Sexual Orientation and Health Risks among RI High School Students

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According to a youth survey, 8% of Rhode Island (RI) public high school students (3,500 students) identify as lesbian, gay or bisexual (LGB). This paper examines if there are any differences in health risk behaviors and exposures for this population versus their heterosexual peers.

METHODOLOGY

Every two years, RI high school students participate in the Youth Risk Behavior Survey (YRBS). The YRBS is a sample survey examining the major causes of disease and injury morbidity and mortality.

The YRBS asks the following question: "Which of the following best describes you? 1) heterosexual; 2) lesbian or gay; 3) bisexual, or 4) not sure." Student responses are parsed into two categories, those indicating either #1 (heterosexual), or #s 2 or 3 (lesbian, gay or bisexual).

Fourteen risk measures are examined, relating to mental health, violence, tobacco, drugs and alcohol, and sexual activity. Each measure is a negative indicator, so lower values are preferred. As the YRBS is a sample survey, two years of data (2011 and 2013) are combined to yield samples of sufficient size (>100) to be statistically representative of the LGB cohort. All the differences in values presented here (between LGB and heterosexual students) are statistically significant at the 95% confidence level.

RESULTS

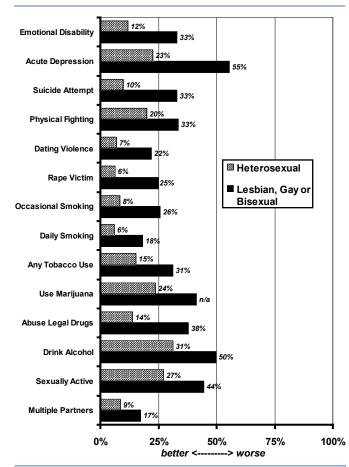
Demographically, lesbian, gay or bisexual students are more likely than their heterosexual classmates to be female (70% versus 48%), Hispanic (28% versus 19%), and poor academic performers (15% versus 7%).

LGB students report more mental health issues when compared to their heterosexual peers. Emotional disability is almost three times more common (33% versus 12%), depression is twice as prevalent (55% versus 23%), and the attempted suicide rate is three times higher (33% versus 10%)¹

Compared to their heterosexual classmates, reported violence is much more common among LGB students. They are more likely to engage in physical fighting (33% versus 22%), three times more likely to experience dating violence (22% versus 7%), and four times more likely to be a victim of sexual assault (25% versus 6%).

Reported tobacco, alcohol and substance use is higher among LGB high school students compared to their

Table. Health Risks Among High School Students by Sexual Orientation Rhode Island, 2011 and 2013



Source: Rhode Island Youth Risk Behavior Survey, Rhode Island Department of Health

heterosexual peers. Occasional smoking is three times higher (26% versus 8%), as is daily smoking (18% versus 6%), and the use of any tobacco product is twice as high (31% versus 15%). LGB students have higher rates of alcohol drinking (50% versus 31%), marijuana use (41% versus 24%), and abuse of legal drugs (prescription and 'over-the-counter') (38% versus 14%).

More LGB high school students report being sexually active compared to heterosexual students. LGB students are more likely to engage in intercourse (44% versus 27%) and twice as likely to have had multiple (4+) sexual partners (17% versus 9%).

DISCUSSION

Lesbian, gay or bisexual students are clearly a vulnerable population displaying a higher prevalence of health risks across every measure examined. Dating violence (1 in 5 LGB students), forced sexual intercourse (1 in 4 LGB students) and attempted suicide (1 in 3 LGB students) are particularly alarming. Equally disturbing are the rates of drinking (1 in 2 LGB students), depression (1 in 2 LGB students) and emotional disability (1 in 3 LGB students).

Reducing health disparities requires concerted effort in identifying the prevention needs and susceptibilities of this group of youth. Strategic interventions, such as increased access to physical/mental health services and prevention education, are needed to change negative social behaviors (e.g., smoking, drinking) and to help avoid victimization from exposure to other negative situations (e.g., rape, dating violence).

Footnote

1. The "Attempted Suicide" rate is based on the proportion of students who reported they had attempted suicide one or more times in the 12 months prior to the survey. During past years, the attempted suicide rate among Rhode Island high school students has been 8%-9%, and in 2011, it was 8.7%. This rate was higher than the overall rate for the United States, which was 7.8% in 2011 (the most current data available). However, in 2013, the self-reported attempted suicide rate among all Rhode Island public high school students rose to 14.3%, which prompted the Department of Health to confirm the data with the Centers for Disease Control and Prevention (CDC), which sponsors the survey and weights the state's data to be representative of the population. The CDC conducted an audit of their 'weighting' methodology for this measure and concluded the 2013 value was correct. It should also be noted that these data are different than other data, such as hospitalization data for suicide attempts, since not all attempts result in a hospital admission. For example, in Rhode Island during 2012, there were 17.2 per 10,000 (less than 1%) hospitalizations for suicide attempts among teens aged 13-19.

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