

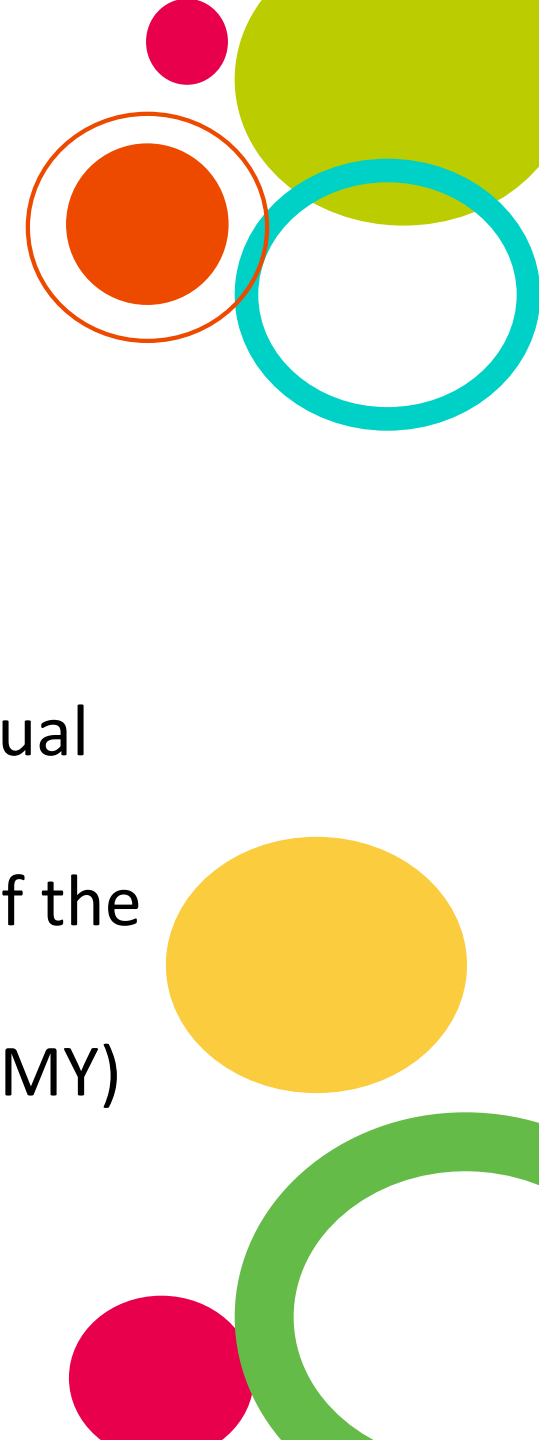
# Health inequalities in gender minority and non-minority adolescents in Ireland

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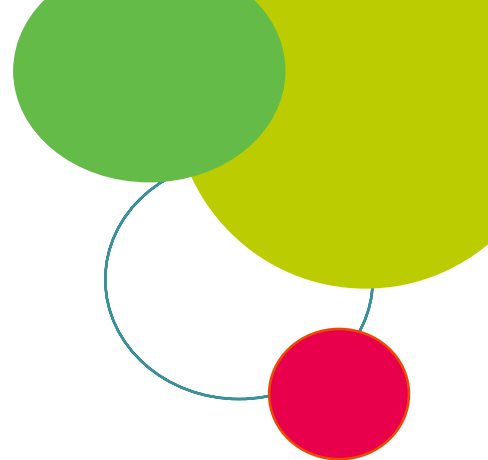
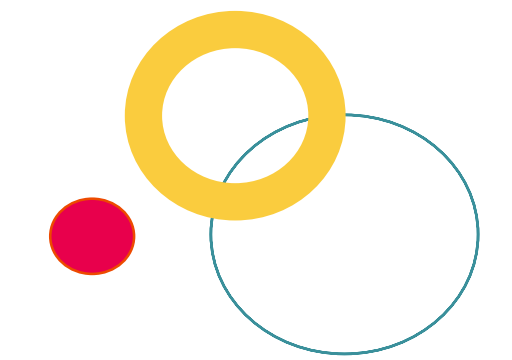
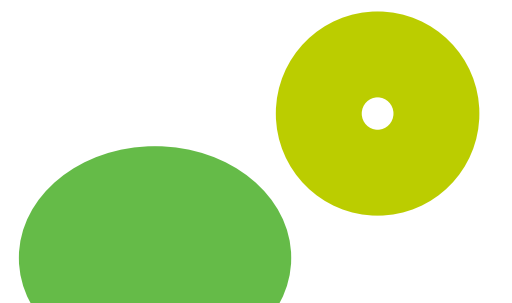


