INVISIBLE MAJORITY: THE DISPARITIES FACING BISEXUAL PEOPLE AND HOW TO REMEDY THEM

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**Movement Advancement Project**
The Movement Advancement Project (MAP) is an independent think tank that provides rigorous research, insight, and analysis that help speed equality for LGBT people. MAP works collaboratively with LGBT organizations, advocates and funders, providing information, analysis and resources that help coordinate and strengthen efforts for maximum impact. MAP's policy research informs the public and policymakers about the legal and policy needs of LGBT people and their families. For more information, visit [www.lgbtmap.org](http://www.lgbtmap.org).

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See page 28 for more information about these organizations.

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EXECUTIVE SUMMARY

Despite comprising more than half of the lesbian, gay, and bisexual (LGB) community, bisexual people are frequently swept into the greater LGB community, their specific disparities made invisible within data about the LGB community as a whole. This report outlines the key areas in which bisexual people face disparities and highlights recommendations for policymakers, communities and service providers.

Who Are Bisexual People?

Bisexual people comprise about half (52%) of LGB people in the United States. Research also finds that a substantial percentage of Americans experience attraction to or have had sexual contact with individuals of more than one gender, even if they don't identify as bisexual. People of color are more likely than white people to identify as bisexual; bisexual women of color comprise 36% of bisexual women, compared to 26% of heterosexual women. Bisexual people are more likely to be parents than gay and lesbian people.

Even as existing research yields important information about bisexual people and their lives, data about bisexual people remains limited. Very few nationally representative surveys ask questions about sexual orientation and small sample sizes in the surveys that do ask about sexual orientation do not allow comparative analyses to be made among LGB people, so findings are often limited to LGB people as a whole rather than examining lesbian and gay respondents separately from bisexual respondents.

Bisexual People Face Pervasive Bias in Families, Communities, and Society

Research shows that both heterosexual people and gay and lesbian people express bias towards bisexual people. This bias ranges from exclusion from social networks to assumptions that a bisexual person is confused about their sexuality or will cheat on their partner, to the discrimination discussed throughout this report in all areas of life including at work, at school, and when seeking health care. Bisexual people also lack support from families and friends. Only 28% of bisexual people say that all or most of the important people in their life know they are bisexual, compared to 77% of gay men and 71% of lesbians.

As detailed in this report, bias and discrimination have tangible impacts on bisexual people in many areas of life.
reveals that bisexual women are screened for breast cancer and cervical cancer at much lower rates than lesbian and heterosexual women (only 80% of bisexual women reported ever being screened for cervical cancer, compared to 92% of lesbian women and 93% of heterosexual women). Service providers must understand these specific risks and outcomes in order to serve bisexual patients.

**Increased Levels of Violence.** Bisexual people face shocking rates of intimate partner violence, domestic violence, rape, and sexual assault. The Centers for Disease Control and Prevention report that 46% of bisexual women have been raped, as well as 17% of heterosexual women and 13% of lesbian women. Bisexual students too, suffer high levels of sexual assault on campus and bisexual people in places of incarceration report high rates of violence at the hands of staff and other inmates. More must be done to prevent violence and provide housing and recovery services for bisexual people seeking services.

Read together, the data in this report show a clear picture of the bisexual experience. Bisexual people are afraid to be open about their sexual orientation and if they are openly bisexual, they face bias and a distinct lack of support. Hopefully this report can serve as a call to policymakers and service providers across the country: in order to fully serve the LGBT community, they must fully serve the bisexual community.
INTRODUCTION

During the past decade, the United States has witnessed growing understanding and acceptance of lesbian, gay, bisexual, and transgender (LGBT) people and increased legal protections based on sexual orientation and gender identity. Rarely, however, have the experiences and lives of bisexual people, who comprise more than half of the entire LGBT community, been explicitly considered in the social or legal narrative. Rather, bisexual people are frequently swept into the greater lesbian, gay, and bisexual (LGB) community, their specific disparities made invisible within data about the LGB community as a whole.

Bisexual people’s sexuality is often also invisible in broader society: bisexual people are often assumed to be gay, lesbian, or heterosexual based on the gender of their partner. Yet when bisexual people are open about their sexuality, they face increased levels of violence from intimate partners; rejection by community, family, and peers; and skepticism from the people and organizations whom they turn to for help, resources, and services.

This report focuses on the “invisible majority” of the LGBT community, the nearly five million adults in the United States who identify as bisexual and the millions more who have sexual or romantic attraction to or contact with people of more than one gender. It provides an overview of current research so we can better understand those who comprise the largest share of the lesbian, gay, and bisexual population. The report also shows how bias, stigma, discrimination, and invisibility combine to create serious negative outcomes for bisexual people, and it provides concrete recommendations for change. Finally, sidebars throughout the report highlight the lived experiences of bisexual people—and the pervasive discrimination and key disparities they face.
WHO ARE BISEXUAL PEOPLE?

There are More Bisexual than Lesbian and Gay People

People who identify as bisexual comprise about half of lesbian, gay, and bisexual people in the United States (see the infographic on the previous page). Analysis of the National Survey of Family Growth (NSFG) found that 5.5% of women and 2% of men identify as bisexual. Additionally, many Americans, especially young Americans, identify as something other than heterosexual, gay, or lesbian.

Of students grades 9-12 who completed the Youth Risk Behavior Survey (YRBS) from 2001-2009, a median of 3.7% of students identified as bisexual. Of students who completed the same survey six years later, in 2015, 6.0% identified as bisexual (and 2% identified as gay or lesbian). In 2014, the Human Rights Campaign (HRC) released the results of a survey of over 10,000 LGBT students ages 13-17. Gay- and lesbian-identified youth comprised less than half of respondents. Nearly 40% of the youth identified as bisexual, 7% as pansexual, 4% as queer, 4% as other, and 1% as “other bisexual.”

While the previous data are about people who identify as bisexual, research finds that a substantial percentage of Americans experience attraction to or have had sexual contact with individuals of more than one gender, even if they don’t identify as bisexual. Eight percent of male adult respondents to the NSFG and almost 20% of female respondents said they were not attracted only to the opposite sex. And among respondents to the NSFG who identified as heterosexual, 13% of women and 3% of men reported having had same-sex sexual contact. Responding to an online poll in 2015, 12% of Americans who identified as heterosexual said they had had same-sex sexual experiences (15% of heterosexual-identified women and 8% of heterosexual-identified men).

There are key similarities and differences among people who identify as bisexual and people who do not identify as bisexual but who experience attraction to or have had sexual contact with people of more than one gender. In the sections that follow, we compare research findings for bisexual people to lesbian, gay, and heterosexual people, noting differences, where available, when researchers have defined bisexuality based on self-identification or sexual behavior.

Bisexual People Are Diverse

As illustrated throughout this report, bisexual people face specific disparities in many areas of life. For some bisexual people, these disparities may be compounded by discrimination on the basis of race, ethnicity, gender identity, disability, and other characteristics.

Studies have found that LGBT populations are more racially diverse than the population at large. Preliminary analysis of data from the 2014 Behavioral Risk Factor Surveillance System (BRFSS) shows that people of color are more likely to identify as bisexual, compared to their white counterparts. Men of color comprised 27% of heterosexual male respondents, but 35% of male bisexual respondents. In particular, male multiracial/other respondents comprised 15% of bisexual men, but only 6% of heterosexual men. Among women, women of color comprised 36% of bisexual women, compared to 26% of heterosexual women. Notably, black women comprised 13% of heterosexual women, and 17% of bisexual women.

