

Adult Samples							
Author (Year)	Sample, Sampling Method	Percentage of Sexual Minority Individuals, Dimensions of Sexual Orientation, Assessment Method	Outcome Variables	Main Results (SM vs. HET) All Effects ORs if not other specified	Subgroup Differences	Gender Differences	Note
American College Health Association, National College Health Assessment (ACHA-NCHA)	USA, young adults, random samples within schools or random samples of classrooms	Paper & web-Surveys, (only paper spring 2000 - fall 2002)					
J. Blossich & Bossarte (2012) ^b	11,046 adults, 18-24 years-old (only 5% random sample of HET). Fall 2008 and spring 2009 surveys	2% identified as LG, 3% as B, and 2% as Q (that were removed from analysis).	SA in the last year with single item	Ss effects for LG (3.8) and B (5.4) ORs created by authors, in paper adjustment for mental health diagnosis	SO difference somewhat larger for B than LG participants	Not reported	
Duryea & Frantz (2011)	54,111 adults, 18-24 years-old Spring 2005 survey	+++ 1.2% of women identified as L and 4% as B; 3.2% of men identified as G and 1.7% as B.	Among those with ≥ 1 times binge drinking in past 2 weeks; scores calculated for 9 negative consequences items, i.e., drinking and driving, fighting, unsafe sex, injuring self or other.	SO differences for binge drinking not given. Negative consequences (effects d): G men: 0.2, B men: 0.2 L women: 0.2, B women: 0.2	Bs had higher levels than HET for negative consequences from drinking, LG had lower levels than HET.	Comparable	
D. L. Kerr, Santurri, & Peters (2013)	92,410 women aged 18 to 24 years-old. Three random subsamples from fall 2008, spring/fall 2009 surveys: 6,689 HET, 849 L, 2,456 B.	+++ 5% identified as B or L. Q and trans were removed.	For this paper, item on feeling so depressed that it was difficult function (past year), overwhelming anxiety (past year), diagnosis of depression (lifetime), and SA (past year)	All effects ss: feeling depressed (L 2.3, B 2.8) feeling anxious (L 1.7, B 2.1) diagnosis of depression (L 2.4, B 3.1) SA (L 4.4, B 5.1)	Slightly larger SO differences for B than L women.	-	
D. L. Kerr, Ding, & Chaya (2014) ^b	65,281 adults, 18-25 years-old, fall semesters 2009 – 2011 (three years)	+++ 5% identified as SM (2% as LG and 3.1% as B) Q were excluded	Past month and lifetime nicotine, alcohol, and drug use (marijuana and any other illegal drug use for this analysis), and consequences of alcohol use	Past month results, all ss if not marked nss. Women: tobacco (L 2.3, B 2.9), alcohol (L 1.0 nss, B 1.5), marijuana (L 2.1, B 2.8), other illegal drug use (L 1.6, B 2.9). Men: tobacco (G 1.0 nss, B 1.4), alcohol (G 1.3, B 1.5), marijuana (G 1.0 nss, B 1.7), and other illegal drug use (G 1.3 nss, B 1.8). Results comparable for lifetime results	Larger effects among B compared to their LG counterparts.	Somewhat larger effects among women than men.	

<p>D. Kerr, Ding, Burke, & Ott-Walter (2015)</p>	<p>42,986 female undergraduates, three fall semesters (2009–2011)</p>	<p>+++ 1.2% identified as L, 3.7% as B</p>	<p>Alcohol / various drug use, past 30 days, responses with use on one/two or more days equated to "drug use." Non-prescribed prescription use of various drugs, past year, equated to prescription drug misuse</p>	<p>Alcohol: 1.0 nss, 2.5 nss Cigarettes: 2.4 ss, 3.2 ss Marijuana: 2.0 ss, 2.8 ss Inhalants: 1.2 ns, 3.0 ss Steroids: 3.2 nss, 1.1 nss Cocaine: 0.9 nss, 2.5 ss Metamphetamine: 2.7 nss, 5.4 ss Other Amphetamine: 1.1 nss, 2.2 ss Sedatives: 2.2 ss, 3.5 ss Hallucigenes: 2.9 ss, 6.3 ss Opiates: 2.2 nss, 4.6 ss MDMA-ecstasy: 0.9 nss, 4.1 ss Other club drug: 1.6 nss, 3.2 ss Other illegal drug: 2.3 ss, 3.1 ss Prescription drugs (unprescribed): L 1.3-1.7, most ss; B 1.8-2.1, all ss</p>	<p>Larger effects among B than L women except alcohol (no difference) B had ss higher levels of current use of all drugs included in the study than L, except steroids.</p>	<p>-</p>	<p>Adjustment includes partnership status (in addition to socio-demographic variables)</p>