# Background and Aims

- Pilot study
  - Recruited adolescent members of LGBTI+ communities
  - Countries – Ireland, Canada, Spain, Scotland & Wales
  - Presented items on birth-registered sex, gender identity, sexual orientation, health and wellbeing indicators
  - Aim of pilot to test the acceptability and understandability of the items
  - This study compared the health of gender minority youth (GMY) and non-minority youth in Ireland across a variety of health indicators
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# Method and Sample

- Sample 481 young people aged 13–18 (mean age:  $15.67 \pm 1.47$ , percentage GMY: 39.1),
  - Community & Snowball sampling
  - Recruited via national & local LGBTI+ groups
  - Ethical boards in all 4 countries agreed not to ask for parental consent
  - Compared health indicators of gender minority youth and non-minority youth
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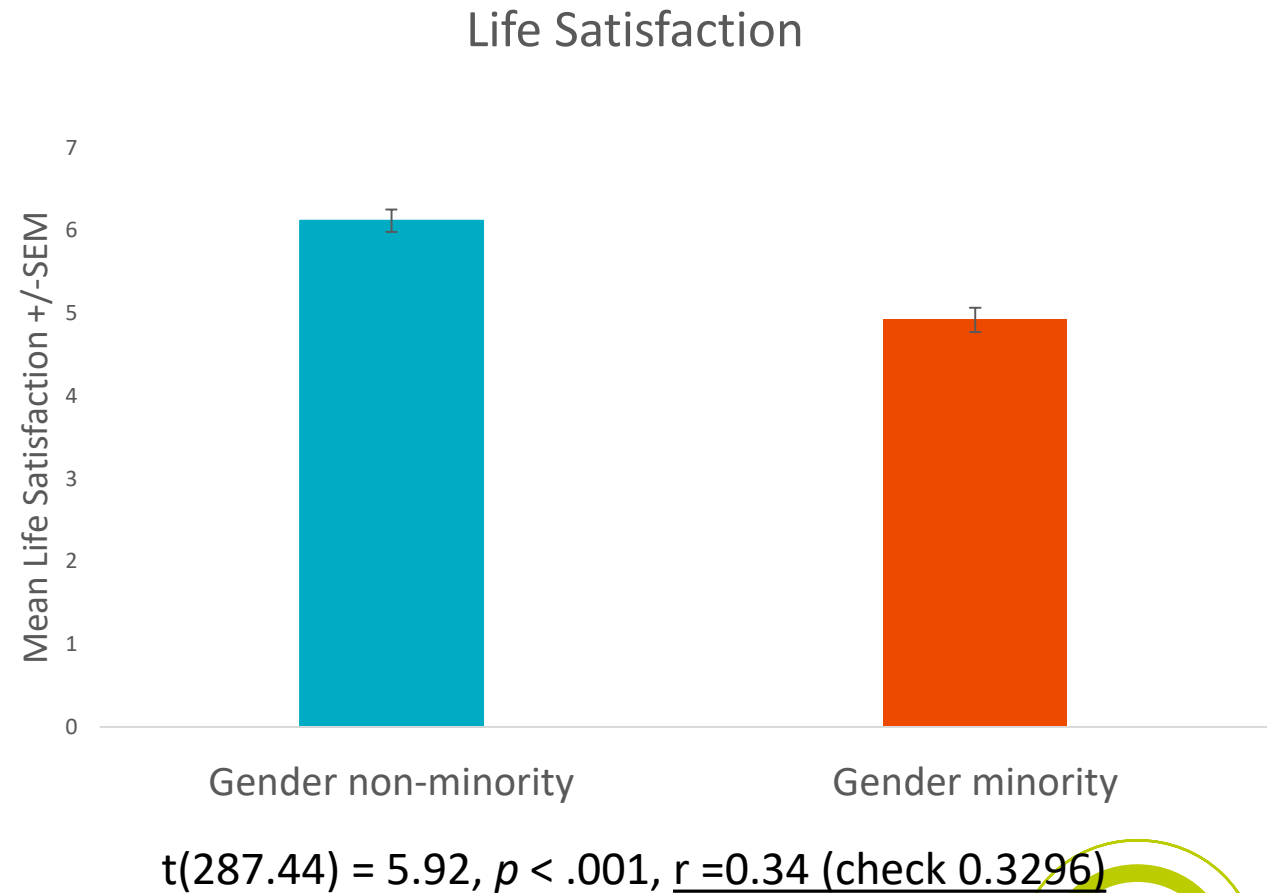
# Life Satisfaction & Multiple Health Complaints

	Low life satisfaction	High life satisfaction
Non-minority	52.0%	48.0%
GMY	81.1%	18.9%

$\chi^2(1) = 27.45, p < .001, V = .301$

	No Multiple Health Complaints	Multiple Health Complaints
Non-minority	19.9%	80.1%
GMY	7.0%	93.0%

