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Do I Fit In? Psychosocial Ramifications of Low Gender Typicality in Early Adolescence

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Youth often suffer negative social and psychological repercussions if they do not fit in with their social reference groups (Sentse, Scholte, Salmivalli, & Voeten, 2007). Not fitting in with one's gender category is particularly salient. Starting in childhood, low gender typicality—i.e., perceived lack of fit with a binary gender category—is associated with a variety of adjustment difficulties. For example, low typicality is associated with lower self-worth from middle childhood (Egan & Perry, 2001) to mid-adolescence (Menon, 2011). Low gender typicality is also linked to higher internalizing symptoms in general (Carver, Younger, & Perry, 2003), and to specific internalizing symptoms such as anxiety (Jewell & Brown, 2014). Measures of gender typicality in the aforementioned studies span from behaviorally specific (e.g., engagement in sex-typed behaviors; Young & Sweeting, 2004) to broad sense of lack of fit (e.g., extent to which participants feel similar to other boys/girls; Smith & Leaper, 2006). In the current study, we focus on the subjective sense of gender typicality as we examine an underlying mechanism that can help explain why young adolescents who perceive themselves not to be gender typical in middle school may manifest subsequent psychosocial or behavioral problems: peer victimization.

Gender Typicality and Peer Interactions

In addition to having intrapersonal ramifications (e.g., internalizing symptoms), gender typicality is inherently a social construct. Gender norms associated with the gender binary are learned through observation and social feedback; this learning process starts early in life with parents and caregivers as role models and providing feedback (e.g., Endendijk et al., 2014; Kane, 2006). During adolescence, youth spend less time with family (e.g., Larson, Richards, Moneta, Holmbeck, & Duckett, 1996), and, in many secondary schools in the United States, have more opportunities to interact with same-age peers with little direct adult supervision. During this same developmental period, adolescents become particularly sensitive to social signals from peers, strengthening their role as (gender) socializing agents (cf. Blakemore & Mills, 2014).

As peers become increasingly important, observations of negative feedback in the form of peer ridicule and intimidation further convey what is not tolerated or accepted in a particular

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group or setting (Juvonen & Galvan, 2009). When peers target behaviors, mannerisms, or appearances that are not gender typical, they “police” and reinforce gender norms (Martin & Ruble, 2010). Although gender policing may start in early childhood with comments like “boys don’t play with dolls,” the social repercussions of deviating from gender norms tend to increase with age (Carter & McCloskey, 1984; Zosuls, Andrews, Martin, England, & Field, 2016). Physical changes with the onset of puberty may increase the salience of gender, and peer victimization related to gender typicality continues into adolescence (e.g., Eder, Evans, & Parker, 1995; Pascoe, 2012; Young & Sweeting, 2004).

Given that less gender typical youth are at risk for peer victimization, and that peer victimization is robustly associated with concurrent and subsequent adjustment problems (Arseneault, Bowes, & Shakoor, 2010), the question then is whether psychosocial adjustment problems associated with low gender typicality are due—at least in part—to peer victimization. Such a model has been directly examined in only a few cross-sectional or retrospective studies (excepting studies of sexual minorities, e.g., D’Augelli, Pilkington, & Hershberger, 2002). For example, relying on concurrent data, Jewell and Brown (2014) demonstrated that gender-based teasing mediated the association between gender typicality and depression in sixth, seventh, and eighth grade students. Similarly, T. E. Smith and Leaper (2006) showed that peer acceptance partially mediated the concurrent association between gender typicality and self-worth for a sample of 12- to 17-year-old youth recruited from an athletics camp. Using a retrospective measure of childhood gender nonconformity (as opposed to gender typicality) Roberts, Rosario, Slopen, Calzo, and Austin (2013) reported that bullying helped to account for the association found between nonconformity and depression in 12- to 30-year-olds.

