



Considering Sexual Orientation as a Potential Official Statistic: Discussion paper

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Email:	info@stats.govt.nz
Phone toll-free:	0508 525 525
Phone international:	+64 4 931 4600
Fax:	+64 4 931 4610
Post:	PO Box 2922, Wellington, 6140, New Zealand
Website:	www.stats.govt.nz

Introduction

This paper is a first step to evaluate the need for statistics about the gay, lesbian and bisexual (GLB) population in the context of the Official Statistics System. It provides an evaluation of sexual orientation information as a topic of emerging social and political enquiry.

Statistics New Zealand is currently initiating a Review of Cultural Identity Statistics and the topic of sexual orientation information discussed in this paper sits within this wider review. Public consultation on the Review of Cultural Identity Statistics is intended to take place later in 2008.

Given the interest in information on the topic of sexual orientation and the current census consultation process, this paper has been released prior to the consultation process for the Review of Cultural Identity Statistics.

Any responses to this paper will be recorded for consideration by Statistics New Zealand. However formal consideration of any responses will not be undertaken immediately – they will be considered during the review period for the Review of Cultural Identity Statistics (www.stats.govt.nz/people/arts/cultural-identity).

Correspondence regarding this paper can be sent to social.conditions@stats.govt.nz

1. Executive summary

Statistics New Zealand received submissions requesting information on sexual orientation during content consultation for the 2001 Census, the 2006 Census and the General Social Survey 2008 (GSS). The objective of this paper is to discuss the sexual orientation topic broadly and begin to establish whether and to what extent official statistics on this sub-population are required and whether these should be produced within the Official Statistics System in relation to other emerging information needs.

The Human Rights Act 1993 states that direct and indirect discrimination based on sexual orientation is unlawful. Statistics New Zealand does not believe that not collecting sexual orientation data is discriminatory per se. However, the commitment to human rights legislation is one of several factors that may cause gay and lesbian considerations to gain greater social weight, and the department anticipates this may lead to a demand for statistical inquiry.

Sexual orientation and behaviour is a topic of emerging interest in New Zealand and internationally. The GLB communities are acknowledged as a sub-population that is increasing in size as societies become less discriminatory about non-heterosexual relationships.

Research has begun to show that there is a growing trend in the willingness of both the GLB population and the general population to report on their sexual orientation and behaviour.

Statistics New Zealand recognises the importance of further understanding information needs regarding the GLB sub-population for both policy agencies and the community. A primary information need is the establishment of New Zealand population estimates and basic information on how well-being outcomes vary for people of different sexual orientations. Submissions on the uses of information on

sexual orientation will be useful in establishing the priority for information on this area compared with other unmet data needs.

If a sexual orientation topic is prioritised for inclusion in official statistics, methodological issues of population size, appropriate disaggregation, mode and acceptability will need to be addressed. As a first step, further information is required to understand and refine information needs in order to decide which of several potential concepts should be collected. The methodological issues outlined in this paper do not in themselves preclude the collection of GLB data – they are presented as the realistic statistical development challenges of the topic.

This paper recommends:

- monitoring statistical developments in the collection of GLB data internationally
- collaborative investigation of some of the identified methodological issues
- production of a GLB analytical report that brings together existing data to establish better information and to evaluate current data quality.

2. Background to Official Social Statistics

Statistics New Zealand considers emerging topics of social interest, such as sexual orientation within the context of the Programme of Official Social Statistics. The programme was approved by the Government in November 2003 to provide a coherent system of social statistics across Government agencies. The programme identified 13 domains that address the key strategic and statistical information needs for social policy development and evaluation. Until recently, statistical information needs and suitability of topics were evaluated on a survey-to-survey basis. The assessment of information needs, such as sexual orientation, now fits within the wider context and objectives of the official statistics system. Sexual orientation is being considered within the scope of a review of cultural identity domain.

