



Sexual Trauma in Sexual and Gender Minorities

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INTRODUCTION

People belonging to sexual and gender minorities (SGM) face a lot of difficulties and discrimination. One of the serious issues that they face is sexual trauma. It is an extremely unfortunate truth that sexual trauma and violence have been part of human lives ever since their existence. Communities across the world have been dealing with violence and crimes of a sexual nature, and to date, there is no respite. When it comes to people belonging to SGM, the problem is even severe.

The prevalence rates of sexual crimes vary across regions. In the United States, almost one in five women experience rape in their lifetime.¹ Rape is the most severe form of sexual violence. The prevalence of other forms of sexual violence and crimes is as high as 44%.¹ Among SGM, the prevalence of sexual crimes varies from 16 to 85% across individual studies.² The high variability in prevalence rates is attributable to differences in methods used in studies. There are differences in the methods of sample recruitment and the method/definition of sexual crimes (single-item questions vs. detailed descriptions). Even then, the significantly high burden of problems among SGM is apparent even to unaided eyes.

There are some risk factors that are common among heterosexual/cisgender and SGM people. These include a history of childhood sexual abuse, hazardous alcohol use and sexual risk behaviors.³ People belonging to SGM face the additional burden of 'minority stress'.³ Under the largely prevalent heteronormative culture, SGM individuals face significant discrimination in all aspects of life and carrying along is not at all easy. Drugs, alcohol and sex are used to cope with the stress. These means might help to deal with the problem for a short while, but ultimately, they only compound the difficulties faced by SGM people.

The mental health issues arising from traumatic experiences are bothersome. Any person suffering from sexual violence is at high risk for the development of post-traumatic stress disorder, depression, suicidal ideations, alcohol and drug abuse and other negative mental health consequences. There are negative consequences on physical health too, in the form of binge eating, obesity and

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hypertension.⁴ What is more difficult in the case of SGM is their limited access to help. Specialized services are limited, even in developing countries, and are nearly nonexistent in many developing countries. Research on protective factors or on factors promoting resilience among victims of sexual trauma in SGM individuals is very limited. It is believed that 'a high sense of belonging' could be helpful and may protect individuals against negative mental health consequences.⁵

Only a little is known about the problem of sexual trauma among SGM. The larger picture has still not been revealed. Review papers on this topic have attempted to identify the gaps in research on this subject.^{6,7} First is the lack of proper identification of sexual and gender groups. Most studies have relied on self-reporting or asked participants to choose one option among the given options. The full spectrum has often not been covered. Assessment or measurement of sexual trauma experience is also variable. The majority of studies have used single-item questions or a small set of options. Not many have undergone a detailed assessment or used a validated questionnaire. Thus, the quality of assessment has been subpar in many of the published studies. Other major problems with the studies are small sample size and cross-sectional study design. Without a large, representative sample covering the diverse spectrum of SGM, observed over a reasonable period, it shall not be possible to understand the problem in its totality.^{6,7}

It could be concluded that the problem of sexual trauma and violence among SGM is huge. Existing research has limitations, and so is the available respite. There is a clear need to explore more with inclusive participation in research and develop tailored interventions for the SGM victims.

REFERENCES

1. Black M, Basile K, Breiding M, Smith S, Walters M, Merrick M, et al. The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.; 2011.
2. Rothman EF, Exner D, Baughman AL. The prevalence of sexual assault against people who identify as gay, lesbian, or bisexual in the United States: a systematic review. *Trauma Violence Abuse* 2011;12:55-66.
3. Blayney JA, Jaffe AE, Hequembourg AL, Parrott DJ. Sexual Victimization Among Sexual and Gender Minoritized Groups: Recent Research and Future Directions. *Curr Psychiatry Rep* 2023;25:183-91.
4. Caceres BA, Wardecker BM, Anderson J, Hughes TL. Revictimization Is Associated With Higher Cardiometabolic Risk in Sexual Minority Women. *Womens Health Issues* 2021;31:341-52.
5. Backhaus I, Lipson SK, Fisher LB, Kawachi I, Pedrelli P. Sexual assault, sense of belonging, depression and suicidality among LGBQ and heterosexual college students. *J Am Coll Health* 2021;69:404-12.
6. Blondeel K, de Vasconcelos S, García-Moreno C, Stephenson R, Temmerman M, Toskin I. Violence motivated by perception of sexual orientation and gender identity: a systematic review. *Bull World Health Organ* 2018;96:29-41l.
7. Yerke A, DeFeo J. Redefining Intimate Partner Violence Beyond the Binary to Include Transgender People. *Journal of Family Violence* 2016;31:975-9.