



LA County Lesbian & Bisexual Women's Health Collaborative Resource Guide 2014

The selections below offer a sample of research publications and are not exhaustive of all of the available publications related to various aspects of lesbian and bisexual women's health. For further information about this guide, or the LA County Lesbian and Bisexual Women's Health Collaborative, please see the contact information at the end.

TITLE	PUBLICATION OVERVIEW
Health Behaviors and Health Status	
<p>Health Behaviors and Health Care Utilization of Southern Lesbians Austin, E.L. and J. A. Irwin, 2010</p> <p>http://www.sciencedirect.com/science/article/pii/S104938671000006X#</p>	<p><u>Overview:</u> Uses an online survey to compare the health behaviors and health care utilization of lesbians aged 19 and older living in the south to representative subsamples of women from the general population</p> <p>Southern lesbians:</p> <ul style="list-style-type: none"> • Were less likely to be in poor physical health, but more likely to have experienced recent depression • Reported more risky behaviors associated with poor physical and mental health • Experienced barriers to routine healthcare, including having no health insurance or no regular provider
<p>Health Risk Behaviors in an Urban Sample of Young Women Who Have Sex with Women A L. Herrick, A.K. Matthews, and R. Garofalo, 2010</p> <p>http://www.tandfonline.com/doi/pdf/10.1080/10894160903060440</p>	<p><u>Overview:</u> Compares the sexual and substance use behaviors of women who have sex with women aged 16-24 to the sexual and substance use behaviors of nonsexual minority youth.</p> <p>Women who had sex with women had:</p> <ul style="list-style-type: none"> • Higher rates of drug use than nonsexual minority youth • Greater alcohol use than nonsexual minority youth: <ul style="list-style-type: none"> ○ 68% used at least monthly ○ 38% used at least weekly ○ 32% were binge drinkers • More risky sexual behaviors: <ul style="list-style-type: none"> ○ 65% had unprotected anal sex ○ 88% had sex while intoxicated ○ 43% used the internet to find partners ○ 42% participated in public sex ○ 20% had intercourse resulting in pregnancy

<p>The Health and Health Care of Lesbian, Gay, and Bisexual Adolescents. Coker TR, Austin SB, and Schuster MA. 2010</p> <p>http://www.annualreviews.org/doi/full/10.1146/annurev.publhealth.012809.103636</p>	<ul style="list-style-type: none"> • Discusses ways in which researchers and clinicians can improve LGB adolescent health and health care • Examines health care provision and utilization as well as health indicators and health risks for LGB youth, including: <ul style="list-style-type: none"> ○ Substance use ○ Eating disorders ○ Suicidality ○ Risky sexual behaviors ○ Violence exposure and victimization ○ Homelessness
<p>Adult Health Behaviors Over the Life Course By Sexual Orientation Boehmer, Ulrike, 2012</p> <p>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3483982/pdf/AJPH.2011.300334.pdf</p>	<p>Overview: Uses data from the California Health Interview Survey to determine the extent to which risk behaviors of lesbian, gay, and bisexual individuals differed from those of heterosexual populations across age cohorts.</p> <p>Results:</p> <ul style="list-style-type: none"> • Potential increases in sexual minority health disparities with age <ul style="list-style-type: none"> ○ E.g. lesbians 50 and older had lower odds of consuming the recommended servings of fruit and vegetables. • Lesbian and bisexual women had: <ul style="list-style-type: none"> ○ Higher rates of tobacco and alcohol use ○ Higher rates of physical activity ○ Higher rates of ER visits ○ Lower rates of Pap tests
<p>Barriers to Optimal Care between Physicians and Lesbian, Gay, Bisexual, Transgender, and Questioning Adolescent Patients R.L. Kitts, 2010</p> <p>http://www.tandfonline.com/doi/full/10.1080/00918369.2010.485872</p>	<p>Overview: Residents and attending physicians were surveyed regarding practice, knowledge, and attitudes pertaining to LGBTQ adolescents in order to identify barriers to optimal care of LGBTQ adolescents.</p> <p>Most physicians did not:</p> <ul style="list-style-type: none"> • Regularly discuss sexual orientation, sexual attraction, or gender identity while taking a sexual history from adolescents • Ask about sexual orientation if an adolescent presented with depression, suicidal thoughts, or had attempted suicide • Ask additional sexual health-related questions if an adolescent stated they were not sexually active • Believe they had all the skills needed to address issues of sexual orientation with adolescents

