

Consent / Landing Page

Welcome to the Adolescent NeuroDevelopment (AND) Lab Sexual Identity Development (SID) Milestones Study!

Below you will find a brief overview of the research project:

What does the research involve?

The current study aims to explore the composition and sequence(s) of sexual identity development milestones (i.e., coming out to family, coming out to friends, self-identifying, first sexual attraction) in Australia's Generation-Z. We are interested in exploring associations between milestone sequence(s) and several social-emotional outcomes in emerging adulthood.

You will be asked to complete an online questionnaire for approximately 20 minutes, and attend an **optional** follow-up Zoom interview where you can elaborate on your own experience and management of the SID milestones. For the interview, we will be particularly interested in the impact of social media, social support and cohort defining events (such as the same-sex marriage postal vote in 2017) on your sexual identity

development.

Who can participate?

We are looking for young people and emerging adults who identify as LGBTQIA+, live in Australia, and who are part of Gen-Z (born from 1997 and onward). Please note, you must be 16 years or older to participate in the current study.

Reimbursement

In appreciation of your time for participating in the follow-up interview, you will receive a \$35 Coles/Myer e-gift card; this will be the only direct benefit to you for participation in this study. Additionally, for completion of this survey we are offering 5x \$50 Coles/Myer e-gift cards through a random raffle. If you wish to participate in the raffle, there will be an option at the end of the survey to link your email address. **Note**, participation in the interview does not increase your chances of winning the raffle draw, you will have an equal chance simply by participating in the survey.

If you are interested in participating, please click the "Next" arrow below to continue onto our consent page. If you do not wish to participate, simply exit the survey.

Thank you.

Project ID: 37035

**Project title: Sexual Identity Development
Milestones**

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If you meet our eligibility criteria, then you are invited to take part in this study. Please read the [Explanatory Statement](#) in full before deciding whether to participate in this research. If you would like further information regarding any aspect of this project, you are encouraged to contact the research team via: milestones-

study@monash.edu.

Your responses will be kept anonymous, are confidential (unless required by law) and your participation in this research is voluntary. You have the right to withdraw at any point during the study, for any reason. If you choose to continue, please complete all questionnaire items yourself. If you do not want to answer a particular question, please click the "Next" arrow and leave the answer blank, or select the option "prefer not to say", where applicable.

By continuing, you consent to the following:

- You will be asked to complete questionnaires about your experience of your sexual identity development, and also: social rejection, social media usage, emotion regulation, self-acceptance, social and school support, and disordered eating behaviors.
- You will be asked to provide basic demographic information (i.e., your ethnicity, sexual orientation, gender identity, etc).
- You will be asked to complete an **optional** online follow-up interview about these experiences with a researcher (approximately 60-minutes long). This interview will be collaborative and involve creating a Life History Calendar charting your experiences during your sexual identity development. The interview will be audio recorded so that it may be transcribed for data analysis at a later date.

If you agree to continue, you acknowledge:

- The project has been explained clearly, and that you have had the opportunity to contact the research team to ask additional questions.
- Your participation is voluntary, and you are free to withdraw your consent at any time.
- You understand that if you withdraw from the study, any data which has already been collected may still be used as the survey is kept anonymous.
- You understand that any data the researcher extracts from the study for use in reports or published findings will not, under any circumstances, contain names or identifying characteristics. You will remain anonymous at all times in any reports or publications based on the project.
- You understand that the data from questionnaires and devices will be kept in secure storage only accessible to the research team.

- ☐ I consent, begin the study.
- ☐ I do not consent and do not wish to participate.

Demographics

How old are you currently?

What is your date of birth? (Please enter as dd/mm/yyyy)

Which state / territory do you currently live in?

What type of school did you receive the majority of your secondary education in?

- ☐ Public
- ☐ Private - Independent
- ☐ Private - Religious
- ☐ Specialist School
- ☐ Homeschooling

☐ Other:

Where was/is this school located?

- ☐ Urban or City
- ☐ Suburban
- ☐ Rural or Small Town

Are you currently in secondary school (high-school)?