A survey of Minnesotan youth found that more youth of color identify as bisexual: 3% of white and Asian youth reported identifying as bisexual, compared to 7% of American Indian/Alaskan Native youth, 5% of black/African American youth, and 6% of Native Hawaiian/Pacific Islander youth.

There is some evidence that more transgender people identify as bisexual than non-transgender people. Of respondents to the National Transgender Discrimination Survey, 23% reported identifying as bisexual and another 20% as queer.

Research finds that bisexual adults have a higher prevalence of disability than the LGBT community and the general population. Among men, 22% of heterosexual men, 26% of gay men, and 40% of bisexual men are disabled. Disability was defined in this study as being “limited in any way in any activities because of physical, mental, or emotional problems . . . [or having] any health problem that requires them to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone.”

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* The term pansexual refers to a person’s sexual orientation and describes people who are attracted to other people regardless of gender.
BI THE NUMBERS

WITHIN THE LGBT COMMUNITY

- GAY, 31%
- LESBIAN, 17%
- BISEXUAL, 52%
- HETEROSEXUAL, 19%

AMONG THE WHOLE POPULATION

- WOMEN
  - BISEXUAL: 5.5%
  - GAY OR LESBIAN: 1.3%
  - HETEROSEXUAL: 92%
  - DON'T KNOW/REFUSED: 0.9%
- MEN
  - BISEXUAL: 2%
  - GAY OR LESBIAN: 1.9%
  - HETEROSEXUAL: 95%
  - DON'T KNOW/REFUSED: 1%

BY AGE

PERCENT OF PEOPLE WHO ARE NOT ENTIRELY GAY OR LESBIAN OR HETEROSEXUAL

- AGES 18-29
  - GAY OR LESBIAN: 29%
  - HETEROSEXUAL: 71%
- AGES 30-44
  - GAY OR LESBIAN: 24%
  - HETEROSEXUAL: 76%
- AGES 45-64
  - GAY OR LESBIAN: 8%
  - HETEROSEXUAL: 92%
- AGES 65+
  - GAY OR LESBIAN: 7%
  - HETEROSEXUAL: 93%

AMONG ALL YOUTH

- BY SEXUAL ORIENTATION
  - BISEXUAL: 6%
  - GAY OR LESBIAN: 89%
  - HETEROSEXUAL: 3%

- BY SEXUAL BEHAVIOR
  - SEX WITH BOTH SEXES: 48%
  - SEX WITH SAME SEX: 46%
  - SEX WITH OPPOSITE SEX: 6%
  - HAVEN'T HAD SEX YET: 1%

AMONG LGBT YOUTH

- BISEXUAL: 38%
- GAY: 19%
- LESBIAN: 19%
- QUEER: 4%
- PANSEXUAL: 7%
- OTHER BISEXUAL: 1%
- OTHER: 4%


Note: Figures may not total 100% due to rounding.
Bisexual People Are More Likely to be Married and be Parents

Two-thirds of LGB parents are bisexual: approximately 59% of bisexual women and 32% of bisexual men have had children, compared to 31% of lesbians and 16% of gay men (see Figure 1 on the next page).22 According to Pew Research, bisexual people are far more likely to be married than gay or lesbian people: 32% of bisexual women and 23% of bisexual men are married, compared to 6% of lesbians and 4% of gay men.23 By comparison, 34% of lesbians are living with a partner, compared to 24% of gay men, 19% of bisexual women, and 7% of bisexual men.24 Although these data are from before the freedom to marry became widely available, current estimates of the number of married same-sex couples do not indicate a significant change in these percentages.

Bisexual People Are Most Often in Different-Sex Relationships

The majority of bisexual people in relationships are in relationships with people of the opposite sex.25 Eighty-four percent of bisexual people in a committed relationship are involved with someone of the opposite sex.26 Another 4% of bisexual people have a spouse or partner who is transgender.27 Statistically, this makes sense: there are far more people who are attracted to people of a different gender than people who are attracted to people of a similar gender. It is much more likely for a bisexual person to meet a partner of a different gender than a partner of the same gender.28 Being in a marriage or committed relationship may present unique stressors for bisexual people, especially those who are not out in their relationship.29
Emerging data reveal the extent to which bisexual people face bias from their families, communities (including the LGBT community), and society as a whole. A recent study of bias towards bisexual men and women revealed that 14% of Americans felt that bisexuality was not a legitimate sexual orientation. Research shows that both heterosexual people and gay and lesbian people express bias towards bisexual people. This bias manifests in many forms, from exclusion from social networks to assumptions that a bisexual person is confused about their sexuality or will cheat on their partner, to the discrimination discussed throughout this report in all areas of life including at work, at school, and when seeking health care.

Research is beginning to uncover the extent of this bias against bisexual people. For example, in a survey of bisexual people in 2013, nearly one in three bisexual people said that there is little to no acceptance of LGBT people in the United States today, compared to only 15% of gay men and 16% of lesbians (see Figure 1). When asked about social acceptance for different groups within the LGBT community, 33% LGBT people said there was a lot of social acceptance of bisexual women, compared to only 8% who said there was a lot of social acceptance for bisexual men. Finally, only 41% of bisexual people said that society is more accepting of people who are LGBT compared to 10 years ago. Sixty-six percent of gay men and 57% of lesbians said the same.

Within the LGBT community, only 33% of bisexual people had ever attended a Pride event, compared to 72% of gay men and 61% of lesbians. And only 20% of bisexual people said that there is a lot of social acceptance of LGBT people where they live, compared to 31% of lesbians and 39% of gay men.

Bisexual people lack support from families and friends. Only 44% of bisexual youth report they know an adult in their family to whom they could turn if they were sad, compared to 54% of gay and lesbian youth. Among adults, bisexual people are also less likely to feel comfortable being open about their sexual orientation. Only 28% of bisexual people said that all or most of the important people in their life know they are bisexual, compared to 77% of gay men and 71% of lesbians. More precisely, only 12% of bisexual men said that most of the important people in their life know they are bisexual, compared to one-third of bisexual women. Sixty-five percent of bisexual men said that few or none of the important people in their lives know they are bisexual.

A recent study of bisexual men through Columbia University found that many men had not told and never planned to tell their friends, family, or female partners...
about their male partners because they anticipated negative emotional reactions and negative changes in their relationships.43

“I would never tell anyone. I’ll go to my grave with this.”

- Participant in the Columbia University study44

When bisexual people struggle to find community and acceptance, they report high levels of mental distress. A 2010 study of health-related quality of life among lesbian and bisexual women found that, while mental distress among lesbian women decreased significantly for lesbians living in urban areas compared to nonurban areas, the same could not be said for the bisexual respondents.45 In fact, for bisexual respondents living in urban areas the odds of having frequent mental distress were twice as high as bisexual women living in nonurban areas.46 The researchers theorize that this may be due to the lack of community support for bisexual women in urban areas, compared to the support that lesbian women may find, causing bisexual women in urban areas to feel even more isolated when faced with the distinct lack of support.47

Physical and mental health disparities are discussed in more detail starting on page 13.

Limited and Flawed Data Collection on Bisexual People

Although the data showing the specific disparities faced by bisexual people are undeniable, serious problems with data collection remain. Very few nationally representative surveys ask questions about sexual orientation, and even fewer ask about gender identity. Even when surveys do ask about sexual orientation, small numbers of respondents frequently do not allow comparative analyses to be made among lesbian, gay, and bisexual people. Most analyses and subsequent studies and reports group together all non-heterosexual respondents—or all individuals who identify as LGB—as a seemingly homogenous group. This makes understanding the varied experiences and needs of bisexual people (and indeed all LGB people) difficult.