<p>Lytte, De Luca, & Blosnich (2014)</p>	<p>89,199 adults, 18-24 years-old. Fall 2008 and spring 2009 surveys.</p>	<p>4.2-8.3% identified as LGB, depending on race.</p>	<p>Past year SA. Past year diagnosis or treatment for depression.</p>	<p>Depression diagnosis (all ss): Black: 4.0, Asian: 3.4, Latino: 2.6, Multiracial: 3.0, Other: 4.3, Non-Hispanic White: 2.8 SA (all ss): Blacks: 3.9, Asian: 3.7, Latino: 2.8, Multiracial: 5.8, Other: 4.3, Non-Hispanic White: 4.2. Further analysis is available online (Ramsay & Tremblay (2015))</p>	<p>None reported</p>	<p>None reported</p>	<p>Effects reported within racial subgroups</p>
<p>Matthews-Ewald, Zullig, & Ward (2014)</p>	<p>110,412 adults, mean age 22.1 years-old, 2008-2009 surveys (no semesters specified)</p>	<p>+++ Identification as LGBQ (transgender individuals excluded)</p>	<p>Outcome variable: past year diagnoses or treatment for anorexia or bulimia by professional (yes/no).</p>	<p>Ss effects among men (G: 3.9, B: 4.2, Q: 4.5), nss effects among women (L: 1.0, B 1.3, Q 1.1). CAVE: Controls: Cigarette use past month, binge drinking (≥ 5 drinks in a row) in past two weeks (yes/no), depressive symptoms in past year</p>	<p>Comparable effects for LG, B, Q.</p>	<p>Larger effects for men than women.</p>	<p>ORs adjusted for drinking, depression etc: likely under-estimations!</p>
<p>Oswalt & Wyatt (2011)^b</p>	<p>27,454 adults, 18-49 years-old, 84.5% between 18-24 years. Fall 2009 survey</p>	<p>7% identified as LGBQ (LG 1.9%, B 2.9%, Q 1.5%). Transgender (0.1%) excluded</p>	<p>Frequency of having felt sad, depressed, anxiety (and more) in past two weeks, past month, past year, combined. Past year diagnosis or treatment of mental disorder (depression, anxiety, panic attacks, plus others). SA (past year and before)</p>	<p>Past year effects: Felt sad LG/B/Q: 1.7, 2.0, 1.8 Depressed LG/B/Q: 2.1, 2.6, 2.3 Anxiety LG/B/Q: 2.0, 2.0, 1.6 Diagnosis past year: Depression LG/B/Q: 2.4, 3.1, 2.4 Anxiety LG/B/Q: 2.1, 2.5, 1.9 Panic Attack LG/B/Q: 0.25, 2.6, 2.3 SA past year: LG/B/Q: 4.6, 3.7, 2.7 SA lifetime: LG/B/Q: 3.1, 4.8, 2.2</p>	<p>Comparable effects between LG and B, somewhat smaller effects among Q than LGB.</p>	<p>None reported</p>	<p>Results for SA see Ramsay & Tremblay (2015)</p>
<p>Pelts & Albright (2014)</p>	<p>702 veterans, making 3% of the 2011 fall study.</p>	<p>7% identified as LGBQ, n = 45</p>	<p>Past year diagnosis or treatment of mental disorder (ADHD,</p>	<p>Diagnosis/treatment (past year): Depression: 4.0 ss, Bipolar 4.2 ss</p>	<p>None reported</p>	<p>None reported</p>	

	No information on age.		bipolar, bulimia, panic attacks, OCD, phobia, schizophrenia, SUD, other addiction); Lifetime: ever having felt depressed, anxious, SA	Anxiety 2.3, Phobia: 5.2 nss, OCD: 9.8ss, Schizophrenia: 71.5 ss, SUD: 6.1 ss, Other addiction: 14.8 ss Lifetime diagnosis depression: 2.7 ss Having ever felt: Depressed: 2.7, Anxious: 2.4 SA: 12.5			
Australian Longitudinal Study on Women's Health	Adult women, random sample.						
