On November 25, 2020, the Sexual & Gender Minority Research Office (SGMRO) at the National Institutes of Health (NIH), published a Request for Information to provide the public an opportunity to provide comments on research opportunities related to the NIH Scientific Workshop on Violence and Related Health Outcomes in Sexual and Gender Minority (SGM) Communities. Fifteen stakeholders shared comments, which are summarized below:

**Romantic and sexual partner violence, including teen dating violence, intimate partner violence, and sexual violence**

**Intimate Partner Violence**

- Consider impact of IPV on attitudes and access to cervical cancer screening and HPV testing among transgender men. Does this differ by age, educational level, geography or other socio-demographic factors?
- Identify trauma informed practices for transgender men at risk for IPV to increase cervical cancer screening and HPV testing in community settings of care.
- Prioritize development and validation of measures that more accurately assess violence as experienced by SGM communities. Currently existing measures, such as the IPV-GBM scale, need to be expanded to be inclusive of more SGM populations and extended to other forms of violence experienced by SGMs.
- Consider IPV experienced by SGMs that are not experienced by heterosexuals (i.e. minority stress) from the perpetrator perspective to understand antecedents of violence (i.e. internalized homophobia).

**Sexual Violence**

- Examine the role of sex trafficking on violence among SGMs. SGM minority youth are at elevated risk for being victims of sex trafficking, in part due to elevated rates of homelessness.
- Consider how sexual violence committed by a non-partner perpetrator would fit within the current framework. This is important as sexual violence against SGMs specifically related to their SGM status does occur (e.g., sexual assault of transgender individuals involved in sex work).

**Community violence, including gender-based violence, hate crimes, workplace violence, neighborhood violence, and police violence**

**Community Violence**

- Reevaluate placement of gender-based violence and hate crimes under "community violence" when all violence perpetrated against individuals related to SGM status could meet conceptual definitions of gender-based violence and hate crimes.
- Restructure "community violence" and consider addition of “institutional violence” to include the specific and disproportionate violence SGMs experience in institutions (e.g., schools, hospitals and medical settings, assisted living facilities, social services).

**Gender-based Violence**

- Include the effects of gender-based violence on mental health (including self-acceptance, internalized homophobia, etc.); self-efficacy; positive and negative coping strategies; and other issues.
- Explore differences between gender-based violence and violence not due to gender/sexual identity.
Other Topics

Data Collection

• Require and standardize inclusive sexual orientation and gender identity (SOGI) data collection for NIH funded research. Sex categories should include intersex people.
• Consider how contemporary structural violence against trans and genderqueer folks systematically invisibilizes this group, making interpersonal violence socially acceptable and health outcomes difficult to measure.

HIV/AIDS

• i emerging research base to support an adapted cognitive processing therapy related to HIV prevention and reductions in PTSD symptoms by my group O’Cleirigh et al – AIDS and Behavior, and O’Cleirigh is writing up the results of a larger study. The mental health components separated from just the HIV components in sexual minority men research needs to further articulated and studied.

Intersectionality

• Utilize an intersectional framework to examine how violence is experienced by SGM communities of color, especially Black and Latina transgender women.
• Collaborate with community-academic organizations to address the needs of trans women of color (e.g., Trans Sistas of Color Project and the Love Her Collective in Detroit, MI). These groups consist of academic researchers, community activists, front line workers seeking to address the unique experiences of violence that Black and Latina trans women face in their relationships and communities through measurement and intervention efforts.
• Examine the impact of racism and anti-Blackness as it intersects with violence among SGM communities. Utilize experts and community members of color in research on SGM people of color..
• Consider intersectional, as well as population-specific studies that consider the experiences of SGM people who have been historically at the margins (e.g., studies of populations with differences in sexual development (DSD), intersex conditions, or who identify as intersex, SGM people of color; individuals in child welfare or in custody).

Intersex Adults

• Include researchers who work with intersex populations to better understand the impact of violence/discrimination on health outcomes within these populations.

Lifespan

• Explore the ways that violence may shape trajectories of vulnerability and health across the lifespan. While these issues may be particularly notable in adolescence, with the growing knowledge of age-related patterns of discriminatory experiences (e.g. showing that SGM people report the most discrimination in middle adulthood), they are relevant and urgent across the lifespan.
• Explore sexual identity developmental milestones, and the ways they are linked with experiences of stigma and violence, and ultimately with health outcomes.
• Consider research on fluidity of sexual identification (particularly among SGM youth) and how researchers assess sexual identity.

Structural Violence

• Incorporate structural violence within each session, such as religious organizations/church violence and bullying (including assault, “conversion” therapy, etc.)
• Explore the criminal legal system, including police profiling of transgender communities, disparities in pretrial detention, discrimination against LGBTQ communities in bail setting hearings, and criminalization of self-defense.
Interventions/Strategies

- Promote research that highlights the lack of efficacy from conversion therapies, how they can be abusive/harmful/traumatizing to SGMs, strategies to mitigate the abusive effects of conversion therapies, and ways to prevent it from happening.
- Develop, test, and evaluate affirmative based treatments to address the psychologically deleterious effects of SGM-specific traumatic events and stressors.
- Map out current violence reduction interventions and take a critical look at where SGM-specific content can be incorporated.
- Study how critical context (i.e., cultural milieu, legal/policy setting, community norms and resources, institutional practices such as in schools and the workplace, and family relations) influences exposure to stigma, victimization and violence; health outcomes; and the dynamic between violence and health outcomes. These experiences can lead SGM people to avoid necessary healthcare, further exacerbating health vulnerabilities. More research is needed to understand risk and protective factors driving these experiences in order to bolster prevention and intervention efforts.

Violence and COVID-19

- Consider domestic violence among SGM couples, including during COVID-19 stay at home orders.
- Consider youth experiences of violence at home, including during COVID-19 stay at home orders.
- Consider elder abuse for SGM older adults in general and during the COVID-19 pandemic.

Research Funding

- Create clear pathways and mechanisms of support for SGM organizations and people to meaningfully compete for any funds geared toward researching violence against SGM communities.
- Require institutions with grant awards to meaningfully engage SGM people and community organizations in the research process.
- Structure funding mechanisms in ways that motivate, encourage, and resource SGM people and organizations to engage in research. Of particular priority should be research collaborations with SGM organizations that have significant leadership of those including Black and Indigenous people, people of color, transgender and nonbinary, people involved in sex work, people who are undocumented, and people with disabilities, among others (e.g. NCAVP, Positively Trans+, Breakout!).
- Fund research that interconnects between forms of violence and uses frameworks that take structural and economic factors into account.

General

- Explore the severity and frequency of violence as experienced by SGM communities.
- Focus on SGM living in rural communities and experiences of violence in those settings.
- Consider addition of micro-aggressions as a topic.
- Consider addition of a domain that captures collective violence (e.g., political and structural violence).
- Use a broader definition of violence, such as state-sanctioned violence (e.g. healthcare denials, lack of nondiscrimination policies, don’t ask/don’t tell, barriers to travel, legal gender documentation, marriage/ adoption, sex work policies).
- Consult the NASEM report on the wellbeing of LGBTQ+ populations. Specifically, Chapter 5 (Law), section on “Protecting against violence”, Chapter 9 (Education), section on “Discrimination experiences at school”, Chapter 11 (Health), section on “Violence and victimization”.
- Include one panel session entirely devoted the discussion of Violence and SGM in a global context, involving speakers from various regions, such as Asia, Europe, Africa and Latin America, who are experts in such subject matter and have experiences that may be different from those in the United States.