Second, studies examining behavioral health outcomes include men who identify as gay, men who identify as bisexual, men who do not identify as gay or bisexual but have sex with other men, men who have sex with transgender women, and transgender women who have sex with men all under the umbrella of “men who have sex with men (MSM).” While helpful for identifying the risks and disparities these communities face as a group, this ignores the unique needs and experiences of each individual sub-population, particularly men who identify as bisexual, men who have sex with people of more than one gender, transgender women (who under this framework are considered men), and transgender men (whom this framework cannot accurately capture). See page 18 for a more thorough discussion on how this flawed framework impacts data analysis on HIV prevention, treatment, and care.

Finally, some studies continue to conflate sexual orientation and gender identity, for example by asking respondents if they are lesbian, gay, bisexual, or transgender and then reporting about LGBT respondents as a group. Results from these studies obscure differences among lesbian, gay, bisexual, and heterosexual transgender people.

All of these flawed research practices result in commingled data that do not facilitate setting targeted research priorities or tailored programs and services designed to improve outcomes for bisexual people (and for other populations within the LGBT community).

Recommendations

LGBT data-collection leaders such as The Fenway Institute48 and The Williams Institute agree that disaggregated data analysis is a best practice for LGBT research. Throughout this report, we recommend that local, state, and federal agencies collect more specific data on the disparities facing LGBT people, including bisexual people. In general, all surveys should include standardized questions to capture respondents’ sexual orientation and gender identity. The federal Behavioral Risk Factor Surveillance System49 (BRFSS) and the Youth Risk Behavior Surveillance System50 (YRBS) contain sexual orientation and gender identity questions that should be implemented in all states. Likewise, the sexual orientation question found in the National Health Interview Survey (NHIS) has been tested across a range of populations and geographic areas and should be used as a model for other behavioral health instruments.51 In order to more fully understand the needs and disparities of populations within the broader bisexual community, it is also vital that researchers, where possible, analyze data through an intersectional lens, look at how sexual orientation, gender identity, race, disability, age, and other characteristics impact health and other outcomes.
DISPARITIES AND RECOMMENDATIONS
Unsafe and Unsupportive Educational Environments

Research finds that LGBT youth and young adults report negative experiences in schools, including higher levels of harassment, discrimination, and violence. Bisexual youth have distinct experiences from their peers in several key areas.

In a 2014 survey by the Human Rights Campaign (HRC) of more than 10,000 LGBT students, 29% of bisexual youth reported being frequently or often verbally harassed compared to 29% of all LGBT youth respondents (data was not available for gay and lesbian students alone) and 9% of non-LGBT respondents. Twenty-four percent of bisexual youth and 32% of pansexual youth reported frequently or often being excluded by peers for being different (compared to 25% of all LGBT youth respondents and 13% of non-LGBT respondents). In another survey, more than 44% of bisexual youth reported having been bullied, threatened, or harassed in the past year through the Internet or by text, compared to 20% of straight youth, 30% of lesbian and gay youth, and 31% of questioning youth.

Bisexual students, in particular, may also be disconnected from resources at school designed to support students. HRC's 2014 survey found that bisexual youth were less likely than their gay and lesbian peers to know if there was a Gender and Sexuality Alliance (GSA) in their school, or if there was an LGBT community center in their area. And only 54% of bisexual youth surveyed by HRC were out at school, compared to 72% of gay and lesbian youth.

“I've had people tell me that my life is worthless because I'm bisexual, and that I'm nothing.”
- Participant in the HRC survey

When students have negative experiences at school, they may skip school, show a decline in their academic performance, and develop lower educational aspirations and attainment. A 2011 study found that nearly 30% of bisexual youth reported one or more unexcused absence from school, compared to just over 15% of gay and lesbian youth, and between 9% and 14% of straight youth. A 2015 study found significantly lower rates of educational attainment among bisexual students: bisexual women were 64% less likely to have graduated high school and 48% less likely to have ever enrolled in college than “completely heterosexual” respondents; and bisexual men were 45% less likely to enroll in college than “completely heterosexual” men.

This harassment, exclusion, and lack of support at school may be compounded for some bisexual youth, leading to higher prevalence of risk behaviors, including substance use. See page 15 for more information on bisexual youths' substance use.

There is little specific data on the experiences of bisexual students of color, but research shows that LGBTQ youth of color face discrimination at home and at school that may lead to school push-out and the school-to-prison pipeline. Read our report Unjust: How the Broken Criminal Justice System Fails LGBTQ Youth to find out more.

Risk Behaviors Among Bisexual Youth

The Centers for Disease Control and Prevention's (CDC) 2001-2009 Youth Risk Behavior Survey found that bisexual-identified students in grades nine through twelve were more likely than heterosexual students to engage in risk behaviors that contribute to unintentional injuries, behaviors that contribute to violence, behaviors related to attempted suicide, tobacco use, alcohol use, other drug use, sexual behaviors, and weight management.

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**Figure 3: Behaviorally Bisexual Youth Experience More Dating Violence**

Percent of Students Experiencing Dating Violence, by Sexual Contact and Sexual Orientation

![Bar chart showing the percentage of students experiencing dating violence by sexual contact and orientation.](http://www.cdc.gov/mmwr/pdf/ss/ss60e0606.pdf)

In the same study, students who had sexual contact with both sexes had a higher prevalence of the following risk behaviors than both students who had only had sexual contact with the same sex and students who had only had sexual contact with the opposite sex: behaviors that contribute to violence, behaviors related to attempted suicide, tobacco use, alcohol use, other drug use, and weight management.63 Thirty percent of students who had sexual contact with both sexes reported experiencing dating violence, compared to 14% of students who had only had sexual contact with the opposite sex, 20% of students who had only had sexual contact with the same sex, and 23% of students who identify as bisexual (see Figure 3 on the previous page).64 Similarly high: 27% of students who had sexual contact with both sexes reported being physically forced to have sexual intercourse, compared to compared to 11% of students who had only had sexual contact with the opposite sex, 17% of students who had only had sexual contact with the same sex, and 23% of students who identify as bisexual.65

Recommendations

- The federal government should clarify that Title IX’s prohibition on sex discrimination in education explicitly includes sexual orientation.
- Congress should pass legislation prohibiting discrimination, harassment, and bullying of students on the bases of sexual orientation and gender identity.
- States should prohibit discrimination, harassment, and bullying on the bases of sexual orientation and gender identity.
- All local, state, and federal level data collection on students should include questions about sexual orientation and gender identity. The sexual orientation and gender identity modules to the Youth Risk Behavior Survey and the Behavioral Risk Factor Surveillance System are good models that allow for disaggregated analysis about bisexual youth.
- Local school districts and state departments of education should adopt sexual violence prevention curricula that are inclusive of LGBT youth, including bisexual youth.
- Local school districts and state departments of education should create and promote comprehensive sexual and reproductive health education curricula that are inclusive and affirming of sexual orientation and gender identity.
- Local school districts and state departments of education should create and promote inclusive and affirming curriculum materials that incorporate the contributions of LGBT people, including bisexual people across all subjects and disciplines including social studies, literacy, science, and math.
- Local school districts and state departments of education should provide training for teachers and educational professionals on how to best serve LGBT students, including bisexual students, Trainings should include how to prevent discrimination, bullying, and harassment and how to support students experiencing the same.
- Local school districts and state departments of education should work with health agencies to ensure all students have access comprehensive reproductive health services, including condoms, contraception, HIV-related healthcare, and tests for sexually transmitted diseases including HIV, gonorrhea, and chlamydia.
- School districts should allow and support Gender and Sexuality Alliances (GSAs) within schools. School staff should ensure these student organizations are inclusive and affirming of bisexual students.
At the Intersections: The Unique Experiences of Bisexual Youth Experiencing Homelessness

The largest proportion of lesbian, gay, and bisexual (LGB) youth experiencing homelessness identify as bisexual: in a recent study of street outreach programs by the Administration on Children, Youth, and Families, 20.0% of youth identified as bisexual, compared to 9.9% of youth who identified as gay or lesbian, and 4.1% as “something else.” Gender identity was collected separately from sexual orientation; 6.8% of youth in this survey identified as transgender.