Low gender typicality is likely to directly, as well as indirectly, contribute to psychosocial adjustment problems. Those who perceive themselves not to be gender typical may feel distressed, in part, because they feel that they do not fit in the way they should or because they may worry what that sense of not fitting in may imply (e.g., about their sexual orientation). However, negative social feedback is also potent, regardless of whether it is from family (e.g., Kane, 2006), teachers (e.g., Pascoe, 2012), or peers (e.g., Jewell & Brown, 2014). We focus in the study on peer victimization in middle school because such mistreatment increases during early adolescence (Pellegrini & Long, 2002) and, at the same time, sensitivity to negative social signals is heightened (Blakemore & Mills, 2014). Presuming that peer victimization is a particularly salient and impactful experience in general, but in particular for youth who do not feel like or act like most other same-gender peers, we examine how such experiences shape the psychosocial adjustment across middle school years.

Differences by Sex and Ethnic Group

Psychosocial adjustment outcomes associated with gender typicality may vary by sex. In one study of middle school participants, associations between gender typicality and adjustment were stronger for boys (Jewell & Brown, 2014), whereas in another study of third through eighth graders, gender typicality was related to self-worth only for girls (Carver et al., 2003). Yet other studies have found no sex differences (e.g., Egan & Perry, 2001). The reasons

behind these different patterns are unclear; one possibility is that age and pubertal development may play a role. Girls tend to experience pubertal onset earlier than boys (Carskadon & Acebo, 1993), which may result in different relative salience of gender norms at different ages. Timing of pubertal development in comparison to peers may drive some peer victimization and adjustment outcomes as well (Nadeem & Graham, 2005; Reynolds & Juvonen, 2011), making it a factor worth taking into account.

Another possibility is that boys and girls express psychosocial adjustment problems differently, particularly in adolescence. For example, researchers have demonstrated stronger links between stressors and internalizing symptoms such as depression in girls (e.g., Mezulis, Funasaki, Charbonneau, & Hyde, 2010); further, health complaints are more commonly reported among depressed girls than boys (e.g., Bennett, Ambrosini, Kudes, Metz, & Rabinovich, 2005). In contrast, externalizing behaviors are typically reported at higher levels and endorsed more for adolescent boys in responses to stressors (e.g., Leadbeater, Kuperminc, Blatt, & Hertzog, 1999). As such, it is important to examine a wide range of psychosocial outcomes when estimating the effects of low gender typicality and peer victimization in adolescence.

Compared to sex differences, less is known about racial or ethnic differences with regard to gender typicality. Most samples in studies of gender typicality have been comprised primarily of White youth, limiting confidence in generalizability of findings. Our literature review revealed one study that explicitly examined differences among White, Black, and Hispanic fifth grade students in associations between gender identity and adjustment (Corby, Hodges, & Perry, 2007). The association between typicality and self-worth differed in the aforementioned study such that there was a stronger association for White participants, weaker association for Hispanic participants, and no association for Black participants. There were also some differences in associations between various aspects of adjustment and both gender contentedness and felt pressure to conform. Together, these findings suggest that ethnicity should be further examined as a potential moderator between gender typicality and adjustment outcomes.

Current Study

In the current study, we examined prospective associations between self-perceived gender typicality, peer victimization, and a broad set of adjustment outcomes (i.e., social anxiety, somatic complaints, and externalizing behavior) during early adolescence. Capitalizing on a large, diverse sample of students recruited from 26 urban schools in Southern and Northern California, we analyzed these associations across the middle school years. To expand on past studies which focus largely on depression and self-worth, we examined social anxiety to capture internalizing distress. Given gender differences in manifestations of maladjustment, we also relied on an indicator of physical health by assessing somatic complaints which are more typical of adolescent girls (Bennett et al., 2005) as well as externalizing behaviors that may be more prevalent among boys (Leadbeater et al., 1999).