McNair, Kavanagh, Agius, & Tong (2005) ^b	19,582 adult women, two age cohorts (22-27 and 50-55 years-old), surveys 2000/2001	+++ 8.6% of younger women identified as SM (0.9% L or moL), 0.8% as B, 6.8% as moHET. 2.6% of older women were SM (1.2% lesbian, 0.2% bisexual, 1.2% moHET). Questionnaire	MH Index Scale of the SF-36, diagnoses of depression and anxiety by doctor, CES-D depression scale, single item on anxiety, single item on SA (deliberate self-harm in past 6 months).	Young women (moHET, B, L/moL), Depression diagnosis: 2.6 ss, 3.3 ss, 2.9ss Self reported depression: 2.6 ss, 3.6 ss, 3.0 ss Anxiety diagnosis: 2.5 ss, 3.6 ss, 2.1 nss Self reported anxiety: 2.4 ss, 3.4 ss, 1.6 nss SA: 4.3 ss, 8.0 ss, 8.0 ss Ss for MH and depression scale for all subgroups (effect size n.a) Older women: Depression diagnosis: 2.2 ss, 0.8 nss, 1.8 nss Self reported depression: 2.3 ss, 1.2 nss, 0.8nss Anxiety diagnosis: 2.1 nss, 0.5nss, 1.1nss Self reported anxiety: 2.2 ss, 0.3 nss, 1.2 nss SA: 5.1 ss, 24.3 ss, 2.4 nss Ss for MH or depression scale only for moHET (effect size n.a.)	For young women, comparable SO differences for all SO subgroups. For older women, effects for depression/anxiety only for moHET, and reversed/no effects among B and L. For SA, B older L had highest SO differences.	-	
McNair, Szalacha, & Hughes (2011)	Adult women, 25-30 years-old 2003 survey	+++ 8.7% identified as SM (0.7% L, 0.4% moL, 1.1%B, 6.4% moHET), moL and L were combined	CES-D scale cutoff ≥ 10, diagnoses or treatment of depression or anxiety in past 3 years	All effects ss except CES-D among L: depression diagnosis/treatment: L 2.6, B 4.2, moHET 2.7 Anxiety diagnosis/treatment: L 2.9, B 4.4, moHET 2.1, CES-D ≥ 10: L 1.2, B: 2.4, moHET 1.6	Somewhat larger effects for B compared to L or moHET (which were comparable)	-	
Hughes, Szalacha, & McNair (2010) ^b	8,850 women, youngest part of cohort (25-30 years-old) in 2003 survey	+++ 6.4% identified as moHET, 1.1% B, 1.1% as moL or L (were combined)	See McNair et al. (2005), CES-D scale cutoff ≥ 10, alcohol risk (none/low risk/at risk) and binge drinking, marijuana and illicit drug use in past year. Self-harm past 6 months	Effects in this order: moHET, B, L: All ss if not specified as nss. Risky drinking 2.9, 2.6, 3.4 Binge drinking: 1.9, 1.9, 2.5 Marijuana use: 1.4 ss?, 2.3, 0.9 ns Illicit drugs (not marijuana): 4.7, 6.5, 4.5 Depression diagnosis: 2.7, 4.1, 2.6	For alcohol/drugs comparable effects. For depression, anxiety and SA larger effects for B and moHET comparable with L.	-	

				Anxiety Diagnosis: 2.1, 4.3, 2.9 Self-harm past 6 months: 4.3, 8.0, 2.1			
Behavioral Risk Factor Surveillance Study (BRFSS)	Probability based complex sampling design, USA, stratified random sample, (≥ 18 years-old)	Computer assisted telephone interviews					
Balsam, Beadnell, & Riggs (2012)	103,087 adults, mean age n.a., Washington, 2003-2007	+++ 3% of women (1.4% L and 1.6% B) and 2.8% of men (1.9% G and 0.9% B) identified as LGB.	Alcohol use, smoking status, poor mental health (21-30 days of past 30 days vs. less days poor mental health)	Ss differences for all SM subgroups: Men (G, B) Binge drinking: 1.6, 2.0, Heavy drinking: 1.5, 2.4 Smoking: 2.1, 2.8, Poor mental health: 1.8, 3.4 Women (L, B) Binge drinking: 1.5, 3.6, Heavy drinking: 1.7, 2.5 Smoking: 2.2, 3.3, Poor mental health: 1.6, 3.3	Larger SO differences for bisexual compared to LG men and women. See also Fredricksen (2013) for comparison of L and B women	Comparable SO differences	
J. R. Blosnich, Bossarte, & Silenzio (2012)	1,700 adult veterans, mean age n.a., Washington, surveys 2005 -2010	3.6% identified as LGB	Poor mental health > 15 days of past 30 days	Nss effect (1.6)	None reported	None reported	
J. Blosnich, Foyne, & Shipherd (2013)	1,908 adult female veterans, mean-age n.a., surveys from 10 states, 2010	5.9% identified as LB,	Frequent mental distress (≥6 days in past month), smoking	Frequent mental distress 3.0 Current smoking 2.3	None reported	-	Veteran LB more at risk than non-veteran LB.
