

Confronting health disparities among lesbian, gay, bisexual and transgender youth

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Research indicates that the social stigma that surrounds lesbian, gay, bisexual, and transgender (LGBT) teens leads to a variety of health risks such as substance use, risky sexual behaviors, eating disorders, suicidal ideation, and victimization. An editorial in the September issue of the *Journal of Adolescent Health* calls on clinicians and health researchers to lead the charge in improving the health and well-being of U.S. LGBT teens. Clinicians can start by providing LGBT teens with high-quality, preventive care in a regular, private, and confidential environment. Health researchers can start by including information on sexual orientation and gender identity in health surveys and assessments.

"As clinicians, we should recognize how negative societal reactions related to sexual orientation and [gender identity](#) can affect our patients' health," says senior author Mark Schuster, MD, PhD, chief of General Pediatrics at Children's Hospital Boston and William Berenberg Professor of Pediatrics at Harvard Medical School.

"Clinicians have a responsibility to offer a safe, expert environment in which LGBT youth can get support, receive excellent care, and learn how to protect against health risks."

The editorial expands on a research study also appearing in the September issue of the [Journal of Adolescent Health](#) ("Healthcare Preferences of Lesbian, Gay, Bisexual, Transgender, and Questioning Youth") that examined [health care](#) preferences among LGBT youth, and confirmed that LGBT teens want the same health care that all

adolescents should receive. Despite their willingness to discuss their sexuality with physicians, health care disparities among LGBT youth remain. Recent findings, from research by Dr. Schuster and others, have suggested that many clinicians do not know their patients' sexuality in part because clinicians are not creating opportunities for teens to disclose it.

"Clinicians and researchers can be a prominent and leading group in the effort to improve health and well-being for LGBT youth," adds lead author Tumaini R. Coker, MD, MBA, physician at Mattel Children's Hospital at the University of California Los Angeles (UCLA). "We can start by eliminating the silence on adolescent sexual orientation and gender identity that is too often present in medical and nursing education, large health studies, and adolescent patient encounters."

In particular, Schuster, Coker, and third author Bryn Austin, ScD, of the division of Adolescent/Young Adult Medicine at Children's, recommend that [sexual orientation](#) and gender identity measures be standardized and routinely included in relevant national, state, and local health and research surveys that cover adolescents to increase our understanding of the needs of LGBT youth. They also recommend that clinicians receive training through simulated patient experiences on how to appropriately provide comprehensive and sensitive care, and seek out educational resources to help improve the quality of care they provide to LGBT teens.

Source: Children's Hospital Boston ([news](#) : [web](#))

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