

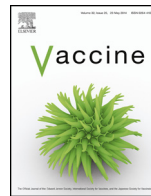


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## LGBT health and vaccinations: Findings from a community health survey of Lexington-Fayette County, Kentucky, USA

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### ABSTRACT

Data on adult immunization coverage at the state level and for LGBT Americans in particular are sparse. This study reports the results of a 2012 Lexington-Fayette County, Kentucky, community health assessment's results asking about eight adult vaccinations among 218 lesbian, gay, bisexual, and transgendered (LGBT) respondents. Researchers collected data using an online survey distributed through LGBT social media, posters, and LGBT print media. The LGBT sample largely matches the demographics of the county as a whole except this group reports higher level of education and fewer uninsured individuals. Among LGBT respondents, immunization prevalence reaches 68.0% (annual Influenza), 65.7% (Hepatitis B), 58.8% (Chickenpox/Varicella), 55.9% (Hepatitis A), 41.2% (Smallpox), and 25.8% (Pneumonia). Among respondents who are currently within the recommended 19–26 years age range for the Human Papillomavirus (HPV) vaccine, the LGBT females are less likely to report receiving the vaccine (15.4%) compared to the national coverage percentage of 34.5%. Males, however, are more likely to have received the vaccine (10.3%) than the national percentage of 2.3%. The small number of LGBT seniors in the study report a much higher prevalence of the Shingles (Herpes Zoster) vaccines than for U.S. seniors 60 and older (71.4% compared to 20.1% nationally). LGBT respondents report higher percentages of adult vaccination.

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### 1. Introduction

Data on adult immunization coverage in the United States are limited largely to Influenza and Pneumonia vaccinations with national coverage data lacking for several other adult vaccines. Most individual states currently do not have state-level prevalence information for adult vaccinations except for self-reported Behavioral Risk Factor Surveillance Survey (BRFSS) data for Influenza and Pneumonia [1]. It is therefore not surprising that we have limited information specifically on adult immunizations among lesbian, gay male, bisexual, and transgendered (LGBT) Americans. There are, however, recent efforts to increase LGBT health data. The U.S.

government's Healthy People 2020 initiative for example includes a specific objective to expand population-based monitoring systems which can stratify by LGBT individuals [2] as well as objectives to expand Hepatitis B vaccinations among men who have sex with men (MSM) [3]. In an effort to expand health statistics of this underrepresented population, we conducted a community health assessment (CHA) in Fayette County, Kentucky, home to Lexington (population 310,000) and the core of a metropolitan area of almost half a million people bordering rural Appalachia [4]. The intent of this paper is to address the deficiency in the immunization literature by offering one of the first studies of a broad range of adult vaccinations among LGBT Americans. As such, it offers a benchmark for comparable future studies looking at LGBT vaccination in other national and regional contexts.

Historically, relatively little public health research has focused LGBT Americans, especially those from underrepresented regions of the country. LGBT health studies are typically focused on samples drawn from large metropolitan cities with minimal data from

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Southern and Appalachian LGBT populations. Over a 20 year period from 1980 to 1999 for example, only 0.1% of English language articles on human health in the MEDLINE index addressed LGBT populations [5]. A subsequent study covering a 22 year period from 1989 to 2011 also found that only 0.1% of National Institutes of Health (NIH) funded research included LGBT populations [6]. Among these, comprehensive CHAs of local communities such as the Fayette County study are apparently non-existent [5]. For example, while a number of recent studies using existing secondary data examine the health of Americans by different sexual orientations, we have been unable to identify a single LGBT-focused CHA specific to a particular city or county [7,8]. Indeed, very little information exists about the preventative health practices, including vaccinations, of LGBT populations outside of major urban regions.

### 1.1. Existing adult immunization data for the general population

Coverage data for adult immunizations are limited for all adults. While the U.S. Centers for Disease Control and Prevention (CDC) reports national coverage data for Influenza, Hepatitis A, Hepatitis B, Pneumonia, Shingles, and the Human Papillomavirus (HPV), the CDC does not report national coverage for Chickenpox (Varicella) or Smallpox [9] (see Table 4). The CDC also currently does not report state-level data because not all states have operational Immunization Information Systems (IIS) and/or adult immunization registries [9]. The Kentucky Immunization Registry for example, was scheduled to launch in November 2015 and was not operational when this study was conducted [10].

