



LGBT Health Disparities

Increased Attention on Health Disparities for LGBT Individuals

In recent years, improving the health, safety, and well-being of the lesbian, gay, bisexual, and transgendered (LGBT) population has garnered interest and attention in the federal government. This is evidenced by the explicit goal to achieve these improvements outlined in the national Healthy People 2020 objectives¹. Health disparities among LGBT individuals has been explored in an increasing number of research studies, as well as a recently published synthesis of current research by the Institute of Medicine (IOM) in 2011. The IOM report suggests that not only do LGBT individuals experience health disparities when compared to heterosexual peers, the type and extent of these disparities varies across age and specific orientation². Thus, it is important to account for both developmental stage and specific orientation when addressing these health disparities. In addition to increased research attention, the findings offered by the IOM report have been utilized to develop specific action steps within federal agencies, such as the National Institutes for Health (NIH)³, to work towards increased health and well-being among LGBT individuals.

Health Disparities Exist for LGBT Youth and Young Adults

LGBT youth and young adults experience a variety of health issues at a higher rate than their heterosexual counterparts.

- Men who have sex with men and are under the age of 25, especially those from a racial or ethnic minority group, account for a disproportion number of HIV diagnoses.²
- LGBT youth have higher rates of suicidal ideation and suicide attempts.^{2,4}
- Risk factors, such as harassment, victimization, and violence, for mental health problems and substance use are higher for LGBT youth compared to their heterosexual peers.²
- Additional risk factors including smoking, alcohol use, substance use, and homelessness may be more prevalent in LGB youth populations.^{2,4}

Health Disparities Continue for Adults and Older Adults

The health disparities experienced by LGBT youth and young adults tend to continue into adulthood. In addition, new disparities arise.

- Services designed to prevent future illness, such as annual well woman exams and mammograms, may be utilized less frequently by lesbians and bisexual women compared to heterosexual women, though more work needs to be done in this area.²
- Compared to heterosexual women, lesbians and bisexual women are at greater risk for becoming obese. This, coupled with other risk factors such as increased alcohol use and smoking, may contribute to higher rates of breast cancer in these groups.²

- The disproportionate HIV/AIDS transmission rate of racial or ethnic minority men who have sex with men observed in young adulthood continues into adulthood.²
- Across adulthood and later adulthood, rates of human papillomavirus (HPV), which has been linked to anal cancer, is higher among men who have sex with men than men who have sex with women.²
- Compared to heterosexual women, bisexual women are more likely to experience rape, physical violence, and stalking in their lifetime. Additionally, both lesbian and bisexual women are more likely to experience psychological aggression than heterosexual women.⁵
- While more research is needed, rates of depression in later adulthood appear to be high for LGB individuals and may be even higher for transgendered individuals.²
- Individuals living with HIV/AIDS are living longer than ever before. Research examining appropriate treatment and care for this population is needed.²

APA Recommendations

- APA supports increased data collection and research efforts aimed at understanding health disparities in underrepresented populations, including LGBT populations. Specifically, consistent data collection regarding sexual orientation and gender identity in federally funded surveys is vital. Such data will allow a better understanding of the nature and extent of LGBT health disparities.
- APA supports recent efforts of federal agencies such as the Department of Health and Human Services, the National Institutes of Health, and the Centers for Disease Control and Prevention to respond to the IOM report by funding research to investigate LGBT health disparities and incorporating sexual orientation and gender identity items into federally funded research. Such research could also identify protective and resilience factors among the majority of LGBT individuals who are healthy, despite the challenges they face. This would provide a more solid foundation for the creation and implementation of culturally sensitive prevention and treatment programs that specifically focus on the needs of LGBT populations.
- APA supports programs that provide necessary training to those in careers related to addressing LGBT health disparities, including psychologists. To eliminate health disparities experienced by LGBT individuals, professionals must have adequate training to address the specific needs of individuals at different ages and of different orientations. Workforce development to better address LGBT health disparities, particularly those related to behavioral health, would contribute to achieving national Healthy People 2020 LGBT goals.

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- ³ National Institutes of Health (2013). *Consideration of the Institute of Medicine (IOM) report on the health of lesbian, gay, bisexual, and transgender (LGBT) individuals*. Retrieved from: http://report.nih.gov/UploadDocs/LGBT%20Health%20Report_FINAL_2013-01-03-508%20compliant.pdf.
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