# Factors Associated with Medical Mistrust Among Sexual and Gender Minority Youth

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#### INTRODUCTION

- Medical mistrust (MM) = tendency to distrust medical professionals and systems due to direct or vicarious experiences of marginalization.
- MM is associated with health disparities.
- Little is known about MM among transgender and non-binary (TNB) youth who experience greater health disparities compared to their cisgender peers.
- Hypothesis: Two theorical frameworks will predict MM: (1) exposure to health services and self-perceptions of health. (2) minority stressors and resilience factors.

#### **METHODS**

- Measures: Demographics, SGM-specific MM.
- Framework 1 with all participants: Recent STI testing and perceptions of physical health.
- <u>Framework 1 with TNB participants:</u> Recent STI testing, history of gender-affirming hormones, and perceptions of physical health.
- Framework 2: Victimization, internalized stigma, social support, and resilience
- Analysis: Hierarchical multiple linear regressions used to test two frameworks

#### **RESULTS**

- Participants: N=421; Ages 18-33 years (M=22.4, SD=3.5), 27% White, 136 TNB; all designated female at birth
- Table 1 shows results of Framework 1 with all participants. Table 2 shows results of Framework 1 with only TNB participants.
- Table 3 shows results from Framework 2.

#### **DISCUSSION**

- Greater engagement with healthcare services with poor perceived physical health resulted in higher MM.
- Distal (instead of proximal) minority stressors were associated with MM (e.g., victimization and lack of family support).
- Both individual and structural approaches are needed to target MM, specifically among Black and TNB youth.

Black, transgender, and non-binary youth reported greater medical mistrust than cisgender sexual minority youth.

## Other factors predicting medical mistrust:

- Higher perceived physical health and recent STI Testing
- Higher victimization and less family support

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### **TABLES**

Table 1: Exposure to Health Services and Self-perceptions of Physical Health (Framework 1) With All Participants.

	Estimate	SE	t-value		
Intercept	3.224	0.236	13.671***		
STI Testing	0.004	0.002	1.916^		
Perceived Physical Health	-0.016	0.005	-3.496***		
TNB Identity	0.414	0.073	5.642***		
Race/Ethnicity - Asian	-0.197	0.157	-1.253		
Race/Ethnicity - Black	0.250	0.087	2.883**		
Race/Ethnicity - Latine	0.058	0.092	0.628		
Race/Ethnicity - Multi-racial	0.133	0.142	0.941		
Race/Ethnicity - Other	-0.298	0.247	-1.203		
$R^2$ =.14, $F(8, 404)$ =8.32, $p$ <.000					
*** = $p < 0.000$ , ** = $p < 0.001$ , ^ = $p < 0.1$					

Table 2: Exposure to Health Services and Self-perceptions of Physical Health (Framework 1) with TNB Youth Only.

	Estimate	SE	t-value		
Intercept	4.017	0.377	10.66***		
STI Testing	0.006	0.003	2.091*		
Perceived Physical Health	-0.022	0.008	-2.842**		
History of GAH	0.031	0.122	0.253		
Race/Ethnicity - Asian	-0.340	0.194	-1.748^		
Race/Ethnicity - Black	-0.016	0.151	-0.107		
Race/Ethnicity - Latine	-0.093	0.141	-0.656		
Race/Ethnicity - Multi-racial	0.280	0.217	1.288		
Race/Ethnicity - Other	-1.257	0.453	-2.776		
$R^2$ =.18, $F(8, 127)$ =3.41, p<.01					
*** = $p < 0.000$ , ** = $p < 0.001$ , ^ = $p < 0.1$					

Table 3: Minority Stress and Resilience (Framework 2) With All Participants.

	Estimate	SE	t-value	
Intercept	2.851	0.244	11.70***	
Victimization	0.377	0.155	2.433*	
Internalized Stigma	0.027	0.068	0.399	
Resilience	-0.008	0.005	-1.665^	
Support from Family	-0.064	0.024	-2.676**	
Support from Friends	0.009	0.031	0.289	
Support from Partner	0.0004	0.027	0.013	
TNB Identity	0.411	0.075	5.496***	
Race/Ethnicity - Asian	-0.170	0.160	-1.064	
Race/Ethnicity - Black	0.231	0.891	2.598**	
Race/Ethnicity - Latine	-0.075	0.094	0.805	
Race/Ethnicity - Multi-racial	0.083	0.145	0.568	
Race/Ethnicity - Other	-0.115	0.245	-0.469	
$R^2$ =.15, $F(12, 399)$ =5.963, $p$ <.000				
*** = $p < 0.000$ , ** = $p < 0.001$ , * = $p < 0.05$ , ^ = $p < 0.1$				