Official statistics allow agencies to recognise the need for and to evaluate policies. Official statistics improve public understanding of society and how social, cultural, economic and environmental well-being are interconnected. They ensure there is access to information that characterises New Zealand and are used to inform decision making relating to New Zealand's social well-being.

Understanding and measuring the well-being of the population and sub-populations requires timely, accurate and high quality data to evaluate and develop effective social policies. Policy makers and communities alike need information that will improve their knowledge and provide insights to best support this aim. In addition policy monitoring requires analysis of sub-populations to ensure interventions have the desired outcomes across all groups.

New topics are assessed according to the criteria outlined below.

Official social statistics must be relevant by providing information that meets user needs in coverage, content and detail. More specifically to the Programme of Official Statistics, official statistics must inform decision making relating to New Zealand's social well-being. To achieve this, the official statistic must:

- address enduring issues of widespread interest to Government departments, local authorities, businesses, and to the general public
- be useful for improving knowledge about New Zealand's population
- inform decision making relating to New Zealand's social well-being

- provide an accurate reflection of the population of interest
- provide information that will help inform and evaluate policy
- be a trusted source
- be publicly acceptable
- be accurate and of high quality.

3. Sexual orientation as a social and political topic of interest

3.1 Background

This paper is a first step to evaluate the GLB population in the context of official social statistics and to establish whether and to what extent statistics about sexual orientation are required. Further consideration will be required as to the priority of the topic relative to other information needs.

Sexual orientation is a topic of emerging social enquiry nationally and internationally. Statistics New Zealand received submissions requesting the inclusion of questions on sexual orientation for the 2001, 2006 and 2011 Census and for the General Social Survey (GSS). The GLB population is understood to be increasing in size, due to more tolerant attitudes. The GLB population could therefore be expected to have more political voice, be more socially visible, and public policies are likely to be more inclusive.

Statistics New Zealand collects data based on the needs of data users and their requirements to answer research questions and monitor public policy, and would not collect data based on the grounds of human rights per se. However, the commitment to human rights legislation is one of several factors that may cause gay and lesbian considerations to gain greater social weight, and the department anticipates this may lead to a demand for statistical inquiry.

The discussion in this paper is centred on statistical consideration of the gay and lesbian and bisexual population (GLB). Social policy and human rights discussion often includes transgender and intersex population (under the acronym GLBTI). However, the scope of this paper is sexual orientation rather than gender identification. Transgender and intersex populations are not included. At this point the transgender and intersex populations are assumed to be very small with information gathering about these topics still in its infancy.

3.2 Available Information

Information on the GLB population has been produced mostly in health research. The need to identify this sub-population with regard to health policy outcomes has been recognised in relation to outcomes such as mental health AIDS prevention and monitoring programmes. Evidence of differential outcomes in relation to the heterosexual population includes:

- higher rates of suicide
 - higher rates of physical and verbal assault
 - higher rates of bullying victimisation
 - higher rates of depression
 - higher rates of alcohol, smoking and other drug dependence
 - more workplace discrimination and impediments to career progression.
- (Ministry of Social Development, 2006)

The UK, the US and Canada are now starting to include questions on sexual orientation and behaviour in a wider range of official surveys. We can expect broader international information telling us more about this sub-population. However, the work in official statistics internationally in this area is still in the early stages.

In New Zealand, official statistics are available on same-sex couples living together and same-sex civil union registrations. Sexual orientation and/or behaviour has been collected in a limited number of surveys.

Same-sex couples are a subset of the GLB population of interest and this is an area where there is a range of established official statistics available. There were 397 resident civil unions registered in 2006 in New Zealand, of which 80 percent were same-sex unions. In the 2006 Census 0.7 percent of all couples reported living together in a same-sex couple. Hyman (2005) used New Zealand 2001 census data to compare the characteristics of same-sex couples with opposite-sex couples living together. The paper noted age structure in same-sex couples is much younger than in opposite-sex couples, with few same-sex couples over 65 reported. Same-sex couples without children had higher average family income levels than their opposite-sex counterparts but this was not the case for couples with children. One-third of female couples had children in their households compared with less than one-fifth of male couples. Caution is currently advised when analysing same-sex couple data due to the small numbers involved and the data quality issues affecting it. There are recommendations to improve the quality of the data, but it needs to be acknowledged that Statistics New Zealand cannot control for all of the quality issues. For instance, whether same-sex couples choose to identify themselves as such in official surveys.

