Sexual Minorities Compared to Heterosexual Men and Women with Colorectal Cancer

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Background

- Lesbian, gay, and bisexual people are medically underserved *sexual minorities*.
- Sexual minorities have greater level of risk factors, (e.g, alcohol and tobacco use); overweight and obesity rates are higher in sexual minority women.
- Incidence and mortality unknown, but ecological studies show higher CRC incidence and mortality in counties with more sexual minorities.
- Medically underserved populations are known risk groups for poor survivorship care, poor survival, and poor quality of life after cancer.
Qualitative interviews

- Purpose of phase 1 was to gather formative information about the experiences of sexual minority survivors with colorectal cancer.
Themes from Interviews

- Economic impact of CRC on Sexual Minorities Employment, Health Insurance, Housing
- Challenges with respect to social support: Social Isolation
- Relationship with health care system: Discomfort with disclosing sexual orientation to providers
Why Recruit from Cancer Registries?

- Quality of Life studies increasingly use population-based registries.
- Registries provide important clinical variables (cancer stage) that are hard to collect from survivors.

**Benefit:** To obtain samples of heterosexual and sexual minorities that represent the larger survivor population, so questions about disparities due to sexual orientation can be answered.
Challenges of Recruiting from Registries

- Limited public awareness about cancer registries.
- Some cancer survivors perceive contact as an invasion of privacy.
- Registries do not collect data on sexual orientation, therefore each survivor’s sexual orientation has to be assessed to determine eligibility for the study.
Study Design

- Increase yield of sexual minorities by focusing on geographic areas in which more sexual minorities reside.
- Include only a random sample of heterosexual survivors.
- Increase diversity by recruiting from two states, California and Georgia, which differ in terms of racial composition, SES, rural and urban.
Next steps

- Recruit informal caregivers to male cancer survivors, using supplemental funding.
- Utilize data obtained from cancer registries for novel ecological analyses of cancer cases by county or census tract.
- Determine recruitment costs and success of one mailing followed by telephone contact vs. two mailings that are followed by telephone contact.
- Determine connectedness of sexual minority CRC survivors to other sexual minority survivors.
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