

Training in Sexual Health Research - Geneva 2007

Health of Sexual Minorities

Lecture notes: Robert Thomson 22 March 2007

Research instruments

Time space study of difficult to reach populations – US Centres for Disease Control

Sigma – British national health service/Terrence Higgins Trust (2003)

Narrative methods (theatre and story-based, focus group discussions)

Methodological principles

Base yourself on existing standard national or regional health or behavioural surveys and insert specific questions on sexual minorities within comparative surveys.

Work with concerned representatives of the communities being researched

Obtain disaggregation of sexual minorities from within other surveys

Never make disclosure or participation in research a condition of access to treatment (reminder: attempts to restrict anti-retroviral therapy on grounds of mode of transmission)

Action/operational research

Sub-populations can include members of the sexual minority being researched using/not using health services, with no medical condition/with(out) sexually transmitted infection/with non-HIV related (chronic) illness/ with HIV-related illness

Other aspects of health of sexual minorities (substance use, mental health)

Demonstrate relevance of the issue, identify and remove barriers and develop health promotion tools for sexual minorities on the basis of collected evidence, not on opinion

Exercise in plenary

Finish the following sentence in your own words:

“Belonging to a sexual minority is relevant to health care because ... ”

Possible answers:

1. A lifetime of (fear of) discrimination will impact on someone's health.
2. Experience of discrimination from health system/staff makes it less likely someone will present for care.
3. Specific behaviour(s) imply specific health needs.

The answers usually (exclusively) come from the perspective of the patient/client. There are answers that come from the perspective of the health provider, who may also belong to a sexual minority.

Values clarification (obtain group agreement)

It is important to understand that belonging to a sexual minority (self-identifying as bisexual, lesbian, or gay, having sexual experience with others of the same sex) or being unsure about one's sexual identity, orientation or preference does not make someone physically or mentally ill.(Score 0-9)

Male – female (Score 0-9)

Masculine – feminine (Score 0-9)

Homosexual – heterosexual (Score 0-9)

Exercise in groups of three

“Why do you think patients/clients who are members of sexual minorities do not disclose this to the health professional?”

Possible answers:

1. Sexual orientations are not relevant to all consultations (minor ailments)
2. Experience of discrimination from health staff and worry about further bias
3. Patient/client presumptions arising from age, sex, sexual orientation, religion or ethnicity of the health professional
4. Worried about if/how the information will be recorded and who will see it (including employers, family, insurers)
5. Shyness, embarrassment, discomfort
6. Patient/client may not be aware of sexual minority status (“out” to themselves)

“What are the benefits of disclosing one’s sexuality to a health professional?”

Possible answers:

1. Screens for relevant health-related conditions
2. Later treatment will benefit from the established relationship
3. Lifestyle issues, personal and sexual relationships can be discussed

Overcoming barriers

Related to health system/environment

Related to health staff

Bibliography and resources

The Health of Sexual Minorities: Public Health Perspectives on Lesbian, Gay, Bisexual and Transgender Populations (Hardcover) by Ilan H. Meyer (Editor), Mary E. Northridge (Editor)

Hickson et al (2003) Making it count; a collaborative framework for reducing the incidence of HIV infection during sex between men. 3rd edition, Sigma Research, London

Keogh et al (2004) Doctoring gay men: Exploring the contribution of General Practice. Sigma Research, London

Sexual Diversity: General Practice and Primary Care Services Audit (NHS/THT)

Guidelines for primary health care providers to enhance the care of gay men, lesbians and bisexuals (NHS/THT)

<http://www.advocatesforyouth.org/glbtc.htm>

Sexual Minority Youth Action Research Project

<http://www.incommunityresearch.org/research/smy.htm>

Abstract

Fundamental support systems for lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth of color, including family, religion, and schools, are often lacking, incognizant of support needs, or at times strongly conflicted due to beliefs around sexuality. Support systems that exist for older LGBTQ individuals are often not available, accessible, or appropriate for younger (ages 14-20) youth coming to terms with their sexual identity. Available support systems often lack experience or knowledge necessary to effectively work with LGBTQ who also identify as youth of color. Launched in 1999, the Sexual Minority Youth Action Research Project expands the work of the Youth Action Research Institute to bring action research, advocacy and leadership to a traditionally marginalized youth population. The program works with urban LGBTQ youth, using an adapted participatory action research training curriculum that includes issue identification and clarification, ecological modeling, introduction to research methods, and action strategy development. In this way, participating youth explore and address issues affecting them, their communities and schools. The formative research conducted by the youth contributes to the understanding and knowledge about issues faced by LGBTQ youth, how they are coping, and resources available to them.

In addition to the research activities, the project provides LGBTQ youth with the space to connect with their peers, and where they can have conversations around their multiple identities, school and family supports, safer sex, self-determination, and other topics that the youth choose or may seem relevant to their selected issue. The Institute for Community Research also provides youth with opportunities to attend conferences where they present on their project, and other cultural/educational activities that they might not otherwise be exposed to.

Project Goals and Objectives

- Train urban, LGBTQ youth of color to do action research for personal growth, group development and community change.
- Develop community leadership among urban, LGBTQ youth of color.
- Increase understanding and knowledge of resources available to urban, LGBTQ youth of color
- Build social supports for urban, LGBTQ youth of color
- Promote awareness and responsive community action to LGBTQ youth issues

Project Details

During the 2002-2003 school year, the Sexual Minority Youth Action Research Project is working in two urban communities in Connecticut (Hartford and New Haven) to identify and address issues affecting LGBTQ youth. Through this two-community study, project participants gather information on a critical issue that youth identify as facing urban - particularly African-American and Puerto Rican - LGBTQ youth. In past years youth have explored issues such as: supports for LGBTQ youth, available resources and their accessibility to youth; and identifying barriers for youth access to these resources. Project staff recruit two teams of six high school age Community Youth Researchers who receive intensive training in participatory action research. The teams meet separately for 8 to 10 hours/week to conduct research in their communities. The two teams come together periodically to discuss progress, share ideas and receive joint trainings as needed. Using research results, Community Youth Researchers work with project staff to develop and begin implementation of action strategies based on their research findings, which are designed to affect change and to build resources for urban LGBTQ youth.