Overseas statistical agencies have produced same-sex couple data. The 2006 Australian Census reported a 25 percent increase in the number of same-sex couples living together between 2001 and 2006. The 2006 Canadian Census counted 75,770 same-sex common-law partners, an increase of 11 percent over the past five years.

The New Zealand Youth 2000 National Secondary School Health Survey and the Youth 07 National Youth Health and Well-being Survey collected information on sexual attraction. Data from Youth 2000 estimated the non-heterosexual (attracted to same-sex, both sexes, not sure or neither) youth population in New Zealand at 7.8 percent (Le Brun et al, 2005).

The 2004 Mental Health Survey included several questions on sexual orientation but has not yet published findings in relation to this topic. Christchurch School of Medicine and Health Research are currently analysing the data. The Ministry of Health is planning to undertake a Sexual Health Survey. This may contain questions on sexual orientation and behaviour.

A number of estimates of the GLB population have been made overseas. In the Canadian Community Health Survey (2004) 2 percent of the population overall identified themselves as GLB. Following a review of a number of studies between 1948 and 1994, Gonsiorek (1995) suggested that between 4 and 17 percent of the United States population identify as GLB. Other overseas estimates of the GLB population have ranged from 1 in 10 of the US population (Kinsey et al, 1953) to 1 in 50 in Britain (Wellings et al, 1994). Laumann et al (1994) estimated that in the US 3.6 percent of men and 1.8 percent of women identify as GLB.

Turner et al (2005) indicate that there has been a large increase in numbers of American women reporting same gender sexual contact. This increase was not

demonstrated as significantly among men. A similar trend was reported in the UK. This analysis relates to actual sexual contact, which is not the same as reporting on self identified sexual orientation or attraction.

4. Information needs

The impetus to collect official statistics must be based on information need and recognised policy relevance. General policy monitoring requires disaggregation of social statistics to better understand the impact of interventions on particular sub-populations. Given that sexual orientation has been subject to legislative sanction within the relatively recent past, there is prima-facie reason to want a better understanding of how social outcomes vary for people of different sexual orientations. Current examples of policy responses to include the non-heterosexual population include:

- A change in welfare benefit entitlements of same-sex couples living together
- changes relating to adoption and family law
- reworking hospital and school policies to include non-nuclear families
- a range of roll on effects from Civil Union legislation
- The Ministry of Social Development set up a policy team in 2004 with a focus on GLBTI populations.

Information needs identified to date fall into three broad categories:

- Enumeration
- Social well-being
- Discrimination

4.1 Enumeration

Basic denominator data is required in order to better understand the GLB population. A denominator provides a baseline total count (enumeration) which is also used to calculate rates. These numbers are used to develop and monitor policies and services. The population is becoming increasingly more visible within the political and social space. With this recognition comes a stronger need for information to be available for decision makers and the GLB population itself. A recent report by the International Lesbian and Gay Association Europe discusses "the picture of social exclusion of LGBT people as one in which individuals are not recognised for who they are and are socially marginalised because of their identity as a lesbian, gay, bisexual or transgender persona, and as a result, are not given the opportunity fully to participate in all spheres of life nor to access all their rights as citizens." (Takács, 2006)

There is an interest in understanding the GLB population in relation to families – as parents-intact families or step-families. For instance, a New Zealand Law Commission Report (2005) raised several policy issues related to GLB headed families. The report also notes that current data cannot distinguish between children born into gay relationships and those resulting from previous heterosexual relationships. This issue has been recognised more broadly in a recent review of Family Statistics, where a need for understanding different family types is discussed (Statistics NZ, 2007).

