

Health Disparities Among Sexual Minority Adults in Indiana

Findings from the 2014-2017 and 2020 Indiana BRFSS



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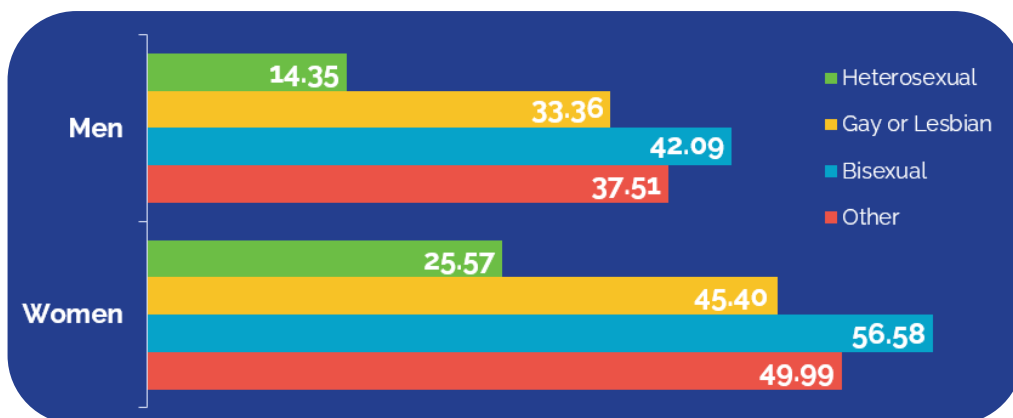
Introduction

Sexual minorities have a higher prevalence of health risk behaviors and poor health outcomes compared to their heterosexual counterparts, indicating that health disparities for lesbian, gay, bisexual, and other sexual minorities (LGB+) are of increasing importance to explore.¹ Numerous studies using data from sexual minority groups have found that sexual minority members are more likely to report frequent feelings of depression, as well as engage in health risk behaviors like cigarette smoking and binge drinking.²⁻⁶

In 2014, the Centers for Disease Control and Prevention (CDC) began offering the optional Sexual Orientation and Gender Identity (SOGI) module for states to include in the Behavioral Risk Factor Surveillance System (BRFSS) survey. Indiana collected SOGI data using the BRFSS in 2014, 2015, 2016, 2017, and 2020. These data were analyzed as part of the present study to identify whether sexual minority men and women in Indiana are at a higher risk of binge drinking, current smoking, and having ever been diagnosed with a depressive disorder compared to their heterosexual counterparts. Due to lack of data and insignificant results, gender identity was not included in these analyses.

Depression Diagnosis

Prevalence of Depression Diagnosis Among Indiana Adults by Sexual Orientation



Sexual minorities in Indiana have a significantly higher prevalence of having ever been diagnosed with depression compared to heterosexual adults. Over half of women identifying as bisexual (56.58%) and nearly half of women identifying as lesbian (45.40%) or another non-heterosexual identity (49.99%) had ever been diagnosed with depression, which were all significantly higher in prevalence compared to heterosexual women (25.57%). Similar trends were present for men, with 42.09% of bisexual men, 37.51% of men with another non-heterosexual identity, and 33.36% of gay men reporting having ever been diagnosed with depression when compared to heterosexual men (14.35%).

4.55%

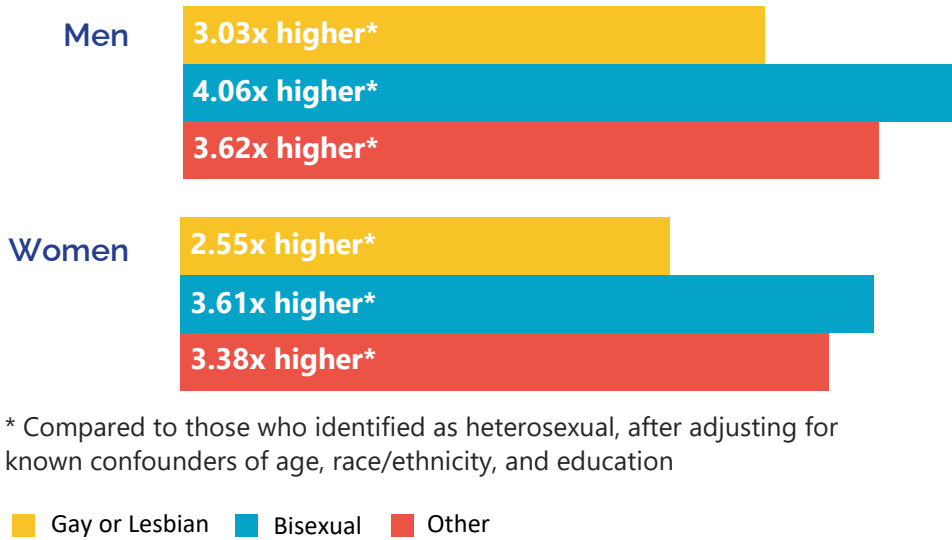
of Indiana adults identified as lesbian, gay, bisexual, or another sexual minority

Fast Facts

Among Indiana adults in 2014-2017 and 2020:

- Individuals who identified as LGBTQ+ tended to be younger and more racially/ethnically diverse compared to those who identified as heterosexual
- 56.58% of bisexual women and 42.09% of bisexual men had ever been diagnosed with depression compared to 25.57% of heterosexual women and 14.35% of heterosexual men
- 28.33% of lesbian women and 37.50% of gay men engaged in current smoking compared to 19.44% of heterosexual women and 23.07% of heterosexual men

Odds of Depression Diagnosis Among Indiana Adults by Sexual Orientation

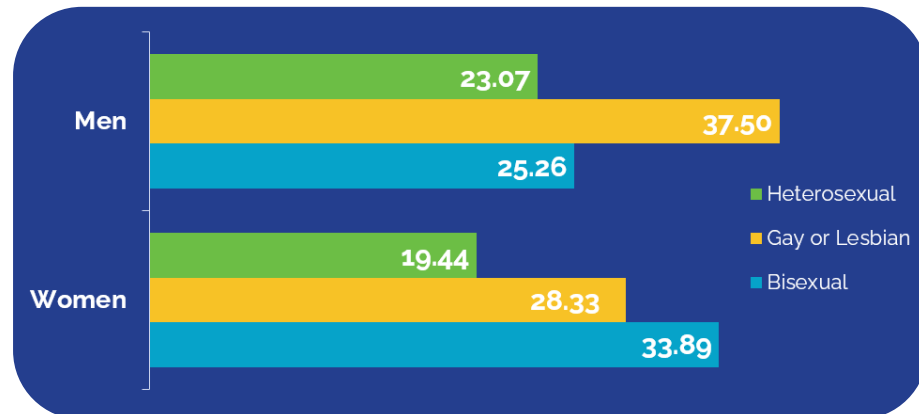


Sexual minorities in Indiana also have greater odds of having ever been diagnosed with depression compared to heterosexual adults, as demonstrated by results from a logistic regression model. In particular, bisexual men and women have the greatest odds of depression diagnosis compared to other sexual minority groups, with bisexual men having 4.06 times greater odds of depression diagnosis and bisexual women having 3.61 times greater odds of depression diagnosis compared to their heterosexual counterparts. These results are consistent with findings from other states, indicating the need for improved access to mental health care for sexual minorities.^{1-5,7}

Current Smoking

An analysis of current cigarette smoking behaviors among Indiana adults based on sexual orientation indicated that gay men, lesbian women, and bisexual women were all significantly more likely to currently smoke cigarettes when compared to heterosexual men and women. Findings from a logistic regression model indicated that gay men had 2.54 times greater odds of being current smokers compared to heterosexual men, and lesbian and bisexual women had greater odds of being current smokers compared to heterosexual women (1.65 and 1.77, respectively). High smoking rates among sexual minority adults can possibly be attributed to increased environmental stressors related to their sexual orientation and to targeted marketing campaigns.^{8,9}

Prevalence of Current Smoking Among Indiana Adults by Sexual Orientation



Binge Drinking

Few significant differences were found in binge drinking behaviors among sexual minorities compared to their heterosexual counterparts. The only group with a significantly higher prevalence of binge drinking was bisexual women, where nearly one-fifth (19.45%) reported binge drinking compared to 10.38% of heterosexual women. Results from a logistic regression model indicated no other significant differences between sexual minority adults and their heterosexual counterparts in reported binge drinking.

19.45%
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Conclusions and Future Research Possibilities

- Similar to findings from other states, sexual minority adults in Indiana are at increased risk of engaging in health-related risk behaviors and suffering from poor mental health outcomes. Minority stress, social exclusion, institutional heterosexuality, and feelings of shame and rejection may all contribute to participation in health risk behaviors and negatively shape mental health outcomes for sexual minorities.^{3,4,7}
- According to the *Human Rights Campaign*, Indiana is one of more than 20 states that falls under the “high priority to achieve basic equality” category for LGBTQ+ populations, indicating the need for policy changes in Indiana to protect LGBTQ+ people from discrimination and to foster inclusion.¹⁰ These protections may also lead to decreased engagement in health-related risk behaviors and improved mental health outcomes.
- To improve health outcomes within the LGBTQ+ population, it is important to tailor health promotion interventions to reflect specific community-level needs, as prior research has shown that community-level interventions tend to work best when designed to reflect specific needs based on age, gender, place of residence, and race/ethnicity.²
- Future research could further explore the underlying causes of participating in health risk behaviors and experiencing poor mental health outcomes among sexual minorities in Indiana. In addition, it would be interesting to analyze outcomes for sexual minorities from different socioeconomic and racial/ethnic backgrounds.
- Although there was a lack of reportable data for transgender and gender diverse adults in Indiana, future research could focus on health disparities among members of these groups once more data have been collected.

References

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For a full report on health disparities among sexual minority adults in Indiana, visit:
https://gis.in.gov/apps/ISDH/BRFSS/Reports/Research/BRFSS_SOGI_Special_Analysis.pdf



For additional information on the Indiana Behavioral Risk Factor Surveillance System (BRFSS): <https://in.gov/health/oda/data-analysis-and-risk-factors/behavioral-risk-factor-surveillance-system/>