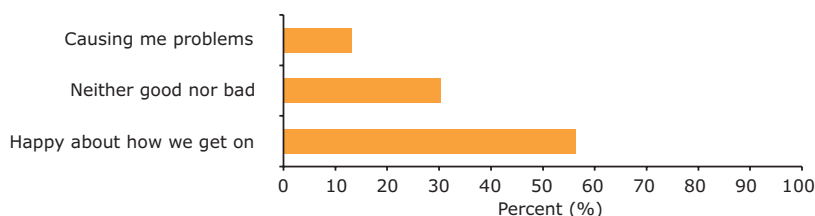
When asked about how much the people in their family expect of them (Figure 2), over half reported that their family expects a lot (52.1%). Those who reported that the family expects something of them (21.0%) were slightly higher than those who thought family expects way too much (18.4%). Fewer students reported not much (5.9%) and nothing (2.6%).

Figure 2. How much do the people in your family expect of you?



When asked about the students' perception of their relationships with their family (Figure 3), over half reported they were happy about how they got on (56.3%). About one third thought their relationship was neither good nor bad (30.4%). Students that thought their relationships with their family were causing them problems were fewer (13.3%).

Figure 3. How do you view your relationships with your family?



Students were asked whether they thought their mother or father, or someone who acts as their mother or father, cares about them. Figure 4 shows that the majority of students thought their parents did care (84.2%) and fewer students thought they did not (15.8%).

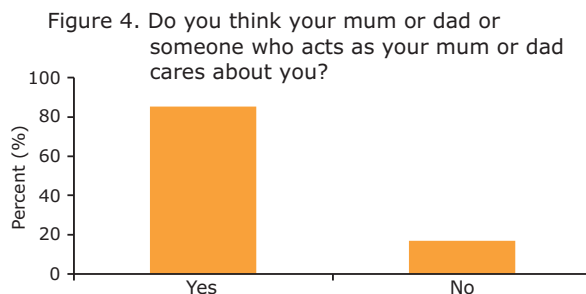


Figure 5 shows that the majority of students thought that on most weeks they get enough time with their mum or dad, or someone who acts as their mum or dad (59.3%). Many of students felt they did not (40.7%).

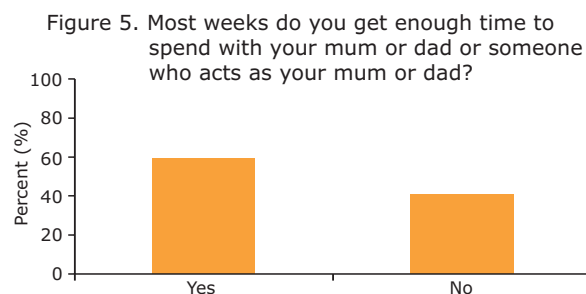
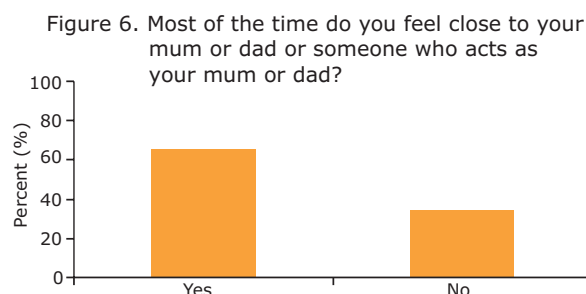


Figure 6 shows that the majority of students felt they were close to their mother or father, or someone who acts as their mother or father (65.3%). Over one third thought they were not close to their mother or father or someone who acts as their mother or father (34.7%).



Students were asked if they were encouraged to have their own ideas or beliefs (Figure 7). Many reported a lot (37.3%) or somewhat (30.3%). Some students reported a little (12.2%) or not at all (9.1%). Fewer students reported that they don't know (9.8%) or does not apply to me (1.3%).

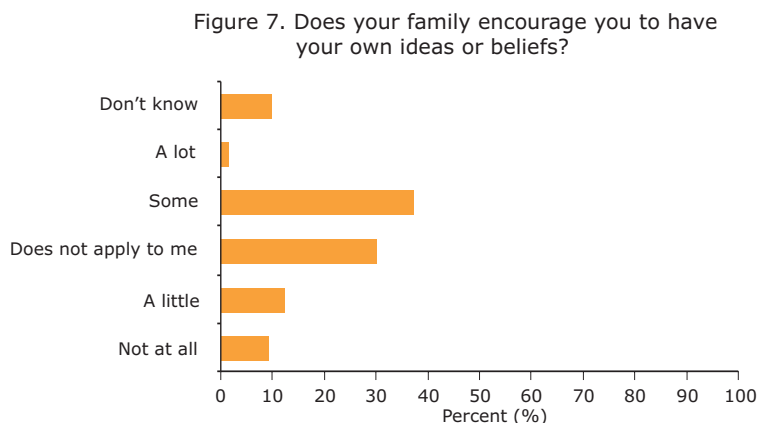
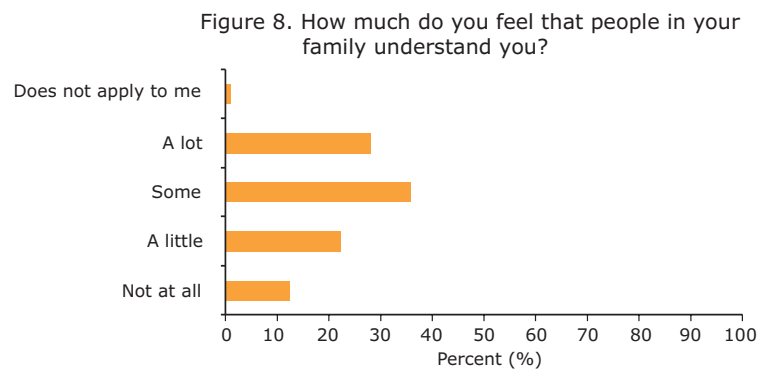


Figure 8 shows that about one quarter (28.1%) of students felt the people in their family understood them a lot. Many students reported that they feel people in their family understand them some (35.9%) and fewer students reported a little (22.4%). Some students reported not at all (12.5%) and does not apply to me (1.1%).



Students were asked if their family wants to know who they are with and where they are (Figure 9). Many students reported always (54.4%) or usually (24.8%). Fewer percentages reported sometimes (13.6%), never (3.9%) or hardly ever (3.3%).

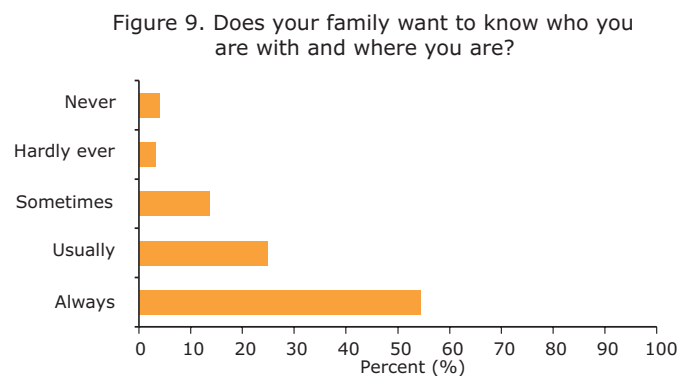
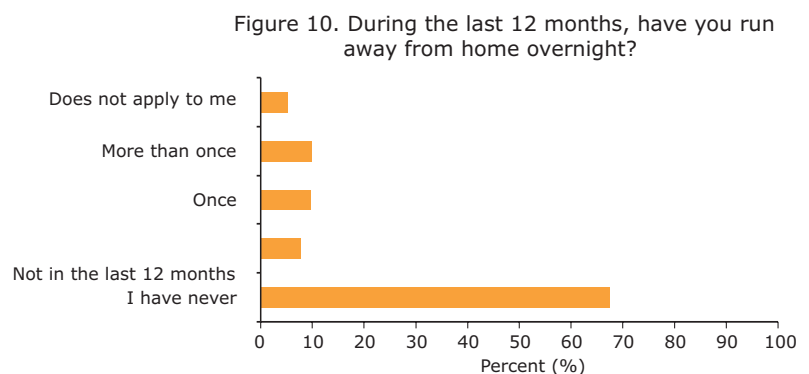
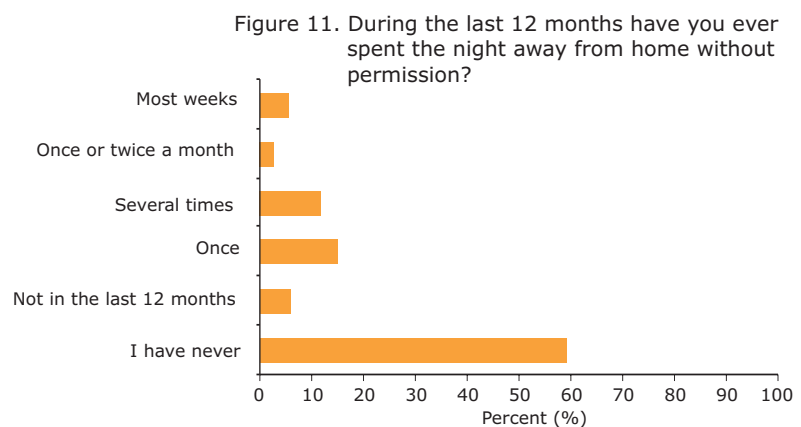


Figure 10 shows that about two thirds (67.4%) of students reported they have never run away from home overnight during the last twelve months. Fewer proportions reported that they have once (9.7%), more than once (9.8%), not in the last 12 months (7.8%) and does not apply to me (5.3%).



