Sexual Minority Health:
A Bibliography and Preliminary Study of the Book Literature

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Abstract

The literature on the health of lesbian, gay, bisexual, transgender, and intersexual (LGBT) people appears in many types of resources and disciplines. To begin to address the need for relevant, easily accessible information for LGBT people and health care providers, this study identified popular and scholarly books published in the past 10 years and analyzed topics; number of books published per year; more prolific authors; and primary publishers. The results indicated that a relatively small number of books were published (521) by a wide range of publishers/self-publishers. Most were about mental health, relationships, or family and 24% were personal accounts.
Health and Lesbian, Gay, Bisexual, Transgender, and Intersexual (LGBT) People: A Study of the Literature

Health information is important for all people. Accessing health information can provide a basis for self-care, illness prevention, and decision-making about treatments. For those who identify with sexual minority groups, issues with delivery of health care due to stigmatization and increased risk for certain diseases and conditions can have serious consequences. Those groups include lesbians, women who have sex with women (WSW), gay men, men who have sex with men (MSM), bisexuals, transgender people, and intersex people (collectively identified in this paper as “LGBT”). Though sexual minority groups are diverse, they share a “historically marginalized social status relative to society’s cultural norm of the exclusively heterosexual individual who conforms to traditional gender roles and expectations…Their “otherness” is the basis for stigma and its attendant prejudice, discrimination, and violence which underlie society’s general lack of attention to their health needs and many of the health disparities” (IOM 2011, 13-14). Research about LGBT health is very limited (IOM 2011, 299; Snyder 2011, 185) and there is very little government funding allocated for such research (Coulter 2014, e106).

Finding information about health and health issues can result in making choices that have a positive impact on health status (Iverson, Howard, and Penney 2008, 701). Interpersonal networks are a primary source of health information for health care providers and lay people (Bennett, et al. 2006, 123; Dutta-Bergman 2004, 284-5). But the healthcare system has been slow to recognize the need for specialized training for health professionals and students and for developing LGBT-inclusive policies (IOM 2011, 4). The American Association of Medical Colleges only developed a statement on curriculum and institutional climate changes in 2014 (Hollenback et al, 1-281). The Human Rights Campaign began producing an annual Healthcare
Equality Index in 2007 to highlight healthcare facilities that have policies for LGBT people that are inclusive and nondiscriminatory (Hanneman 2016, 3). Nursing curricula have very limited content on LGBT health (Lim, et al. 2014, 25). “Mistrustful of organized health care, misunderstood or not recognized by health care providers, and often treated without full disclosure of the truth, the L/G/B/T patient is very likely to be attracted to self-care and its promise of being able to avoid the health care establishment if you stay well. The self-care movement…has appeared as an important counterweight to all of the negative factors in the daily struggle of members of the L/G/B/T community to maintain good health” (Flemming and Sullivant 2000, 97). Because of the sensitivity of the topic of LGBT health, lay people as well as health care providers may prefer the privacy of the Internet and print resources to find information (Mehra and Braquet 2011, 404). “Many high school and college students and others still struggle in the coming out process due to their socially conservative family environments in rural, semi-rural, and urban regions of the country where social, religious, and political viewpoints are less likely to be supportive of LGBTQ” (Mehra and Braquet 2011, 408).

Information Resources on LGBT Health

“In the self-care movement, information is vital, and collecting and disseminating information are activities of extremely high value” (Flemming and Sullivant 2000, 98). The openly available government-produced database, PubMed (http://pubmed.gov), includes most citations that appear in the scholarly biomedical journal literature. That database includes many highly specialized biomedical journals that result from the evolution of subdisciplines or from special interest in a topic. However, there are few journals that focus solely on LGBT health and most began publication in the last 10 years. They include:

-  *Journal of Gay and Lesbian Mental Health*. Taylor & Francis, 1988-
Snyder’s analysis of topics and trends in the biomedical journal literature about LGBT health retrieved over 20,000 articles published in the past 50 years (2011, 167). This implies that scholarly biomedical articles about this topic were widely distributed in journals that were on many other subjects.