- ☐ Yes (please state your year level):
- ☐ No
- ☐ Prefer not to say

If you are not currently in secondary school, please select which best apply to you:

- ☐ I am currently an undergraduate student
- ☐ I am currently a postgraduate student
- ☐ I have finished university and am currently working
- ☐ I am in a TAFE course
- ☐ I have finished TAFE and am currently working
- ☐ I am currently working
- ☐ I am neither working or studying
- ☐ Prefer not to say

The following includes some common ethnicities in Australia, if yours is not mentioned, please specify your own. Please check as many as are relevant to you.

- ☐ North African
- ☐ Sub-Saharan African
- ☐ North American
- ☐ Central American
- ☐ South American
- ☐ East Asian (e.g. Chinese, Japanese, Korean)
- ☐ South Asian (e.g. Indian, Sri Lankan)
- ☐ Southeast Asian (e.g. Vietnamese, Malaysian)
- ☐ Aboriginal or Torres Strait Islander
- ☐ Australian / New Zealand
- ☐ European - Eastern
- ☐ European - Western
- ☐ Maori
- ☐ Middle Eastern (e.g. Turkish, Syrian)
- ☐ Pacific Islander
- ☐ My ethnicity (or at least one of them) is not listed (please describe):
- ☐ Prefer not to say

The following includes some of the most common races in Australia, if yours is not captured, please specify your own. Please check as many as are relevant to you.

- ☐ Aboriginal or Torres Strait Islander
- ☐ Asian
- ☐ Black
- ☐ Indian
- ☐ Pasifika/Maori
- ☐ White/Caucasian
- ☐ My race (or at least one of them) is not listed (please describe):
- ☐ Prefer not to say

What is your chosen religious orientation or faith?

- ☐ Buddhism
- ☐ Christianity
- ☐ Hinduism
- ☐ Judaism
- ☐ Islam
- ☐ My religion/faith is not listed, it is:
- ☐ Prefer not to say
- ☐ I am not religious

We wish to be as inclusive as possible in this study, and so we will also be asking about disability status. Do you have a disability? If yes, please describe your disability below.

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

Do you identify as being neurodivergent? If yes, please describe below.

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

What do you sexually identify as? Please select all that apply.

- ☐ Lesbian
- ☐ Mostly attracted to girls
- ☐ Gay
- ☐ Mostly attracted to boys
- ☐ Straight (Heterosexual)
- ☐ Bisexual

- ☐ Queer
- ☐ Questioning
- ☐ Asexual
- ☐ Pansexual
- ☐ My preferred sexual identity (or at least one of them) isn't listed. I identify as:
- ☐ Prefer not to say

In this study we want to accurately represent trans* and intersex people(s) and their experiences. In order to avoid under-representation, in the next two questions we ask about gender identity, and sex assigned at birth. As with any of our questions, you are welcome to skip or choose “prefer not to say” (it’s up to you). The next question will be about sex assigned at birth. If you wish to skip it, you can press the “Next” arrow.

What is your gender identity? Please select all that apply.

- ☐ Male / man
- ☐ Female / woman
- ☐ Non-binary
- ☐ Genderfluid
- ☐ Trans / gender diverse

☐ My gender identity (or at least one of them) isn't listed. I identify as:

☐ Prefer not to say

What was your sex assigned at birth (i.e., on your birth certificate)?

☐ Male

☐ Female

☐ Intersex

☐ My sex assigned at birth is not listed here (please describe):

☐ Prefer not to say

Please consider each of the incomplete sentences below rate how feminine or masculine you are for each one.

I consider myself as...	Very Feminine	Moderately Feminine	Slightly Feminine	Neutral	Slightly Masculine	Moderately Masculine	Very Masculine
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ideally, I would like to be...	Very Feminine	Moderately Feminine	Slightly Feminine	Neutral	Slightly Masculine	Moderately Masculine	Very Masculine
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Traditionally,
my interests
would be
considered
as...

Very
Feminine

☐

Moderately
Feminine

☐

Slightly
Feminine

☐

Neutral

☐

Slightly
Masculine

☐

Moderately
Masculine

☐

Ver
Masculine

☐

Traditionally,
my
attitudes
and beliefs
would be
considered
as...

Very
Feminine

☐

Moderately
Feminine

☐

Slightly
Feminine

☐

Neutral

☐

Slightly
Masculine

☐

Moderately
Masculine

☐

Ver
Masculine

☐

Traditionally,
my
behavior
would be
considered
as...