We hypothesized that those feeling low in gender typicality would experience worse adjustment outcomes, and that peer victimization would partially account for such

associations. We presumed these associations generally to be robust for boys and girls, although girls were expected to show stronger links with somatic complaints, while boys were expected to show stronger associations with externalizing behaviors. We also explored ethnicity and the interaction of sex and ethnicity as potential moderators. Our analyses included gender typicality data collected at seventh grade—during the second year of middle school, when youth are presumed to have acclimated to the new school—and concurrent self-reports of peer victimization. Adjustment data were collected at eighth grade and baseline (typically sixth grade), such that we were able to examine how seventh grade experiences affected the change in the adjustment indicators by the end of middle school.

This study extends prior research in several ways. First, we used prospective, longitudinal data collected across three years of middle school, controlling for prior levels of adjustment in mediation analyses. Such a design helps us account for the changes in adjustment across time that are either directly or indirectly related to seventh grade gender typicality and peer mistreatment. Second, we tested the model predicting a wide range of adjustment outcomes. Specifically, both somatic symptoms and externalizing problems have been understudied. Third, given possible influences of puberty on perceived gender typicality, we controlled for pubertal timing in comparison to peers in all analyses. Finally, we relied on a large and ethnically diverse sample, enabling us to examine potential moderation by ethnicity.

Methods

Participants

Participants were part of the [MASKED] Project, a longitudinal study of 5,991 ethnically diverse early adolescents (52% girls; 31% Latino/a, 20% European American/White, 13% East/Southeast Asian American, 12% Black/African American, 14% Multiethnic/Biracial, 9% other, and 1% unreported). The current study relied on data from those participants who responded to relevant measures for the current analyses, and who identified as one of the four largest panethnic groups or as multiethnic. Note that gender typicality at seventh grade and all psychosocial adjustment measures at eighth grade were part of a multi-form planned missing data design used by the larger study; as such, only two thirds of the participants responded to each. The final analysis sample included 3,436 participants (52% girls; 37% Latino/a, 22% White, 15% Asian, 11% Black, and 15% Multiethnic). Participants included in each analysis did not differ in the corresponding baseline adjustment level from those who were not included.

Procedure

Participants were recruited during the fall of sixth grade from 26 urban middle schools. In order to participate, students had to receive written consent from a parent or guardian (consent forms were provided in languages other than English as necessary). To encourage high return rates, two \$50 gift cards were raffled at each participating school for students who returned signed consent forms, whether or not they were given permission to participate. Overall, 81% of the consent forms distributed were returned, with 83% of these students receiving consent to participate. Participants provided written assent before completing surveys, then completed written questionnaires in the classroom setting during

fall and spring of sixth grade, spring of seventh grade, and spring of eighth grade. Due to the language demands of the survey, students in self-contained English Language Learner or Special Education programs were not recruited for the study.

Students received a small honorarium (\$5 for each survey taken during sixth grade, and \$10 for seventh and eighth grade surveys). Because parts of the survey were of a personal and sensitive nature, participants were reminded that they could skip questions without repercussion, and each participant was also provided with a list of support resources (e.g., websites and hotline numbers for organizations addressing physical health and mental health issues of teens) to take with them the end of each survey. The survey and all procedures were approved by the University Institutional Review Board.

Measures

Demographics.

Participants indicated whether they were male or female during the first wave of data collection, and for future waves of data collection were given “boy” or “girl” versions of the surveys, respectively. Although male/boy and female/girl are not interchangeable terms, for the sake of consistency the terms boy and girl will be used throughout the current article. For analyses, this information was dummy coded with girls as the reference group. Participants also reported their ethnicity in sixth grade. This information was dummy-coded into the pan-ethnic categories noted above, with White participants as the reference group given that most gender typicality work has used primarily White samples.

Gender typicality.