Students were asked if they ever spent the night away from home without permission during the last 12 months (Figure 11). Over half of the students (59.2%) reported they never have. Some students had once (14.9%) or several times (11.9%). Fewer proportions reported that they have not in the last 12 months (5.8%) or have most weeks (5.4%) or once or twice a month (2.8%).



SCHOOL

Attendance at school in New Zealand is compulsory from the age six to sixteen; therefore much of the adolescents time is spent in the school environment. Adolescents that feel that their teachers care about them are less likely to be involved in risky behaviour and more likely to have better mental health with more enthusiasm towards learning. Schools are much more than a place to receive an education. It is also where peer relationships are formed and played out, testing and learning social skills and behaviour. Peers and friendships become more significant as the adolescent ages. Being liked and accepted increases the adolescent's sense of wellbeing and the probability that they will remain in school and be successful (McLaren; 2002).

Students were asked about their feelings towards school. The majority (79.5%) of students felt they were part of their school.

Figure 12 shows the majority of students reported that they thought school was OK (41.2%), and some students liked school a lot (24.7%) or liked school a bit (20%). Fewer students reported they disliked school (7.7%) or that they disliked school a lot (6.4%).

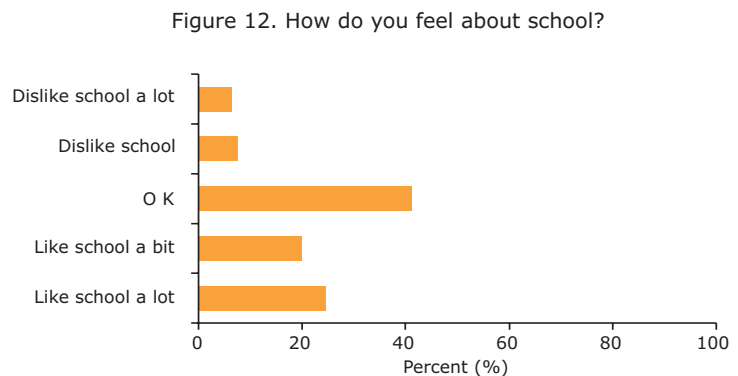


Figure 13, shows that students felt that adults at their school care about them a lot (27.8%) or care about them somewhat (60.3%). About 10% of students felt that adults at school do not care at all.

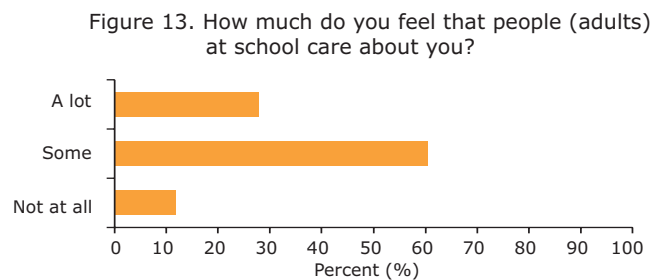


Figure 14 shows many students reported they had more than seven friends at school (74.2%).

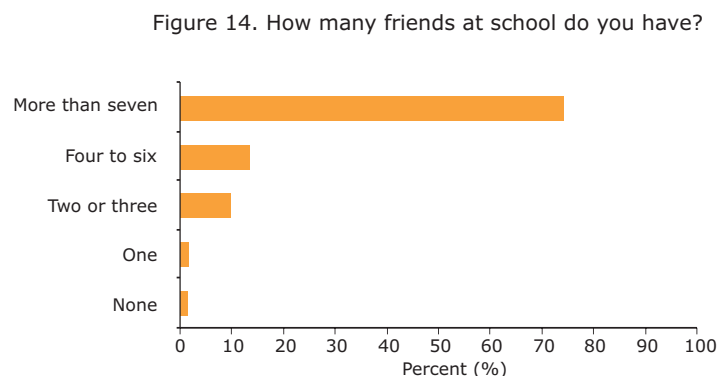
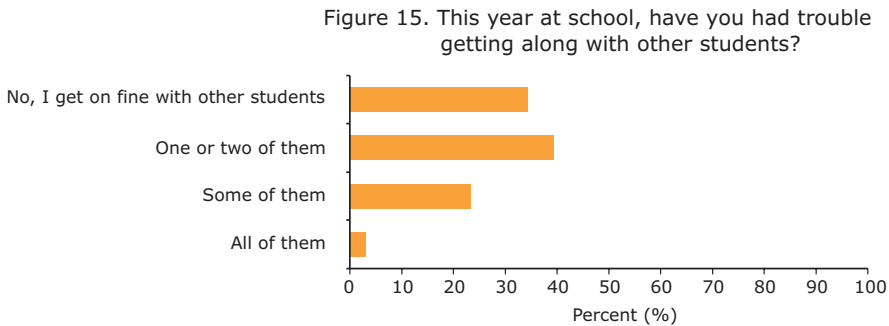
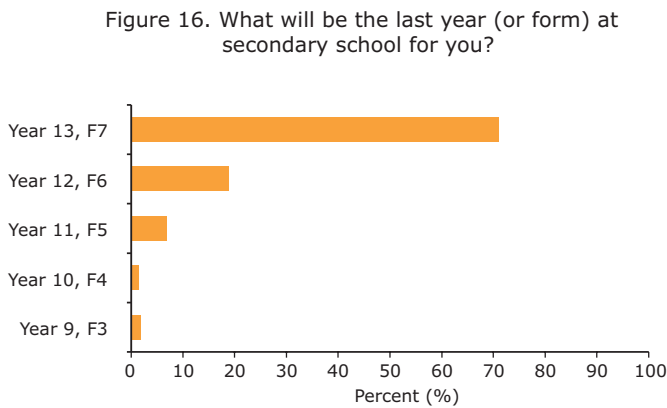


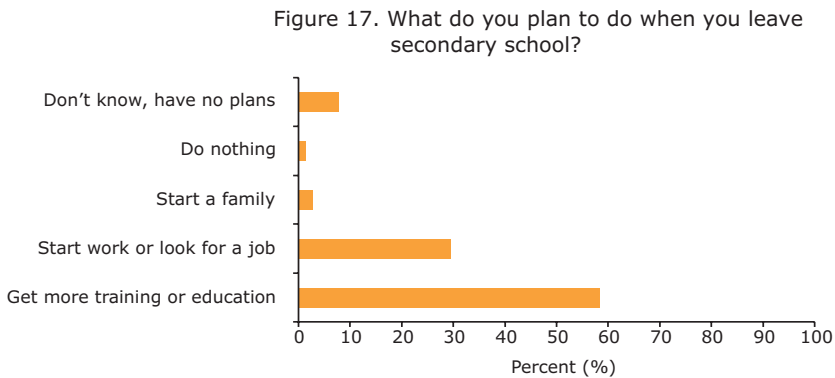
Figure 15 shows about one third (34.3%) of the students reported they got on fine with other students that year. The majority reported they had trouble getting along with one or two other students (39.3%) or trouble with some of them (23.3%). Fewer reported they had trouble with all of the other students (3.1%).



The majority of students (71.0%) reported that Year 13 (Form 7) would be the last year at secondary school (Figure 16).



When asked what they plan to do when they leave secondary school over half (58.5%) the students reported they would get more training or education. Almost one third (29.5%) planned to start work or look for a job (Figure 17).



EMOTIONAL HEALTH

Emotional health refers also to the adolescent's mental health, how they are feeling and how they are coping with being an adolescent in New Zealand. This section on emotional health looks at the internal world of the adolescent.

Students were asked, in general, how they were feeling. Figure 18 shows many students reported they had been feeling up and down (47.1%) and slightly fewer students reported a good mood (46.8%). A small proportion reported they were in a bad mood (6.1%).

Figure 18. In general, how have you been feeling?

