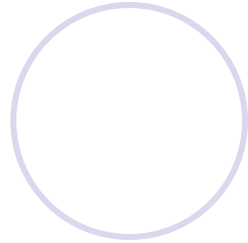
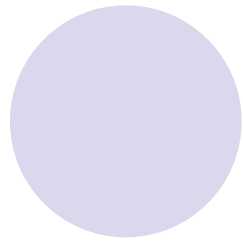


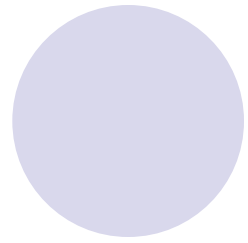
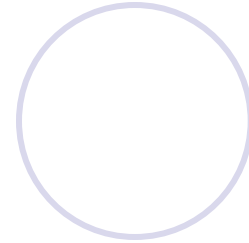
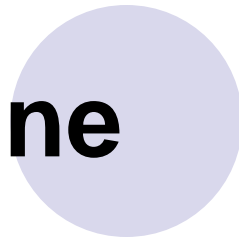


Top Ten Bisexual Health Issues: What Current Research Tells Us

Rainbow Health Ontario Conference,
March 26, 2010
Cheryl Dobinson



Outline



- Background
- How many people are bisexual?
- Top 10 bisexual health issues
- Implications for research and practice
- Next steps



Background

- Ontario Public Health Association, Public Health Alliance for LGBTTTTIQQ Equity working group
 - “Improving the Access and Quality of Public Health Services for Bisexuals” (2003)
- Sherbourne Health Centre
 - First draft of “Top Ten Bisexual Health Issues” (2006)
- Centre for Addiction and Mental Health/ University of Toronto
 - Developed current list for GLMA
 - Special thanks to Dr. Leah Steele, MD, PhD



**How many people are
bisexual?**



...i don't know about your town, but here in Montréal, Québec, women come to the bi women's group. We just have a slight problem! :-)

WE DON'T CALL OURSELVES BI!!!

...i sleep with men and women, but i don't call myself "bi" cuz bisexuals are sleazy and i'm not sleazy.

...i'm part of this "bi group" but if i call myself "bi," lesbians won't sleep with me but straight couples will... ugh.

... i don't call myself "bi" because bi's are 70's throw-back swingers who swap couples in familyrooms in the suburbs. Not me at all.

... i can't be "bi" 'cuz bisexuals will do anyone and i only do Select Women and men!!!

... i just hate labels... my sexuality's in flux, you know...

... join us next week for our breaking story: Christian Coalition members who don't call themselves "Christians"!!

...the Lord is my shepherd but i don't like labels

How many people are bisexual?

| | Bi women | Lesbians | Bi men | Gay men |
|----------------------------------------------------------------------------------|----------------------------------------|-----------------------------|------------------------------------|-----------------------------|
| National Survey of Family Growth (2002, US) ● Identity, Age 18-44 | 2.8% | 1.3% | 1.8% | 2.3% |
| National Survey of Family Growth (2002 US) ● Attraction, Age 18-44 | 1.9% (both) 10.2% (mostly opp. sex) | 1.5% (mostly/only same sex) | 1% (both) 3.9% (mostly opp.sex) | 2.2% (mostly/only same sex) |
| California Health Interview Survey (2001) ● Identity, Age 18-65 | 2% | 1.3% | 1.5% | 3.1% |
| Second Dutch National Survey of General Practice (2001) ● Attraction, Age 18+ | 1.2% | 1.5% | 0.6% | 1.5% |
| Canadian Community Health Survey (2003 & 2005) ● Identity, Age 18-59 | 0.9% | 0.8% | 0.7% | 1.4% |

What is the list based on?

- Population-based research and some additional studies with large samples
- Research with a bisexual category (or categories) and a comparison group or groups
- Studies of adults only
- Studies from a range of countries – US, Canada, UK, Australia, the Netherlands and Mexico
- Different definitions of bisexual
 - Identity, attraction, behaviour, or a combination

Top Ten Bisexual Health Issues

1. Alcohol use
2. Tobacco use
3. Substance use
4. Depression
5. Anxiety
6. STIs and safer sex
7. Cancer: screening and risk factors
8. Suicidality
9. Self-harm
10. Violence, physical abuse and sexual abuse



Alcohol Use

- 18 studies with a bisexual group
 - 11 are population-based
- Bi people tend to report higher rates of alcohol use and alcohol-related problems than heterosexuals, and in some cases than gay men and lesbians
 - Results are more pronounced for bi women
 - Some indication that bi men have higher rates as well, but only 5 studies included men, and results for bi men are less consistent



