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Research Week 2024

Inequities in chronic stress exposure at the intersection of race, gender, and sexual identity in a nationally representative sample of US adults

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Keywords

Racism; Sexism; C-Reactive Protein; Intersectional Framework; Biomarkers

Abstract

Background: Social inequity rooted in systemic oppression is robustly associated with mental and physical health; chronic stress is highlighted as a key mechanism. Growing evidence supports intersectionality theory, that interlocking systems of oppression (e.g., racism, sexism, heterosexism) may contribute to greater exposure to stressors for those with multiply marginalized identities. Limited research examining the association between sexual identity alone and C-reactive protein (CRP) – an upstream biological marker of chronic stress exposure – has yielded mixed results.

Purpose: To examine whether race/ethnicity, gender, and sexual identity interact to produce unequal levels of CRP.

Methods: Using cross-sectional data from the 2003-2010 waves of the National Health and Nutrition Examination Survey, we examined intersectional (self-reported race*gender*sexual identity) patterns in log-transformed CRP levels using a multivariable linear model among 10,885 participants who contributed biospecimen data during their examination. We estimated the percent change in mean log-CRP levels between identity groups when compared to the referent group (straight, non-Hispanic White men).

Results: Mean CRP ranged from 0.16 to 0.89 mg/dL. Relative to straight non-Hispanic White men, mean log-CRP levels were generally higher among women, regardless of race and sexual identity, with Black women identifying as “something else” having the highest percent change in mean log-CRP. Among men, the highest percent change in mean log-CRP were observed for those reporting a sexuality of “something else”.

Conclusion: Across identities, there is evidence of unequal levels of CRP that can contribute to chronic stress. Understanding the intricate interactions between these identities and health is vital for guiding effective interventions. More nuanced approaches to data collection informed by the queer community must be applied to future research to better capture the experiences of these populations.