There are many other types of sources in which relevant information on LGBT health might appear such as books, book chapters, government reports, popular magazines, blogs, audiovisual materials, and primary source materials. But there is no resource or database that collects citations to all of these information sources and organizes them in a single place. In fact, there are few compilations of any information resources related to LGBT health. Links to a selection of consumer health resources are available through organizations such as the National Library of Medicine’s MedlinePlus (https://www.nlm.nih.gov/medlineplus/gaylesbianbisexualandtransgenderhealth.html); the Centers for Disease Control (http://www.cdc.gov/lgbthealth/); the Fenway Institute (http://fenwayhealth.org/the-fenway-institute/); Lavender Health (http://lavenderhealth.org); and GLMA (http://www.glma.org/). “LibGuides” (http://libguides.com) are online listings of the main resources for a specific topic or discipline (What is a Libguide?). Those on LGBT health relay only a small sampling of resources and do not explain the complexities of finding more comprehensive information on this specialized topic.
Finlon admitted that he did not apply specific and consistent inclusion criteria to the web sites he listed for LGBT populations (2002, 111). His perception that sites would change or cease to exist (Finlon 2002, 115) was true, as many of the links were broken in 2015. McKay (2011, 397-400) published a more current list of web sites related to LGBT health but included only twelve.

Books are an accessible and almost universally appreciated source of information. Almost half of the transgender respondents in a study reported that books on transgender issues and therapists were important in informing them (Taylor 2002, 91). However, there are no current bibliographies of books on LGBT health. In a 1999 study of two public libraries in England, 44% of the LGB respondents used bibliographies of books that had been compiled about LGB topics; all found them useful (Norman, 192).

Snyder found that “the health needs of the LGBT cultural group are not well understood by an analysis of the medical literature” (2011, 185). Further challenges in identifying published resources on LGBT health include the multiplicity of terms that are related and the ongoing evolution of the terminology (Daley and Mulé 2014; Snyder 2011; Ciszek, 2011, 431; Greenblatt, 2010; Christensen, 2010; Fikar and Keith 2004, 57). Keilty described the issues in standard library classifications of LGBT-related materials stating, “There are countless examples of how LGBT information is consistently misrecognized and miscategorized” (Keilty 2007, 3).

**Health Information Needs of LGBT People and Healthcare Providers**

Fikar and Keith identified some of the information needs of LGBT health care professionals (2004, 58). Topics of particular interest were: sexual health and practices, coming out, advance directives, marriage, substance abuse, breast cancer, rectal cancer, anal pap smears for men who have sex with men, adolescent depression and suicide, reproduction, adoption, HIV,
hepatitis, immunization, parenting, mental health, domestic violence, loss of a partner, preventive health, transgender surgeries and hormone therapy, and aging.

Most transgender people in a 2002 study obtained information about transgender identity and issues from the Internet, from transgender friends, and from support groups. Almost one-third of the respondents mentioned autobiographical and biographical accounts as important information resources (Taylor 2002, 90-91). Information needs of LGBT people varied based on several factors. One was where a person was in the ongoing process of coming out: self-recognition, sharing with other LGBT people, telling close friends/family, positive self-identification, and integration of their LGBT identity (Mehra and Braquet 2011, 402, 408; Schaller 2011, 109). The information needs of transgender people progressively changed from acceptance/coming out topics towards public policy concerns. They did not have information needs related to transgender issues once they had sex reassignment surgery (Taylor 2002, 95). A study of young gay, bisexual, and questioning men reported that they used sources such as search engines, the National Institute of Health, and Mayo Clinic’s site for questions about sex and sexual health. They suggested that public health practitioners create a reliable information resource that explained sexuality and sexual health practices (Pingel et al. 2013, 297). A study of websites with sexual health information for lesbians concluded that “Not only is there a lack of sexual health information available to lesbians on the Internet but also the information that does exist is often incomplete and written at an advanced level” (Lindley, Friedman, and Struble 2012, 478).

The health information needs and behaviors of LGBT people vary widely in relation to context of information need, preferred mode of communication of health information, demographic, and type of sexual minority (Magee, et al. 2012, 284-286; Wilkerson, et al. 2010,
Men who had sex with men in one study primarily used search engines and LGBT web sites for sexual health information. They used government, public media, and health insurance websites and emailing a healthcare provider least frequently (Wilkerson, et al. 2010, 6).

Clearly, there is a need for better-organized and better quality resources that are customized for individual sub-groups of LGBT and that address specialized topics.

**Research Question**

The literature on LGBT health appears in a variety of types of resources and in many disciplines. To begin to address the need for relevant, easily accessible information for LGBT people and health care providers, this study focused on two questions: (1) Which are recent popular and scholarly books relating to health and lesbian, gay, bisexual, transgender, and intersexual (LGBT) people; and (2) What characteristics do these publications have, such as prevalent topics; topics that are missing or less well-represented; number of books published per year; the more prolific authors; and primary publishers? Identifying books and basic characteristics of this body of literature will organize extant information and help to identify information gaps. Relevant associations, government agencies, publishers, and individuals can use these findings to inform decisions about future publications.

