# What Do We Know About the Health of LGBT Youth?

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#### **Health Status of LGBT Youth**



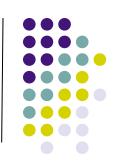
- Overall, young people are healthy and resilient
- Common developmental challenges include:
  - Physical maturation and puberty
  - Cognitive development
  - Psychological development

#### **Additional LGBT Challenges**



- Becoming comfortable with sexual orientation
- Becoming comfortable with gender identity
- Dealing with internal and external phobias (homophobia, biphobia, transphobia)
- Access to positive images and role models
- Limited support from influential adults/peers
- + Challenges for racial/ethnic minority youth

#### Methodological Challenges



- Reliance on small, cross-sectional convenience samples
- Lack of funding, political will
- Study design may overestimate problems
- Inclusion of sexual orientation is recent and limited in scope
- Inclusion of transgendered persons is limited

#### Measurement Challenges (continued)



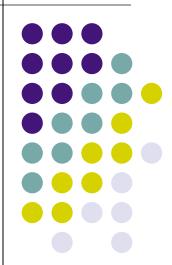
- Defining and measuring sexual orientation and gender identity
- Overcoming the reluctance of LGBT persons to identify themselves to researchers
- Obtaining high quality samples of relatively small populations

#### **Measuring Sexual Orientation**



- Few national or state health surveys on youth collect data on sexual orientation
- No one method to assess sexual orientation (i.e., sexual orientation, identity, attraction, sex of partner)
- Youth may be unsure of own orientation and sexual development is fluid and ongoing
- Estimates of proportion of LGBT youth likely underestimated

# How is the Health of LGBT Youth?



#### **Health Risks in LGTB Youth**



- Mental health
- Suicide
- Violence and Bullying
- Homelessness

- Tobacco use
- Alcohol and other drugs
- Overweight and obesity
- Eating disorders
- Sexually transmitted infections (STIs)

#### **Mental Health Concerns**



- Homosexuality itself is not a mental illness
- LGBT youth may have higher risk for:
  - Eating and body image disorders
  - Depression
  - Anxiety and panic attacks
  - Suicidal ideation and suicidal behavior

#### Suicidality



- Serious methodological challenges and limitations in this literature
- LGBT youth are 3-4x more likely to report a suicide attempt (Garofalo et al, 1999)
- LGBT youth at high risk for depression, substance use, recent suicide attempt by friend/ family, and conflicts with parents
- Unique risks include more frequent and violent victimization, minority- and gay-related stress

#### Impact of Parental Rejection



- LGBT young adults who experienced parental rejection as adolescents were:
  - Almost 6x as likely to have high levels of depression
  - More than 8x as likely to have attempted suicide
  - More than 3x as likely to use illegal drugs
  - More than 3x as likely to engage in unprotected sex

#### Safety, Violence, and Trauma



- 2009 National School Climate Survey of 7,000+ LGBT middle and high school students found:
  - 8 out of 10 had been verbally harassed at school
  - 4 out of 10 had been physically harassed at school
  - 2 out of 10 had been physical assaulted at school
  - 6 out of 10 felt unsafe at school
  - 25%+ missed school because of feeling unsafe
- Perpetrators may be family, peers, teachers, coaches, church officials, employers, police, etc

#### **Health Effects of Bullying**



- People who are bullied:
  - Feel sad and lonely
  - Altered sleep and eating
  - Less interest in activities
  - Suicidal thoughts
  - Physical health problems
  - Miss, skip, drop school
  - Lower academic achievement
  - More violent retaliation

- People who bully others:
  - Abuse alcohol and drugs
  - Get into fights
  - Vandalize property
  - Traffic and criminal convictions
  - Drop out of school
  - Abuse romantic partners, spouses, and children

#### Homelessness



- Between 575,000-1.6 million homeless youth in any given year; ~20-40% identify as LGBT
- LGBT-specific reasons for homelessness may be to avoid violence and discrimination or as a consequence of coming out / being outed
- Additional health challenges include survival sex, substance use, victimization, violence, discrimination

#### **Tobacco Use**



- LGB adult men and women are twice as likely to smoke as heterosexual counterparts (Tang et al., 2005)
- Rates are also higher in LGB youth
   (Up to 50% of LGB youth v. ~35% of straight youth)
   (Ryan et al., 2001)
- Bisexual adults reported smoking rates at or above the LGB rates (Conron et al., 2008; Dobison 2008)

#### **Alcohol and Other Drugs**



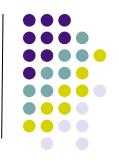
- Evidence for heavier alcohol use (Aaron et al., 2001)
   & more alcohol-related problems (Wilsnack et al., 2008)
- Greater lifetime rates of marijuana, cocaine, club and other illicit drug use
- LGBT sub-groups have different use patterns