J. Blosnich, Bossarte, Silver, & Silenzio (2013)	13,927 partnered adult veterans, mean 36.5-47.2 years-old, depending on subgroup. Survey 2004	0.7% indicated having a same-sex partner	Frequent mental distress (≥6 days in past month), smoking, past month binge drinking	All effects nss. Frequent mental distress 1.3 Smoking 1.4 Binge drinking 1.5			Among SM, veterans only slightly more at risk than non-veterans, few SM individuals
J. R. Blosnich & Silenzio (2013)	11,665 adult veterans, mean age > 60 years-old, survey from 10 different states	2.0% identified as LGB,	Smoking, binge drinking past month	Smoking: 1.3, nss Binge drinking: 0.8, nss	None reported	None reported	
J. R. Blosnich, Farmer, Lee, Silenzio, & Bowen (2014)	93,414 adults, mean age 35.1-47.3, depending on subgroup, USA, Survey from 10 states	+++ 2.4% identified as LGB (35% of these as B), other/don't know and those who refused were excluded	Frequent mental distress (≥6 days in past month), smoking, past month binge drinking	Women Mental distress B 1.5 nss, L n.a., smoking: B 2.1 ss, L 1.9 ss, binge drinking: B 1.7 ss, L 1.6 ss. Men Mental distress: B 2.9 ss, G 1.9 ss, smoking: B and G 1.9 ss, binge drinking: B 1.4, G 1.2	Somewhat larger SO difference for B men and women compared their LG counterparts	Comparable SO differences	
J. R. Blosnich	20,060 adults, mean age 39.7	2.7% self-identified as LGB	Frequent mental distress:	Ss effect, 1.7	None reported	None reported	

& Andersen (2015)	(SM) and 46.7 (HET) years-old, survey 2010 from Maine, Washington, and Wisconsin.		≥14 days self-reported poor mental health in past month (yes/no).	Adjusted for demographic controls			
Conron, Mimiaga, & Landers (2010), ^b see also Landers, Mimiaga, & Conron (2011) for overall effects	67,359 adults, 18-64 years-old, Massachusetts surveys 2001-2008	+++ 2% identified as LG, 1% as B. Q (0.5%) and "other " (0.5%) were excluded	Feeling sad/blue ≥ 15 days in past month, current smoking, binge drinking and illicit drug use past month	Women (L, B) Feeling sad/blue: 1.0 nss, 2.4 ss Current smoking: 1.9 ss, 1.6 ss Binge drinking: 1.4 nss, 1.5 ss Illicit drug use: 2.1 ss, 9.1 ss Men (G, B) Feeling sad/blue: 1.5 nss, 2.1 nss Current smoking: 2.4 ss, 2.0 ss Binge drinking: 1.1 nss, 0.8 nss Illicit drug use: 3.1 ss, 2.3 ss	B men and women had higher OR for mental distress than LG but were comparable for smoking and binge drinking.	B women had larger SO differences than B men but L women were comparable to G men.	
Dilley, Simmons, Boysun, Pizacani, & Stark (2010); ^b also Balsam, et al. (2012)	79,500 adults, mean age n.a., Washington 2003-2006.	+++ 2.4% of women (1.2% L and 1.2% B) and 2.4% of men (1.6% G and 0.8% B) identified as LGB	Heavy drinking (≥ 2 drinks per day in past month), current smoking, poor mental health (≥ 10 days of past 30 days vs. less days poor mental health)	Smoking : L 2.4, B women 2.5, G 2.2, B men 2.3, all ss. Heavy drinking: L 1.8 ss, B women 2.9 ss, G 1.2 nss, B men 2.0 nss). Poor mental health: L 1.7, B women 3.1, G 2.3 , B men 2.1, all ss	Larger effects for B for heavy drinking but not for smoking and poor mental health	Comparable but somewhat larger effect among women for heavy drinking.	