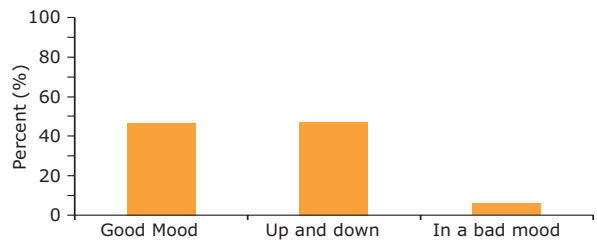
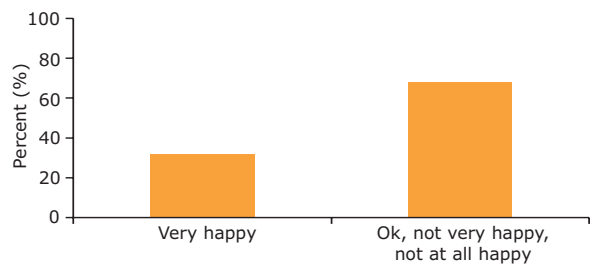


Figure 19 shows how happy or satisfied with life students are. About two thirds of students reported that they were ok, not very happy or not at all happy (68.0%).

Figure 19. How happy or satisfied with life?



The students were asked if they were under strain, stress or pressure. Figure 20 shows the majority (83.9%) reported that they were under some, a little or not at all. Fewer proportions reported that they were under strain, stress or pressure a lot (16.1%).

Figure 20. Are you under strain, stress, or pressure?

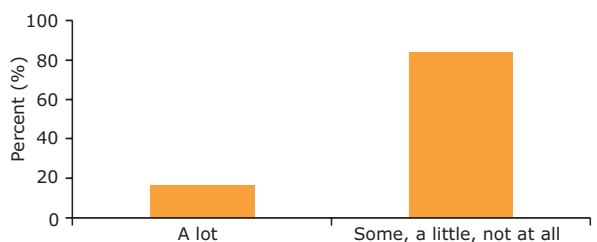
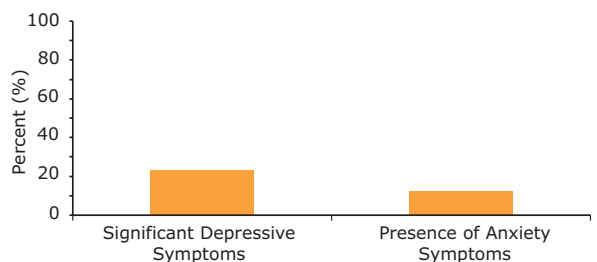


Figure 21 shows almost one quarter (22.9%) of students reported a significant number of depressive symptoms. The presence of mental health disorder symptoms for anxiety was reported by 12.2% of the students.

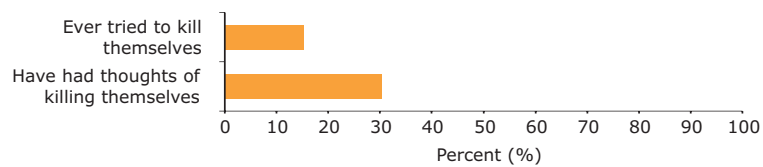
Figure 21. Depressive and anxiety symptoms.



About one third (30.0%) of the students reported it was unlikely or they were unsure of the chances that they would live to the age of 25 years.

Figure 22 shows almost one third of students (30.4%) reported that during the last 12 months, they have thought about killing themselves. During the previous 12 months 15.3% of students reported that they attempted suicide.

Figure 22. Suicidal ideation and attempt



SEXUAL HEALTH

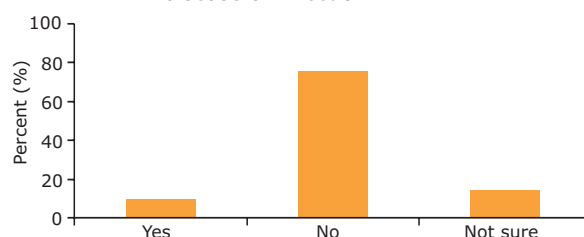
Adolescent sexual health is vast and complex as it includes the interaction of biology and genetics, the individual personality characteristics and the individual's perceptions guided by society and familial values and beliefs (Sieving; 2002). Sexual development, as one of the fundamental changes that adolescents navigate, includes, for many young people, being sexually active. Sexual behaviour can assist a young person to determine what their sexual identity is. Table 9 below shows that of the non heterosexual students 272 (38.4%) reported that they have ever had sex and 168 (24.8%) reported that they are currently sexually active (had sex in the last 3 months).

Table 9. Sexual behaviour of students

	No		Yes	
	N	% Confidence Intervals (95% CI)	N	% Confidence Intervals (95% CI)
Reported ever had sex	431	61.6% (57.3, 66.0)	272	38.4% (34.0, 42.7)
Currently sexually active (in last 3 months)	506	75.2% (71.6, 78.8)	168	24.8% (21.2, 28.4)

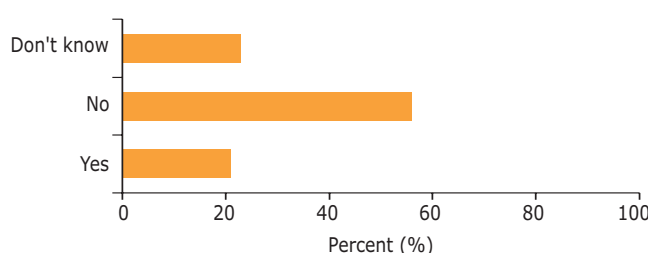
Figure 23 shows of students who reported that they had ever had sex, about three quarters (75.8%) reported they had never had a sexually transmitted disease or infection. Fewer proportions reported they have had a sexually transmitted disease or infection (10.0%) or reported that they were not sure (14.2%).

Figure 23. Have you ever had a sexually transmitted disease or infection?



Students that responded yes to the above question were asked if they told their previous partner/s that they had had a sexually transmitted disease or infection. Over half of the students (60.0%) reported that they did not. Students that did tell their previous partner/s that they had had a sexually transmitted disease or infection (40.0%) were asked if 'they got treatment?'. Figure 24 shows the majority (56.0%) did not get treatment and fewer proportions reported that they did not know (23.0%) if they got treatment.

Figure 24. Did they get treatment?



SUBSTANCE USE

Alcohol and drug use should be viewed within the adolescent developmental perspective with an awareness of risk and protective factors particular to the individual. Adolescents, regardless of their sexual orientation, are likely to experiment with alcohol and/or drugs. On a continuum, adolescent alcohol and drug use ranges from abstinence, experimental, social, problematic, abuse through to dependency. For some adolescents they may use substances because they can and their peers and adults around them use also. For others it will be for a myriad of underlying problems and substance use allows the individual a type of co-existence with the problems. Studies have shown that adolescent gay, lesbian and bisexual youth have higher risk of substance abuse than their peers (Garofalo; 1998) and that stressors that are unique to this group contribute to negative outcomes, including substance abuse (Savin-Williams; 1994). Adolescents whose substance use escalates to problematic, abuse or dependence are likely to affect their general wellbeing, including emotional and physical health and increase the likelihood of risky behaviour (Monti; 2001).

Ever used cigarettes, alcohol, marijuana

Figure 25 shows about half (52.4%) the students reported that they had ever used cigarettes. Over two thirds of students (70.0%) report they had tried alcohol. Fewer students reported they had tried marijuana (40.0%).

Figure 25. Ever used cigarettes, alcohol, marijuana

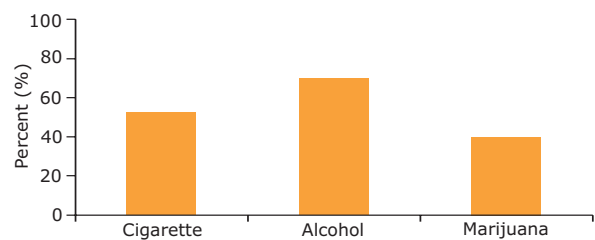
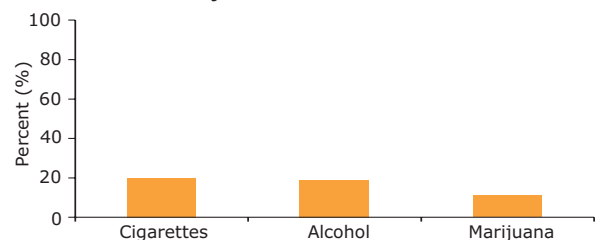


Figure 26. Weekly use of cigarettes, alcohol, marijuana



Weekly use of cigarettes, alcohol, marijuana

Figure 26 shows cigarettes are the highest drug consumed weekly by students (20.0%). Comparable is the weekly use of alcohol (18.9%) and fewer students use marijuana weekly (11.3%).

Binge Drinking

Nearly one third of students (31.5%) report an episode of binge drinking in the last four weeks (drunk 5 or more alcoholic drinks in one session – within 4 hours).

Other drugs

Some students report that they have used other drugs (17.5%).