**Methods**

To compile a list of references to recent books that would help address the need for relevant, easily accessible information for LGBT people and health care providers, the Worldcat database (www.worldcat.org), a catalog of publications that includes over 340 million records from thousands of libraries globally (A global library resource), was mined as the data source and authority. The criteria for inclusion in the bibliography were: the most current editions of
academic and popular books and reports of 20 or more pages in the English language that were owned by 5 or more libraries and had publication dates between 2005 and mid-2015. The definition of “health” used was broad and included wellness, disease, medicine, nursing, allied health, mental health, disability, social work, family, aging, violence, bullying, homophobia, heterosexism, and health aspects of social services.

These exclusions limited the list to a manageable number: older editions; book chapters; reprints; special issues of journals; annual series; theses; fiction; audio or video recordings; books on law, politics, policy, literature, religion, or situational homosexuality, general books on HIV/AIDS; and works with a primary focus on groups outside of the US. Examination of the catalog records of relevant works retrieved by searching commonly used terms resulted in the discovery of additional terms that retrieved other unique records. The screening of each record retrieved ensured compliance with the inclusion criteria. Appendix 1 lists the terms used for the search strategies. The intent was to compile a comprehensive listing; any omissions within the scope described above were unintentional.

The citations were compiled in a spreadsheet, coded, and sorted by author/editor; year of publication; publisher name; type of publisher; and subject. Fikar and Keith’s list of topics that were important to LGBT health care providers (2004, 58, 63), was adapted for the subject coding, collapsing some of the terms under one and supplementing with additional terms that applied to this bibliography.

Results

This section describes the results of analyses to determine which books were published on LGBT health between 2005 and mid-2015; the number of books published each year;
characteristics of topics; topics that were missing or less well-represented; publishing frequency of authors; and the primary publishers.

**Books That Were Published.**

Appendix 2 contains the bibliography of 521 books compiled using the methods described above. It is organized by year of publication, then by author. Each entry has a sequential numerical identifier to which tables in the analysis refers.

**Number of Books Published Each Year.**

Table 1 shows the number of books published each year on LGBT health between 2005 and mid-2015. The total number of books was 521; the average number of books published annually between 2005 and 2014 was 48; the median was 48 (The value for 2015 was not included in the calculation of the mean and median because the bibliography and analysis were completed in August 2015 and therefore represent only a partial year).
Table 1. Number of Books on LGBT Health Each Year

<table>
<thead>
<tr>
<th>Year of Publication</th>
<th># Books Published</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>41</td>
</tr>
<tr>
<td>2014</td>
<td>55</td>
</tr>
<tr>
<td>2013</td>
<td>50</td>
</tr>
<tr>
<td>2012</td>
<td>63</td>
</tr>
<tr>
<td>2011</td>
<td>48</td>
</tr>
<tr>
<td>2010</td>
<td>44</td>
</tr>
<tr>
<td>2009</td>
<td>49</td>
</tr>
<tr>
<td>2008</td>
<td>40</td>
</tr>
<tr>
<td>2007</td>
<td>42</td>
</tr>
<tr>
<td>2006</td>
<td>50</td>
</tr>
<tr>
<td>2005</td>
<td>39</td>
</tr>
<tr>
<td>Total</td>
<td>521</td>
</tr>
</tbody>
</table>

Topics of books.

One analysis examined the proportion of books published that were about health of a specific LGBT population. Figure 1 shows the proportion of books published about each population. Almost half of the books were about the general LGBT population (46%, n=241). The highest percentages of books about specific populations were 15% that were about transgender people (n=76) and about the same about gay men/MSM (14%, n=75). The lowest percentage was 2% each about bisexuals (n=9) and intersex (n=11). Books about youth made up
13% (n=67) of the total (these include juvenile literature as well as books about youth). Eight percent (n=42) of the books were about lesbians.

Figure 1. Books Published about Specific Populations.

Table 2 shows the results of an analysis of genre: advice books; bibliographies; history of LGBT health; books for youth (juvenile works); and personal accounts (including autobiographic and biographic works). The largest proportion (24%, n=125) were personal accounts. A study by Taylor reported that this type of resources was important for transgender people (2002, 90-91). Five percent (n=27) were books written for youth.
Table 2. Genre.