Fredriksen-Goldsen, Kim, Barkan, Muraco, & Hoy-Ellis (2013) ^b	96,992 older adults (≥ 50 years), Washington 2003-2010,	1.5% of women (1.0% L and 0.6% B) and 1.9% of men (1.3% G and 0.5% B) identified as LGB.	Excessive drinking, i.e., ≥4 drinks (≥5 for men) in a row in past month, smoking status, poor mental health (≥ 14 days of past 30 days vs. less days poor mental health)	All effects ss (women, men) Smoking: 1.6, 1.7 Excessive drinking : 1.4, 1.7 Poor mental health: 1.4, 1.8	None reported	Comparable	
Matthews & Lee (2014) ^b	9,876 adults, mean age n.a., North Carolina	2.3% of men (G and B together) and 1.8% of women (L and B together) identified as LGB	Poor mental health in past month, depression told by doctor, current smoking, past month binge drinking (≥4 drinks women, ≥ 5 men) in a row	Poor mental health 2.6 ss (men), 2.6 ss (women) Depression 3.6 ss, 3.0 ss Smoking 0.44 nss, 2.0 ss Binge drinking 0.50 nss, 1.6 nss	Not reported	Comparable for depression and poor mental health. Larger effect for women for substance use	
Rothman, Sullivan, Keyes, & Boehmer (2012) ^b	5,658 adults, 18-60 years-old, Massachusetts, 2002	3.1% identified as LGB	Frequent poor mental health and depression (≥ 15 days in past month), any past month smoking, binge drinking in past month, illicit drug use (past month, lifetime)	Lifetime illicit drug use: 3.5 ss, past month illicit drug use 3.0 ss, binge drinking 1.6 nss, smoking 3.1 ss, poor mental health 1.4, nss, depression 2.4, ss.	None reported	None reported	

Canadian Community Health Survey 2003	Representative sample of the Canadian population							
Brennan, Ross, Dobinson, Veldhuizen, & Steele (2010)	49,901 adults, 18- 59 years-old, survey 2003	+++ 1.3% identified as LG, 0.6% as B	Presence of mood or anxiety disorders, poorer perceived mental health, daily smoking (yes/no), risky drinking (> 8 drinks per week)	Mood/anxiety disorder (all ss): G 3.1, B 2.4 Poor mental health (all nss): G 1.6, B: 1.5 Daily smoking: G and B 1.2, nss. Risky drinking: G 0.7, B 1.3, nss.	For mood/anxiety larger effects for G than B, but reversed for risky drinking, comparable for poor mental health or smoking.	-		
Pakula & Shoveller (2013) ^b	76,630 adults, 18-59 years-old, 2007-2008	2.72% identified as LGB. Computer assisted in person and telephone interview	Self reported mood disorder diagnosis (diagnosed by a professional)	Mood disorder (2.8, ss) In adjusted model (age, education, regular GP, community belonging, life stress AOR 3.5 among men and 2.6 among women (all ss).	None reported		Somewhat larger effect for males in the adjusted model	
Steele, Ross, Dobinson, Veldhuizen, & Tinmouth (2009)	61,713 adult women, 18-59 years-old, 2003	+++ 1.6% identified as SM (0.7% as HO, 0.9% as B), labels were explained with sexual relations, e.g., "bisexual" (sexual relations with people of both sexes).	Mood or anxiety disorder diagnosed by health professional, perceived mental health (single item), smoking (daily vs. not daily), drinking (> 8 drinks a week)	Mood/anxiety disorder: HO 1.4 ss, B 4.2 ss. Poor mental health: HO 1.2 nss, B 4.4 ss Smoking: HO 1.9, B 2.4, all ss. Drinking: HO 2.6, B 2.3, all ss.	B larger effect than HO for mental health but less so for substance use	-		Few SM women in sample.
Tjepkema (2008) ^b	159,824 adults, 18-59 years-old, surveys 2003 and 2005	+++ 1.1% identified as LG, 0.8% as B. See Steele at al. (2009)	Mood or anxiety disorder diagnosed by health professional, perceived mental health (single item), disability in past 2 weeks due to mental health or alcohol.	All effects ss if not noted otherwise Self-perceived fair to poor mental health: Men, G, B: 1.3 nss, 2.3, Women, L, B: 1.3 nss, 3.7 Mood Disorder Men, G, B: 3.0, 3.1; Women, L, B: 1.5, 4.0 Anxiety Disorder Men, G, B: 3.0, 3.6; Women, L, B: 1.5, 3.5. Mental Disability Day, past 2 weeks, Men, G, B: 2.5, 4.8, Women: L, B: 1.9 nss, 3.5	Larger effects among B, especially among women.	Comparable		Few SM in sample
California Quality of Life Survey / California Health Interview	Adults, USA. Random sample, complex sampling design, Telephone interview							
J. R. Blosnich, Mays, & Cochran (2014)	444 adult veterans, mean age 52 years-old, surveys 2008/2009 and 2012/2013	29% identified as LGB	Lifetime SA from the WHO Diagnostic Interview for Suicidality	SA: 3.0, ss; Unadjusted: 2.2, ss (In paper Relationship used for adjusted OR)	Not reported	Not reported		