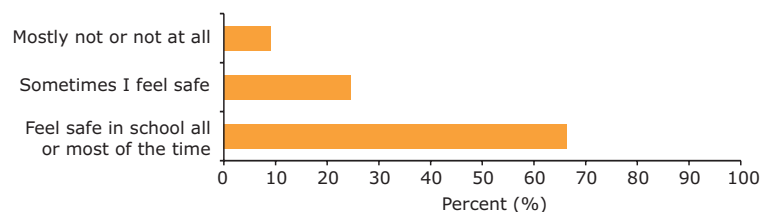


INJURY AND VIOLENCE

Feeling safe in one's environment, be that home, school or the community, is fundamental to healthy youth development. Adolescents that experience victimisation or bullying by peers may have lower self esteem, mental health concerns such as depression and anxiety and possibly lower academic achievement.

Figure 27 shows most students (66.4%) report they feel safe in school all or most of the time. Nearly a quarter of students (24.5%) report they sometimes feel safe and fewer students (9.1%) report that they mostly do not or do not feel safe in school at all.

Figure 27. Do you feel safe at school?



Most students (89.7%) did not miss school because they thought it would be unsafe at school or unsafe on the way to school. Few students report that they had missed school once (5.9%) or more than once (4.4%) because they thought it would be unsafe at school or unsafe on the way to school.

Figure 28 shows about two thirds of students (66.1%) report they have never been bullied at school or not in the past year. Some students (21%) report they had been bullied once or twice in the past year and just over one tenth of the students report that they are bullied at least once a week.

Figure 28. This year how often have you been bullied at school?

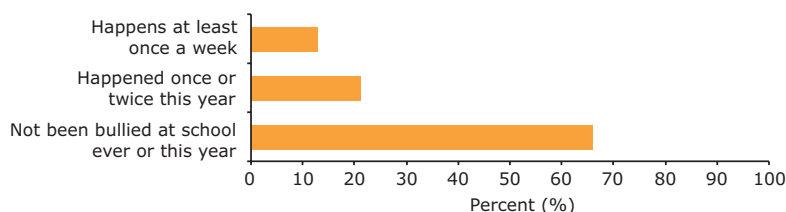


Figure 29 shows that a quarter of students that were bullied in the past year found the bullying really bad/terrible (25.1%). Other students report that the bullying was pretty bad (22.4%), a little bad (32.3%) or that the bullying was not bad (20.2%).

Most students reported they had not missed school over the last month because they were afraid someone might hurt, tease or bully them (85.7%). Over one tenth of students report they had missed school once (7.4%) or more than once (6.9%) over the past month because they were afraid someone might hurt, tease or bully them.

Figure 30 shows about one third of students report they have been touched in a sexual way or made to do sexual things that they didn't want to do (32.3%).

Figure 31 shows almost half the students report that they have been hit or physically harmed by another person on purpose, once or twice or three or more times during the last twelve months (46.4%).

Figure 29. If you were bullied at school this year how was it for you?

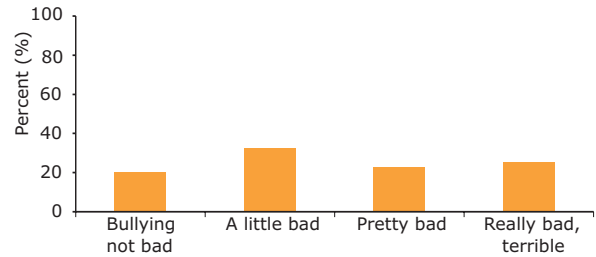


Figure 30. Have you ever been touched in a sexual way or made to do sexual things that you didn't want to do?

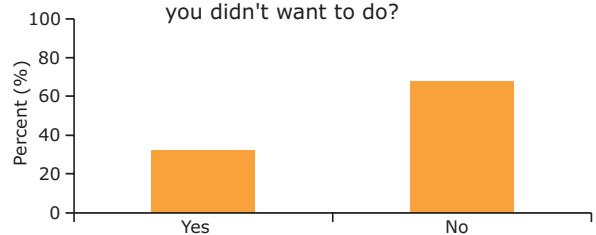
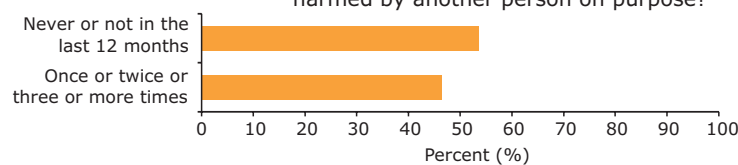


Figure 31. During the last 12 months how many times have you been hit or physically harmed by another person on purpose?



COMMUNITY

The neighbourhood and community has an important influence on adolescents, although it can be difficult to separate community effects from family, school and other environments. It is usually a combination of factors within a community that makes the difference. Mental health issues are recognised to be reduced when an adolescent resides in a neighbourhood that gets on well and has common goals for the collective good (McLaren; 2002). For those adolescents who find it difficult to confide in family members, having good, caring support outside the family can reduce the potential of a negative outcome from stress or risky situations.

Figure 32 shows about three quarters of students report that if they had a serious problem they had a close friend they would feel okay talking to (76.6%).

Figure 32. If you had a serious problem is there a close friend you would feel okay talking to?

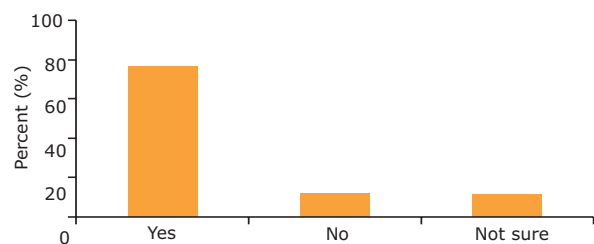


Figure 33 shows almost half the students report that they have never (43.0%) or not in the last twelve months (5.1%) lied to their parents or people responsible for them about where they had been and who they had been with. About one third reported they had lied more than once (30.3%) over the past year.

Figure 33. Have you lied to your parents or people responsible for you about where you had been or whom you were with?

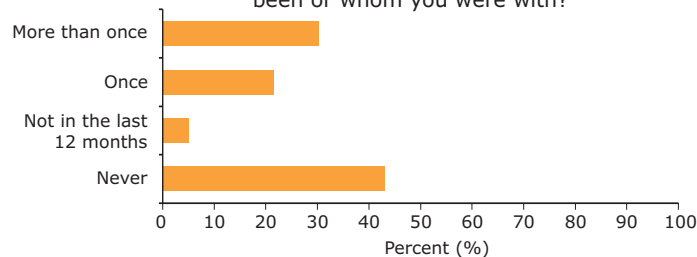


Figure 34 shows about half the students report that if they had a serious problem they would have an adult, who is not in their family, that they would feel okay talking to (54.3%). About one third report they do not (30.7%) and fewer students report that they are not sure (15.0%).

Figure 34. If you were having a serious problem is there an adult (who is not in your family) you would feel okay talking to?

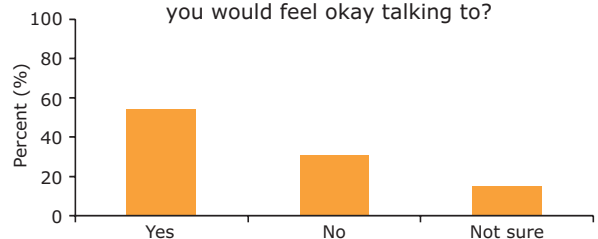
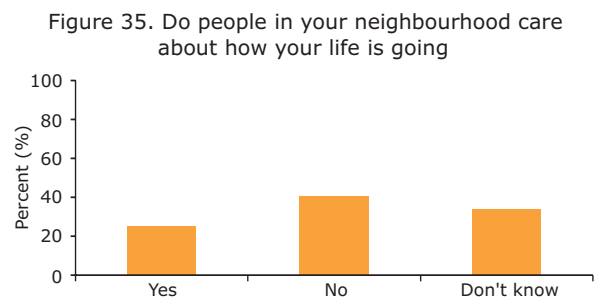


Figure 35 shows one quarter of students report that people in their neighbourhood care about how their life is going (25.1%). Many students report that people in their neighbourhood do not care (40.7%) and about one third did not know (34.2%).



SAME SEX AND BOTH SEXES SEXUAL ATTRACTION

The data analysed previously in this report is based on sexual attraction awareness of non-heterosexual students which included all students who identified as being attracted to the same sex, both sexes, neither sex, and those who weren't sure about their attraction, as per the table below.

Which of the following are you sexually attracted to...?	The opposite sex (e.g. male – female)	The same sex (e.g. male to male or female to female)	Both sexes (e.g. male and female)	Not sure	Neither
Number	8296	68	277	206	150
Percentage	92.2%	0.7%	3.1%	2.3%	1.7%

The following section looks specifically at students (n=345) who reported same sex and both sex attraction and the associations between coming out and selected emotional health and family factors. Of the 345 students most were attracted to both sexes n=277 (80.3%), while some were sexually attracted to the same sex n=68 (19.7%).

