

Course work on vulnerable populations gays bisexuals and lesbians

[Family](#), [Same Sex Marriage](#)



A vulnerable population is defined as a group of people who, due to various factors related to their status and their place within society, have an increased risk for adverse health-related conditions. Differential social statuses allow some distinct groups to enjoy greater health benefits and better living conditions than others, creating a divide which makes those disadvantaged groups vulnerable. In this paper, we will examine the homosexual and bisexual community as a vulnerable population, examining the author's biases and understanding of this particular group before and after becoming educated about it.

Nearly 3.5% of adults in the United States are members of the LGBT community. Also, there are a substantially higher number of people (8.2%) who do not identify as gay or bisexual, but who have engaged in same-sex activities in the past. While more men identify as gay than bisexual, more women identify as bisexual than lesbian. (Gates 2011) By the age of 50, 15% of the men in the United States have done something with another man, regardless of their sexual orientation identification. ("National Survey" 2011)

In terms of location, many people who self-identify as homosexual live on the West or East Coast, San Francisco and New York City carrying the largest homosexual populations in the country. However, at the same time an increasing number of gays and lesbians in the Midwest are coming out, presumably because of an increased social acceptance of homosexuals. However, these numbers are still not as high as the figures found on the coasts, due to the higher percentage of homosexuals there allowing for a more comforting, welcoming environment for them. (Gates 2006) What's

more, homophobia and heterosexism are very prevalent phenomena in environments such as health care and social work; these service individuals allow their personal bias to interfere with their empathy for the patient or case and do not offer as much enthusiasm or energy in their efforts to help them (Dootson, 2000).

Before the writing of this paper, I had many misconceptions about homosexuals. For example, I had little exposure to them beforehand except for depictions of them in the media, and I always assumed that they were overly entitled, carrying a persecution complex. I did not imagine that many of them lived outside the coasts, since that kind of lifestyle would not be looked highly upon in Midwestern or Southern communities. According to my picture of them in their mind, they were self-centered and individualistic, with little regard to family. Homosexual man I pictured as effeminate and promiscuous, whereas lesbians I presumed were mannish, off-putting and aggressive. I presumed that few of them had relationships with their parents, as they would have likely kicked them out upon coming out. I had the impression that a great many of them were promiscuous, and that they drank a lot, leading hedonistic lifestyles. I shared a lot of characteristics of someone with homophobia, and through the research I began to understand how the unethical and cruel treatment of gays and lesbians can negatively affect their medical and social treatment (Martin & Knox, 2000).

I was certainly uncomfortable in the vicinity of the few I have been around, because I had the impression of them being far too outgoing, to the point of intrusion. Their flamboyant nature put me off, as it was not the way I was used to interacting with people. I had a picture in my mind of very well-

dressed and fashionable people who were well off, presuming that very few homosexuals were impoverished, or if they were they would not come out, for fear of reprisals from family that they depended upon.

In light of the demographics and research performed in this picture, I have a slightly different view of homosexuals. While many of my presumptions had a slight basis in fact (the higher prevalence of AIDS in gays and lesbians, the fact that many of them have gravitated to the coasts), I was surprised at just how many still existed in the Midwest, and the percentage of AIDS victims who are gay was a lot smaller than I'd thought. There are a lot more heterosexuals in this day and age who also get AIDS.

I was also surprised at just how many people have engaged in sex acts with members of the same gender, yet still do not identify as gay or bisexual. Whether or not that is indicative of denial on their part or a conscious choice to not come out, it indicates an increasing complexity in human sexual behavior I had not anticipated beforehand. I did not realize to what extent gay and lesbian persecution was affecting them; the numbers of suicides and mental disorders like depression were staggering. It is very indicative of a culture that has not fully accepted them, and where they constantly feel pressure to fit in.

I had no idea just how marginalized homosexuals, especially adolescents, were, particularly in a healthcare context - I did not realize that caretakers could be so cruel, and the impact it had on their health (Dootson, 2000). The knowledge of these demographics and attributes of gays and lesbians helps to better inform health care professionals on ways to treat these patients with respect and proper empathy. Once nurses and other health workers are

adequately educated on what most gays and lesbians go through, they will be more sympathetic and more removed from stereotypes and biases that can color their perception of their patients.

The research I performed on the difficulties that homosexuals have faced and continue to face, even from a health care perspective, shed a lot of light on how I may have been treating gay and lesbian patients in my own work. Knowing the difficulties that lie ahead for a gay person, it has made me substantially more empathetic toward them. Now that I know more about just how vulnerable they are to societal and health issues, it has challenged my perceptions of gays and bisexuals and persuaded me to reevaluate them.

In the case of Greg Ross and Benito Jaramillo, I believe that they should continue to pursue the goal of adopting a child. Given the information and knowledge that I have received from this research, it is clear that social workers and the like (including people who work for adoption agencies) are resistant to the idea of gay couples having children, and therefore they would run into their fair share of obstacles. There are many misconceptions about gays being promiscuous and having a difficult time keeping a relationship. However, given that they are in a happy monogamous relationship together, it should go a long way towards proving that they can handle having a child. Also, it is what they want, and as such they should not give up their pursuit of an adoption – societal and cultural barriers should not prevent them from going after their dream.

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