$\chi^2(1) = 9.90, p = .002, V = .183$



# Body Image

## Body Satisfaction

	Satisfied with own body	Not satisfied with own body
Non-minority	32.7%	67.3%
GMY	34.4%	65.6%

$\chi^2(1) = 0.09, p = .767$

## Perceived Thinness

	Satisfied with body	Body is too thin
Non-minority	74.0%	26.0%
GMY	80.0%	20.0%

$\chi^2(1) = 0.64, p = .426$

## Perceived Fatness

	Satisfied with body	Body is too fat
Non-minority	37.0%	63.0%
GMY	37.6%	62.7.0%

$\chi^2(1) = 0.01, p = .918$



## Smoking

	Never smoked cigarettes lifetime	Ever smoked cigarettes lifetime
Non-minority	78.5%	21.5%
GMY	76.4%	23.6%

$\chi^2(1) = 0.19, p = 0.663$

	Did not smoke cigarettes last 30 days	Smoked cigarettes last 30 days
Non-minority	91.5%	8.5%
GMY	88.7%	11.3%

$\chi^2(1) = 0.64, p = 0.425$

## Alcohol Consumption

	Never drank alcohol lifetime	Ever drank alcohol lifetime
Non-minority	43.6%	56.4%
GMY	49.2%	50.8%

$\chi^2(1) = 0.89, p = 0.345$

	Did not drink alcohol last 30 days	Drank alcohol last 30 days
Non-minority	67.3%	32.7%
GMY	78.4%	21.6%

$\chi^2(1) = 4.38, p = 0.036, V = 0.123$

## Drunkennesness

	Never been drunk lifetime	Been drunk lifetime
Non-minority	69.1%	30.9%
GMY	74.8%	25.2%

$\chi^2(1) = 1.15, p = 0.283$

	Never been drunk last 30 days	Been drunk last 30 days
Non-minority	88.5%	11.5%
GMY	92.0%	8.0%

$\chi^2(1) = 0.98, p = 0.323$

# Traditional and Cyberbullying Victimisation

	Never or rarely been bullied	Often been bullied
Non-minority	87.8%	12.2%
GMY	75.4%	24.6%

$\chi^2(1) = 7.57, p = .006, V = .162$

	Never or rarely been cyberbullied	Often been cyberbullied
Non-minority	92.1%	7.9%
GMY	89.7%	10.3%

$\chi^2(1) = 0.50, p = .480$

# Support from Family and Friends

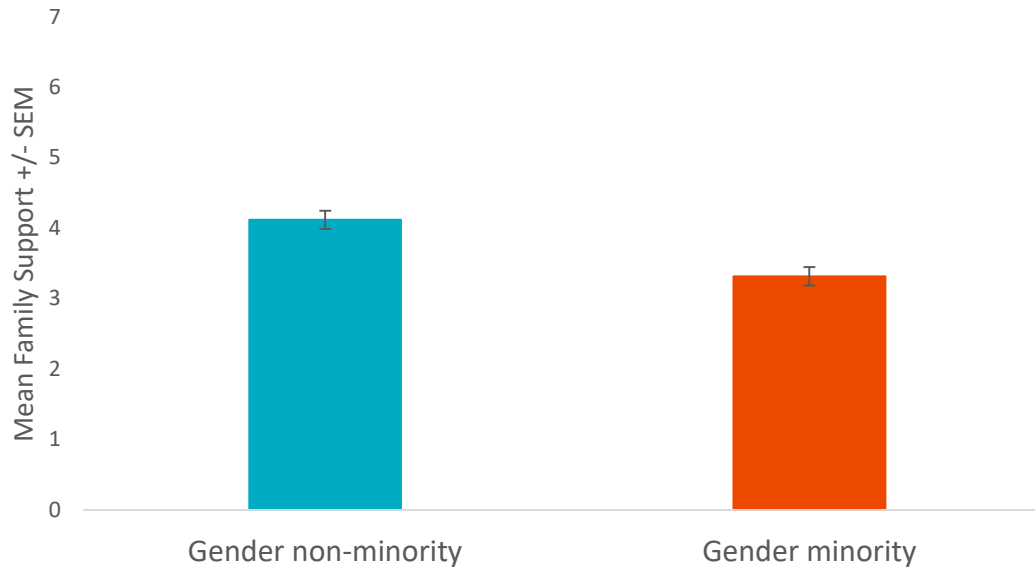
	Low family support	High family support
Non-minority	72.3%	27.7%
GMY	91.7%	8.3%

