

# SOCIAL DETERMINANTS OF LGBT CANCER HEALTH INEQUITIES

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**OBJECTIVES:** *To describe the extant literature on social determinants of health as they relate to the cancer disparities and to highlight the research findings relating to lesbian, gay, bisexual, and transgender (LGBT) populations.*

**DATA SOURCES:** *Published scientific literature and clinical literature, and published reports from the World Health Organization and US Department of Health and Human Services.*

**CONCLUSION:** *The larger literature on health inequities is moving beyond individual-level predictors of risk to evaluate the influence of social determinants of health on the persistent health inequalities in a population. As it has for other groups, additional research into social determinants of health for LGBT persons of color may play an important role in identifying and reducing cancer inequities for this group.*

**IMPLICATIONS FOR NURSING PRACTICE:** *Increased awareness of the factors that contribute to health inequities for the LGBT population may provide insight into improving patient-provider relationships with LGBT patients. A large body of experiential and clinical knowledge positions nurses to conduct meaningful research to expand the current understanding of the social determinants of LGBT cancer health inequities.*

**KEY WORDS:** *LGBT, sexual orientation, cancer disparities, social determinants of health.*

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In the nearly 50 years since the passage of the National Cancer Act of 1971 and the declaration of the “war on cancer,” remarkable progress has been made in the early detection, treatment, and survivability of cancer.<sup>1</sup> Since 1990, the number of cancer deaths in the US has fallen by 23%.<sup>2</sup> Currently, there are nearly 14.5 million individuals in the US who are cancer survivors and that number is expected to rise to 19 million by 2024.<sup>3</sup> Despite overall progress, the

benefits of advances in cancer care have not been distributed equally across all population groups.<sup>2</sup> Disparities in cancer incidence and mortality exist based on socioeconomic status (SES), sex, race and ethnicity, and geographical location.<sup>2</sup> Further, the National Institutes of Health has designated sexual and gender minorities as official disparities populations.<sup>4</sup> Although precise data on cancer rates among lesbians, gay, bisexual, and transgender (LGBT) populations are lacking,<sup>5</sup> evidence suggests that sexual minority status may contribute to excess risk for the development of certain types of cancers, including breast cancer,<sup>6,7</sup> anal cancer,<sup>8</sup> lung cancer,<sup>9</sup> and cancers associated with HIV/AIDS.<sup>10</sup> The causes of these disparities are complex and likely influenced by the same sets of interrelated social, economic, and environmental factors that drive cancer disparity rates among other underserved populations.<sup>11</sup>

The Institute of Medicine has called for additional research to better understand the risk and protective factors associated with LGBT health stemming from multiple levels of influence (ie, community).<sup>12</sup> To date, the majority of research on LGBT health has focused on individual-level behavioral risk factors such as smoking rates;<sup>13,14</sup> however, much less is known about the effects of social and environmental contexts on the health and well-being of this population.<sup>15</sup> Explication of the influence of social determinants on cancer risk in LGBT populations has the potential to advance the science toward the realization of the goal of health equity for LGBT populations.<sup>16</sup> As such, the purpose of this article is to describe the extant literature on the social determinants of health and the known associations with cancer disparities. Where relevant, we describe the data on LGBT

populations as it pertains to each of the social determinants categories and highlight areas in which individuals with intersecting marginalized identities (eg, LGBT person of color) may be even more negatively impacted.

### SOCIAL DETERMINANTS OF HEALTH

The social determinants of health refer to the “structural determinants and conditions in which people are born, grow, live, work and age,”<sup>17</sup> and are increasingly recognized as important contributors to health outcomes.<sup>18</sup> Healthy People 2020 organizes the social determinants of health around five key domains: economic stability, neighborhood and physical environment, education, community and social context, and the health care system.<sup>19</sup> Based on a meta-analysis of nearly 50 studies, social factors including education, racial segregation, social supports, and poverty account for over a third of total deaths in the US each year.<sup>20</sup> Following is a summary of each of the social determinants of health (see [Table 1](#)). We briefly summarize the literature that links cancer outcomes with each of these factors and, where available, focus on what is known about LGBT persons.

### ECONOMIC STABILITY

In 2015, 13.5% (43.1 million) Americans lived in poverty and were economically unstable.<sup>21</sup> Economic stability determinants include poverty, employment, food security, and housing stability.<sup>19</sup> SES has been shown to be a strong and consistent

**TABLE 1.**  
**Social Determinants of Health**

Economic Stability	Neighborhood and Physical Environment	Education	Community and Social Context	Health Care System
Employment	Housing	Literacy	Social integration	Health coverage
Income	Transportation	Language	Support systems	Provider availability
Expenses	Safety	Early childhood education	Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training	Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		
	Walkability			

Health outcomes.

Morbidity, mortality, life expectancy, health care costs, health status.

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