Very
Feminine

☐

Moderately
Feminine

☐

Slightly
Feminine

☐

Neutral

☐

Slightly
Masculine

☐

Moderately
Masculine

☐

Ver
Masculine

☐

Traditionally,
my outer
appearance
would be
considered
as...

Very
Feminine

☐

Moderately
Feminine

☐

Slightly
Feminine

☐

Neutral

☐

Slightly
Masculine

☐

Moderately
Masculine

☐

Ver
Masculine

☐

Thank you for your interest in the Milestones Study.
Unfortunately you are not eligible for the study at this
present time.

Please contact the research staff if you have any
questions about your eligibility at the email address
below: milestones-study@monash.edu

Milestones

We are now going to ask about your age when you experienced several different sexual identity development milestones. There may be some milestones not relevant to you, or which have not yet occurred for you, in these instances please just indicate so in the options available.

How old were you when you first realized you were sexually attracted to someone of the same sex as you, or someone who is non-binary or genderfluid? Please take your best guess.

- ☐ I was age... when this occurred.
- ☐ I have never experienced this.

How old were you when you first internally identified, or recognised, your sexuality as LGBTQ+? (i.e., identified within yourself/ your thoughts).

- ☐ I was age... when this occurred.
- ☐ I have not experienced this yet.

How old were you when you first consensually engaged in sexual activity with someone of the same sex as you, or someone who is non-binary or genderfluid? (I.e., your first developmentally significant sexual interaction). These interactions can be any romantic or intimate sexual interaction with another person, from kissing and making out, to hooking-up.

Here, hooking up with someone refers to any sexual behaviour, including kissing, touching, oral sex, sexual play, and/or penetrative sex.

- ☐ I was age... when this occurred.
- ☐ I have not experienced this yet.

If applicable at all, how old were you when you had your first consensual sexual interaction with someone of the opposite sex as you.

- ☐ I was age... when this occurred.
- ☐ This is not relevant to me.

How old were you when you had your first non-heterosexual romantic relationship?

- ☐ I was age... when this occurred.
- ☐ I have not experienced this yet.

How old were you when you had your first heterosexual (or 'straight') romantic relationship?

- ☐ I was age... when this occurred.
- ☐ This is not applicable to me.

At what age did you first tell someone else about your sexual identity?

- ☐ I was age... when this occurred.
- ☐ I have not done this yet.

Regarding the first person you told about your sexual identity, please describe their relationship to you (i.e., friend, family).

- ☐ Friend
- ☐ Family
- ☐ Peer
- ☐ Colleague
- ☐ Someone on the Internet
- ☐ Other

Regarding the first person you told about your sexual identity, were they straight or part of the LGBTQIA+ community?

- ☐ They were heterosexual/ straight
- ☐ They were part of the LGBTQIA+ community

Have you come out to an immediate family member before (i.e., sibling or parent/guardian)? If yes, please indicate your age when this occurred.

- ☐ I was age... when this occurred.
- ☐ I have not done this yet.

Which immediate family member did you first come out

to? If half- or step-sibling, please specify.

Pubertal Timing

People show a large range of ages during which pubertal growth and development occur. We are interested in learning more about this range of individual differences in pubertal development and its intersection with milestones. We would like to ask you to help us get this information by answering some questions about what you remember about your own pubertal development.

Many people find it useful to think about other events that were occurring around the same time to help them remember their age. For example, you may remember that an event occurred in the fourth grade, but not immediately recall the age. In these cases, you may be able to estimate your age based on these other memories and the grade you were in at the time.

Please answer to reflect when these experiences occurred **during puberty compared to same-age and biological sex peers.**

	Changes relative to same-aged and biological sex peers							Age of occurrence
	Much earlier	Somewhat earlier	About the same	Somewhat later	Much later	I don't know	Not applicable	How old were you (years and months) when the event first noticed it happen?
Would you say your growth spurt in height (during which time you rapidly increased in height, outgrowing their shoes and clothes) occurred...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>
How about the growth of your body hair ("body hair" means underarm and pubic hair)? Would you say that your body hair growth occurred...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>

Hormonal changes during puberty can dramatically change the chemistry of the facial skin. Would you say that your skin changes were...

☐☐☐☐☐☐☐

In general, do you think your development was any earlier or later than most other people your age?