$\chi^2(292) = 4.281, p < .001, r = \mathbf{0.24301}$

	Low peer support	High peer support
Non-minority	40.5%	59.5%
GMY	35.1%	64.9%

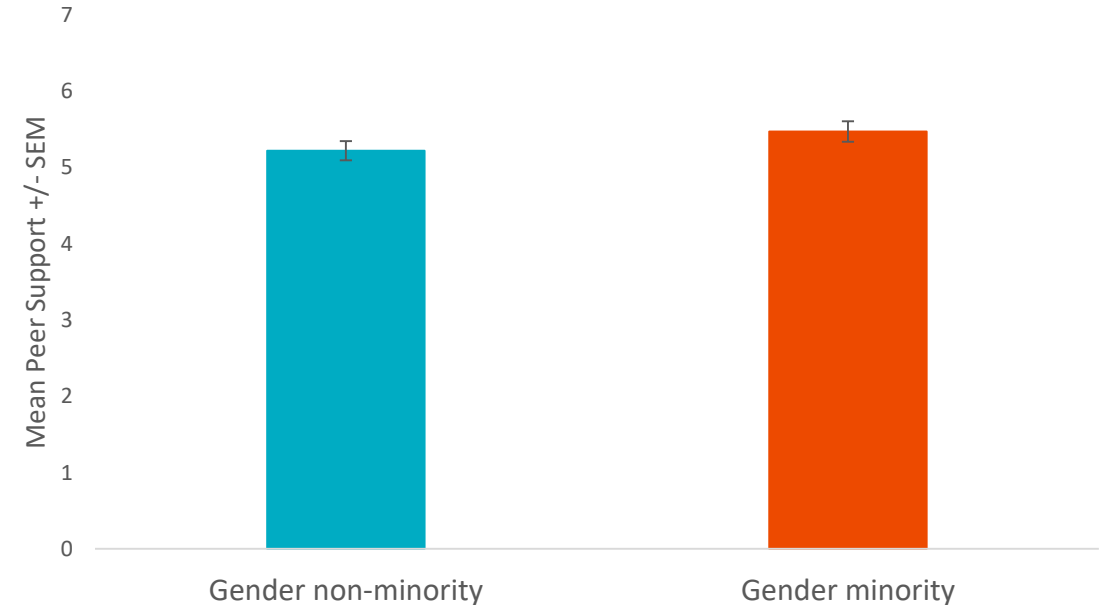
$\chi^2(276.227) = -1.361, p = .175$

Family Support



$t(292) = 4.28, p < .001, r = \mathbf{0.243}$

Peer Support

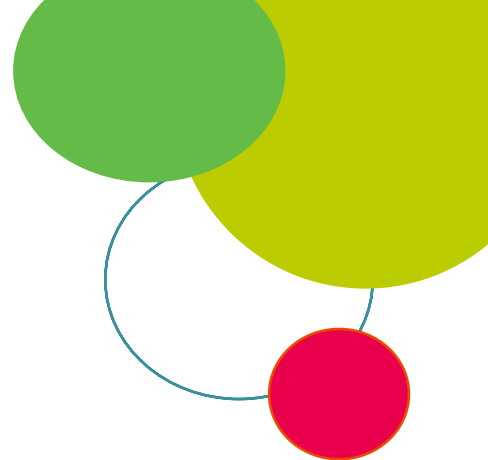
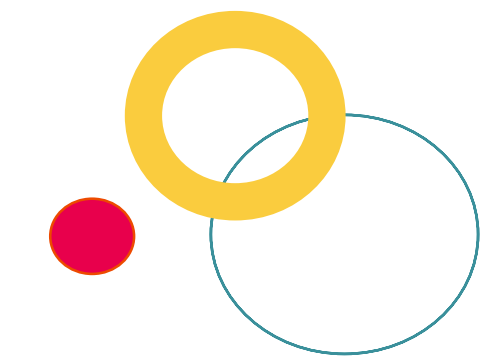



$t(276.23) = -1.36, p .175$





# Discussion

- Results support the general pattern of health disparities between GMY and non-minority youth
  - However, patterns are not consistent across all health indicators and further analyses are warranted
  - Limitations: Availability sampling (LGBTI+ communities - cisgender participants probably belonged to sexual minorities); gender, sexual orientation and other potential covariates were not accounted for
  - Strengths: Relatively high sample size (and high proportion of gender minority youth)
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# Considerations for Practice and Policy

## Practice:

- You may encounter GMY in your practice – don't make assumptions of gender identity based on gender expression
- Practitioners need to be familiar with LGBTI+ terminology and health needs of sexual and gender minority youth (ref. to the short report summary)

## Policy:

- Urgent need for trans-inclusive healthcare and better support for gender dysphoric youth
- School curricula need to be revisited (gender minority erasure)
- Safety and inclusivity in educational and other settings, including LGBTI+ communities

**Thank You!**