4.2 Social well-being

Research supports the existence of a link between sexual orientation and behaviour and quality of life (Allgeier and Allgeier, 2000). As the health sector has led research in this area it is not surprising that evidence of difference and disparity can be found

in this domain and this is the area where sexual orientation data and related topics has been most widely collected.

The New Zealand Suicide Prevention Strategy 2006–2012 identified increased risks faced by GLB young people and a lack of data to understand the extent of the risks and the factors that contribute to it. The report identifies improvements in data collection on sexual orientation and gender identity are required for the development of policy initiatives targeting this group as well as the development of generic actions inclusive of sexual minorities. The Christchurch and Dunedin longitudinal studies found relatively high rates of suicidal behaviour in GLB people.

The Health Behaviours Surveys: Drug and Alcohol Use (2003/04) raises some concern for the well-being of GLB people in New Zealand regarding close relationships, families and social networks. The experience of violence (physical and verbal assault) and harassment is closely linked to mental health problems and self-harm behaviour (for example, suicide).

Although limited, some research, especially within public health, has identified health disparities among GLB populations across a broad spectrum of diseases. Lesbian/bisexual women have been found to be 4.9 times more likely to smoke and 10.7 times more likely to consume alcohol than heterosexual women. Gay and bisexual men did not significantly differ from heterosexual men with regards to smoking and alcohol behaviour (Ridner, 2006).

Gay and bisexual men had significantly higher prevalence estimates of eating disorders than heterosexual men. There were no differences in eating disorder prevalence between lesbian and heterosexual women (Feldman, 2007).

A survey of women from minority racial/ethnic backgrounds found rates of preventive care use was lower for lesbian and bisexual women than heterosexual women of similar racial/ethnic background (Mays et al, 2002).

Policy analysts have expressed an interest in learning from different family types - such as same-sex parents. Increasingly, policy analysts are investigating 'what works' as well as what doesn't. The GLB community may offer insights into healthy family models because of the need to construct families outside of traditional roles. These families may offer broader insights, for instance, into the relationship between parental roles and socialisation. This work is likely to occur in the area of research rather than official statistics.

There is some analysis on the social characteristics of the GLB population – for instance, Fish (2006) provides evidence from the UK, and Hyman (2005) for same-sex couples in New Zealand.

4.3 Discrimination

The government's commitment to human rights carries a responsibility to assess and ensure the fair treatment of GLB people. Sexual orientation is one of the prohibited grounds of discrimination covered by the Human Rights Act 1993. The Human Rights Commission (HRC) monitors discrimination using a survey that employs a measure based on the concept of perceived discrimination of the total population rather than the experience of sub-populations.

While figures are decreasing over time, in 2006 57 percent of respondents still felt that gays and lesbians were subject to a "great deal" or "some" discrimination. This is

higher than for several other key population groups, such as Pacific peoples (54 percent), disabled people (53 percent), Maori (51 percent), older people (44 percent) (HRC/UMR Research, 2006). This may or may not reflect actual discrimination in New Zealand.

It has been suggested by potential users of the General Social Survey that data is needed to understand indirect and direct discrimination that GLB people might experience. HRC data on complaints laid encompass only those who approach the HRC and may not reflect the real extent of discrimination.

Discrimination has been found to be a contributing factor to mental health problems. A study by Warner in 2004 reported gay, lesbian and bisexual men and women have higher levels of mental disorder, which is possibly linked with discrimination.

5. Measurement Issues

5.1 Concepts

Further refinement of information needs is required in order to establish which sexual orientation concepts are relevant for what purposes. Part of this investigation will be elaboration of what it is that each concept helps us understand. There are three main concepts for measuring sexual orientation:

- 'Behaviour' is whether a person's sexual partners are of the same or opposite-sex.
- 'Identity' is whether a person considers themselves to be heterosexual, homosexual or bisexual.
- 'Attraction' which is whether a person is attracted to the same-sex, the opposite-sex or both.