<table>
<thead>
<tr>
<th>Genre</th>
<th># (%) Publications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advice</td>
<td>12 (2%)</td>
</tr>
<tr>
<td>Bibliographies</td>
<td>1 (0%)</td>
</tr>
<tr>
<td>History of LGBT health</td>
<td>13 (3%)</td>
</tr>
<tr>
<td>Juvenile</td>
<td>27 (5%)</td>
</tr>
<tr>
<td>Personal accounts</td>
<td>125 (24%)</td>
</tr>
<tr>
<td>Other</td>
<td>343 (66%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>521 (100%)</strong></td>
</tr>
</tbody>
</table>

The next analysis examined the percentage of books published on different topics. These were derived from Fikar and Keith’s list of topics that were important to LGBT health care providers (2004, 58, 63) and enhanced with additional topics reflected in the bibliography. Table 3 shows that most of the books were on the topic of some aspect of mental health, or relationships and family (56%, n=290). Less than half of the books (44%, n=231) were published in other areas identified as important in LGBT health, each representing less than 10% for each topic.
Table 3. Book Topics.

<table>
<thead>
<tr>
<th>Topic</th>
<th># (%) Bks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aging</td>
<td>12 (2%)</td>
</tr>
<tr>
<td>Biomedicine</td>
<td>29 (6%)</td>
</tr>
<tr>
<td>Bullying/stigma/violence</td>
<td>18 (3%)</td>
</tr>
<tr>
<td>Coming out</td>
<td>31 (6%)</td>
</tr>
<tr>
<td>Delivery of health care</td>
<td>45 (9%)</td>
</tr>
<tr>
<td>Disability</td>
<td>4 (1%)</td>
</tr>
<tr>
<td>Education</td>
<td>21 (4%)</td>
</tr>
<tr>
<td>Health</td>
<td>18 (3%)</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>26 (5%)</td>
</tr>
<tr>
<td>Homelessness</td>
<td>3 (0%)</td>
</tr>
<tr>
<td>Homophobia, heterosexism</td>
<td>16 (3%)</td>
</tr>
<tr>
<td>Mental health, identity</td>
<td>165 (32%)</td>
</tr>
<tr>
<td>Relationships/family</td>
<td>125 (24%)</td>
</tr>
<tr>
<td>Substance use</td>
<td>8 (2%)</td>
</tr>
<tr>
<td>Total</td>
<td>521 (100%)</td>
</tr>
</tbody>
</table>

Table 4 shows the results of an analysis to identify the authors who published the most books during this time period. It includes information on the authors’ backgrounds and the source of that information. The bibliography included only the most recent edition of books. Eight authors wrote-edited or co-wrote-edited more than two books in this time period. These
eight authors wrote/edited 29 books. Forty-three wrote/edited or co-wrote/edited 2 books and 622 wrote/edited or co-wrote/edited 1 book each.

Table 4. Publishing Frequency and Background of Authors.

<table>
<thead>
<tr>
<th>Author</th>
<th>Author Background</th>
<th># of Bks Published</th>
<th>Reference #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bonnie Kaye</td>
<td>Holds an M.Ed. degree, specializes in straight/gay relationship counseling</td>
<td>5</td>
<td>178, 229, 373, 411, 456</td>
</tr>
<tr>
<td>Jack Drescher</td>
<td>Holds an MD degree, is a psychiatrist and psychoanalyst in private practice</td>
<td>4</td>
<td>108, 180, 402, 446</td>
</tr>
<tr>
<td>Rachel Pepper</td>
<td>Is a Licensed Marriage and Family Therapist in private practice</td>
<td>4</td>
<td>190, 352, 393, 513</td>
</tr>
<tr>
<td>Jaime Seba</td>
<td>No background information available</td>
<td>4</td>
<td>138, 247, 248, 249</td>
</tr>
<tr>
<td>Kate Bornstein</td>
<td>Is an author, playwright, performance artist, gender theorist</td>
<td>3</td>
<td>102, 265, 437</td>
</tr>
<tr>
<td>Somjen Frazer</td>
<td>Is founder, President and Principal Consultant of Strength in Numbers Consulting Group, holds a Master’s Degree in Sociology from Oxford University and BA from Cornell</td>
<td>3</td>
<td>112, 281, 321</td>
</tr>
</tbody>
</table>
Martin Kantor

Is a Harvard-trained psychiatrist who has been in private practice in Boston and New York, active in hospital residency training programs (http://www.abc-clio.com/ABC-CLIOCorporate/product.aspx?pc=A4212C)

