SEXUAL HEALTH AND RISK REDUCTION AMONG COLLEGE STUDENTS: A CASE FOR LG B-SPECIFIC INCLUSIVITY

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REALITIES OF YOUNG ADULTHOOD

- Dynamic opportunities for development may present enhanced risk for illness or infection
  - 10% of students regularly seek on-campus counseling, 29% are seen by college-based counselors in other settings

- Mental and stress-related disorders are impactful
  - 50% of disease burden among young adults
  - Association with binge drinking, drug use and abuse, and risky sexual encounters
INTERSECTION OF YOUNG ADULTHOOD AND IDENTITY DEVELOPMENT

- Impact of sexual orientation, gender identity, and gender expression
  - Stigma and discrimination
- Minority Stress Theory
- Focus on behavioral outcomes
METHODOLOGY

• American College Health Association – National College Health Assessment
  • Measures broad range of behaviors
  • Valid and reliable

• Criteria for Inclusion
  • Student status
  • Age
  • Relationship status
### Sample Demographics

<table>
<thead>
<tr>
<th></th>
<th>Frequency (n)</th>
<th>% Valid</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age in years</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean = 19.99, SD = 1.64, range = 18-24</td>
<td></td>
<td></td>
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<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>50,965</td>
<td>33.7</td>
</tr>
<tr>
<td>Female</td>
<td>100,313</td>
<td>66.3</td>
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<tr>
<td><strong>Ethnicity</strong></td>
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<tr>
<td>White</td>
<td>113,038</td>
<td>74.3</td>
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<tr>
<td>Black or African American</td>
<td>9,274</td>
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<td>Hispanic or Latino/a</td>
<td>11,731</td>
<td>7.7</td>
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<td>Asian or Pacific Islander</td>
<td>17,902</td>
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<td>American Indian, Alaska Native</td>
<td>2,413</td>
<td>1.6</td>
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<tr>
<td>Biracial or Multiracial</td>
<td>5,426</td>
<td>3.6</td>
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<tr>
<td>Other</td>
<td>3,736</td>
<td>2.5</td>
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<tr>
<td><strong>Sexual Orientation</strong></td>
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<tr>
<td>Heterosexual</td>
<td>141,091</td>
<td>95.1</td>
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<tr>
<td>Gay/Lesbian</td>
<td>2,905</td>
<td>2.0</td>
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<tr>
<td>Bisexual</td>
<td>4,325</td>
<td>2.9</td>
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</tbody>
</table>
MEASURES

• Antecedents to Risk (12 month history)
  • Diagnosed or treated for depression, 12-month history
  • Emotionally, physically, or sexually abusive relationship, 12-month history

• Risk Behaviors
  • Cigarette, Alcohol, Marijuana use, 30-day history
  • Considered suicide, 12 months
  • Attempted suicide, lifetime

• Sexual Health (12 month history)
  • Sexually touched without consent
  • Attempted penetration w/o consent
  • Penetrated w/o consent
  • Sex without providing consent
  • Sex without receiving consent
  • Unprotected sex
DATA ANALYSIS

- Data entered into IBM SPSS Statistics 21.0 for Windows
- Cross-tabulations used to examine disparities
- Independent samples t-tests
ANTECEDENTS TO RISK

- LGB respondents nearly three times more likely to have been diagnosed or treated for depression (OR = 2.94, p < 0.001)
  - Depression among lesbian/bisexual females (OR = 3.10, p < 0.001)
- Enhanced likelihood of being in intimate relationships characterized by emotional, physical, or sexual abuse (OR = 1.84, 2.43, 2.17, p < 0.001)
  - Abuse among gay/bisexual males (OR = 1.81, 1.72, 2.56, p < 0.001)
  - Physical abuse among lesbian/bisexual females (OR = 2.92, p < 0.001)
• LGB respondents more likely to engage in cigarette, alcohol, and marijuana use (OR = 2.21, 1.39, 1.85, \( p < .001 \))

  • Lesbian/bisexual female tobacco use (OR = 2.82, \( p < .001 \))

• LGB respondents more likely to have suicidal ideation and attempts (OR = 1.50, 3.70, \( p < .001 \))

  • Risk of suicide among lesbian/bisexual females (OR = 4.10, \( p < .001 \))
SEXUAL BEHAVIORS

- LGB respondents more likely to have been sexually touched without providing consent (OR = 2.08, p < 0.001)

- Unprotected sexual activity (OR = 1.51, p < 0.001)

- Attempted sexual penetration by gay and bisexual males (OR = 4.75, p < 0.001)

- Lack of consent among lesbian and bisexual females (OR = 1.60, 1.62, p < 0.001)
• Higher education uniquely positioned to promote healthy decision-making

• Focused interventions based upon gender and sexual preference assist in meeting health objectives