Participants’ self-perceptions of gender typicality were assessed in spring of seventh grade using three items ($\alpha = .74$). Items were rated on a 5-point scale ranging from 1 (Not at all) to 5 (All the time), and oriented such that high numeric values indicated typicality and low values indicated atypicality. For boys, items included “I feel I am just like other boys,” “I feel I fit in with other boys,” and “I feel I act just like other boys.” For girls, items referred to other girls. These items were adapted from the 6-item gender typicality scale used by (Egan & Perry, 2001). Composite scores were centered separately for boys and girls, as the items were asked in a gender-specific manner and assume different social reference groups.

Psychosocial Adjustment.

Measures of adjustment included social anxiety, somatic complaints, and externalizing behavior. The current study used self-reported adjustment data collected in the spring of eighth grade, and baseline adjustment levels collected in sixth grade (social anxiety and somatic complaints) or seventh grade (externalizing behavior). *Social anxiety* ($\alpha_6 = .78$, $\alpha_8 = .80$) was measured using six items (e.g., “I worry about what others think of me”) rated on a 5-point scale ranging from 1 (Not at all) to 5 (All the time). This measure was adapted from two subscales of the Social Anxiety Scale for Children-Revised: Fear of Negative Evaluation and Social Avoidance and Distress—General (LaGreca & Lopez, 1998). *Somatic complaints* ($\alpha_6 = .73$, $\alpha_8 = .76$) were measured at each time point using five items adapted from Add Health (Udry & Bearman, 1998). Participants indicated how often they

experienced various physical symptoms (e.g., headaches, poor appetite) over the past two weeks on a 4-point scale ranging from 1 (Not at all) to 4 (Almost every day). *Externalizing behavior* ($\alpha_6 = .70$, $\alpha_8 = .72$) was measured using six items assessing frequency of problem behaviors (cutting class, making fun of others, causing trouble in class, getting into fights, saying or doing mean things to others, and hanging around kids who get in trouble), rated from 1 (Never) to 5 (Almost all the time). Higher scores on each measure indicated poor adjustment outcomes, and all measures were centered across the entire sample for analyses.

Peer victimization.

Perceived peer victimization ($\alpha = .78$) was assessed at eighth grade using four items. Participants first chose which of two statements about perceived status as victims described them better (e.g., “Some kids are often picked on by other kids” or “Other kids are not picked on by other kids”), and then indicated their level of agreement with that statement (“Really true for me” or “Sort of true for me”), creating a 4-point scale for each item (Neary & Joseph, 1994). Items were oriented so that higher numbers corresponded with higher perceived peer victimization, and the measure was centered across the entire sample.

Pubertal timing.

Information about pubertal timing was collected during spring of sixth grade. Participants rated their pubertal timing as compared to their peers. Boys were asked whether they thought they were developing (looking like a man) faster or slower than most boys their age. Girls were asked whether they thought they were developing (looking like a woman) faster or slower than most girls their age. The 5-point rating scale was coded as follows: -2 “much slower”, -1 “slower”, 0 “about the same”, 1 “faster”, and 2 “much faster”. To capture possible differences in adjustment based on off-time pubertal development—both faster or slower development than that of peers—these values were squared, and both the linear and quadratic terms were used in the analyses.

Analysis Plan

Linear regression analyses were used first to test whether seventh grade gender typicality and peer victimization predicted each eighth grade adjustment outcome. Initial analyses included two-way interactions (between gender typicality and sex, gender typicality and ethnicity, sex and ethnicity, and sex and peer victimization) and a three-way interaction (between gender typicality, sex, and ethnicity). All interactions with ethnicity were nonsignificant and were thus excluded from the final models. In addition, a separate set of linear regression models was used to determine whether there were significant sex differences in associations between gender typicality and peer victimization when controlling for baseline adjustment; results were nonsignificant and are not reported below.

The PROCESS macro for SPSS (Hayes, 2013) was used to test final mediation models. For each model, 95% bias corrected accelerated confidence intervals of indirect effects were computed using the PROCESS macro to compute unstandardized effects of 5,000 bootstrapped samples. In addition, a completely standardized index of mediation (ab_{cs}) was calculated for the sake of comparability to the direct effects (Preacher & Kelley, 2011).

