



Is it getting better? Trends in sexual health behaviours among lesbian, gay, bisexual and mostly heterosexual (LGB+) adolescents in Western Canada

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Co-authors and Funding Acknowledgment

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Background

- The World Health Organization identified alarming trends of declining contraceptive use among adolescents from 2014 to 2022 (Költő A et al., 2024).
- LGB+ youth in many countries report disparities in sexual health behaviours vs. heterosexual peers, in part due to stigma and discrimination (Saewyc et al., 2014; Kim et al., 2017; Everett et al., 2019; Költő A et al., 2024).
- Structural stigma, defined as societal-level conditions and norms that hinder the well-being of marginalized populations, has been identified as a major barrier to accessing sexual health services (Saxby et al., 2022)





Research Questions

What are the 15-year trends in sexual health behaviours for LGB+ youth in Western Canada?

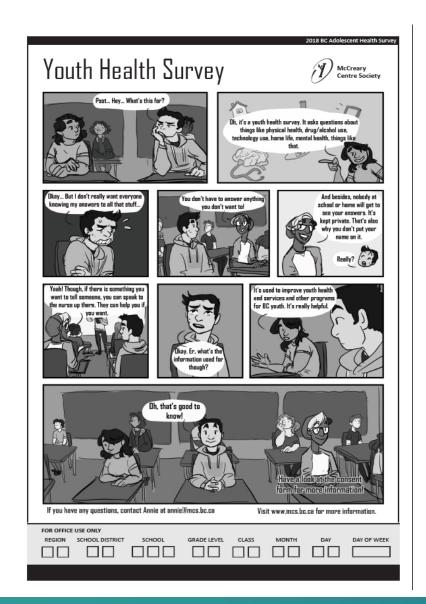
Are there disparities between LGB+ & heterosexual youth?

Are these gaps narrowing or widening?





Data Source



- 2008, 2013, 2018, and 2023
 BC Adolescent Health Survey
- Cluster Sampling design
- Grades 7 to 12 in public schools across BC.
- Included youth who reported their sexual orientation.
- Total sample size:
 - Boys: 2008=13,763; 2013=13,840; 2018=17,612; 2023=18,272
 - Girls: 2008=14,694; 2013=14,334; 2018=18,149; 2023=17,760





Measures: Sexual Orientation

- Youth selected their sexual orientation from the following categories:
 - Straight, mostly straight, bisexual or pansexual, gay or lesbian, I am not sure yet, no attraction.
- Heterosexual included being unsure of sexual orientation, questioning or having no attraction, based on prior research that the large majority of these youth were younger, but will eventually identify as heterosexual.





Measures: Trend and Gap Analysis Outcomes

- Ever had sex
- Ever had oral sex
- Methods used to prevent pregnancy the last time they had sex
 - Effective contraceptive methods
 - -Condom use at the last intercourse
- Pregnancy involvement (ever getting pregnant or getting someone else pregnant)
- Ever diagnosed with a Sexually Transmitted Disease by a doctor or nurse





Analysis: Trends analysis

- All analysis were conducted using complex samples.
- Cross tabulation and 95% CI to estimate the prevalence for all the sexual health outcomes.
- Age-adjusted logistic regressions for the four survey cycles to determine statistical significant trends over time, separately for boys and girls.
- An odds ratio greater than 1 will indicate declining trend, and an aOR less than 1 will indicate an increasing trend.





Analysis: Gap trends analysis

 We used age-adjusted logistic regression models for each survey cycle to calculate the disparities, with heterosexual as the reference category, then trends in gaps via interactions.

	Main effects (AORs)	AORs for interaction terms	Outcome variable
Year 2008, 2013, 2018	>1	>1	Widening
Year 2008, 2013, 2018	>1	<1	Narrowing
Year 2023 (reference)			
Year 2008, 2013, 2018	<1	>1	Narrowing
Year 2008, 2013, 2018	<1	<1	Widening
Year 2023 (reference)			





Results: Trends and disparities in sexual activity

- The trends in ever having sex and oral sex have significantly declined since 2008 for all the groups.
- Sexual minority youth were more likely to engage in sexual activity compared to their heterosexual peers and this gap narrowed from 2008 to 2023 for the following groups:
 - –Gay boys
 - -Bisexual boys and girls
 - -Lesbian girls

