

The effects of sexual orientation on sexual function and distress presented

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In recent years, there has been debate around the topic of who is happier, healthier, and more satisfied sexually—traditional heterosexual or sexual minority women.

A study, presented at the [2023 Annual Meeting of The Menopause Society](#) in Philadelphia September 27–30, suggests that cisgender heterosexual women have higher relationship scores and less anxiety and depression than their less traditional counterparts.

Satisfaction with one's relationship and sex life has been shown to have a direct impact on a woman's mental and [physical health](#). Rates of substance abuse, obesity, and stroke have even been linked to [sexual satisfaction](#) and sexual distress. Unfortunately, little research has been conducted on [sexual function](#) in sexual minority women (described as a group whose [sexual identity](#), orientation, or practices differ from the majority of the surrounding society).

A new study involving more than 6,200 sexually active women, including a small percentage of women who were identified as sexual minority women, aimed to evaluate sexual function and sexual distress in cisgender sexual minority women compared to cisgender heterosexual women.

The study concluded that, in general, sexual minority women had significantly lower quality of life and relationship satisfaction scores compared to heterosexual women. Sexual minority women were also more likely to experience anxiety and depressive symptoms, as well as sexual distress. No statistically significant differences were seen, however, for sexual dysfunction between the two groups. Additional research is needed to address multiple other variables in a larger, more diverse study population.

The results presented during the meeting are part of a presentation entitled, "Associations of sexual function and [sexual orientation](#) in cisgender women."

"Many women feel uncomfortable discussing their [sexual health](#) with

their health care practitioners, and this can be even more challenging for women who identify as lesbian, bisexual, or queer, due to fears of stigma or discrimination. Our goal with this research was to evaluate if differences exist in female sexual functioning based on sexual orientation and utilize that information to ultimately foster a more inclusive environment in health care and sexual medicine," says Dr. Talia Sobel, lead author from Mayo Clinic Arizona in Scottsdale.

"As health care professionals, we need ensure that all women receive quality health care and their specific needs are being addressed," adds Dr. Stephanie Faubion, medical director of The Menopause Society. "The results of studies like this one will hopefully lead to improved provider-patient communications and overall care for sexual minority women."

Provided by The North American Menopause Society

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