

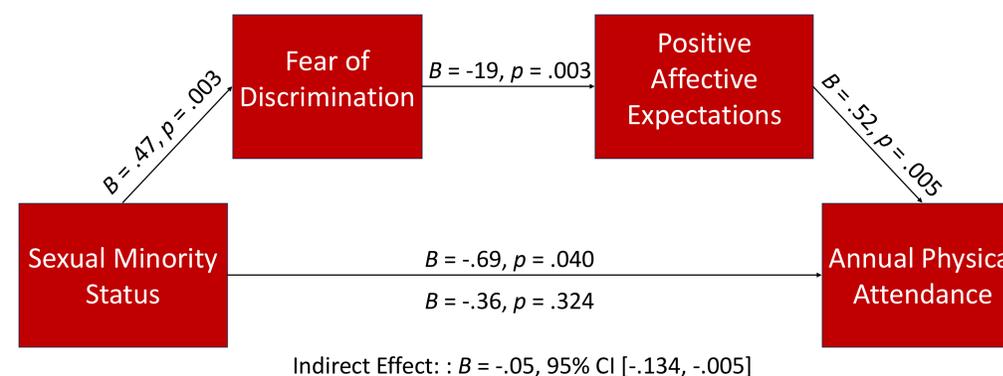
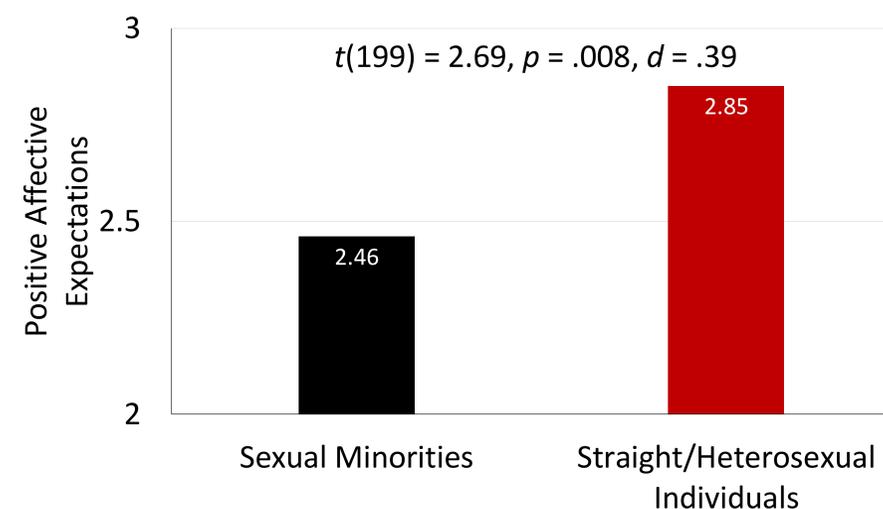
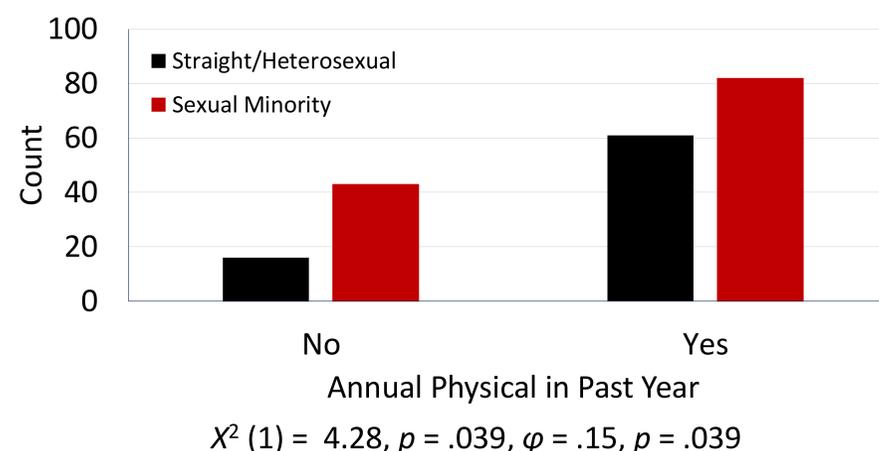
### BACKGROUND

- Annual physicals are a strong predictor of improved health behaviors and outcomes, yet sexual minorities (SM) attend at lower rates than heterosexual individuals, which may contribute to disparities in preventive care and downstream morbidity.
- Minority stress theory suggests anticipated stigma and negative clinical expectations as barriers to care, while positive affect associated with care can increase engagement.
- The present study examined affective expectations and perceived discrimination as mechanisms underlying this gap among lesbian, gay, and bisexual-spectrum adults.

### METHOD

- A total of 203 participants ( $M_{age} = 38.5, SD = 12.8$ ) were recruited via Prolific.
- Answered a single item assessing past year physical attendance. (e.g., have you had an annual physical examination within the past 12 months?). Those who responded with “I don’t know/unsure” were recoded as negative to create binary outcome variables.
- To assess Positive Affective Expectations, the Positive and Negative Affect Schedule (PANAS) was modified to assess anticipated affective states at a doctor’s appointment and modified to include additional medically relevant emotions (e.g., relieved, cared for).
- Fear of discrimination was assessed with four items developed by the study team to assess physician appointment-relevant fear of discrimination.
  - Items: I am afraid that when I visit the doctor:
    - I will be discriminated against
    - I will be blamed for issues surrounding my identity
    - I will be verbally harassed
    - I will be punished for aspects of my identity

### RESULTS



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- Sexual minorities were less likely to have attended an annual physical in the past year.
- Sexual minorities also reported lower positive affective expectations when thinking about visiting a health care provider.
- A serial mediation model indicated that fear of discrimination and positive affective expectations mediated the relationship between sexual minority status and annual physical attendance.

### DISCUSSION

- Fear of discrimination at doctor visits contributes to affective expectations about those visits, which may in turn impact annual physical attendance.
- These findings may help to inform health messaging interventions. Future studies should explore if interventions aimed at targeting affective expectations mitigate the effects of fear of discrimination.
- There is a need to reduce fear of discrimination at medical appointments for sexual minorities.
- This study is limited by its cross-sectional design. The mediation model clarifies relationships among variables but should be interpreted with caution.
- Future studies should further address the relationship between fear of discrimination and positive affective expectations through experimental methods.
- Further, future studies should assess these factors in more ecologically valid environments (e.g., before medical appointments).

The HP2 Lab is at SPSP, check out our other work here!



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