**Age and sexuality distribution of same sex and both
sex attracted students**
N = 345

Age	Attracted to the same sex	Attracted to both sexes
	N	N
≤ 13	12	59
14	23	50
15	12	64
16	10	59
≥ 17	11	45



SAME SEX AND BOTH SEXES SEXUAL ATTRACTION AND COMING OUT

Identity integration may or may not include disclosure of sexual identity. Disclosure is often referred to as 'coming out'. There is however a distinction between 'disclosure' and 'coming out'. Disclosure is the act of telling someone else about being gay, lesbian or bisexual. Coming out is a process that occurs over the lifespan, and refers to the individual exploring the definition of what it means to be gay or lesbian, understanding that they are different from peers and involvement with others who are like themselves, usually within gay and lesbian cultures (D'Augelli; 2001). Individuals may elect to not disclose in order to protect themselves and avoid homophobic reactions and stigma (D'Augelli; 2001). Relationships with friends and family can therefore be based in part on fabrications and a creation of a 'false self' occurs (D'Augelli; 2001). The creation of a 'false self' can cause withdrawal, feelings of isolation and mental health problems (Maguen; 2002). Others may try to deny or alter homosexual feelings/behaviour (Garofalo; 2001).

Figure 36 shows about one third of students reported that they were aged 11 or younger when they first became aware of sexual attractions to people of the same sex (35.2%). Some students report that they were 12 or 13 (27.2%) or 14 or 15 (27.4%) and fewer students report that they were 16 or over (10.2%).

Figure 36. Age of first awareness of sexual attractions to people of the same sex?

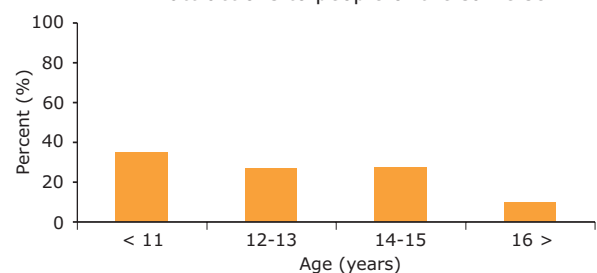
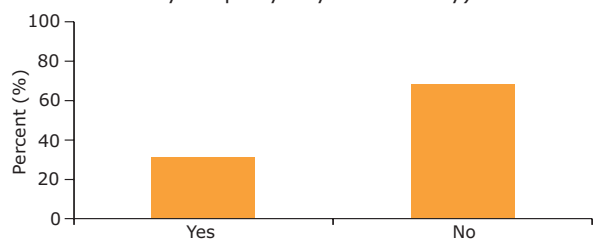


Figure 37 shows the majority of students report they have not come out to people close to them about their sexuality (68.7%). About one third of students reported that they had come out (31.3%).

Figure 37. Have you come out? (told people close to you openly of your sexuality)



Adolescents' relationship with their parents or guardians can tend to be fraught at times as the adolescent transitions into adulthood. Usually this occurs in warm and encouraging environments and parental or guardian support remains constant. For same sex attracted or both sex attracted adolescents, however, the environment and support within the family can diminish should the adolescent decide to reveal their sexual attraction as same or both sex (D'Augelli; 2001). Connection and support may be reduced, ranging from the withdrawal of emotional support to the removal of fundamental living resources such as accommodation, food and money (D'Augelli; 2001).



Students that reported they had come out were asked if they were able to talk to their family about this (Figure 38). Many students reported that they were not able to (61.1%). Almost a quarter of students reported that they did speak to their family and they could easily talk with them (23.3%). Some students reported that yes, they were able to speak with their family, but it was difficult (12.1%). Fewer students report that this question does not apply to them (3.5%).

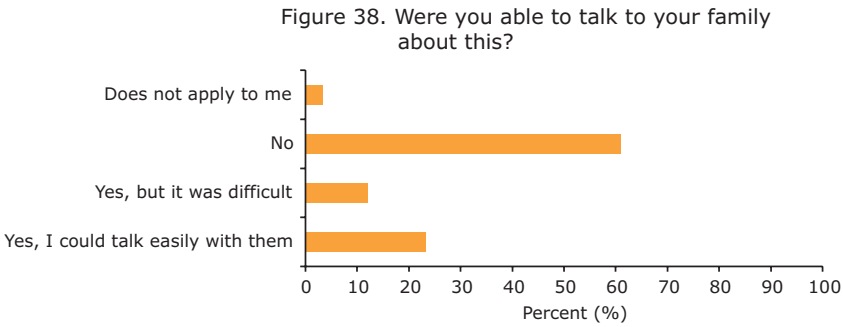
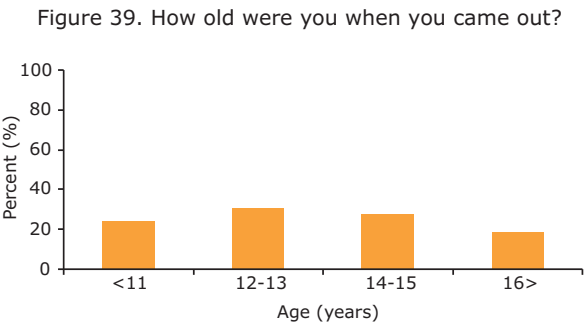


Figure 39 shows that almost one third of students came out when they were aged 12 to 13 years (30.3%). Some students reported they were 14 to 15 years old (27.4%) or 11 years old or younger (23.9%) when they came out. Fewer students report they were 16 years old and over (18.4%).



COMING OUT AND FAMILY RELATIONSHIPS

Figure 40 shows many students report they are happy about how they get on with their family (come out 42.9%, not come out 44.6%). One third of students viewed their relationships with their family as neither good nor bad (come out 31.4%, not come out 36.4%). Some students viewed their relationships with family as causing them problems (come out 25.7%, not come out 19.0%).

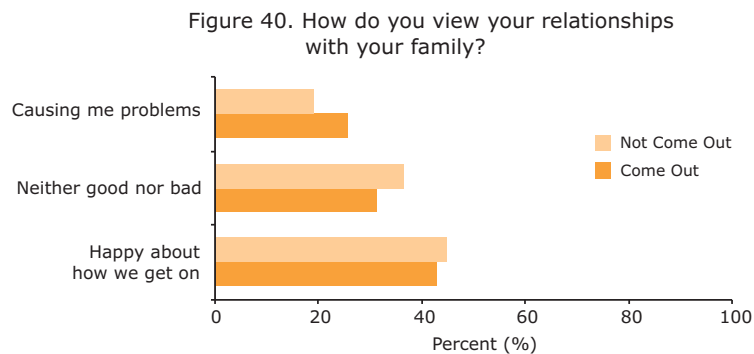
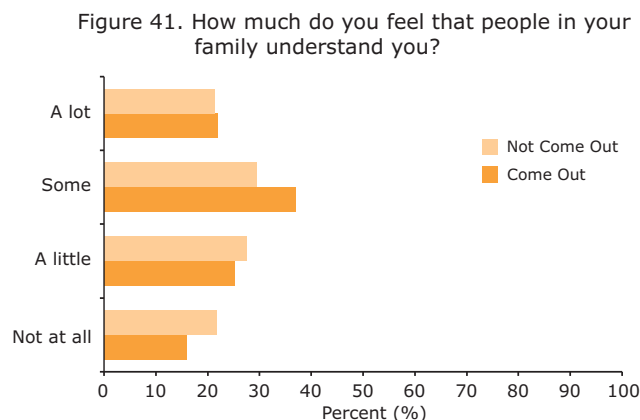


Figure 41 shows many students felt that people in their family understood them somewhat (come out 36.9%, not come out 29.4%). About one quarter of students felt that people in their family understood them a little (come out 25.2%, not come out 27.5%). Some students felt that people in their family understood them a lot (come out 21.9%, not come out 21.3%) while other students felt not at all understood (come out 16.0%, not come out 21.8%).

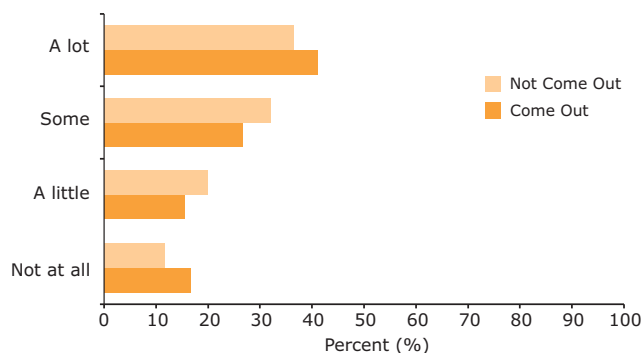


Students who had come out were more likely (come out 63.1%, not come out 48.5%) to report that they could talk about their problems with anyone in their family.