Despite bisexual youth comprising the largest proportion of LGB youth, bisexual youth have little access to targeted services. And a growing body of research shows that bisexual youth experience unique challenges and barriers that may put them at an increased risk of experiencing homelessness.

Some bisexual youth lack support at school and from peers and families that in turn puts them at risk for homelessness. In a report based on the 2013 Minnesota Student Survey, bisexual youth reported experiencing more challenges to success in school than gay, lesbian, and questioning youth, including mental distress and family violence. Bisexual youth also experienced lower levels of protective factors such as having a positive view of their identity, having teacher/school support, feeling generally supported, feeling empowered, and having a commitment to learning.

A 2014 study of LGBT youth found low levels of family acceptance and knowledge of support systems among bisexual youth (27% of bisexual youth said their families were “very accepting,” compared to 33% of lesbian and gay youth). In fact, a 2005 study looking at the risks of homelessness among LGBT and straight youth found that 26% of bisexual youth indicated they experience homelessness because of physical abuse inflicted by their parents (compared to 13% of gay and lesbian and 15% of heterosexual youth).

“My father didn’t respect me for who I am because he [doesn’t] like bisexual people or gay people so from there I came out to him and I told him and then he just kicked me out, because he couldn’t take it.”

– Participant in a Streetwise and Safe survey, 19 years old, Latino, bisexual, male

Bisexual youth were less likely to be out to their families, friends, peers, and school than gay and lesbian youth, mirroring the experiences of bisexual adults.

Without these targeted supports in mental health, risk behaviors, and family acceptance, and with decreased access to positive schools supports, bisexual youth are at an increased risk of experiencing homelessness and housing instability. Bisexual youth face such challenges with unique strengths, including strong self-advocacy and communication skills, which is important to keep in mind when working with and designing targeted programs and support for the bisexual community.

The disparities experienced by bisexual youth underscore the need for targeted services and support for bisexual youth experiencing homelessness and bisexual youth at risk of homelessness. Additionally, surveys of LGB youth must be sure to disaggregate data between bisexual and gay and lesbian youth. When data are disaggregated, the unique disparities of bisexual youth are made clear and can drive changes to policy and practice to reduce the disparities and homelessness among bisexual youth.

High Rates of Discrimination in the Workplace

Bisexual people face harassment and discrimination in the workplace that may impact health, well-being, and earning power. In a study of the employment discrimination experiences of bisexual people, nearly two-thirds of respondents reported experiencing some form of harassment or discrimination at work, including hearing inappropriate jokes (see Figure 4).73

Perhaps unsurprisingly, very few bisexual people are open about their bisexuality in the workplace. A 2011 study by the Williams Institute found that only 6% of bisexual people reported being open about their sexual orientation to all their coworkers, compared to 40% of lesbian and gay people.74 A survey of LGBT Americans by the Pew Research Center found that only 11% of bisexual respondents reported their closest co-workers know that they are bisexual, while half of gay men and lesbians said that their co-workers know their sexual orientation.75 And only 44% of bisexual respondents said that their workplace is very accepting of bisexual people, compared to 60% of gay men and 50% of lesbians.76

Employment discrimination takes a toll on bisexual people’s health and well-being. The Williams Institute points out that employment discrimination is a form of minority stress that may impact the health of the people facing the discriminatory behavior.77 Minority stress can be defined as the impact of exposure to both interpersonal and structural discrimination.78 That is: discrimination by individuals (for example, employment discrimination, housing discrimination, jokes, bullying, harassment) and by legal structures (for example, inability to bring a claim of health care discrimination or to file a successful claim for asylum). The Williams Institute cites to a 2009 survey finding that 74% of bisexual respondents indicate they were in excellent or very good health, compared to 78% of gay men and lesbians and 83% of heterosexual respondents.79

Similarly, employment discrimination takes a toll on earning power. Pew Research Center found that 48% of bisexual respondents reported an annual family income of less than $30,000, compared to 30% of gay men, 39% of lesbians, and 28% of all adults in the United States (see Figure 5 on the following page).80 Similarly, a 2010 study of lesbian and bisexual women found that 48% of bisexual women were living on an income 200% below the federal poverty level, compared to 34% of lesbians.81 The Williams Institute has also found that bisexual people are less likely to have enough money to buy necessities like food: 25% of bisexual people participate in the Supplemental Nutrition Assistance Program (SNAP), commonly known as food stamps, compared to 14% of lesbians and gay men.82 Bisexual people of color have especially high rates of participation in SNAP: 47% of African American bisexual people and 39% of “other/multiracial” bisexual people are on food stamps.83

Figure 4: Bisexual People Experience High Levels of Employment Discrimination
Percent of Respondents Reporting...

<table>
<thead>
<tr>
<th>Discrimination Type</th>
<th>Percentage of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being Fired Because of Their Sexuality</td>
<td>5%</td>
</tr>
<tr>
<td>Being Denied a Work Opportunity Because of Their Sexuality</td>
<td>7%</td>
</tr>
<tr>
<td>Not Being Hired for a Job Because of Their Sexuality</td>
<td>13%</td>
</tr>
<tr>
<td>Not Being Promoted Because of Their Sexuality</td>
<td>13%</td>
</tr>
<tr>
<td>Being Given an Unfair Review Because of Their Sexuality</td>
<td>20%</td>
</tr>
<tr>
<td>Being Sexually Harassed Because of Their Sexuality</td>
<td>31%</td>
</tr>
<tr>
<td>Being Exposed to Biphobic Jokes at Work</td>
<td>58%</td>
</tr>
</tbody>
</table>

Recommendations

- Congress should pass the Equality Act, explicitly prohibiting employment discrimination on the bases of sexual orientation and gender identity.
- The Equal Employment Opportunity Commission (EEOC) should continue to interpret Title VII’s prohibition on sex discrimination in employment as inclusive of sexual orientation. The EEOC should clarify that anti-bisexual jokes and harassment are impermissible under Title VII.
- The federal government should educate the public on the EEOC and some federal courts’ interpretations of Title VII to include sexual orientation.
- The federal government should expand research and data collection on workers’ sexual orientation and gender identity, and disaggregate this data on sexual orientation.
- States should pass legislation prohibiting employment discrimination on the bases of sexual orientation and gender identity.
- Local municipalities should pass legislation prohibiting discrimination on the bases of sexual orientation and gender identity.
- Employers should clarify that anti-bisexual jokes and harassment are unacceptable. Employers should have explicit workplace policies and trainings that include support for bisexual employees. Employers should support Employee Resource Groups that are LGBT-specific and bisexual-inclusive.