Boehmer, Miao, & Ozonoff (2012)	10,942 adult cancer survivors, 20-85 years-old (mean ca. 50), California health interview survey, 2001, 2003, 2005	+++ 3.5% identified as LGB (34% of these as B),	Smoking (only current smoking reported here) and amount of alcohol in past month	Any alcohol past month, all nss. Women: L 1.3, B 1.1, Men: G 0.9, B 1.2 Smoking: Women: L 1.3 nss, B 2.2 ss, Men: G 1.5 nss, B 2.5 ss.	Slightly elevated SO differences for smoking among B individuals	Comparable effects	
Boehmer, Miao, Linkletter, & Clark (2012)	163,221 adults, USA, 20-85 years-old (mean ca. 50), California health interview surveys 2001, 2003, 2005, 2007	+++ 3.4% identified as LGB (40% of these as B)	Smoking (only current smoking reported here), amount of alcohol in past month	Women (all ss). Smoking: L 2.7, B 3.5, Alcohol: L 2.3, B 2.0s, Binge drinking: L 1.9, B 2.1. Men: Smoking: G 1.8 ss, B 1.2 nss, Alcohol: G 3.2 ss, B 0.9 nss, Binge drinking: G 1.3, B 0.8, all nss.	Among women, comparable SO differences between L and B. Among men, G men had somewhat larger SO differences than B men.	Men had somewhat smaller SO differences than women.	OR from regression model 1 was used (controlling for age)
Cochran & Mays (2009), ^b same study as Grella, Cochran, Greenwell, & Mays (2011)	2,272 adults, 18-72 years old (mean 39.2 - 42.5 depending on subgroups), from the California Quality of Life survey 2004/2005	+++ 12% were classified as SM, i.e., identified as LGB (9.5%) or heterosexual identified but with homosexual experiences (HetHo, 2.2%).	Past year DSM-IV disorders (MD, GAD, Panic attack, AD, DD, any disorder) with CIDI-SF, past month psychological distress with Kesslers Psychological Distress scale (cutoff ≥ 15).	Adjusted RR (Table 4) Men (G, B, HetHo) MD: 2.2 ss, 1.5 nss, 3.6 ss, GAD: 2.3 ss, 2.2 ss, 2.5 ss Panic attack: 2.7 ss, 1.2 nss, 1.9 nss AD: 1.7 nss, 1.9 nss, 5.7 ss DD: 1.9 nss, 1.6 nss, 5.7 nss ≥ 1 disorder: 1.9, 1.7, 3.3, all ss Distress: 2.0 ss, 2.1 ss, 2.8 ss Women: (L, B, HetHo) MD: 1.6 ss, 1.8 ss, 1.0 nss GAD: 1.2 nss, 2.5 ss, 1.3 nss Panik attack: 1.0 ss, 2.4 ss, 1.5 nss AD: 1.7 nss, 1.4 ss, 4.1 ss DD: 1.7 nss, 2.4 ss, 5.0 ss ≥ 1 disorder: 1.1 nss, 1.9ss, 1.4nss Distress: 1.7 ss, 3.1 ss, 1.2 nss	Among men, HetHo had the largest SO differences, B and G were comparable. Among Women, B had somewhat elevated SO differences. See Grella et al. (2011) for overall effects.	Overall there were larger effects for men than women. G men had somewhat larger effects than L women, same was true for HoHet, but reversed effect among B.	
Cochran, Grella, & Mays (2012) ^b	2,671 adults, mean age 46.5 years, California Quality of Life Survey 2007	4.5% were classified as SM because of same-sex sexual partners since age 18 or in past year (2.1%) or if they considered themselves as LGB (2.4%)	Drug and alcohol use, weekly binge drinking, drug use in past year	Marijuana use: 3.2, ss Other illicit drug use: 2.4 ss Binge drinking: 1.7, ss	None reported	None reported	
Grella et al, (2001), (same study as Cochran & Mays, 2009) ^b	2,079 adults from the California Quality of Life survey, 2004/2005	13.8% (unweighted) and 5.2% (weighted) of men and 15.3% (unweighted) and 7.0% (weighted) of women were classified as SM, i.e., identified as LGB or were heterosexual identified but with homosexual experiences.	See Cochran & Mays (2009), for this analysis MD, panic attacks, PTSD, and GAD were combined as well as AD with DD.	Mental health disorders: Men 2.2 ss, Women 2.2 ss AD/DD: Men 1.8, Women 6.6.	None reported	Larger effect for AD/DD among women.	Discrepancies between percentage of SM in text and in Table 1 where > 20% were SM.

Wight, Leblanc, & Lee Badgett (2013)	36,774 adults, 18-70 years-old, California Health Interview Study 2009	3.2% identified as LGB, and 7.1% of them were in same-sex marriages, 12.4 in registered domestic partnerships (RDP).	Kesslers Psychological Distress scale.	Overall, ss effect (effect size n.a.). Married HET had lowest levels, followed by LGB same-sex married, HET unmarried, LGB in RDP, and other LGB. No ss effect between LGB same-sex Married, LGB in RDP and HET of any marital status. In paper, results are adjusted for self-rated health. However, results remain the same if not adjusted for self-related health (Wight, pers. communication, April 2015)		None reported	
Christchurch Birth Cohort	Complete birth cohort of Christchurch, NZ, followed up several times.						