Tobacco Use

- 14 studies with a bisexual group
 - 8 are population-based
- Bi women tend to report higher rates of smoking than heterosexual women, and similar or slightly higher than lesbians
- Only 5 studies included men, and results for bi men are not consistent



Substance Use

- 10 studies with a bisexual group
 - 5 population-based
- Bisexual people consistently reported higher rates of drug use than heterosexuals and often higher than lesbians and gay men
 - Only 3 of the studies included men
 - Dodge & Sandfort 2007 review: a number of studies have shown that MSM drug users are often bi identified or behaviourally bisexual

Depression/Mood Disorder

- 13 studies with a bisexual group
 - 5 population-based
- Bisexuals tend to report higher rates of depression than heterosexuals, and often higher than gay men and lesbians
 - 6 studies included men, less pronounced results
- Tjepkema 2008 found:
 - 25% of bi women reported a mood disorder diagnosis, compared to 8% of heterosexual women and 11% of lesbians
 - 11% of gay and bi men reported a mood disorder diagnosis, compared to 4% of heterosexual men



- 7 studies with a bisexual group
 - 4 population-based
- Bisexual people tend to report higher rates of anxiety disorders than heterosexuals, and in some cases higher than gay men and lesbians
 - 5 studies included men, results less pronounced
- Tjepkema 2008 found:
 - 18% of bi women reported an anxiety disorder diagnosis, compared to 6% of heterosexual women and 9% of lesbians
 - 11% of bi men reported a mood disorder diagnosis, compared to 3% of heterosexual men and 8.5% of gay men



STIs and Safer Sex

- The increased risk of HIV infection for MSM is well known
- In 1997, Doll et al concluded:
 - Many bi men engage in relatively high rates of unprotected anal sex with male partners
 - Bi men probably engage in less same-sex sexual behaviour than gay men
 - Bi men report higher rates of anal sex with women than heterosexual men
- In 2007, Dodge & Sandfort review indicates:
 - Large body of literature identifies bisexual behaviour and identity as risk factors for HIV infection among men



STIs and Safer Sex

- HIV infection rates:
 - Cochran and Mays 2007
 - Bi women more likely than other women to report being HIV+
 - Bi men more likely than heterosexual men to report being HIV+, less likely than gay men
 - Diamant et al 2000 (women only)
 - Bi women more likely than heterosexual or lesbian women to report being HIV+



STIs and Safer Sex

- 15 studies with a bisexual group (1999 - now)
 - 9 population-based
- Bi men compared to heterosexual men tend to report higher on:
 - Anal sex with women, sex with sex workers, STI rates, condom use with sex workers, # of sexual partners
- Bi men compared to gay men:
 - Less anal sex with men, more likely to have traded sex, STI reports vary (tend to be similar or lower)



STIs and Safer Sex

- Bi women compared to heterosexual women tend to report higher on:
 - Anal sex with men, # of male sexual partners, unsafe sex, STI rates, MSM partners, substance use with sex, male IDU partner, sex work
- Bi women compared to lesbians tend to report higher on:
 - STI rates, substance use with sex, sex work



STIs and Safer Sex

Canadian Community Health Survey:

- Bi men **over 2X** as likely as heterosexual men to report an STI diagnosis (gay men 5.5X as likely as heterosexual men) (Brennan et al, in press 2010)
- Bi women **over 3X** as likely as heterosexual women to report an STI diagnosis (lesbians similar to heterosexual women) (Steele et al, 2009)

Cancer: screening and risk factors

- 7 studies with a bisexual group, all women
 - 3 population-based
- **Mammograms:** bi women report lower rates than heterosexual women, tend to be similar to or lower than lesbians
- **Pap tests:** similar to heterosexual women, one study reported lower rates (lesbians tend to report lowest)
- **Risk factors:** higher breast cancer risk profile than heterosexual women, risk for various cancers also affected by higher rates of alcohol and tobacco use, as well as higher rates of anal sex (for anal cancer)

Cancer: screening and risk factors

- Bisexual men:
 - Can hypothesize based on risk factors that risk of anal cancer and HIV-related cancers is likely to be higher than for heterosexual men, but lower than for gay men