Story: James

I work at a moderately conservative (e.g. socially liberal) higher education institution in a liberal state. When I came out as bisexual to people at work, most of my colleagues were, as I expected them to be, supportive and welcoming, and didn’t alter their treatment of me in any perceptible ways. A few weeks later, several of us were weighing two distinct creative options for an upcoming project, and I remarked that I was having a really hard time choosing between options A and B. “Well, that figures,” one of my co-workers joked. Nervous laughter filled the room; about seven colleagues were present—some junior to us both, some senior. (He’s senior to me, but I don’t report to him.) “What I mean is,” I pressed on, feeling a flop sweat starting, “is that A meets [certain project objectives] really well, and B meets [other objectives] really well. So it’s a tough choice with a lot at stake.” Having gotten one laugh, he wasn’t prepared to drop the chance to show how buddy-buddy we were on the topic of my sexuality and my supposed inability to make a committed choice. “Well, sure—thing is, you’ll tell us you want A now, but in a few months you’ll want B.”

Source: As told to the Movement Advancement Project. Names have been changed.
Difficulty Seeking Immigration Relief

Bisexual immigrants, asylum seekers, and refugees have unique needs and valid claims. There are at least 267,000 undocumented LGBT immigrants and 637,000 LGBT documented immigrants in the United States. There is no data collection of the number of LGBT refugees or asylum seekers in the United States, but Heartland Alliance has estimated that approximately 3,500 LGBT refugees enter the United States and 1,250 LGBT people are granted asylum each year. There is no current estimate of the number of bisexual immigrants, regardless of immigration status, as specific data on sexual orientation and gender identity of immigrants is not widely collected.

The process for gaining asylum or refugee status in the United States is very strict. Sexual orientation became an officially protected ground for asylum in 1994 after a long history of explicit exclusion of LGBT-identified people, people who had sexual contact with people of the same gender, and people living with HIV. Serious barriers remain for LGBT people, however, including the statutory one-year filing deadline for asylum claims. Many LGBT people fleeing persecution in their country of origin may not feel safe enough to talk about their sexual orientation, much less to an asylum officer, before one year has passed. Nor may an LGBT person know that their LGBT status can create a valid claim for asylum.

When a bisexual person approaches an asylum officer to begin a claim, they may be faced with a barrage of questions designed to understand the extent of the persecution they faced in their country of origin. A bisexual-identified person may have to produce evidence of romantic or sexual contact with people of more than one gender, or a person who identifies as gay or lesbian may have to justify away their past sexual contact with a person of a different gender. Different cultures have various mores around sexual orientation and sexual behavior and a person filing for asylum may not understand that their bisexuality or bisexual behavior may qualify them for a claim based on sexual orientation persecution. In addition, a lack of understanding about bisexuality may mean that an immigration official may unfairly discount a bisexual person’s application for asylum by assuming that the applicant is actually heterosexual.

For example, in 2016, the Seventh Circuit Court of Appeals affirmed an immigration judge’s decision that a bisexual man should not be granted asylum because of his sexual orientation. Despite the asylum seeker’s plethora of evidence documenting not only the years of physical harassment he endured in his country of origin, but also of his relationships with men and women, the immigration judge was skeptical of his bisexuality, citing his wife and children as contrary evidence. As Judge Posner said in his dissent to the Seventh Circuit’s ruling, “The weakest part of the immigration judge’s opinion is its conclusion that Fuller is not bisexual, a conclusion premised on the fact that he’s had sexual relations with women (including a marriage). Apparently the immigration judge does not know the meaning of bisexual.”

Story: Apphia Kumar

Apphia Kumar did not know she could apply for asylum to the United States as a bisexual person, despite her years as a bisexual activist in India. In fact, her research indicated otherwise, turning up stories of bisexual people whose asylum claims were rejected on the grounds of “not being gay enough” and stories of bisexual people who chose to only disclose their same-sex relationships in order to strengthen their claims.

When Apphia began to work with an immigration attorney on her asylum claim, the attorney warned her they had never seen a successful claim for asylum by a bisexual person. Despite massive odds against her, Apphia went on to file the first successful recorded claim for asylum based on her bisexual identity and her LGBT advocacy in India.

Source: As told to the Movement Advancement Project.
Recommendations

• Congress should extend the one-year filing deadline for all asylum seekers, including bisexual asylum seekers.

• United States Citizen and Immigration Services (USCIS) should train Refugee, Asylum, and International Operations (RAIO) Officers on how to competently process an asylum claim for someone who may identify as bisexual, or may have had sexual contact with individuals of more than one gender.

• USCIS should continue to train all RAIO Officers on the cultural differences around bisexuality and bisexual behavior (for example, in some countries, bisexual behavior may be more commonplace while bisexual identity may not). It is important for RAIO officers to explain to asylum seekers all the potential bases for an asylum claim, including sexual contact with individuals of the same gender.

• USCIS should provide explicit resources to assist bisexual asylum seekers.

• USCIS and the Department of Justice should provide cultural competence training for all attorneys and immigration judges processing asylum claims, including on bisexuality.

• USCIS should not consider previous relationships and/or marriages as prima facie evidence that a permanent resident or asylum seeker is in a fraudulent marriage.

• USCIS should collect voluntary, confidential data on the sexual orientation and gender identity of asylum seekers.

• The Department of Homeland Security should immediately end detention of immigrants, including asylum seekers.

Substantial Mental and Physical Health Disparities

Researchers have long found that minority stress can have health outcomes, including poorer mental health, in communities of color, for example, and among LGBT people (see page 10 for a discussion about minority stress). For bisexual people, stigma, harassment, and discrimination do significant harm over the course of their lives. Not surprisingly, bisexual peoples’ experiences of discrimination, bias, and stigma have measurable mental and physical health implications.

Mental Health

Research on LGBT people suggests that minority stress factors such as rejection, social isolation, harassment, and discrimination may lead to mental health conditions or exacerbate existing conditions, thereby increasing suicide risk. While too little research has been conducted specifically on bisexual people to allow conclusions to be drawn about factors that underlie mental health and suicide-related outcomes, it is clear that bisexual youth and adults have elevated risks in both domains, compared to their heterosexual as well as gay and lesbian counterparts. Bisexual youth and adults have poorer mental health and higher self-reported rates of suicidal ideation and behavior than gay, lesbian, and heterosexual youth and adults. In the general population, mental health conditions have been found to contribute significantly to suicide, although many other individual, interpersonal, community, and societal factors clearly increase suicide risk.