Results

In the following section, we first provide descriptive statistics for our variables of interest. We next identify patterns in our control variables across adjustment outcomes. Third, we present the results of regression models examining moderation as well as final mediation models for each outcome variable.

Descriptive Statistics

Means and standard deviations are presented separately for boys and girls in Table 1. Boys reported significantly higher gender typicality ($t(3434) = -9.09, p < .001$) than girls. We did not categorize levels of gender typicality (i.e., it was treated as a continuous variable), however, it is worth noting that 12% of girls and 14% of boys reported gender typicality at least one standard deviation below average. Compared to girls, boys reported lower levels of social anxiety ($t(2280) = 6.99, p < .001$) and somatic complaints ($t(2303) = 14.81, p < .001$), and they scored higher on externalizing behaviors ($t(2224) = -7.55, p < .001$) at eighth grade. Also shown in Table 1, most of the variables were intercorrelated in the expected manner; lower gender typicality was associated with worse adjustment and more peer victimization, and peer victimization was also associated with worse adjustment. It is worth noting that these correlations were of a small to moderate magnitude, i.e., not all adolescents reporting low gender typicality reported experiencing victimization or poor adjustment.

Gender Typicality, Peer Victimization, and Adjustment

Regression analyses revealed adjustment differences associated with sex (consistent with above description), ethnicity, pubertal timing, and baseline adjustment (Table 2). In comparison to White participants, Black, Latino, and multiethnic participants reported less social anxiety, and Asian participants reported more. In addition, Black participants reported more externalizing behavior than White participants, and Asian participants reported less. With regards to pubertal timing, earlier development was associated with significantly higher social anxiety. In addition, off-time development (early or late) was associated with significantly elevated somatic complaints. As expected, for all outcomes, baseline adjustment levels were a strong predictor of outcome adjustment levels.

Lower gender typicality at seventh grade was associated with higher social anxiety at eighth grade ($\beta = -.07, p < .001$; Table 2). Higher peer victimization also significantly predicted higher social anxiety, even taking baseline social anxiety into account ($\beta = .15, p < .001$; $R^2 = .02$). Analysis of the mediation model using PROCESS Model 4 (Hayes, 2013) showed that the indirect effect of gender typicality on social anxiety through peer victimization was significant (95% BCa CI $[-.03, -.01]$). The standardized index of mediation ($ab_{cs} = -.02$) was approximately one third of the size of the remaining direct effect. In other words, about a third of the association between gender typicality and eighth grade social anxiety was accounted for by peer victimization.

As shown in Table 2, the association between seventh grade gender typicality and somatic complaints at eighth grade differed by sex ($\beta = .05, p = .041$) such that for girls, but not boys, lower gender typicality predicted higher somatic complaints ($\beta_{\text{girls}} = -.07, p = .016$;

$\beta_{\text{boys}} = .01, p = .690$; Figure 2). Peer victimization was also a significant predictor, such that higher peer victimization predicted higher somatic complaints ($\beta = .20, p < .001$; $R^2 = .03$). Mediation analyses using PROCESS Model 5 (Hayes, 2013) revealed a significant indirect effect of gender typicality through peer victimization for both boys and girls (95% BCa CI $[-.03, -.02]$). The standardized index of mediation ($ab_{cs} = -.03$) was approximately three times the magnitude of the remaining direct effect for boys, and approximately half of the remaining direct effect for girls. As shown in Figure 1, this suggests that part or all of the association between gender typicality and somatic complaints can be attributed to peer victimization experiences of girls and boys, respectively.