Figure 42 shows many students felt their family cares about their feelings a lot (come out 41.1%, not come out 36.5%). Some students felt their family cares somewhat about their feelings (come out 26.7%, not come out 32.0%). Fewer students report they felt their family cares a little (come out 15.6%, not come out 19.9%) or cares not at all (come out 16.6%, not come out 11.6%).



Figure 42. How much do you feel your family cares about your feelings?



The majority of students reported that they thought their mother or father, or someone who acts as their mother or father cared about them (come out 80.6%, not come out 82.2%)

Over half the students reported they felt close to their mother or father, or someone who acts as their mother or father (come out 59.2%, not come out 56.5%).

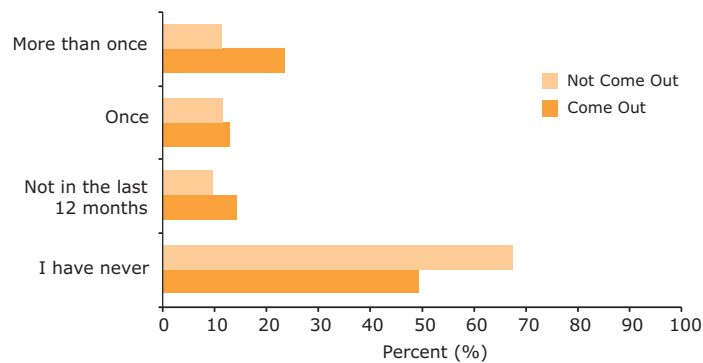
Many students who have not come out reported that most weeks they got enough time to spend with mum or dad, or someone who acts as their mother or father (58.2%). Fewer students that have come out reported they got enough time to spend with mum or dad, or someone who acts as their mother or father (47.1%).

COMING OUT AND RUNNING AWAY

Figure 43 shows the associations between students that have come out, students who have not come out and running away from home overnight during the last twelve months. Students that have come out were significantly more likely (come out 23.5%, not come out 11.3%) to have run away more than once from home overnight during the last twelve months. Students that have not come out (come out 49.3%, not come out 67.5%) were more likely to have never run away from home overnight. Some students report that they had not run away overnight in the last twelve months (come out 14.3%, not come out 9.7%) or that they have run away overnight in the last twelve months once (come out 12.9%, not come out 11.5%).

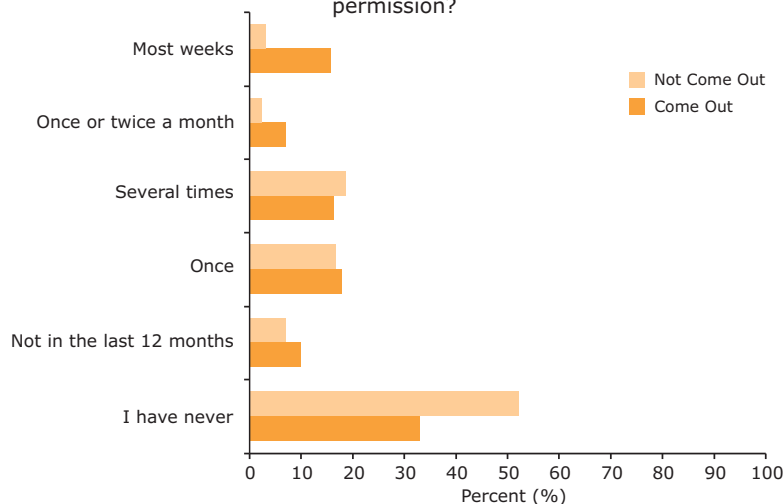
Figure 44 shows students that have not come out (come out 33.1%, not come out 52.1%) were more likely to have never spent the night away from home without permission over the last twelve

Figure 43. During the last 12 months, have you run away from home overnight?



months. Students that have come out (come out 15.7%, not come out 3.2%) were significantly more likely to have spent the night away from home without permission for most weeks over the last twelve month period. Some students reported that they had once (come out 17.9%, not come out 16.7%) or several times (come out 16.4%, not come out 18.6%). Fewer students reported they had not spent the night away without permission over the last twelve months (come out 9.9%, not come out 7.0%) or once or twice a month (come out 7%, not come out 2.4%).

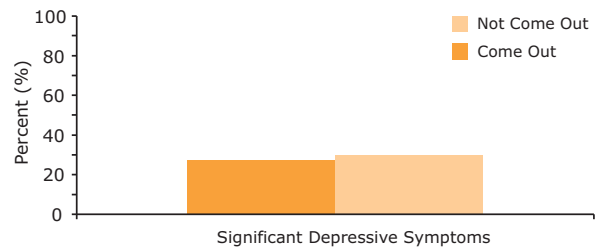
Figure 44. During the last 12 months, have you ever spent the night away from home without permission?



COMING OUT AND DEPRESSION

Many students do not present with significant depressive symptoms regardless of whether they have come out or not (come out 72.5%, not come out 70.2%). However, Figure 45 shows, nearly one third of each of these groups of students are presenting with significant depressive symptoms (come out 27.5%, not come out 29.8%).

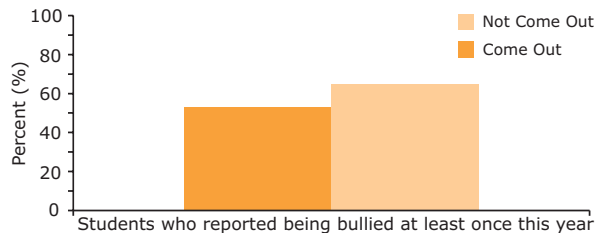
Figure 45.



COMING OUT AND BULLYING

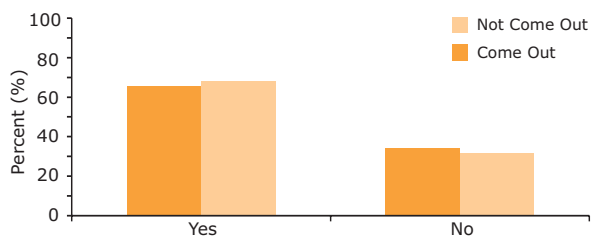
Figure 46 shows that students that have come out are more likely to be bullied than those students who have not come out (come out 53.2%, not come out 65.0%).

Figure 46.



Most students reported they felt safe at school most or all of the time (come out 65.8%, not come out 68.2%). However, Figure 47 shows that about one third of students from each group reported they did not feel safe at school most or all of the time (come out 34.2%, not come out 31.8%).

Figure 47. Students who reported they felt safe at school most or all of the time





APPENDIX



Bold numbers refer to percentages of students, with 95% confidence intervals below

Which of the following are you sexually attracted to...? N= 8997	The opposite sex (e.g. male – female)	The same sex (e.g. male to male or female to female)	Both sexes (e.g. male and female)	Not sure	Neither
Number	8296	68	277	206	150
Percentage	92.2%	0.7%	3.1%	2.3%	1.7%

Sexual attraction of students by age

N = 8997

Age	Heterosexual		Non-heterosexual	
	N	%	N	%
≤ 13	1701	89.4 (87.5, 91.3)	201	10.6 (8.68, 12.5)
14	1976	92.3 (90.8, 93.6)	166	7.7 (6.30, 9.12)
15	1927	93.8 (92.4, 95.2)	129	6.2 (4.75, 7.57)
16	1546	93.2 (91.7, 94.5)	111	6.8 (5.43, 8.24)
≥ 17	1146	92.1 (89.6, 94.6)	94	7.9 (5.39, 10.3)

Gender distribution of students

N=8997

	Heterosexual		Non-heterosexual	
	N	%	N	%
Female	4510	92.1	389	7.9
Male	3786	92.4	312	7.6
Total Female and Male Students	8296	92.2	701	7.8

Ethnicity distribution of students

N = 8911

Ethnicity	Heterosexual		Non-heterosexual	
	N	%	N	%
Māori	1971	90.6 (89.1, 92.0)	207	9.4 (7.9, 10.8)
Pacific	548	82.9 (79.0, 86.7)	115	17.1 (13.2, 20.9)
Asian	531	85.0 (82.3, 87.7)	93	15.0 (12.3, 17.6)
Other	350	90.9 (87.6, 94.1)	36	9.1 (5.9, 12.3)
NZ European	4816	95.2 (94.4, 95.8)	244	4.8 (4.1, 5.5)



Decile grouping distribution

N = 9011

Decile	Heterosexual		Non-heterosexual	
	N	%	N	%
1 - 3	1083	84.5 (80.8, 88.2)	205	15.5 (11.9, 18.9)
4 - 7	3981	92.7 (91.1, 94.2)	301	7.3 (5.7, 8.8)
8 - 10	3244	94.4 (93.2, 95.4)	197	5.6 (4.6, 6.6)

Age distribution of non-heterosexual students

N=701

Age	Frequency	Percentage
≤ 13	201	28.7
14	166	23.7
15	129	18.4
16	111	15.8
≥ 17	94	13.4

Age distribution of non-heterosexual female students

N=389

Age	Frequency	Percentage
≤ 13	114	29.3
14	79	20.3
15	75	19.3
16	62	15.9
≥ 17	59	15.2

Age distribution of non-heterosexual male students

N=312

Age	Frequency	Percentage
≤ 13	87	27.9
14	87	27.9
15	54	17.3
16	49	15.7
≥ 17	35	11.2

NON-HETEROSEXUAL YOUTH

Home and Family

Do you talk about your problems with anyone in your family?