Gerald P. Mallon

Is Executive Director of the National Center for Child Welfare Excellence (http://www.hunter.cuny.edu/socwork/faculty/cv/mallon.pdf)

<table>
<thead>
<tr>
<th>Primary Publishers.</th>
</tr>
</thead>
</table>
| Table 5 shows the publishers of more than ten books during the time period on LGBT health (an average of at least one book per year). Springer is the umbrella company for Springer, Springer Science+Business Media, Routledge, Taylor & Francis, and Haworth, so the data for all of these were included under “Springer” (Do you mean; Informa; and Haworth). Two of these publishers ranked in the top 20 of world publishers, Springer at #20 and Informa at #22 (The world’s, 2015).

Routledge (including Taylor and Francis and Haworth) was the most prolific publisher of books on LGBT health with 46 books. But this represented only 9% of the books published. |
Table 5. Primary publishers.

<table>
<thead>
<tr>
<th>Name</th>
<th># of Bks Published</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routledge/Taylor Francis/Haworth (Informa)</td>
<td>46</td>
</tr>
<tr>
<td>Springer</td>
<td>15</td>
</tr>
<tr>
<td>Oxford University Press</td>
<td>11</td>
</tr>
<tr>
<td>Palgrave Macmillan</td>
<td>11</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>83</strong></td>
</tr>
</tbody>
</table>

Table 6 shows that associations, centers, government agencies, institutes, and university presses published 27% (n=140) of the books. Notably, 38% of the publishers (n=200) produced only 1 book each. University presses published 13% (n=67) of the books.

Table 6. Books Published by Other Organizations.

<table>
<thead>
<tr>
<th>Publisher Type</th>
<th># of Bks Published</th>
</tr>
</thead>
<tbody>
<tr>
<td>Associations, Centers, Govt. Agencies, Institutes</td>
<td>73</td>
</tr>
<tr>
<td>University Presses</td>
<td>67</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>140</strong></td>
</tr>
</tbody>
</table>

Discussion

Books are a source of information that can be read in private and do not make judgments about their readers. For those who want information on aspects of LGBT health, that privacy and neutrality are key to the pursuit of learning about a topic (Schaller 2011, 109). This study began to address the need for bibliographies of books and provided an analysis of works published within the past ten years. The lack of standard terminology for concepts related to LGBT health
required a highly iterative search process. The terms included in Appendix 1 should be useful for those interested in pursuing new works and those that did not fall within the scope described above. As the terminology further evolves, new terms can be added to this list.

**Books Published.**

The number of books published from 2005 to mid-2015 was small, consistently at around 48 per year. Many of these were self-published or published by small presses. There is no predominant publisher for this topic, and the major commercial publishers produce little. Since publishers are market-driven, they may not have uncovered a large enough market to publish books on LGBT health. Research influences the academic market, and the National Institutes for Health, the primary government funder of health-related research, funds very little research on this topic (Coulter, et al. 2014).

**Topics of Books.**

The prominence of personal accounts as a genre in this study is notable. This implies that telling one’s own story through a book-length account is an important and valued way of publicly communicating one’s identity and the accompanying issues and helping others to deal with the same.

Findings of an Institute of Medicine report that “research has not been conducted evenly across sexual and gender minority populations, with more research focusing on gay men and lesbians than on bisexual and transgender people” (2011, 3) is somewhat similar to the finding in this study. Books on gay men outnumbered those on lesbians and bisexuality, but the number of books on transgender people exceeded all of them. The bibliography developed for this study included scholarly works as well as popular works which may account for the difference in findings. The importance of books to transgender people was reported in the results.
of a survey in which close to half of the respondents “stated that they consulted non-biographical books for transgender related information” (Taylor 2002, 91).

Of the topics of interest to LGBT health care professionals (Fikar and Keith 2004, 58), the following were not represented in the bibliography:

- Sexual health and practices
- Advance directives
- Breast cancer
- Rectal cancer
- Anal pap smears for men who have sex with men
- Reproduction
- Hepatitis
- Immunization
- Marriage and adoption (out of scope for this bibliography)

There were relatively few books on any topic except “mental health” and “relationships/family.” The Institute of Medicine reported that these topics were important but under-researched (IOM, 297). Unlike Snyder (2011, 185), who studied the scholarly biomedical journal literature, this study found that few books were focused on HIV/AIDS or STDs. But the findings of this study were similar to Snyder’s, who reported that “Overall, very little literature exists on other important disease topics that may affect the LGBT population, such as cardiovascular medicine and cancer…Other significant public health concerns such as mental illness and substance abuse also are under-emphasized. Parenting and aging are important concerns of LGBT persons, yet, there is little discussion of these topics to date” (Snyder 2011, 185). These are areas in which publishers and authors could fill gaps. There is also a need for books for teachers about LGBT
students in their classrooms; education administrators on LGBT-friendly policies for schools; and on including education about LGBT students and issues in teacher preparation programs. Specialized bibliographies and a database on LGBT health would facilitate access to this information.