The association between gender typicality and eighth grade externalizing behavior was no longer statistically significant when baseline level of externalizing behavior was included ($\beta = -.01, p = .493$; Table 2). However, those who experienced more peer victimization at seventh grade reported more externalizing behavior at eighth grade, and this differed by sex ($\beta = .07, p = .004$), such that boys showed a stronger association between peer victimization and externalizing behavior than girls ($\beta_{\text{boys}} = .19, p < .001$; $\beta_{\text{girls}} = .09, p < .001$; $R^2 = .02$; Figure 3). Mediation analyses using PROCESS Model 14 (Hayes, 2013) revealed a significant indirect path through peer victimization for both boys (95% BCa CI $[-.03, -.01]$) and girls (95% BCa CI $[-.01, -.00]$; Figure 1). The standardized indirect effects for boys ($ab_{cs} = -.03$) and girls ($ab_{cs} = -.01$) were approximately twice the magnitude and the same magnitude as the remaining nonsignificant direct effects, respectively. This suggests that despite the lacking of a significant direct effect, low gender typicality is associated with higher perceived peer victimization, which is in turn associated with more externalizing behavior.

Altogether, seventh grade gender typicality predicted seventh grade victimization, which in turn predicted adjustment in eighth grade. This was true even when controlling for earlier (sixth or seventh grade) adjustment. In addition, gender typicality directly predicted social anxiety for boys and girls over time, as well as somatic complaints for girls, when accounting for both earlier adjustment and victimization. Associations with gender typicality were present for both boys and girls, with a stronger indirect effect of gender typicality on externalizing behaviors for boys, and a stronger direct effect of gender typicality on somatic complaints for girls.

Discussion

The current study significantly adds to the small body of literature (e.g., Jewell & Brown, 2014; Smith & Leaper, 2006) examining peer victimization as one underlying mechanism that can help account for the relation between low gender typicality and psychosocial adjustment problems in adolescence. To our knowledge, this investigation is the first to rely on prospective, longitudinal data from a large, ethnically diverse sample and to include a wider range of adjustment outcomes. As hypothesized, low gender typicality at seventh grade predicted increased social anxiety and somatic problems by eighth grade. More importantly, these associations were partly accounted for by peer victimization experiences, and lower gender typicality also indirectly predicted higher levels of externalizing behavior through higher levels of peer victimization. Overall, the current findings imply that, although

perceived lack of fit with a binary gender category may be directly responsible for some of the associated adjustment problems, peer mistreatment plays a vital role over time as well. Adverse social experiences in middle school appear to negatively impact well-being of less gender typical youth—even to the point of making them feel physically ill. These findings are important inasmuch as they help inform attempts to intervene and improve the psychosocial adjustment of low-gender-typicality youth.

As expected, sex moderated some of the associations between gender typicality and adjustment. Consistent with Mezulis et al., (2010) girls showed a stronger direct association between gender typicality and somatic complaints. Boys, in turn, demonstrated a stronger indirect path to externalizing behavior than girls (c.f. Leadbeater et al., 1999). These differences suggest that gender typicality impacts psychosocial adjustment for both boys and girls during early adolescence, but that the normative manners in which boys and girls manifest their distress differs. This finding highlights the importance of using a variety of adjustment indices (over and beyond the typical internalizing indices) when studying gender typicality.

In contrast to sex, ethnicity did not moderate associations with psychosocial adjustment. This aligns with research by Corby et al. (2007), who found that ethnicity did not moderate associations between gender typicality and internalizing or externalizing problems, although there were differences in the association with self-worth. By contrast, the same study found ethnic differences in the association between felt pressure and internalizing problems, suggesting that different aspects of gender identity may be more sensitive to ethnicity-specific norms. As such, continuing to attend to potential differences across racial and ethnic groups when possible in studies of gender identity is warranted.

Limitations and Future Directions

While the current study provides insight into prospective associations between low gender typicality, increased peer victimization, and psychosocial adjustment difficulties, several questions remain. For one, in the current study, all measures relied on self-report, raising the issue of potential shared method variance. Self-reports were used intentionally, as they capture participants' own understanding of their social fit and peer mistreatment. Nevertheless, it is important that future studies also use observer ratings (teacher-, peer-, or parent-reports) of gender typicality, peer mistreatment, and adjustment.