Fergusson, Horwood, & Beautrais (1999) ^b	1,007 young adults, 21 years-old.	2.8% SM individuals, 2.0% identified as LGB and 0.8% as heterosexuals but having heterosexual relationships since age 16. Interview	Mental disorders 14-21 years; past year mental disorders (DSM-III-R) with Diagnostic Interview for Children (at age 15/16), mental disorders (DSM-IV) with CIDI at ages 18 and 21. SA (lifetime)	GAD: 2.8, ss MD: 4.0, ss Conduct disorder: 3.8, ss Nicotine dependence : 5.0, ss Other substance abuse: 1.9, nss Multiple disorders: 5.9, ss. SA: 6.2, ss	None reported	None reported	
Fergusson, Horwood, Ridder, & Beautrais (2005) ^b	967 young adults, 25 years old.	+++ 12.4% SM (2.8% moHO and 9.6% moHET), based on a latent-class variable created from behavior/attraction/identity dimensions at ages 21 and 25.	Mental disorders (DSM-IV) 21-25 years; with CIDI at ages 18, 21 and 25, suicide attempts in past 5 years with single item.	Effects all ss if not specified as nss Men: (moHO, moHET) MD: 14.1, 4.4, Anx. Disorder: 46.6, 3.6 AD: n.a., 2.2 nss, DD: 6.0, 3.2, SA: 24.8, n.a. Women (moHO, moHET) MD: 3.1, 1.9, Anx. disorder: 2.5nss, 1.9nss AD: n.a., 2.0 nss, DD: 4.7, 4.7, SA: 7.7, 3.2 nss	Larger effects for moHO compared to moHET individuals	Larger effects among men, especially moHO men.	Unusual categorization, resulting in large group of moHET
Danish Registry	All adults of Denmark, linking mortality data with the register of marital status.						
Qin, Agerbo, & Mortensen (2003) ^{a, b}	Mortality data 1981-1997	Current marital status	Suicides	Ss effect, 4.3	None reported	None reported	
Mathy, Cochran, Olsen, & Mays (2011) ^b	Mortality data 1990-2001	Current or past registered domestic same-sex partnership (255 in year 1990 up to 2348 in mid of 2001 among men and 862-3521 among women, respectively)	Suicides	Men: incidence RR 8.2 ss Women: incidence RR 1.7, nss. Reference group: current or past (heterosexually) married individuals	None reported	Larger effect among men	

Frisch & Simonsen (2013) ^{a, b}	Mortality data 2000-2010	See Mathy et al. (2010) 0.1% of men and women were in a same-sex registered partnership; 1.9% of women and 1.0% of men were cohabiting in same household at least one year.	Suicides	For same-sex registered partners, ss incidence Hazard Ratios (HR): Men: 4.1, Women: 6.4 Reference group: current or past heterosexually married individuals. For same-sex cohabiting individuals, HR 3.2, ss, among men and HR 1.8 nss among women.	None reported	Smaller effect among men	
Dutch Survey of General Practice	Adults, random sample from lists of 104 general practitioners	Item on sexual preference (women exclusively, predominantly women, both women and men, men predominantly, men only). Predominantly and exclusively categories were combined to HET and HO. Questionnaire					
T. G. M. Sandfort, Bakker, Schellevis, & Vanwesenbeeck (2006) ^b	9,511 adults ≥ 18 years-old (mean 48.0-48.8 depending on subgroup)	2.4% identified as SM (1.5 HO, 0.9 B)	Mental health assessed with the General Health Questionnaire (GHQ), current and ever smoking, soft and hard drug use (ever), binge drinking: ≥1 day in past 6 months.	Mental health (GHQ, acute problems): HO d=0.4 ss, B d=0.2 nss General: HO d=-0.4 nss, B d=-0.15 nss Current smoking: HO 1.4, B 1.1, al nss Current alcohol: HO 0.6 ss, B 0.6 nss Soft drugs: HO 1.1 nss, B 3.1 ss, Hard drugs: HO 1.2, B 2.7. Binge drinking: HO 1.7 ss, B n.a.	HO and B comparable for smoking and alcohol. Larger effect among B for drug use.	Larger effect for women among B	
T. G. M. Sandfort, Bakker, Schellevis, & Vanwesenbeeck (2009) ^b	9,684 adults, ≥ 18 years-old (mean 45.7-57.2 depending on subgroup)	+++ 2.4% identified as SM (1.5 HO, 0.9 B)	Acute mental health problems assessed with the GHQ. Past year or lifetime episode of severe depression or anxiety ≥ 2 weeks.	Men Acute mental.: HO d=0.4 ss, B d=-0.1 nss Anxious ever: HO 2.3 ss, B 1.0 nss; Anxious past year: HO 2.8 ss, B 1.5 nss, Depressed ever: HO 3.4 ss, B 0.7 nss, Depressed past year: HO 2.8 ss, B 0.6 nss Women Acute mental.: HO d=0.2 ss, B: d= 0.2 nss Anxious ever: HO 1.0 nss, B 1.3 nss; Anxious past year: HO 1.2 nss, B 1.4 nss, Depressed ever: HO 1.5 nss, B 1.4 nss, Depressed past year: HO 3.0 ss, B 1.7 nss	Among men, larger effects for HO but not B (where sometimes reversed effects). Comparable among women.	Larger effects for HO men than women, smaller effect among B men than women.	