Data analyzed from the National Epidemiological Survey on Alcohol and Related Conditions found that, while lesbian, gay, and bisexual identity were all associated with higher odds of having a mood or anxiety disorder, bisexual behavior (defined in the survey as having had sex with “both males and females”) conferred the greatest odds of having any mood or anxiety disorder (see Figure 6 on the next page). Mood disorders include depression; anxiety disorders include panic and generalized anxiety disorder. Men who had sex with men and women were 3.2 times more likely to have any lifetime mood disorder than men who had sex only with women; likewise, women who had sex with men and women were 2.3 times more likely to have any lifetime mood disorder than women who had sex only with men. According to the CDC, across all states and cities who administer the YRBS, a median of 55% of high school students who had sexual contact with both sexes reported feeling “sad or hopeless,” compared to 28% of students who had only had sexual contact with the
opposite sex and 39% of students who had only had sexual contact with the same sex.\textsuperscript{93} Bisexual-identified students had similarly high rates of feeling sad or hopeless: a median of 56% of bisexual-identified students, compared to 41% of youth who identified as gay or lesbian, 38% of youth who identified as questioning, and 25% of youth who identified as heterosexual.\textsuperscript{94}

A 2015 study found that girls who reported sexual attraction to “both boys and girls” were more likely than girls who reported sexual attraction “only to girls” and “only to boys” to have disordered eating symptoms.\textsuperscript{95} Boys who reported sexual attraction to or sexual behavior with “boys” and “boys and girls” had higher rates of disordered eating symptoms.\textsuperscript{96}

Bisexual people have significantly higher rates of substance use for some specific substances. See Figure 7 on the next page for data from the Centers for Disease Control and Prevention on bisexual and behaviorally bisexual youths’ drug use compared to gay, lesbian, questioning, and heterosexual youth and youth who have sexual contact with only the same sex or only the opposite sex.

Some data suggest that bisexual-identified elders are more likely to experience depression.\textsuperscript{97} The researchers surmised that bisexual elders may experience greater depression due to a lack of emotional support from or increased negative interactions with family members.\textsuperscript{98}

\begin{figure}
\centering
\includegraphics{figure6.png}
\caption{Bisexual-Identified and Behaviorally Bisexual People Are More Likely to Have Anxiety and Mood Disorders}
\end{figure}
In a 2010 study in Canada, bisexual men were six times more likely than heterosexual men to report seriously considering suicide at some point in their lives. By comparison, gay men were four times more likely to say they had seriously considered suicide than heterosexual men. Among women in this same study, bisexuals were six times more likely and lesbians almost four times more likely to report lifetime suicidal ideation than their heterosexual counterparts. Bisexual people also more frequently report having made a suicide attempt at some point in their lives, compared to heterosexual, or gay and lesbian adults. Nearly a quarter of bisexual adults reported having attempted suicide, four times the rate of heterosexual adults. Lesbian and gay adults were more than twice as likely to report having attempted suicide as heterosexual adults.

According to analysis of data from the National Transgender Discrimination Survey, transgender people who identified as something other than gay, lesbian, or straight (including people who identified on the survey as bisexual, pansexual, queer, and non-binary-attracted) were more likely to have ever attempted suicide (42.6%) than transgender people who identified as gay, lesbian, or straight (38.4%).

Analysis of YRBS data from the CDC shows high rates of suicidal ideation and attempts among bisexual-identified and behaviorally-bisexual youth (see Figure 8 on the next page). According to a different study of more than 13,000 middle and high school students, 44% of bisexual youth reported thinking about suicide in the past 30 days (compared to 33% of LGBTQ youth overall and 7% of heterosexual youth). Among bisexual youth, 21% percent reported attempting suicide in the past year, compared to 9% of all LGBTQ youth and over 2% of heterosexual youth. Significantly, a national study that followed depressed youth from adolescence into young adulthood found a marked decline in suicidal thoughts and behavior among youth of all sexual orientations except for those who identified as “mostly gay” or bisexual.

Analysis of the Massachusetts Youth Risk Behavior Survey showed that youth who reported having sex with “same and opposite sex partners” were more likely to report making a plan to attempt suicide, while youth who identified as lesbian or gay reported higher rates of planning for a suicide attempt than youth who identified as bisexual. Youth who identified as lesbian, gay, or bisexual had significantly higher rates of making plans for a suicide attempt compared to their heterosexual peers.

---

**Figure 7: Bisexual-Identified and Behaviorally Bisexual Youth Have High Rates of Drug Use**
Percent of Respondents Using Drugs, by Sexual Orientation and Sexual Contact

**Figure 7a: Heroin**

<table>
<thead>
<tr>
<th></th>
<th>Bisexual</th>
<th>Gay/Lesbian</th>
<th>Not Sure</th>
<th>Heterosexual</th>
<th>Sex with Opposite Sex</th>
<th>Sex with Same Sex</th>
<th>Sex with Both Sexes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Percent</strong></td>
<td>10%</td>
<td>13%</td>
<td>2%</td>
<td>11%</td>
<td>3%</td>
<td>18%</td>
<td>18%</td>
</tr>
</tbody>
</table>

**Figure 7b: Inhalants**

<table>
<thead>
<tr>
<th></th>
<th>Bisexual</th>
<th>Gay/Lesbian</th>
<th>Not Sure</th>
<th>Heterosexual</th>
<th>Sex with Opposite Sex</th>
<th>Sex with Same Sex</th>
<th>Sex with Both Sexes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Percent</strong></td>
<td>26%</td>
<td>19%</td>
<td>8%</td>
<td>17%</td>
<td>11%</td>
<td>34%</td>
<td>3%</td>
</tr>
</tbody>
</table>

**Figure 7c: Methamphetamine**

<table>
<thead>
<tr>
<th></th>
<th>Bisexual</th>
<th>Gay/Lesbian</th>
<th>Not Sure</th>
<th>Heterosexual</th>
<th>Sex with Opposite Sex</th>
<th>Sex with Same Sex</th>
<th>Sex with Both Sexes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Percent</strong></td>
<td>15%</td>
<td>13%</td>
<td>3%</td>
<td>16%</td>
<td>4%</td>
<td>21%</td>
<td>15%</td>
</tr>
</tbody>
</table>

Recommendations

- The federal Substance Abuse and Mental Health Services Administration (SAMHSA) should provide cultural competence guidance for grantees, including organizational grantees and individual mental health professionals, working with LGBT, and specifically bisexual, youth and adults.
- SAMHSA should train national hotline and lifeline staff on how to respond to bisexual callers.
- The federal government should continue to work on incorporating questions about respondents’ sexual orientation and gender identity into all health and demographic surveys.
- Federal and state governments should fund more research into the factors related to mental health and suicide-related outcomes in bisexual people.
- State and local departments of mental health should provide cultural competence training for organizations and mental health professionals working with bisexual clients.
- Medical schools and schools training medical providers should provide LGBT-specific, bisexual-inclusive cultural and health competence training for their students.

---

Figure 8: Behaviorally-Bisexual and Bisexual-Identified Youth Are More Likely to Think About Suicide or Make a Plan To Attempt Suicide

Median Percent of High School Students Who...

- **...Seriously Considered Attempting Suicide**
  - Bisexual: 40%
  - Gay/Lesbian: 30%
  - Not Sure: 24%
  - Heterosexual: 12%

- **...Made a Suicide Attempt Plan**
  - Bisexual: 36%
  - Gay/Lesbian: 21%
  - Not Sure: 25%
  - Heterosexual: 14%

- **...Attempted Suicide**
  - Bisexual: 30%
  - Gay/Lesbian: 10%
  - Not Sure: 8%
  - Heterosexual: 6%

- **... Experienced a Suicide Attempt that Resulted in an Injury, Poisoning, or Overdose that had to be Treated by a Doctor or Nurse**
  - Bisexual: 11%
  - Gay/Lesbian: 8%
  - Not Sure: 8%
  - Heterosexual: 6%

Physical Health

Bisexual people and people who have sexual or romantic attraction to or contact with people of more than one gender have a higher prevalence of some specific negative physical health outcomes, including cardiovascular disease, smoking, substance use, some cancers, and sexually transmitted infections. These outcomes are also found in other communities that experience discrimination, particularly people of color (see Figure 9). Despite these health disparities, however, bisexual people are rarely targeted for specific interventions, treatment, or health care services.