In addition, future studies should attempt to account for what contributes to participants' perceptions of their gender typicality. For example, an adolescent might feel they are not typical of their gender because of their appearance, leisure or career interests, or romantic attraction. One might expect the social experiences for and adjustment outcomes of these adolescents to differ based on the visibility of their deviations from gender norms and whether these deviations are seen as positive or negative. In future studies, participants' views of what it means to act, look, and think like a "typical" boy or girl in their peer group or environment could be assessed, as well as why they stand out or fit in and what contributes to these views (e.g., peer and parental attitudes, exposure to gender stereotypes, etc.).

Finally, although the current study focused on showing the potent role of negative treatment by peers in shaping adolescent experiences with gender, other sources and types of gender socialization should be examined. Parents, for example, shape very young children's understanding of gender (Kane, 2006), and continue to provide social feedback on adherence to gender norms during adolescence (e.g., Carr, 2007). Siblings may contribute to gender socialization as well, particularly in families with parents who adhere to more traditional gender roles (McHale, Crouter, & Tucker, 1999). Teachers are in a position to provide feedback that either exacerbates or curtails negative responses from peers in the school setting (e.g., Kosciw, Greytak, Palmer, & Boesen, 2014; Pascoe, 2012). However, it is possible that peers also act as buffers against negative gender socialization rather than as gender police, providing support to friends who do not find this support in other places. The role of such different gender socialization effects should be further examined simultaneously in a single investigation.

Implications

The mediating role of peer victimization demonstrated in this study suggests that reducing victimization would alleviate at least part of the poor adjustment associated with lower gender typicality. To this end, existing school-based anti-bullying programs designed to increase empathy and kindness may be the most efficient and practical direct approach (e.g., KiVa; cf. Kärnä et al., 2011). They would be particularly suitable because such programs do not target or single out any particular risk group. However, at this point we do not have any empirical evidence to show that these programs specifically improve the psychosocial adjustment of youth who do not feel they fit in with their gender category. Evaluations of general anti-bullying programs (as opposed to targeted interventions) do not typically examine changes in outcomes for specific victimized subgroups. By examining specific subgroups, researchers can make claims to whether they are helping those who need help the most (e.g., Juvonen, Schacter, Sainio, & Salmivalli, 2016). Such interactive risk by intervention effects should be assessed for youth who do not view themselves as typical of their gender, along with other targeted groups (e.g., sexual minorities, youth with disabilities, overweight youth, etc.).

In addition to reducing the risk of peer victimization and its emotional effects, it is possible that effective anti-bullying programs could also help to alleviate the negative feelings that are associated with witnessing less gender conforming youth being targeted by their peers. Observing peer victimization or mistreatment of particular groups (e.g., overweight, LGBT youth) can negatively affect adjustment (e.g., Lampard, MacLehose, Eisenberg, Neumark-Sztainer, & Davison, 2014; Rivers, Poteat, Noret, & Ashurst, 2009). Such observations may promote perceptions of the school environment as unsafe, and negative school climate is linked to poor psychosocial adjustment (e.g., Brand, Felner, Shim, Seitsinger, & Dumas, 2003). If gender atypical youth see others targeted for gender norm violations, fear of victimization might be psychologically damaging in a manner similar to actual victimization (D. S. Smith, Schacter, Enders, & Juvonen, 2017).