<p>Veterans Administration Health Care Utilization among Sexual Minority Veterans Simpson, T.L., 2013</p> <p>http://www.researchgate.net/publication/237015242_Veterans_administration_health_care_utilization_among_sexual_minority_veterans</p>	<p><u>Overview:</u> Uses Anderson’s Emerging Behavioral Model of Health Services to assess predictors for and rates of VHA utilization by sexual minority veterans and to identify specific barriers to accessing care</p> <p><u>Results:</u></p> <ul style="list-style-type: none"> • ¼ of respondents avoid using a desired VHA service for fear of stigmatization • Services commonly avoided were counseling and outpatient medical and dental care • Factors associated with greater health care utilization were: <ul style="list-style-type: none"> ○ Female gender ○ Older age ○ Unemployment ○ Low income ○ Positive PTSD screen ○ Positive service connection ○ Worse physical functioning ○ Greater number of years since leaving the military <p>Of those who utilized services:</p> <ul style="list-style-type: none"> • 1/3 of respondent’s providers definitely do not know about their sexuality • Only 1/3 of respondents talk sometimes with VHA providers about issues related to their sexuality.
<p>Psychological Distress, Well-Being, and Legal Recognition in Same-Sex Couple Relationships Ellen D.B. Riggle and Sharon S. Rostosky, 2010</p> <p>http://www.drlynepiche.com/uploads/photos/psychological%20distress%20orientation%20and%20recognition%20adults%202010.pdf</p>	<p><u>Overview:</u> Used on online survey of LGB individuals to compare the well being and psychological distress of those in single, dating, committed, and legally recognized relationships.</p> <p><u>Results:</u></p> <ul style="list-style-type: none"> • Females reported more stress and depressive symptoms • Parents reported more meaning in their lives • Participants in longer relationships reported less stress and internalized homophobia <p>Higher education was associated with:</p> <ul style="list-style-type: none"> • Less stress • Fewer depressive symptoms • More meaning in life <p>Compared to those in committed relationships, those in legally recognized relationships reported:</p> <ul style="list-style-type: none"> • Less internalized homophobia • Fewer depressive symptoms • Lower stress levels • More meaning in their lives
<p>Emotional Distress among LGBT Youth: The Influence of Perceived Discrimination Based on Sexual</p>	<p><u>Overview:</u> Used data from a school-based survey in Boston, MA to evaluate emotional distress among high school students and whether emotional distress</p>

<p>Orientation. Joanna Almeida, Renee M. Johnson, et al. 2009</p> <p>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3707280/</p>	<p>of LGBT students was mediated by perceptions of mistreatment or discrimination due to their LGBT status</p> <p>Compared to heterosexual, non-transgendered youth, LGBT youth:</p> <ul style="list-style-type: none"> • Had significantly more depressive symptoms • Were five times more likely to report suicidal ideation (30% vs. 6%) • Were more likely to self harm: (5% vs. 3%) <p>Among LGBT students, perceived discrimination accounted for increased:</p> <ul style="list-style-type: none"> • Depressive symptoms • Risk for self harm • Risk for suicidal ideation
<p>National Transgender Discrimination Survey Report on Health and Health Care Jaime M. Grant, Lisa A. Mottet, et al, 2010</p> <p>http://transequality.org/PDFs/NTDSReportonHealth_final.pdf</p>	<p><u>Overview:</u> Surveyed over 7,000 transgender individuals about significant aspects of transgender discrimination in order to create a comprehensive report on the health, health care, and barriers to health care of the transgender population.</p> <p><u>Results:</u></p> <ul style="list-style-type: none"> • Most respondents had accessed transition-related medical care • Most wanted surgery but had not had it yet • 41% reported attempting suicide • Over a quarter misused drugs or alcohol specifically to cope with discrimination • 89% received or wanted gender identity-related counseling <p>Respondents reported:</p> <ul style="list-style-type: none"> • Very high rates of postponing medical care <ul style="list-style-type: none"> ○ Due to discrimination (28%) ○ Due to cost (48%) • Barriers to health care access included: • Refusal of care (19%) • Harassment and violence in medical settings (28%) <ul style="list-style-type: none"> ○ Physical attacks, 2% ○ Verbal Harassment, 28% • Lack of provider knowledge (50%)

<p>Sexual Minority Status and Self-Rated Health: The Importance of Socioeconomic Status, Age, and Sex Mieke Beth Thomeer, 2013</p> <p>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3679198/</p>	<p><u>Overview:</u> Uses data from the 1991 to 2010 General Social Survey to examine the association between sexual minority status and self-rated health as moderated by socioeconomic status, age, and sex.</p> <p><u>Results:</u></p> <ul style="list-style-type: none"> • Respondents with any same sex partners: <ul style="list-style-type: none"> ○ Reported worse health than those with only different sex partners ○ Was associated with worse health for women but not men, and only among younger adults
<p>Physical Health Complaints Among Lesbians, Gay Men, and Bisexual and Homosexually Experienced Heterosexual Individuals Cochran S.D. and Mays V. M, 2007</p> <p>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2040376/</p>	<p><u>Overview:</u> This study used data from the California Quality of Life Survey to examine associations between sexual orientation and self-reports about physical health status, common health conditions, disabilities, and psychological distress.</p> <p><u>Results:</u></p> <ul style="list-style-type: none"> • Lesbians and homosexually experienced heterosexual women reported a greater variety of health conditions and limitations • Bisexual women were more likely report a functional health limitation and poorer physical health • Lesbians and bisexual women were more likely than exclusively heterosexual women to report they were receiving disability income
<p>Invisible: The State Of LGBT Health In Colorado One Colorado Education Fund, 2011</p> <p>http://www.one-colorado.org/news/lgbt-health-report/</p>	<p><u>Overview:</u> This study used a series of community health dialogues and an online survey of the health needs and beliefs of LGBT individuals to provide a clearer picture of the state of LGBT health and wellness in Colorado.</p> <p>Topics include:</p> <ul style="list-style-type: none"> • Expanding healthcare access • Increasing affordability of care • Providing culturally responsive care • Factors to improve patient provider relationships for LGBT persons • Recommendations for a healthier Colorado

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