☐☐☐☐☐☐☐

Much earlier Somewhat earlier About the same Somewhat later Much later I don't know Not applicable

How old (y and mon were you v this happ or first not it happen

What about when your breasts began to grow (think about when you wore your first training bra)

☐☐☐☐☐☐☐

What about when you began growing facial hair or shaving, did it occur...

☐☐☐☐☐☐☐

What about voice changes (cracking, breaking or dropping), did they occur...



AttentionCheck

This is an attention check to filter out fake responses. Please select 'strongly agree' to show you are paying attention to this question.

- ☐ Strongly disagree
- ☐ Somewhat disagree
- ☐ Neither agree nor disagree
- ☐ Somewhat agree
- ☐ Strongly agree

InternalisedHomonegativity

Please mark the response that best indicates your current experience as an LGBTQ+ person. Please be as honest as possible and indicate **how you really feel now**, not how you think you should feel.

If it were possible, I would choose to be straight	Disagree Strongly <input type="radio"/>	Disagree <input type="radio"/>	Disagree Somewhat <input type="radio"/>	Agree Somewhat <input type="radio"/>	Agree <input type="radio"/>	Agree Strongly <input type="radio"/>
I wish I were heterosexual	Disagree Strongly <input type="radio"/>	Disagree <input type="radio"/>	Disagree Somewhat <input type="radio"/>	Agree Somewhat <input type="radio"/>	Agree <input type="radio"/>	Agree Strongly <input type="radio"/>
I believe it is unfair that I am attracted to people of the same sex	Disagree Strongly <input type="radio"/>	Disagree <input type="radio"/>	Disagree Somewhat <input type="radio"/>	Agree Somewhat <input type="radio"/>	Agree <input type="radio"/>	Agree Strongly <input type="radio"/>

SMA-RSS

We are now going to present you with several situations. They all start with 'Imagine that...'. Try to imagine as best as possible what this situation would be like for you **present day**. After every situation, there are two questions. Please do your best to complete **all** scenarios.

Some of these situations involve a same-sex/gender, multiple sexes, and/or non-binary partner; read these situations according to your sexual orientation/ chosen partner. Some of the situations take place at school/university/work; read these as whatever context is currently most relevant to you.

Scenario 1. Imagine that you are walking through the hallway at school/university/work and a group of students/peers/colleagues is walking in your direction. When you pass them some of them start to laugh.

How concerned or anxious would you be that they are laughing because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that they are laughing because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 2. Imagine that you are instructed to work on an assignment/task with a partner and no one wants to work with you.

How concerned or anxious would you be that no one wants to work with you because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that no one wants to work with you because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 3. Imagine that you are walking on the streets with some friends. You get the feeling that some youth are following you.

How concerned or anxious would you be that you are being followed because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that you are being followed because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 4. Imagine that a group of classmates/peers/colleagues are whispering together. They look in your direction and then continue to talk.

How concerned or anxious would you be that they are whispering about you because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that they are whispering about you because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 5. Imagine that some of your classmates/peers/colleagues are celebrating a birthday of another classmate/peer/colleague. You are not invited.

How concerned or anxious would you be that you are not invited because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned - 6
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that you are not invited because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 6. Imagine that only you and a group of macho

men are on a train. They look in your direction and laugh.

How concerned or anxious would you be that they are laughing because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that that they are laughing because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 7. Imagine that you are giving a presentation in class/at work and a classmate/colleague laughs at you.

How concerned or anxious would you be that they are laughing because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/> 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> 6

How likely is it that that they are laughing because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/> 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 8. Imagine that you are at work and a customer indicates they do not want to be helped by you.

How concerned or anxious would you be that the customer does not want to be helped by you because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/> 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> 6

How likely is it that the customer does not want to be

helped by you because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 9. Imagine that you are watching a series with a LGBT character in it. One of your parents enters the room and says that there are too many gay people on TV.

How concerned or anxious would you be that they would accept you less because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that they would accept you less because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 10. Imagine that someone in your family makes a joke about LGBT people.

How concerned or anxious would you be that this person will not accept you because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that this person will not accept you because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 11. Imagine that you are watching TV with your parents. There is a program/show about LGBT rights on TV. They change the channel.

How concerned or anxious would you be that they would accept you less because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/> 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> 6

How likely is it that they would accept you less because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/> 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 12. Imagine that you are at a family celebration with your partner. You notice your relatives looking at you, but they don't come over to talk to you.