(N=682)

Yes	No
60.0 (56.5, 63.5)	40.0 (36.4, 43.4)

Most of the time do you think your mum or dad or someone who acts as your mum or dad cares about you?

(N = 690)

Yes	No
84.2 (81.6, 86.7)	15.8 (13.2, 18.3)

How much do the people in your family expect of you?

(N = 686)

Way too much	18.4 (15.7, 21.0)
A lot	52.1 (48.1, 56.0)
Some	21.0 (17.0, 24.8)
Not much	5.9 (3.9, 7.9)
Nothing	2.6 (1.1, 3.9)

Most weeks do you get enough time to spend with your mum or dad or someone who acts as your mum or dad?

(N = 681)

Yes	No
59.3 (55.3, 63.1)	40.7 (36.8, 44.6)

How do you view your relationships with your family?

(N = 676)

Happy about how we get on	56.3 (52.4, 60.1)
Neither good nor bad	30.4 (26.7, 34.0)
Causing me problems	13.3 (10.3, 16.2)

Most of the time do you feel close to your mum or dad or someone who acts as your mum or dad?

(N = 689)

Yes	No
65.3 (61.3, 69.2)	34.7 (30.7, 38.6)



Bold numbers refer to percentages of students, with 95% confidence intervals below

Does your family encourage you to have your own ideas or beliefs?
(N = 687)

Not at all	9.1 (7.0, 11.1)
A little	12.2 (9.6, 14.6)
Some	30.3 (26.5, 34.0)
A lot	37.3 (32.9, 41.6)
Does not apply to me	1.3 (0.5, 2.0)
Don't know	9.8 (7.7, 11.9)

During the last 12 months, have you run away from home overnight?
(N = 684)

I have never	67.4 (64.1, 70.5)
Not in the last 12 months	7.8 (5.5, 10.1)
Once	9.7 (7.4, 11.8)
More than once	9.8 (7.4, 12.0)
Does not apply to me	5.3 (3.5, 7.0)

How much do you feel that people in your family understand you?
(N = 691)

Not at all	12.5 (10.0, 14.9)
A little	22.4 (18.5, 26.1)
Some	35.9 (32.5, 39.3)
A lot	28.1 (24.2, 31.9)
Does not apply to me	1.1 (0.3, 1.7)

During the last 12 months, have you ever spent the night away from home without permission?
(N = 684)

I have never	59.2 (54.6, 63.7)
Not in the last 12 months	5.8 (3.8, 7.8)
Once	14.9 (11.7, 18.0)
Several times	11.9 (9.5, 14.2)
Once or twice a month	2.8 (1.5, 3.9)
Most weeks	5.4 (3.8, 6.8)

Does your family want to know who you are with and where you are?
(N = 695)

Always	54.4 (49.5, 59.3)
Usually	24.8 (20.5, 28.9)
Sometimes	13.6 (11.0, 16.1)
Hardly ever	3.3 (1.8, 4.7)
Never	3.9 (2.4, 5.3)

School

How do you feel about school?
(N = 682)

Like school a lot	24.7 (19.6, 29.6)
Like school a bit	20.0 (16.8, 23.2)
O K	41.2 (37.7, 44.7)
Dislike school	7.7 (5.7, 9.5)
Dislike school a lot	6.4 (4.1, 8.6)

How much do you feel that people (adults) at school care about you?
(N = 673)

Not at all	11.9 (9.0, 14.7)
Some	60.3 (55.9, 64.7)
A lot	27.8 (23.5, 32.0)

This year at school, do you feel like you are part of your school?
(N = 676)

Yes	No
79.5 (75.9, 82.9)	20.5 (17.0, 24.0)

How many friends at school do you have?
(N = 680)

None	1.3 (0.4, 2.1)
One	1.6 (0.6, 2.4)
Two or three	9.6 (7.3, 11.8)
Four to six	13.3 (10.1, 16.3)
More than seven	74.2 (70.4, 78.0)



This year at school, have you had trouble getting along with other students?
(N = 677)

All of them	3.1 (1.7, 4.4)
Some of them	23.3 (20.0, 26.6)
One or two of them	39.3 (34.5, 44.0)
No, I get on fine with other students	34.3 (29.1, 39.4)

What do you plan to do when you leave secondary school?
(N = 667)

Get more training or education	58.5 (53.5, 63.4)
Start work or look for a job	29.5 (25.1, 34.0)
Start a family	2.9 (1.6, 4.2)
Do nothing	1.3 (0.3, 2.2)
Don't know, have no plans	7.8 (5.6, 9.7)

What do you think will be the last year (or form) at secondary school for you?
(N = 673)

Year 9, F3	1.9 (0.9, 2.8)
Year 10, F4	1.5 (0.4, 2.4)
Year 11, F5	6.8 (5.0, 8.6)
Year 12, F6	18.8 (14.9, 22.7)
Year 13, F7	71.0 (66.6, 75.1)

Emotional Health

In general, how have you been feeling?
(N = 691)

Good Mood	46.8 (42.2, 51.2)
Up and down	47.1 (42.3, 51.9)
In a bad mood	6.1 (4.1, 8.0)

Presence of other mental health disorder symptoms - Anxiety
(N = 629)

Above cut off	12.2 (9.3, 14.9)
Below cut off	87.8 (85.0, 90.6)

How happy or satisfied with life?
(N = 694)

Very happy	32.0 (27.9, 36.0)
OK, not very happy, not at all happy	68.0 (63.9, 72.0)

What do you think the chances are that you will live to the age of 25 years?
(N = 687)

High or very high	70.0 (65.0, 75.0)
Unlikely or unsure	30.0 (25.0, 35.0)

Are you under strain, stress, or pressure?
(N = 678)

A lot	16.1 (13.4, 18.6)
Some, a little, not at all	83.9 (81.3, 86.5)

During the last 12 months have you thought about killing yourself?
(N = 690)

Yes	30.4 (26.5, 34.1)
No	69.6 (65.8, 73.4)

Students with significant number of depressive symptoms (RADS)
(N = 674)

Above cut off	22.9 (20.0, 25.8)
Below cut off	77.1 (74.1, 79.9)

During the past 12 months, have you ever tried to kill yourself?
(N = 695)

Yes	15.3 (12.3, 18.2)
No	84.7 (81.7, 87.6)



Bold numbers refer to percentages of students, with 95% confidence intervals below

Sexual Health

Have you ever had a sexually transmitted disease or infection?
(N = 271)

Yes	10.0 (6.8, 13.1)
No	75.8 (70.5, 81.0)
Not sure	14.2 (10.1, 18.2)

Did you tell your previous partner/s that you had had a sexually transmitted disease or infection?
(N=28)

Yes	40.0 (20.3, 59.4)
No	60.0 (40.5, 79.6)

Did they get treatment?
(N= 28)

Yes	21.0 (4.4, 37.5)
No	56.0 (35.5, 76.5)
Don't know	23.0 (4.7, 41.2)

Sexual behaviour of students

	No		Yes	
	N	%	N	%
Reported ever had sex	431	61.6 (57.3, 66.0)	272	38.4 (34.0, 42.7)
Currently sexually active (in last 3 months)	506	75.2 (71.6, 78.8)	168	24.8 (21.2, 28.4)

Substance Use

Cigarettes

Ever smoked a cigarette
(N = 608)

Yes	52.4 (47.6, 57.1)
No	47.6 (42.8, 52.3)

Weekly cigarette smoking
(N = 608)

Yes	20.0 (16.6, 23.4)
No	80.0 (76.5, 83.3)

Daily cigarette smoking
(N = 607)

Yes	13.4 (10.6, 16.1)
No	86.6 (83.8, 89.3)

Alcohol

Ever drunk Alcohol
(N = 619)

Yes	70.0 (64.5, 75.3)
No	30.0 (24.6, 35.4)

Weekly Alcohol use
(N = 616)

Yes	18.9 (15.2, 22.4)
No	81.1 (77.5, 84.7)

Binge drinking in last four weeks
(N = 600)

Yes	31.5 (26.7, 36.2)
No	68.5 (63.7, 73.2)



Marijuana

Ever used Marijuana
(N = 585)

Yes	40.0 (34.3, 45.4)
No	60.0 (54.5, 65.6)

Weekly Marijuana use
(N = 584)

Yes	11.3 (8.3, 14.2)
No	88.7 (85.7, 91.6)

Other Drugs

Ever use of other drugs
(N = 553)