The existing Kentucky adult immunization coverage data comes from the 2012 Kentucky BRFSS and provides data only on self-reported Influenza and Pneumonia vaccinations. For 2012 the BRFSS data show the prevalence of Kentuckians aged 65 years and older who have been immunized for Influenza (KY 61.8% vs. US 60.1%, annually) and Pneumonia (KY 65.6% vs. US 68.8%, lifetime) closely mirrors national immunization rates among seniors. Within the state's senior population, there are no statistically significant differences in Influenza immunization in terms of sex, race, education, or annual income, although Kentucky's Black seniors are significantly less likely to be immunized against Pneumonia (49.9% of Black seniors compared to 66.9% of White seniors) [11].

The Kentucky BRFSS does not report county-level data but does provide data at the multi-county Area Development District (ADD) level. Lexington-Fayette County is part of the Bluegrass ADD. In 2012 the BRFSS reports a prevalence estimate of 62.8% among Bluegrass ADD seniors for the Influenza inoculation in the past twelve months and 63.2% for lifetime Pneumonia vaccine coverage [11]. In 2010 the University of Kentucky and Kentucky Department for Public Health analyzed county-level data and calculated 42% of Fayette County adults (19 and older) had received the Influenza vaccine in the past year compared to 39% among all Kentuckians [12]. Prevalence estimates for the general Kentucky or Fayette County population for other adult immunizations do not currently exist. Therefore, this study's county-level data on adult LGBT vaccinations are unique.

### 1.2. Existing adult immunization data for the lgbt population

Adult vaccination data and LGBT health data in general are rare, and the existing published LGBT vaccine studies largely focus on immunizations against sexually transmitted diseases such as HPV and Hepatitis A and B [7,13–17]. While one study does examine a broader range of adult vaccinations for MSM in prison, there are problems in generalizing this study to the majority of gay and bisexual men [18].

Population-based survey data have historically not asked for respondents' sexual orientation [19]. More recently, however, the

CDC has added sexual orientation questions to the 2013 National Health Interview Survey (NHIS) [8]. Among the 1.6% of respondents identifying as gay or lesbian in these face-to-face health interviews, 45.8% aged 18 and older report having received the Influenza vaccine in the past year. Among the 0.7% identifying as bisexual, 34.7% aged 18 and older report having received the Influenza vaccine in the past year [8].

Prior to 2011, 25 states and the District of Columbia included at least one item asking about sexual orientation identity or same-sex sexual behaviors on their states' version of the BRFSS [20]. Kentucky, however, first added a sexual orientation question to its BRFSS questionnaire in 2014. At the time of this article, these data are not publicly available [21].

Therefore, while the individual states seek to establish state immunization registries, state-level vaccine coverage data for adults currently are limited. For individual counties within states such data are rare. While the BRFSS data do compare Influenza and Pneumonia vaccination coverage by sex and race, most states have yet to collect or publish immunization data by sexual orientation. With its focus on a broad number of adult immunizations, this study's county-level data on understudied LGBT residents contributes to filling a large gap in immunization research.

## 2. Methods

This study was approved by the Fayette County Health Department's Internal Review Board (IRB) and funded by the Kentucky Office of Health Equity and the Kentucky HIV/AIDS Program. Study design included (a) a series of eight focus groups and (b) a cross-sectional survey of a convenience sample of local LGBT individuals conducted in 2012–2013. Researchers gathered data via eight confidential exploratory focus groups targeting different local LGBT communities living in the Lexington area. These focus groups were then used to design an anonymous web-based survey with an offline paper survey also available to respondents.

### 2.1. Focus groups

This study began with eight exploratory focus groups seeking input from various LGBT communities in Fayette County such as youth (ages 18–26), African-Americans, Hispanics, lesbian women, and gay men. Participants were recruited through social media advertisements such as Facebook. Focus group participants completed a short paper survey collecting their demographics and information on insurance coverage. An average of eight people participated in each focus group.

#### 2.1.1. Online survey recruitment

The feedback provided by the focus groups helped in the development of the online CHA survey. Researchers distributed the URL for the online survey through general and LGBT-specific social media such as Facebook and LambdaNet (a local LGBT listserv). Posters were distributed in Lexington gay bars, and 15 paper surveys were collected from individuals who wished to participate offline. Participants received no compensation for their voluntary participation. Participants were not pre-screened for selection criteria.

#### 2.1.2. Measures

The resulting analytic sample of 218 individuals responding to the immunization questions was analyzed using univariate statistics and chi-square tests. Data were analyzed using IBM SPSS 22.

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