Different concepts will be more or less relevant to different information needs. Discussion with potential data users points to information on sexual identity being most relevant for general social statistics, such as those monitoring social well-being, whereas sexual behaviour continues to be more relevant in the health context.

Different concepts will produce different population sizes. Overseas research finds that the number of people who identify as gay or lesbian is much smaller than the number who report having sexual relations with someone of the same-sex. The numbers of people who identify as homosexual or bisexual, or who have sex with people of the same-sex or are attracted to people of the same-sex, is not necessarily reflected in living arrangements. Because there is not always overlap between identity, behaviour and relationship, numbers of civil unions or same-sex couples living together is not necessarily indicative of the size of the GLB community.

Research has found potential difficulties for respondents when asked to answer a question on sexual orientation. The difficulties have mostly been blamed on concepts being poorly defined and understood (McManus, 2003). Statistics New Zealand will monitor international developments in this area.

Official statistics must provide an accurate reflection of the population of interest. Data quality can be affected if the question is not sufficiently precise, as it can then be misinterpreted by respondents. For instance, there are significant data quality issues with the 2006 Census civil unions data for production of both legal and social marital status statistics, and the data is not fit for use. It is believed to be due to respondent misinterpretation regarding what a civil union is.

5.2 Technical Feasibility

Size

In the Canadian Community Health Survey (2004) 2 percent of the population overall identified themselves as gay, lesbian or bisexual.

Analysis of the distribution of same-sex couples in New Zealand from census data shows an uneven geographic distribution pattern that, together with the small population size, is likely to cause sampling difficulties for a national population sample. A study by Hughes (2006) found geographic micro clustering of homosexual men differed from the general male population: 12–13 percent of the national population of homosexual men resided in an inner-city Auckland area compared with 1.3 percent of all males aged over 15. Internationally, the Canadian Health Survey gave different homosexual estimates for each province and the American Community Survey (New York Times) has recently found uneven geographic distribution of same-sex couples.

The Programme of Official Statistics surveys have sample sizes of about 8,000 and are designed to make inference about the general population. As an indication a contrasting sub-population of interest is Pacific people, who at the time of the 2006 Census made up 6.9 percent of the total population. The General Social Survey will not be producing detailed breakdowns due to the size of this population.

The Official Statistics System does not collect information that is not expected to be sufficiently fit for use. This is primarily driven by a requirement to minimise respondent burden and make prudent use of resources.

Related to population size, are issues relating to the heterogeneous nature of the gay and lesbian group. From a rights-based perspective it is logical to aggregate homosexual and bisexual and others such as transgender people together. From a statistical perspective there are limitations to such groupings. For example the gay and lesbian populations appear to have different family and household patterns (including the impact of children) and different income patterns. There also appears to be different geographical distributions of these by couple type (Census macroevaluation 2006) which would indicate, for instance, differing access to services. There is also some evidence of differences within group and disparity in the health outcomes of the GLB population. Aggregation of these groups will not necessarily produce meaningful statistics.

There appear to be gender differences in GLB population sizes. In the Canadian Community Health Survey (2003) sexual orientation questions were asked for the first time. "Do you consider yourself to be heterosexual (sexual relations with people of the opposite-sex), homosexual (sexual relations with people of your own sex), or bisexual (sexual relations with people of both sexes)?" 1.0 percent of Canadians aged 18 to 59 reported themselves to be homosexual and 0.7 percent bisexual. Broken down by sex about 1.3 percent of men and 0.7 percent of women considered themselves homosexual. Conversely, more women (0.9 percent) than men (0.6 percent) reported being bisexual.

Mode

Analysis from the 2006 Census reinforces that the New Zealand public have difficulties with concepts outside of their particular experiences. The 2006 Census data for legal marital status showed that 7,905 people reported that they were 'legally joined in a civil union'. The social marital status data from the 2006 Census indicated that 3,264 people reported that they lived with a civil union partner. These figures are

significantly higher than registered civil unions data would lead Statistics NZ to expect, and are believed to be due to respondent misinterpretation regarding what a civil union is. A self complete questionnaire may not produce quality data on sexual orientation. Interviewer administered surveys allow for more detailed questions and support.