Women enrolled in the National Longitudinal Study of Adolescent to Adult Health who identified as “mostly heterosexual” and “mostly homosexual” have been reported to be more likely to develop cardiovascular disease than heterosexually-identified women.

Compared to non-bisexual transgender people (18.2%), bisexual transgender people are more likely to be current smokers (21.2%). When looking at all transgender people who do not identify as gay, lesbian, or straight, 33.7% are current daily or occasional smokers, compared to 27.2% of gay, lesbian, and straight transgender respondents.

One survey found that 18-19% of “mostly straight and bisexual” women aged 25-34 reported a sexually transmitted disease diagnosis in the past year, compared to 12% of straight women and 7% of “mostly gay or gay” women. Conversely, only 65-75% of “bisexual and mostly gay/gay” women reported having a routine doctor checkup in the past two years, compared to 82-85% of “straight and mostly straight” women.

One study found that bisexual women ages 50-79 had higher rates of breast cancer. Analysis of the BRFSS reveals that bisexual women are screened for breast cancer and cervical cancer at much lower rates than lesbian and heterosexual women (for example, only 80% of bisexual women reported ever being screened for cervical cancer, compared to 92% of lesbian women and 93% of heterosexual women).

CDC analysis shows that bisexual people have lower rates of health insurance (22.5% of bisexual people lack health insurance compared to 16.0% of gay/lesbian and 16.5% of heterosexual people) and are more likely to have failed to obtain needed medical care in the past year due to cost (16.2% of bisexual people compared to 11.7% of gay/lesbian and 7.6% of heterosexual people).

Compounding these disparities, bisexual people fear bias from medical professionals: a 2013 study of disclosure
of sexual orientation to medical professionals found that bisexual people were far less likely to tell their doctor about their bisexuality, compared to lesbians and gay men. In fact, 39% of bisexual men and 33% of bisexual women hadn’t told their doctor about their sexual orientation, compared to 10% of gay men and 13% of lesbians. Not only does a lack of disclosure potentially impact medical care, it also has negative consequences for participants’ psychological well-being.

**Recommendations**

- The federal government should include questions about respondents’ sexual orientation and gender identity on all health and demographic surveys, including the Behavioral Risk Factor Surveillance System (BRFSS), the Youth Risk Behavior Surveillance System (YRBS), the Census, and the National Health Interview Survey.
- States should adopt the sexual orientation and gender identity modules of the BRFSS and the YRBS.
- The Department of Health and Human Services, along with state departments of health, should focus health insurance exchange recruitment efforts on LGBT communities, including bisexual people.
- State and local departments of mental health should provide cultural competence training for organizations and health professionals working with bisexual clients.
- Medical schools and schools training medical providers should provide LGBT-specific, bisexual-inclusive cultural and health competence training for their students.

**HIV Prevention, Treatment, and Care**

Studies of the efficacy of HIV prevention, treatment, and care have primarily focused on a population called “men who have sex with men,” or MSM. This population includes men who identify as gay, men who identify as bisexual, men who do not identify as gay or bisexual but have sex with other men, men who have sex with people of more than one gender, men who have sex with transgender women, and transgender women who have sex with men. While this behavioral-based category has helped move HIV prevention and treatment away from a sole focus on gay men, the broad category means that the prevention and treatment methods developed are not tailored specifically to all of the communities they cover. Additionally, data on MSM do not reveal the disparities faced by each sub-population, including men who identify as bisexual and men who have sex with individuals of more than one gender.

The Centers for Disease Control and Prevention (CDC) estimate that MSM account for 67% of all new HIV diagnoses in 2014, despite comprising 2% of the U.S. population. Among white MSM, new diagnoses fell 18% between 2005 and 2014, while new diagnoses rose 24% for Latino MSM. Among African American MSM, diagnoses rose a cumulative 22% between 2005 and 2014, but have leveled since 2009; likewise, young African American MSM experienced an 87% increase in new diagnoses since 2005, but a 2% decline since 2010.

While the CDC recommends that MSM get tested for HIV at least once a year, the National HIV Behavioral Surveillance System reveals that only 18% of MSM got tested in 2011. This low test rate means that many people living with HIV don’t know it (see Figure 10).

Analysis of data on HIV epidemiology from the Georgia Department of Health found that fewer HIV-positive men who had sex with men and women had been linked to care (that is, knew their viral load within a few months of diagnosis), compared to men who only had sex with men. This analysis highlights the importance of disaggregated data, and the implications for care for women who have sex with men who have sex with men and women.

![Figure 10: Men who Have Sex With Men Have Low Rates of Awareness of HIV Status](source)

Recommendations

• The federal Department of Health and Human Services as well as local and state departments of health should provide guidance to grantees on prioritizing culturally competent research and program development specific to bisexual people and the treatment, prevention, and care of HIV.

• The federal Department of Health and Human Services, and local and state departments of health should provide guidance to grantees on the differences between men who have sex with men, men who have sex with men and women, men who identify as bisexual, and transgender women, as well as appropriate methods of differentiating approaches to those populations in research and program development.

• The federal Department of Health and Human Services, and local and state departments of health should invest in tailored interventions, treatment, and care for men who have sex with men and women and bisexual-identified men, particularly access to PEP and PrEP.
Increased Levels of Violence

Bisexual people face shocking rates of intimate partner violence, domestic violence, rape, and sexual assault.

A 2013 CDC report found that 61% of bisexual women and 37% of bisexual men reported experiencing rape, physical violence, and/or stalking by an intimate partner at some point in their lifetime (as shown in Figure 11). The same study found that 46% of bisexual women had been raped, as well as 17% of heterosexual women and 13% of lesbian women. The vast majority of bisexual and heterosexual women who had been raped reported only having male perpetrators (98% and 99%, respectively).

Forty-seven percent of bisexual men and 75% of bisexual women reported experiencing any sexual violence other than rape from any perpetrator across their lifetime.

Among female respondents to this survey, more than half of bisexual women who experienced violence, rape, or stalking by an intimate partner reported negative impacts of the violence, including having missed school or work, being fearful or concerned for their safety, or experiencing post-traumatic stress. Percentages for men were based on numbers too small to accurately calculate.

Among transgender and gender non-conforming students responding to a survey by the Association of American Universities, bisexual transgender and gender non-conforming students reported the highest rate of experiencing nonconsensual sexual contact involving physical force or incapacitation: 24% of bisexual transgender and gender non-confirming students, compared to 9% of heterosexual transgender and gender non-confirming students and 18% of lesbian and gay transgender and gender non-conforming students. When reporting sexual assault, bisexual women receive the fewest positive social reactions, compared to lesbian and heterosexual women. In fact, the National LGBTQ Domestic Violence Capacity Building Learning Center held a series of focus groups with bisexual women survivors of domestic violence and found that bisexual women felt that their abusive partners were threatened by their sexuality and used that as a reason for perpetuating violence. Bisexual women reported “going back into the closet” as a survival mechanism when experiencing intimate partner violence as their bisexual identity was seen as threatening to abusive partners. And finally, bisexual women survivors reported feeling isolated from LGBTQ people and from the broader community and often did not disclose their bisexual identity when accessing services for intimate partner violence.

