Assessing Physician-Patient Communication on Sexual Health: Variations Across Sexual Orientations in the U.S. Healthcare System

Emily Neel[1], Mark R. Zonfrillo, MD, MSCE[2,3], Abigail Donaldson, MD[3], Laura Lindberg, PhD[4] ,
[1] Warren Alpert Medical School of Brown University, [2]Department of Emergency Medicine, Warren Alpert Medical School of Brown University, [3]Department of Pediatrics, Warren Alpert Medical School of Brown University, [4]Department of Urban-Global Public Health, Rutgers School of Public Health

Introduction

- Adolescents are at high risk for unplanned pregnancy and STI transmission[1]
- Sex education is correlated with
  - Improved STI prevention
  - Increased contraceptive use
  - Improved navigation of healthy relationships[2,3]
- However, many adolescents do not receive comprehensive sex education[4]
- Additionally, queer youth have disparities in
  - Accessing LGBTQ+-inclusive sex education
  - Higher rates of nonconsensual sex, sexual violence, sex without condoms, and unintended pregnancy[5, 6]

Previous National Survey of Family Growth-based research

- 65% of women received counseling on condoms and birth control[7]
- Black bisexual women 2.71 times more likely to receive sexual history assessments compared to White heterosexual women[8]
- <50% of women and <25% of men received a risk assessment, with higher rates among those with multiple opposite-sex partners or male sexual partners[9]
- 21-22% of males and 27% of females reported receiving counseling from a healthcare provider[4]

Aims

- Examine relationship between sexual orientation and topics/frequency of sexual health counseling offered by healthcare providers
- Update and expansion of previous analyses using same dataset
  - Include data from 2011-2019
  - Incorporate men in all analyses
  - Explore sexual orientation differences
  - Examine additional counseling-related variables

Methods

- Dataset: National Survey of Family Growth public-use data, years 2011-2019
- Population: males and females ages 15-24
- Demographic variables: age, race/ethnicity, education, mother's highest education, religion raised, place of residence, insurance status, household size, languages spoken at home
- Predictive variable: self-identified sexual orientation (heterosexual, straight, gay, lesbian, homosexual, bisexual, same-sex sexual experiences)
- Outcome variables: healthcare location, concerns for seeking reproductive health care, discussion or counseling with healthcare provider about various sexual education topics

Active Steps

- Generate shell tables and analysis plan
- Statistical analyses
  - Descriptive statistics
  - Bivariate analysis
  - Logistic regression models that adjust for potential confounders

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