5.3 Public acceptability

There is a risk that inclusion of questions on sexual orientation in official surveys may impact on response rates. This might include members of the GLB population who might fear a backlash or discrimination should the information be revealed.

Statistics New Zealand commissioned some qualitative research looking at public attitudes towards sexual orientation being included as a question in the 2006 Census. This research showed groups most accepting of such questions included younger people, middle-aged people, and members of the 'out' gay and lesbian communities. Those less accepting included Pacific and Asian peoples, rural people, and older people. These are significant groups for the population census, which is currently the primary tool to collect regional and small population estimates. There is concern that public resistance to a sexual orientation topic could result in reduced response rates for high interest groups (Statistics New Zealand, 2006).

Statistics Canada also carried out some qualitative testing asking both gay and non-gay Canadians how they felt about including a question on sexual orientation in both the population census and national health surveys. There was a generally positive reaction to asking a question but participants had a preference to being asked about sexual orientation in the context of a health survey, since the application of findings from health research was more obvious to them. New Zealand and Canada have differing census data collection methodologies, with New Zealand individuals completing their own separate individual form. The New Zealand method may reduce individual concerns over disclosure of potentially sensitive information to other members of the household however the public perception of the context of collection may be comparable.

In 2006 the General Register for Scotland carried out a postal test to gauge the impact of including a question on sexual orientation in a census form. Caution does need to be drawn due to the low overall response rate (31 percent). But, of the forms returned, 1.3 percent responded to the GLB categories, 0.9 percent to 'other', 8.5 percent chose 'prefer not to answer' and 6.2 percent gave no response at all. The combined item non response of 15 percent is unacceptable. However, the cause of the total non-response (non-return) rate is a larger concern.

The appropriate age for asking a question on an individual's sexual orientation requires consideration. For instance, the census does not ask individuals under 15 years old questions on income and smoking behaviour.

The compulsory nature of information collected under the Statistics Act is also a consideration for those official surveys conducted by Statistics New Zealand. Other official statistical surveys – such as health surveys – do not require respondents to respond to all questions in the survey as they are not taken under the Statistics Act. For this reason Statistics New Zealand surveys require a higher level of public acceptability than other government agency collections.

6. Conclusion

This paper discusses sexual orientation as a potential topic in the official statistics portfolio. It acknowledges the emerging importance of statistical information on sexual orientation that accurately reflects New Zealand's diverse population and is able to inform policy development and outcome monitoring.

The official statistics criteria outlined in this paper provide a focus for discussion about the provision of and priorities for official statistics. Certain sexual orientation information needs have been identified but a range of significant measurement issues will need to be resolved, should a sexual orientation topic be prioritised for inclusion in official statistics. The methodological issues of population size, appropriate disaggregation, refinement of concepts, mode, and public acceptability will need to be addressed to ensure the statistical information is accurate and of high quality.

All information needs are prioritised for inclusion in official statistics. Further evidence illustrating disparities between heterosexual and non-heterosexual individuals would be useful for future discussion and consideration of sexual orientation as a potential official statistic. In addition, information of the enduring and widespread interest in an official statistic, which goes beyond the health context, would be useful to build a case for future work and assessment of the topic as a priority among other, potentially competing, data needs.

Next steps

Statistics New Zealand's analysis of the topic suggests that the following work would be beneficial:

1. Document and prioritise GLB information needs (relative to other information needs) across government as part of the Review of Cultural Identity Statistics.
2. Investigate the production of a GLB analytical report using existing data in order to make current information more available and to evaluate current data quality.
3. Support or directly undertake research into the identified methodological issues.
4. Monitor work on the topic by the Ministry of Social Development and the Ministry of Health, most notably the results from the Mental Health Survey and the Sexual Health Survey.
5. Continue to monitor international work and look at the potential to collaborate with other national statistical offices.

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