**Recommendations for Future Research.**

This study could lead to many other studies of the literature on LGBT health with important, practical applications for access to information for LGBT people and their health care providers. Those recommendations are:

1. Develop a comprehensive, open access database of citations to international scholarly and popular books, book chapters, reports, theses, literature, fiction, nonfiction, juvenile works, and data sources on LGBT health. Include topics not included in this bibliography (i.e., health and religion, arts, law, policy). This has been done for other health-related subjects that are widely dispersed in different disciplines and types of publications (HABRI Central; LILACS; Native Health; Women’s Health Research).

2. Prepare bibliographies on specialized topics, i.e., sexuality and sexual health for young gay males (Pingel, et al. 2013).

3. Construct a stable and regularly-updated website that provides links to LGBT health resources such as associations, health care providers, and conferences. Advertise widely.

4. Construct a thesaurus of relevant terms for use by those who organize information on LGBT health.

5. Analyze personal accounts to identify common and disparate themes, and to identify areas for further research.
Conclusion

The literature on LGBT health is an area that would benefit from convenient and comprehensive compilations of resources and analyses of their content and publication characteristics. This study was a first step and resulted in the development of a bibliography of books that was fascinating for its complexity. The multitude of terminologies; publications found in the literature of many disciplines; and their appearance and importance in scholarly as well as popular literature posed challenges to comprehensive searching and required a highly iterative process. These are characteristics of an emerging and multidisciplinary field.

Compilations of information are a first step, but are not sufficient. Better ways to communicate health information need to be identified, and need to vary based on preferences of different gender and sexual minorities, ages, levels of education, and other demographics. Health information can influence health behaviors, and can therefore have a positive influence on quality of life.
References


http://www.springer.com/gp/about-springer/company-information/know-your-springer


“Native Health Database.” Accessed April 1, 2016. [https://hscssl.unm.edu/nhd/](https://hscssl.unm.edu/nhd/).


Appendix 1. Search Terms Used to Identify Books in the Worldcat Database.

These are the terms that are related to the concept, “LGBT.” They were searched in various combinations in the subject field of the Worldcat database to identify resources for the bibliography. An asterisk (“*”) at the end of a word indicates a truncation that would include variations on the word stem. An example is “homosexual*” which would retrieve citations that included the keywords “homosexual,” “homosexuals,” and “homosexuality.”

androgeny  
heterosexism
berdache  
homophob*
bisexual*  
homosexual*
closeted  
intersex*
coming out  
gay, gays, gay parents  
lesbian*
gender ambigu*  
LGBT*
gender dysmorphe*  
non-binary gender
gender identi*  
nonheterosexual
gender nonconforming  
queer*
gender variant  
questioning
GLB*  
same sex
hermaphrodit*  
sex* ambigu*
sex chromosome abnormality*  sex reassign*
sex differentiation disorder*  sexual minorit*
sex* fluid*  transgender*
sex* minorit*  transsexual*
sex* orientation  two-spirit

These are the terms combined with the above “LGBT” terms related to the concept, “health:”

<table>
<thead>
<tr>
<th>adjustment</th>
<th>counseling</th>
<th>home care</th>
</tr>
</thead>
<tbody>
<tr>
<td>adolescent*</td>
<td>disabil*</td>
<td>homeless*</td>
</tr>
<tr>
<td>age factors, aged, aging</td>
<td>disease*</td>
<td>identity</td>
</tr>
<tr>
<td>baby boom</td>
<td>drug*</td>
<td>intergenerational</td>
</tr>
<tr>
<td>behavior*</td>
<td>famil*</td>
<td>intimacy</td>
</tr>
<tr>
<td>bereave*</td>
<td>geriatric*</td>
<td>life style</td>
</tr>
<tr>
<td>bully*</td>
<td>gerontol*</td>
<td>manual*</td>
</tr>
<tr>
<td>caregiver*</td>
<td>grief</td>
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2015 (through July)


2014


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2013


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2011


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2010


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2008


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