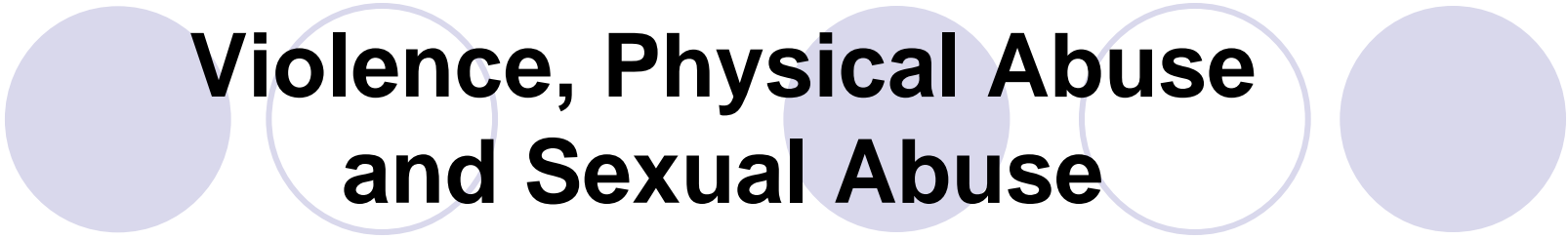
Suicidality

- 9 studies with a bisexual group
 - 4 population-based
- Bisexuals report higher on measures of suicidality, and in most cases higher than gay men and lesbians
 - Bi women almost **6X** as likely as heterosexual women to have seriously considered suicide (lesbians 4X) (Steele et al, 2009)
 - Bi men almost **7X** as likely as heterosexual men to have seriously considered suicide (gay men over 4X) (Brennan et al, in press 2010)



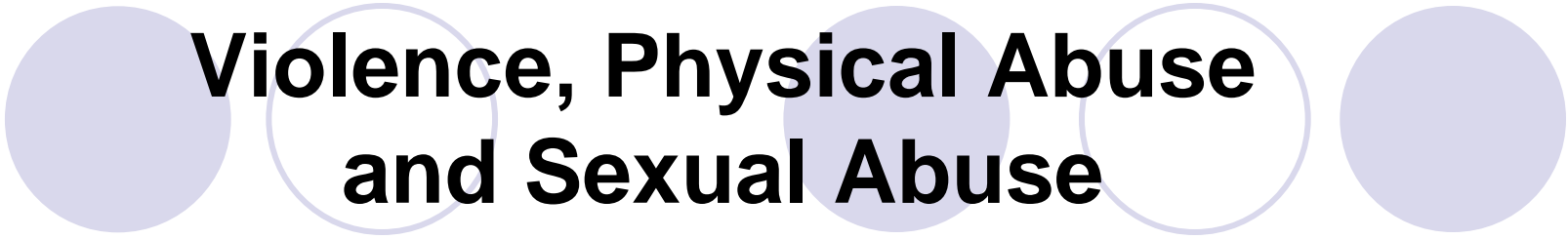
Self-harm

- 2 studies with a bisexual group
 - 1 population-based
- Bisexuals report higher rates of self-injurious behaviour than heterosexuals, gay men and lesbians
- McNair et al 2005 found:
 - Midlife (age 50-54) bisexual women **24X** more likely than exclusively heterosexual women to have “deliberately hurt yourself or done anything that you knew might have harmed or even killed you” in the last 6 months



Violence, Physical Abuse and Sexual Abuse

- 8 studies with a bisexual group
 - 3 population-based
- Bisexuals reported higher rates of experiencing violence, physical abuse and sexual abuse than heterosexuals, and higher than or similar to gay men and lesbians
- 3 studies included men
 - results for bi men tended to be **more** pronounced than for women (ie. in 1 study which analyzed men and women separately)



Violence, Physical Abuse and Sexual Abuse

- Beauchamp 2008 found that bisexuals were **4X** more likely than heterosexuals to have experienced violent victimization (gay men/lesbians 2.5X) and that over $\frac{1}{4}$ of bisexuals had experienced spousal violence (compared to 7% of heterosexuals and 15% of gay men/lesbians)
- Heidt et al 2005 found that only 26% of bisexuals had **not** experienced childhood sexual abuse &/or adult sexual assault, compared to 39% of gay men and 42% of lesbians



Additional Health Disparities

- Eating disorders
- Mental health service use
- Unmet health need
- Social support
- Quality of life/emotional well-being

Implications for Research and Practice

- Research:

- More research is needed that collects and analyzes information on bisexuals separately from gay men and lesbians
- More research is needed on bi men in particular
- Research on reasons for health disparities
- Issue: measuring sexual orientation

Implications for Research and Practice

- Practice:

- Recognize that bisexuals are distinct from gay men and lesbians, and may experience some health disparities differently or disproportionately
- Interventions for bisexuals specifically &/or interventions that are inclusive of bisexual people



Next Steps

- Review by a GLMA Advisory Committee in order to finalize the list (currently under way)
- Publication – print and online
- Continue to inform research and practice