Finally, school-wide prevention programs can address gender typicality more specifically, not by targeting individual students and attempting to change their conformity to norms, but

rather by changing perceived gender norms and normative responses to gender norm violations. Research by (Heinze & Horn, 2014) suggests that various factors contributing to perceived gender typicality (e.g., appearance, mannerisms, activity preferences, and sexuality) differentially affect peer treatment during adolescence. These individual characteristics need to be considered in context, i.e., taking perceived match with social groups into consideration (Sentse et al., 2007). If changes can be made to gendered content of curricular materials, gendered language used by school faculty, etc., in such a way that they increase the diversity of representations of gender norms and decrease salience of stereotypes, this could be one step in weakening ties between these norms and perceived atypicality. If behaviors or characteristics that were once considered gender atypical are normalized in this manner, some youth may cease to see themselves as problematically different from their peers, thus improving adjustment outcomes. Likewise, if youth are no longer seen by their peers as atypical based on these behaviors or characteristics, this could reduce the likelihood of victimization and subsequent adjustment problems. In sum, with broader gender norms and reduced gender-related victimization, young adolescents currently reporting low typicality and poor adjustment might experience more positive outcomes.

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Figure 1.

Standardized coefficients for peer victimization as a mediator between gender typicality and adjustment outcomes. All models controlled for sex, ethnicity, pubertal timing, and baseline adjustment.

Note. Interactions between sex and gender typicality or peer victimization were included in models only when significant. Moderated paths are indicated with separate coefficient values for boys (B) and girls (G).

$^{***}p < .001$. $^{**}p < .01$. $^*p < .05$.

Figure 2. Association between gender typicality and somatic complaints moderated by participant sex, at an average level of baseline somatic complaints and peer victimization, same perceived rate of development as peers, and the control ethnicity (White).

Figure 3. Association between peer victimization and externalizing behavior moderated by participant sex, at an average level of baseline externalizing behavior and gender typicality, same perceived rate of development as peers, and the control ethnicity (White).

Table 1

Descriptive Statistics and Pearson Correlations for Gender Typicality (7th Grade), Adjustment Indices (8th Grade), and Peer Victimization (8th Grade).

Measure	Boys <i>M (SD)</i>	Girls <i>M (SD)</i>	1. GT	2. SA	3. SC	4. EB	5. PV
1. Gender Typicality	3.58 (.96)	3.29 (.93)	—	-.16***	-.15***	-.05	-.21***
2. Social Anxiety	1.97 (.76)	2.19 (.75)	-.14***	—	.24***	-.00	.19***
3. Somatic Complaints	1.58 (.53)	1.96 (.66)	-.08**	.28***	—	.29***	.25***
4. Externalizing Behavior	1.80 (.62)	1.61 (.54)	-.08**	.10*	.14***	—	.23***
5. Peer Victimization	1.79 (.70)	1.79 (.73)	-.17***	.23***	.26***	.24***	—

Note: Correlations are split by gender, with correlations below the diagonal for boys ($N = 1646$) and correlations above the diagonal for girls ($N = 1790$).

*
 $p < .05$.

**
 $p < .01$.

 $p < .001$.

Table 2Summary of Regression Analyses for Variables Predicting 8th Grade Adjustment

Variable	Social Anxiety (<i>n</i> = 2192)		Somatic Complaints (<i>n</i> = 2245)		Externalizing Behavior (<i>n</i> = 2225)	
	R ²	β	R ²	β	R ²	β
Step 1	.20 ***		.20 ***		.36 ***	
Sex		-.10 ***		-.26 ***		.07 ***
Asian		.05 *		-.02		-.04 *
Black		-.12 ***		-.01		.04 *
Latino/a		-.16 ***		-.01		-.02
Multiethnic		-.06 *		-.01		.03
Pubertal Timing		-.04 *		.01		.01
Pub. Tim. Squared		.01		.04 *		.00
Baseline Adjustment		.34 ***		.30 ***		.55 ***
Step 2	.01 ***		.01 ***		.00	
Gender Typicality		-.07 ***		-.07 *		-.01
Gen. Typ. X Sex ^a		NA		.05 *		NA
Step 3	.02 ***		.03 ***		.02 ***	
Peer Victimization		.15 ***		.19 ***		.09 ***
Peer Vic. X Sex ^a		NA		NA		.07 **

Note

^aIncluded only in models for which preliminary analyses indicated moderation* *p* < .05.** *p* < .01.*** *p* < .001