Yes	17.5 (14.2, 20.8)
No	82.5 (79.1, 85.7)

Injury and Violence

Do you feel safe at school?
(N = 680)

Feel safe in school all or most of the time	66.4 (62.1, 70.7)
Sometimes I feel safe	24.5 (21.0, 27.8)
Mostly not or not at all	9.1 (6.6, 11.4)

During the past month how many days did you not go to school because you felt you would be unsafe at school, or on your way to or from school?
(N = 668)

Not missed school	89.7 (87.5, 91.8)
Missed one	5.9 (4.0, 7.7)
More than once	4.4 (2.9, 5.8)

This year how often have you been bullied at school?
(N = 660)

Not been bullied at school ever or this year	66.1 (60.9, 71.3)
Happened once or twice this year	21.0 (17.0, 25.1)
Happens at least once a week	12.9 (9.3, 16.2)

If you were bullied at school this year how was it for you?
(N = 227)

Bullying not bad	20.2 (14.9, 25.3)
A little bad	32.3 (26.0, 38.6)
Pretty bad	22.4 (16.7, 27.9)
Really bad, terrible	25.1 (18.5, 31.6)

In the last month how many times have you not gone to school because you were afraid someone might hurt, tease or bully you?
(N = 225)

Not missed at all or in last month	85.7 (81.3, 90.0)
Once	7.4 (3.9, 10.8)
More than once	6.9 (3.5, 10.2)

Have you ever been touched in a sexual way or made to do sexual things that you didn't want to do?
(N = 617)

Yes	32.3 (28.9, 35.6)
No	67.7 (64.3, 71.0)

During the last 12 months how many times have you been hit or physically harmed by another person on purpose?
(N = 677)

Once or twice or three or more times	46.4 (42.2, 50.4)
Never or not in the last 12 months	53.6 (49.5, 57.7)



Bold numbers refer to percentages of students, with 95% confidence intervals below

Community

If you had a serious problem is there a close friend you would feel okay talking to?
(N = 632)

Yes	76.6 (73.1, 80.1)
No	11.9 (8.8, 14.9)
Not sure	11.5 (8.6, 14.2)

If you were having a serious problem is there an adult (who is not in your family) you would feel okay talking to?
(N = 609)

Yes	54.3 (49.8, 58.7)
No	30.7 (26.4, 34.9)
Not sure	15.0 (11.9, 17.9)

Have you lied to your parents or people responsible for you about where you had been or whom you were with?
(N = 617)

Never	43.0 (38.6, 47.4)
Not in the last 12 months	5.1 (3.4, 6.7)
Once	21.6 (17.6, 25.6)
More than once	30.3 (26.4, 34.0)

Do people in your neighbourhood care about how your life is going?
(N = 613)

Yes	25.1 (21.7, 28.4)
No	40.7 (36.4, 44.9)
Don't know	34.2 (30.2, 38.1)

Same sex sexual attraction and coming out

How old were you when you became first aware of sexual attractions to people of the same sex?
(N = 307)

Age	N	%
≤ 11	108	35.2 (29.9, 40.3)
12-13	85	27.2 (21.8, 32.5)
14-15	82	27.4 (22.6, 32.1)
≥ 16	32	10.2 (6.5, 13.8)

How old were you when you came out?
(N = 94)

Age (years)	N	%
≤ 11	22	23.9 (13.9, 33.8)
12-13	29	30.3 (19.6, 41.0)
14-15	26	27.4 (16.6, 38.0)
≥ 16	17	18.4 (9.6, 27.1)

Have you come out?
(N = 345)

	N	%
Yes	109	31.3 (26.5, 36.0)
No	236	68.7 (63.9, 73.4)

How do you view your relationships with your family?
(N=339)

	Those who have come out		Those who have not come out	
	N	%	N	%
Happy about how we get on	48	42.9 (33.3, 52.4)	103	44.6 (38.4, 50.8)
Neither good nor bad	34	31.4 (21.4, 41.3)	82	36.4 (29.6, 43.1)
Causing me problems	27	25.7 (17.3, 33.9)	45	19.0 (13.6, 24.2)

Were you able to talk to your family about this?
(N = 105)

	N	%
Yes, I could talk easily with them	25	23.3 (15.5, 31.1)
Yes, but it was difficult	13	12.1 (05.4, 18.6)
No	64	61.1 (51.4, 70.6)
Does not apply to me	3	3.5 (0, 7.7)

How much do you feel that people in your family understand you?
(N = 337)

	Those who have come out		Those who have not come out	
	N	%	N	%
Not at all	17	16.0 (9.0, 23.0)	50	21.8 (17.0, 26.5)
A little	26	25.2 (15.6, 34.7)	65	27.5 (21.9, 33.1)
Some	40	36.9 (27.0, 46.6)	68	29.4 (22.8, 35.8)
A lot	23	21.9 (13.4, 30.3)	48	21.3 (15.9, 26.5)



Do you talk about your problems with anyone in your family? (N = 336)	Those who have come out		Those who have not come out	
	N	%	N	%
Yes	69	63.1 (54.5, 71.6)	112	48.5 (42.4, 54.6)
No	38	36.9 (28.3, 45.4)	117	51.5 (45.3, 57.5)

How much do you feel your family cares about your feelings? (N = 336)	Those who have come out		Those who have not come out	
	N	%	N	%
Not at all	17	16.6 (7.7, 25.5)	28	11.6 (7.3, 15.9)
A Little	17	15.6 (9.1, 22.0)	45	19.9 (14.5, 25.1)
Some	28	26.7 (17.5, 35.8)	74	32.0 (25.1, 38.8)
A lot	43	41.1 (31.1, 50.9)	84	36.5 (29.3, 43.6)

How much do you think your mum or dad or someone who acts as your mum or dad cares about you? (N = 343)	Those who have come out		Those who have not come out	
	N	%	N	%
Yes	89	80.6 (73.0, 88.1)	192	82.2 (77.2, 87.1)
No	20	19.4 (11.8, 26.9)	42	17.8 (12.8, 22.7)

Most of the time you feel close to your mum or dad or someone who acts as your mum or dad? (N = 342)	Those who have come out		Those who have not come out	
	N	%	N	%
Yes	65	59.2 (49.2, 69.1)	132	56.5 (50.8, 62.2)
No	44	40.8 (30.8, 50.7)	101	43.5 (37.7, 49.1)

Most weeks you get enough time to spend with your mum or dad or someone who acts as your mum or dad? (N = 338)	Those who have come out		Those who have not come out	
	N	%	N	%
Yes	51	47.1 (38.9, 55.2)	134	58.2 (50.7, 65.6)
No	57	52.9 (44.7, 61.1)	96	41.8 (34.3, 49.2)



Bold numbers refer to percentages of students, with 95% confidence intervals below

During the last 12 months, have you run away from home overnight? (N=323)	Those who have come out		Those who have not come out	
	N	%	N	%
I have never	51	49.3 (41.0, 57.5)	146	67.5 (61.1, 73.8)
Not in the last 12 months	15	14.3 (7.0, 21.6)	22	9.7 (5.5, 13.8)
Once	14	12.9 (5.3, 20.4)	26	11.5 (7.5, 15.4)
More than once	24	23.5 (15.3, 31.5)	25	11.3 (6.9, 15.5)

During the last 12 months, have you ever spent the night away from home without permission? (N=340)	Those who have come out		Those who have not come out	
	N	%	N	%
I have never	37	33.1 (23.4, 42.7)	120	52.1 (45.0, 59.1)
Not in the last 12 months	10	9.9 (4.4, 15.4)	16	7.0 (3.1, 10.7)
Once	20	17.9 (10.0, 25.6)	39	16.7 (11.0, 22.3)
Several times	17	16.4 (10.2, 22.4)	44	18.6 (13.7, 23.4)
Once or twice a month	7	7.0 (2.1, 11.9)	6	2.4 (0.5, 4.2)
Most weeks	16	15.7 (8.0, 23.4)	8	3.2 (1.0, 5.3)

Students with significant number of depressive symptoms (RADS) (N = 336)	Those who have come out		Those who have not come out	
	N	%	N	%
Above cut off	28	27.5 (18.9, 36.0)	70	29.8 (23.9, 35.7)
Below cut off	75	72.5 (63.9, 81.0)	163	70.2 (64.2, 76.0)

Students who reported being bullied at least once this year (N = 321)	Those who have come out		Those who have not come out	
	N	%	N	%
Yes	51	53.2 (44.1, 62.2)	147	65.0 (58.0, 72.0)
No	44	46.8 (37.7, 55.8)	79	35.0 (27.9, 41.9)

Students who reported they felt safe at school most or all of the time (N = 329)	Those who have come out		Those who have not come out	
	N	%	N	%
Yes	64	65.8 (56.4, 75.1)	159	68.2 (61.5, 74.9)
No	34	34.2 (24.8, 43.5)	72	31.8 (25.1, 38.4)



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