#### **Overweight and Obesity**



- Current epidemic of overweight and obesity
- Adult lesbians may still be twice as likely to be overweight or obese; similar trends for youth (Boehmer et al., 2007; Roberts et al., 2003; Austin et al., 2009)
- Significant health concern and risk factor for other chronic conditions

#### **Body Image & Eating Disorders**



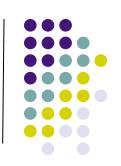
- Gay and bisexual men have higher prevalence of eating disorders (Feldman & Meyer, 2007) and body dissatisfaction (Kaminski et al., 2005)
- Younger men (ages 18-29) are at highest risk
- Data on lesbian & bisexual women are mixed
  - Lesbians happier with bodies and less likely to report trying to look like images of women in the media
  - Higher risk for bisexual women, notably purging

#### **Sexually Transmitted Infections**



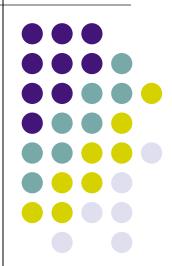
- Men who have unprotected sex with other men are at increased risk for:
  - HIV/AIDS
  - Syphilis
  - Gonorrhea
  - Chlamydia
  - Herpes
  - Human papilomavirus (HPV)
  - Viral hepatitis A and B

### **Sexually Transmitted Infections**(continued)



- Literature on women who have sex with women is much more limited and mixed:
  - Self-identification of sexual orientation is frequently inconsistent with reported sex of sexual partners
  - Some evidence for increased risk of bacterial vaginosis, chlamydia, HSV-1, HPV, trichomonas

# How Can We Better Collect Better Data?

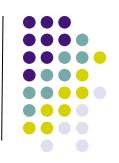


#### **Measurement Points to Ponder**



- What are the consequences for response rate depending on how you measure orientation?
  - Behavior more revealing than attraction
  - Self-labeling and identity can be most challenging
  - Non-responders more likely to be boys, younger students, and racial/ethnic minorities
- What happens when you include unsure?
  - People who skip one question skip many more

#### **Sexual Orientation Measures**



Survey Name	Sexual Orientation Question
National Health and Nutrition Examination Survey (NHANES)	In your lifetime, with how many [females] [males] have you had vaginal, anal, or oral sex?
National Longitudinal Survey on Adolescent Health	Have you ever had a romantic attraction to a [male] [female]?
National Survey of Children's Health	None
Youth Risk Behavior Surveillance System (YRBSS)	Which of the following best describes you: heterosexual (straight), gay or lesbian, bisexual, not sure, or none of the above?

#### **Measurement Points to Ponder**

(continued)



- How does item location, item structure, or survey context matter?
  - More items missed on first and last pages
  - Length and complexity of items, too many response options = lowest response rate
  - Who is sponsoring the study matters
  - How closely students sit next to each other matters
  - Privacy in seeking clarification matters

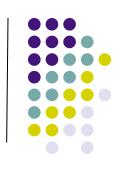
### Recommended Wording: Sexual Attraction



- Who are you sexually attracted to?
  - Males
  - Females
  - Both males and females
  - I am not sexually attracted to anyone yet

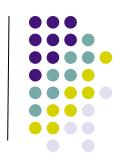
- Are you sexually attracted to males Y/N?
- Are you sexually attracted to females Y/N?

#### Recommended Wording: Sex of Sexual Partner(s)



- How many different males have you had sexual experiences with in your life?
  - None, one person, two people, three or more
- How many different females have you had sexual experiences with in your life?
  - None, one person, two people, three or more

# Recommended Wording: Self-Labeling / Identity



- How would you describe your sexual orientation?
  - Heterosexual (sexually attracted to the opposite sex)
  - Mostly heterosexual
  - Bisexual (attracted to both men and women)
  - Gay or lesbian (sexually attracted to the same sex)
  - Other \_\_\_\_\_\_
  - I am not sure yet
  - I don't understand this question

## Recommended Wording: Fantasies



- When you think or daydream about sex, do you dream about:
  - Males
  - Females
  - Both
  - I don't daydream about sex yet

#### **Measurement Consequences**



- Use of self-identification as LGBT may limit findings to youth "out enough" for self-report
- Use of sex of sexual partners excludes youth who have not engaged in partnered activity
- Better approach is multidimensional:
  - Sexual identity
  - Sexual attraction
  - Sexual partners

#### **Problem of Reluctant Participants**



- Research on sensitive topics heightens concern
  - Perceived as intruding on privacy
  - Repercussions of disclosure
  - Triggers social desirability
- Consequences for measurement include:
  - Refuse to participate at all
  - Decline to answer individual question(s)
  - Intentionally give inaccurate response(s)

#### Ways to Overcome Reluctance



- Establish trust and credibility
- Be professional, competent, and sensitive
- Choose appropriate research methods
- Guarantee anonymity -- confidentiality
  - NIH Certificate of Confidentiality

#### Questions

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