A survey of 26,965 Minnesota college students found similarly high levels of sexual assault among bisexual students (see Figure 12 on the next page). And in places of incarceration, bisexual people face violence by inmates and staff. A 2012 report by the U.S. Department of Justice indicated that 34% of bisexual male former inmates reported being sexually victimized by another inmate, compared to 4% of heterosexual and 39% of gay former inmates. Bisexual female former inmates reported a higher rate of inmate-on-inmate victimization (18%) than heterosexual inmates (13%) and lesbian inmates (13%). Additionally, 18% of bisexual male and 8% of bisexual female former inmates reported being sexually victimized by staff—with male bisexual people who are currently incarcerated having the highest reported rate of any sexual orientation.
Recommendations

- The federal Department of Justice and Department of Health and Human Services should provide guidance on cultural competence to grantees and service providers who serve bisexual survivors of violence.

- The Department of Justice should clarify to grantees who receive funds through the Violence Against Women Reauthorization Act that VAWA prohibits grantees from discriminating on the bases of sexual orientation (including bisexuality) and gender identity in all programs.

- The Department of Housing and Urban Development should clarify to grantees and all HIUD-funded housing programs (including shelters) that the Equal Access Rule’s prohibition of discrimination on the basis of sexual orientation explicitly includes bisexuality.

- Congress should pass the Equality Act, explicitly prohibiting housing discrimination on the bases of sexual orientation and gender identity.

- States should pass legislation prohibiting housing discrimination on the bases of sexual orientation and gender identity.

- Local and state departments of housing, health, and justice should provide guidance on cultural competence to grantees and service providers who serve bisexual survivors of violence.

- Local, state, and federal departments of corrections should improve training for correctional staff to proactively address safety concerns for inmates and educate incarcerated people about their rights to safety and to file complaints.

CONCLUSION

Bisexual people face bias on many fronts: from friends and family; from service providers and employers; from heterosexual people; but also, often from gay and lesbian people. This bias, when combined with the interpersonal and legal discrimination that constitute minority stress, creates unique and specific negative outcomes for bisexual people. This report outlines the evidence of these disparities and makes recommendations for how to remedy them.

For example, bisexual youth face bias and discrimination from peers and family and have higher incidents of some risk behaviors than gay, lesbian, and heterosexual youth. In order to best serve bisexual youth, laws must prohibit discrimination against bisexual youth and schools should provide teachers and educational professionals with the cultural competency training that explicitly includes bisexual students. Similarly, bisexual people face very high levels of violence from intimate partners, from fellow students, and from fellow inmates when incarcerated. Service providers of violence survivors must understand these risk factors and know how best to serve bisexual clients.

Underscoring all of this report’s recommendations is the fact that bisexual people make up more than half of the lesbian, gay, and bisexual community. Thus, LGBT service providers, such as those providing youth programming, mental health services, or legal assistance, must also be able to competently serve bisexual people or risk excluding over half of the people who deeply need their services.

Each publication and study cited through this report paints the same picture: bisexual people are afraid to be open about their sexual orientation and if they are openly bisexual, they face bias and a distinct lack of support. This report should serve as a clarion call to policymakers and service providers across the country: in order to fully serve the LGBT community, we must also fully serve the bisexual community.
APPENDIX

In 2015, a group of bisexual activists, including leadership from the few bisexual-specific advocacy organizations, gathered in Washington, D.C. for the first-ever policy briefing on the specific disparities facing bisexual people and how federal agencies could take steps to remedy these disparities. The documents drafted for the briefing in 2015 created the foundation for this report. We thank the following non-exhaustive list of people who lent their expertise to the original documents and to this report.

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Jan Hansen
Mimi Hoang, PhD
Mary Clark Hoelscher, PhD
Camille Holthaus
Lorraine Hutchins, PhD
Lindsey Kirkham
Apphia Kumar
Robyn Ochs, EdM
Jen Restle
Ellyn Ruthstrom, MA
Betti Schleyer, PhD
Beth Sherouse, PhD
H. Sharif Williams PhD, MEd (aka Dr. Herukhuti)
ENDNOTES


7 Ibid.

8 Ibid.


10 Peter Moore, “A Third of Young Americans Say They Aren’t 100% Heterosexual.”


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PARTNER ORGANIZATION DESCRIPTIONS

This report was developed in partnership with:

American Foundation for Suicide Prevention
The American Foundation for Suicide Prevention is dedicated to saving lives and bringing hope to those affected by suicide. AFSP creates a culture that’s smart about mental health through education and community programs, develops suicide prevention through research and advocacy, and provides support for those affected by suicide. For more information, visit www.afsp.org.

BiNet USA
BiNet USA is America’s civil-rights & advocacy group for all bisexual, fluid, pansexual & queer-identified people and their families, friends & allies. For more information, visit www.binetusa.org.

Bisexual Organizing Project
The Bisexual Organizing Project (BOP) is committed to building, serving and advocating for an empowered bisexual, pansexual, fluid, queer, and unlabeled (bi+) community to promote social justice. For more information, visit www.bisexualorganizingproject.org.

Bi Queer Alliance
It is Bi Queer Alliance Chicago’s mission to educate, empower, and provide resources for bisexual and queer persons. We aim to do this by directly educating the bisexual and queer communities along with the general public, creating awareness of bisexual and queer issues, amassing and disseminating resources and information, and through charitable acts to the bisexual and queer community. For more information, visit www.bqachicago.org.

Bisexual Resource Center
The Bisexual Resource Center (BRC) envisions a world where love and sexual expression is celebrated, regardless of sexual orientation or gender expression or identity. The BRC has been committed to providing support to the bisexual community and raising public awareness about bisexuality and bisexual people in order to eradicate misunderstanding, marginalization and discrimination against bisexuals since 1985. For more information, visit www.biresource.net.

Center for Culture, Sexuality, and Spirituality
The Center for Culture, Sexuality, and Spirituality uses arts activism, creativity and cultural production to liberate the ways people love, experience the Erotic, and connect to the Sacred. It provides spaces for the exhibition and exploration of sensual awareness, sexual consciousness, erotic power, and pleasure as well as gathering places for people engaged in sexual empowerment to express themselves and enjoy erotic events, demonstrations, and sexuality-related classes. For more information, visit www.sacredsexualities.org.

Los Angeles Bi Task Force (LABTF)
The Los Angeles Bi Task Force (LABTF) is a 501 (c) (3) non-profit that promotes education, advocacy, and cultural enrichment for the Bi+ (bisexual, fluid, pansexual, queer) communities in the Greater Los Angeles Area. For more information, visit www.labicenter.org.

National Black Justice Coalition
The National Black Justice Coalition (NBJC) is a civil rights organization dedicated to empowering Black LGBT people. NBJC’s mission is to end racism and homophobia. As America’s leading national Black LGBT civil rights organization focused on federal public policy, NBJC has accepted the charge to lead Black families in strengthening the bonds and bridging the gaps between the movements for racial justice and LGBT equality. For more information, visit www.nbjc.org.

National Coalition of Anti-Violence Programs
The National Coalition of Anti-Violence Programs works to prevent, respond to, and end all forms of violence against and within lesbian, gay, bisexual, transgender, queer (LGBTQ) and HIV-affected communities. NCAVP is a national coalition of local member programs, affiliate organizations and individuals who create systemic and social change. NCAVP strives to increase power, safety and resources through data analysis, policy advocacy, education and technical assistance. For more information, visit www.avp.org.

National LGBTQ Task Force
The National LGBTQ Task Force works to secure full freedom, justice and equality for lesbian, gay, bisexual, transgender and queer people. For over forty years, we have been at the forefront of the social justice movement by training thousands of organizers and advocating for change at the federal, state, and local level. For more information, visit www.thetaskforce.org.