How concerned or anxious would you be that they don't come over to talk because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/> 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> 6

How likely is it that they don't come over to talk because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 13. Imagine that you are on a date with someone at a restaurant. Your waiter provides you and your date with poor service.

How concerned or anxious would you be that the waiter is being rude because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that the waiter is being rude because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Scenario 14. Imagine that you are walking into a shop holding hands with your partner. Other customers stare at you.

How concerned or anxious would you be that they are staring at you because of your sexual orientation?

Very unconcerned	2	3	4	5	Very concerned -
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How likely is it that they are staring at you because of your sexual orientation?

Very unlikely	2	3	4	5	Very likely - 6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

AttentionCheck

This is an attention check to filter out fake responses. Please select 'somewhat agree' to show you are paying

attention to this question.

- ☐ Strongly disagree
- ☐ Somewhat disagree
- ☐ Neither agree nor disagree
- ☐ Somewhat agree
- ☐ Strongly agree

DERS-16

The final stages of this survey will ask you to rate items on how you regulate your emotions, and your identity acceptance.

Please indicate how often the following statements apply to you by selecting the appropriate rating (1–5) for each item. If unsure, take your best guess.

I have difficulty making sense out of my feelings	1 - Almost never	2 - Sometimes	3 - About half the time	4 - Most of the time	5 - Almost always
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am confused about how I feel.	1 - Almost never	2 - Sometimes	3 - About half the time	4 - Most of the time	5 - Almost always
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

When I am upset, I have difficulty getting work done.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I become out of control.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I believe that I will remain that way for a long time.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I believe that I'll end up feeling very depressed.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I have difficulty focusing on other things.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I feel out of control.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I feel ashamed with myself for feeling that way.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I feel like I am weak.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>

When I am upset, I have difficulty controlling my behaviours.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I believe that there is nothing I can do to make myself feel better.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I become irritated with myself for feeling that way.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I start to feel very bad about myself.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, I have difficulty thinking about anything else.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>
When I am upset, my emotions feel overwhelming.	1 - Almost never <input type="radio"/>	2 - Sometimes <input type="radio"/>	3 - About half the time <input type="radio"/>	4 - Most of the time <input type="radio"/>	5 - Almost always <input type="radio"/>

Self-Acceptance

Please read the following statements carefully and indicate how true each statement is for you. Please note 'sexuality' below refers to your sexual attractions to

people of the same-sex, multiple sexes, and/or non-binary individuals.

I accept my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I feel in conflict about my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I am comfortable with my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I am ashamed of my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I accept all parts of my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I struggle to accept my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I feel at peace with my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I try to fight my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>
I have come to terms with my sexuality	Totally true for me <input type="radio"/>	Somewhat true for me <input type="radio"/>	Neither true nor untrue <input type="radio"/>	Somewhat untrue for me <input type="radio"/>	Totally untrue for me <input type="radio"/>

Thinking about my sexuality makes me feel upset	Totally true for me	Somewhat true for me	Neither true nor untrue	Somewhat untrue for me	Totally untrue for me
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Qualitative_Inq

Before we finish, we want to hear more about your experience of your sexual identity development. In particular, we are interested in how you navigated sexual identity development milestones, such as self-identifying and coming out. For the interview, we will collaboratively map out your sexual identity development milestones and the contextual events surrounding them. There will also be a short (5-10 minute) pre-interview questionnaire on your experiences of school support, disordered eating behaviours, and social media usage.

The data collected from the interview will be de-identified and not personally linked to you in any way. If you wish to participate in the interview with your camera turned off, let the research team know when booking an interview time.

If you would like to participate in a follow-up zoom interview regarding this (approximately 1hr long), please provide your email address below and you will be contacted by our research team. You will be reimbursed \$35 for your time during the interview.

To proceed to the end of the survey and enter your details to go into the raffle draw, please click the "Next" arrow. To keep your survey response anonymous (unless you have inquired about the interview), there will be a link that directs you to another survey page for you to enter your email address into, this will ensure your survey responses remain anonymous.

Prize Raffle

If you wish to be entered into the raffle to win one of the 5x \$50 Coles/Myer e-gift cards, please follow [THIS LINK](#) and enter your email address.

Once you have entered your email, please return to this

survey and follow the "Next" button to submit your responses. If you do not wish to be entered into the raffle, please just follow the "Next" button to submit your responses.

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