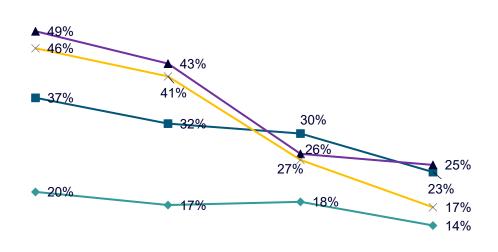




Trends in sexual activity

Trends in Ever Sex- Girls

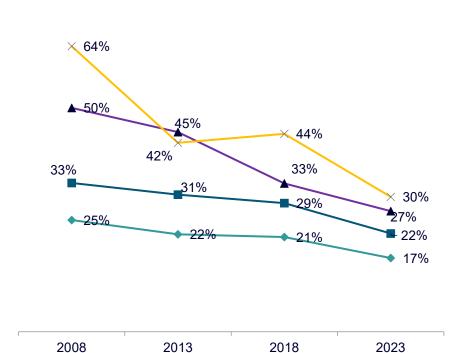
2013



2018

2023

Trends in Ever Oral Sex- Boys





2008



→ Het+ → MoHet

—Bisex

 \longrightarrow Gay

Results: Trends in methods to prevent pregnancy

Effective contraceptive methods: Declining trends for heterosexual boys (84% → 76%), heterosexual girls (87% → 81%), and upward trends for bisexual boys (61% → 85%), lesbian girls (51% → 83%).

• Condom use at last sex: Declining trends for heterosexual boys (74% → 62%), mostly heterosexual boys (68% → 53%), heterosexual girls (62% → 58%), bisexual girls (60% → 44%) and lesbian girls (30% → 18%).





Results: Disparities in methods to prevent pregnancy

 Sexual minority youth were less likely to report using effective methods of contraception in 2008 compared to their heterosexual peers- this gap has significantly narrowed for gay and bisexual boys, and lesbian girls.

	2008 aOR ^a	2013 aOR ^a	2018 aOR ^a	2023 aOR ^a			
Boys							
Gay	0.45*	0.74	0.78	1.17			
Bisexual	0.31**	1.08	1.16	1.65*			
Girls							
Lesbian	0.15**	0.41*	1.61	1.08			
Bisexual	0.60*	0.77	0.78	0.81			





Results: Disparities in methods to prevent pregnancy

 Lesbian, gay and bisexual boys were less likely to report having used condoms. This gap has persisted across all groups except for bisexual girls.

	2008	2013	2018	2023		
	aORa	aORa	aOR ^a	aOR ^a		
Boys						
Gay	0.30*	0.54*	0.43*	0.41*		
Bisexual	0.48*	0.68	1.12	0.85		
Girls						
Lesbian	0.26**	0.13**	0.14**	0.16**		
Bisexual	0.86	0.65**	0.75*	0.59*		





Results: Trends in pregnancy involvement and STIs.

 Ever getting pregnant or causing a pregnancy declined for all groups except heterosexual girls (unchanged) and mostly heterosexual boys (increased: 3% → 8%).

 Ever diagnosed for STIs by doctor or nurse also declined for all groups except for mostly heterosexual boys and heterosexual girls (unchanged).





Results: Disparities in pregnancy involvement and STIs.

 Bisexual girls and boys were more likely to report pregnancy outcomes every year (except 2023 for boys) compared to their heterosexual peers, and this gap has been narrowing.

 LGB youth were more likely to report STIs compared to their heterosexual peers. This disparity has been narrowing since 2008.





Results: Sexual health education

- A large majority of youth of all sexual orientations among boys and girls had received sex education at school (79% to 89%).
- 35-40% of bisexual youth and 55-65% of gay/lesbian youth said sexual education they received was not relevant to their orientation, and were significantly more dissatisfied than their heterosexual peers (13-14%).
- Significantly higher proportion of sexual minority youth reported feeling that their sex education did not start at the right age, not being relevant for their disability and health condition as well as not being relevant to their gender identity.





Summary

- With some of the declining trends and narrowing of disparities, overall we are seeing the sexual health outcomes getting better for LGB+ youth in Western Canada.
- There are still some persistent gaps in 2023, specifically in contraceptive use/safe sex methods, which raises concerns for us to maintain our efforts in supporting our LGB+ youth.



In light of the recent increase in anti-LGB+ protests, there is a need for ongoing monitoring as well as for advocacy for LGB+ inclusive sexual health education.





Thank You

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