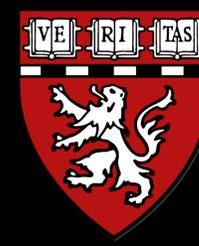




Disordered Eating Behaviors in Sexual and Gender Minority Adolescents: A Literature Review



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BACKGROUND

- The literature on eating disorders (ED) in adolescents:
 - Establishes prevalence and presentation
 - Acknowledges social pressures as a risk factor
- Body image ideals differ between sexual orientation minority (lesbian, gay, bisexual) adolescents and heterosexual peers
- Gender expression ideals differ between cisgender and gender minority (transgender, non-conforming) youth
- Limited data on diagnosed EDs in these populations, but robust literature on disordered eating behaviors (DEBs)
- Increased risk of depression and suicide attempts in youth with EDs and DEBs
- How do sexual orientation and gender identity/expression impact DEBs and EDs?
- To our knowledge, ours is the first literature review to address DEBs in sexual orientation minority youth and gender minority youth

METHODS

Records Identified via database searching (duplicates removed)

Review of abstract (n= 47)

Review of full text article (n=25)

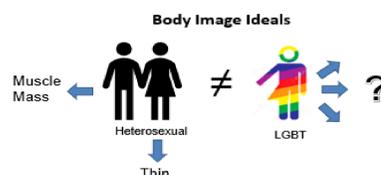
- Exclusion criteria:
- Age not specified, average age > 21, > 10 % of participant age > 21)
 - Outcome measures were not DEB
 - Poster abstracts, Case studies, Editorials

Data extraction (n=16) including:

- Study design
- Publication date
- Data collection method
- Participant LGBT-ID or other
- DEB/outcome: bingeing, dieting, vomiting laxative use, diet pill use, steroid use, restriction, exercise.
- Prevalence and odds ratios of DEB

OBJECTIVE

To review the prevalence or likelihood of **disordered eating behaviors amongst sexual and gender minority adolescents**



DISCUSSION

1. What does the data mean?

Role of Screening:

- Who and when?
- What DEB to screen?
- Include body ideal questions?

2. **High prevalence** of DEB vs. low prevalence of diagnosed eating disorders

- Screening issues?
- Or DEB **indicative of other** underlying concerns or within range of normal development?

3. Existing **data** is largely **non-clinical**

Need for more data

4. **“Unsure” identity:**

- Evolving social pressures
- Anxiety of uncertainty** vs. exclusion of not readily defined ID vs. not-out

LINK TO POSTER WITH REFERENCES



RESULTS

Table 1. Characteristics of Studies Included

Study	Data Source	Design	LGBT	Comparison	Disordered Eating Behaviors						
					Bingeing	Purging	Dieting	Diet pill	Restriction	Exercise	Non-RX Steroid
French, S. A. (1996)	Adolescent Health Survey in MN in 1987	C-S-C	LG	Heterosex.	+	+	+	+			
Watson, R. J. (2017)	Adolescent Health Survey in MN in 1987	C-S-C	T		+	+		+	+		
Hadland, S. E. (2014)	MA Youth Risk Behavior Survey of 12,984 youth	C-S-C	LGB	Heterosex.		+		+	+		
Guss, C. E. (2017)	MA Youth Risk Behavior Survey (2013)	C-S-C	T	Cis-male and female		+		+	+		+
Sawovic, EM (1998)	Minnesota Adolescent Health Survey (1986-1987)	C-S-C	LGB	Heterosex.			+				
Feder, S. (2017)	Gender Diversity Clinic in Ottawa	R-C-R	T	Gender dysphoria	+	+			+	+	
Austin, S. B. (2013)	Youth Risk Behavioral Surveillance Systems Survey (2005-2007)	C-S-C	LGB	Heterosex.		+		+			
Austin, S. B., Zupadeh, N. (2004)	Growing Up Today Study (GUTS) (1999-2004)	C-S-C	LGB		+	+	+	+			
Austin S.B., Zupadeh NJ, Coffey HL (2009)	Growing up Today Study (GUTS) (1999-2009)	C-S-C	LGB	Heterosex.	+	+					
Galzo, J. P. (2019)	Youth Risk Behavior Surveys (2009-2015)	C-S-C	LGB	Heterosex., unsure		+		+	+		+
Thapa, K. (2017)	NYC Youth Risk Behavior Survey (2011)	C-S-C	LGB	Heterosex., unsure		+					
Zullig, K. J., (2017)	Connecticut Youth Risk Behavior Survey (2013)	C-S-C	LGB	Heterosex., unsure		+		+	+	+	
Galzo, J. P., Masou, K. E. (2019)	US National Growing Up Study, in 2001, 2003, and 2005	P-C			+	+	+				+
Diemer, E. W. (2015)	American College Health Association-National College Health Assessment II	C-S-C	LGBT	Cis-heterosex.		+		+			
Mercish, E. H. (2015)	2012 Dane County Youth Assessment (13933 students)	C-S-C	LGB								+
Galzo, J. P., Austin, S. B. (2019)	Avon Longitudinal Study of Parents and Children	C-S-C	LGB	Heterosex.	+	+	+				
Watson, R. J., Adjei, J., (2017)	1999 to 2013 Massachusetts Youth Risk Behavior Surveys	C-S-C	LGB			+		+	+		

Table 1. Characteristics of studies included in the review. C-S-C = Cross-sectional cohort; P-C= prospective cohort; R-C-R = retrospective chart review.

Table 2. Number of Studies Showing Significant or Non-significant Difference in DEB by LGBT Identity

	Bingeing	Purging	Dieting	Diet Pill Use	Restriction	Exercise to Lose weight	Steroid Use (non-RX)
Transgender (unspecified)	-	+++/-		++/-	++/-	-	+ (FTM)
Gay Male	++++	+++++	++/-	+++/-	++++	--	+
Bisexual Male	++	++++		++++	+++		+
Lesbian	+/-	+++++	++/-	+++/-	++/-	-	-
Bisexual Female	+	++++		++++	+++	-	-

Table 2. Evidence of significant increase in specified disordered eating behaviors in designated LGBT-identifying group. The '+' represents a single study that showed statistically significant increase in this DEB in the group. The '-' represents A study showing no statistical difference from comparison group (universally heterosexual peers). The red highlight indicates that there were at least 50% more studies showing significant difference than not.

Table 3. Prevalence of DEB. Highest Reported Across All Identity Groups:

Bingeing	gay males (up to 25%) and lesbians (up to 25.5%)
Purging	gay and bisexual males (up to 35.2, 35.3 respectively).
Dieting	gay males (up to 71.9%)
Restriction	lesbians (35.9%)
Diet Pill Use	lesbians (up to 44.9%)

Table 3. Highest prevalence reported from studies included in review for specific DEB.