Los Angeles County Health Survey	Adult women, USA, Los Angeles. Random Sample	Sexual Identity. Telephone Interview					
Diamant, Wold, Spritzer, &	4,697 women, mean age 42 years-old.	+++ 1.9% LB (0.8% L)	Single items on alcohol and tobacco use	All effect adjusted RRs (Table 2) Current smoking: L 1.7 ss, B 1.7 ss	L and B comparable	-	Low % of SM women, those

<p>Gelberg (2000) b</p>	<p>Survey, 1997.</p>			<p>Any alcohol: L 1.1 nss, B 1.2 ss Alcohol almost daily: L 2.3 nss, B 2.8 ss ≥ 3 drinks per sitting: L 2.2 ss, B 2.2 ss ≥ 3 drinks almost daily: L 5.4ss, B 5.8nss</p>			<p>not sure of their SO were excluded</p>
<p>Diamant & Wold (2003) b</p>	<p>4,135 women, mean age 38 years old. Survey 1999.</p>	<p>+++ 2.7% LB (1.7% L)</p>	<p>Single items on mental poor mental health in past month (≥ 1 days), feeling depressed (all or most of the time in past month), receiving diagnosis of depression or related disorder by doctor, current smoking</p>	<p>Unadjusted ORs (in paper adjustment for smoking, obesity etc.) Poor mental health: L 2.1 ss, B 1.3 nss Feeling depressed: L 1.5 nss, B 1.7 nss Depression diagnosis: L 2.3 ss, B 1.3 nss Smoking: L 2.4 ss, B 2.7 ss</p>	<p>Smaller effects for B compared to L</p>	<p>-</p>	
<p>Midwestern University, undergraduates</p>	<p>Adults, USA, undergraduates from a large Midwestern university, 2003. Random sample from University register.</p>						
<p>McCabe, Hughes, Bostwick, & Boyd (2005) b</p>	<p>9161 adults, age n.a.</p>	<p>+++ 12.1% of women and 9.1% of men identified as SM (moHET, B, moLG, LG). 17.6% of women and 8.9% of men were classified as SM on their attraction (moHET, B, moHO, HO). 3.7% of men and 3.9% of women were SM based on lifetime sexual behavior (B, HO). Web Survey</p>	<p>Alcohol (binge drinking in past two weeks), past year and past month marijuana use, other illicit drug use in past year</p>	<p>Results hard to bundle (all effects ORs) Women Identity: moHET 1.4-3.9, all ss, B 0.9-7.1, ss and ≥1.9 except alcohol 0.9, moL 1.6-4.6 all ss except alcohol, L 0.8 nss alcohol, 4.9 ss smoking, 1.3 nss marijuana, 0.9 nss opioid, 0.0nss stimulants, 1.1 other illicit drugs. Attraction: moHET 1.4-4.3 all ss, B 0.8 nss for alcohol, other variables 1.8-8.6, most ss. moHO 2.0-3.1 some ss, HO: 0.8 nss alcohol and 0.9 nss stimulants, 1.4-2.1 other variables. Behavior: B 1.7-4.5 all ss, HO 1.1 heavy alcohol, 0.6 smoking, 0.4 stimulants, 1.3-1.9 other variables, all nss Men Identity: moHET 0.9 alcohol nss, 1.3-2.6 other variables. B 0.5ss alcohol, marij. 1.1, 1.6-2.1 for other variables. moG 0.6 nss alcohol, 1.9-4.9 all ss for other variables. Attraction: moHET 0.8 nss alcohol, 0.9 opioid, 1.30-1.9 other variables, some ss, B 0.6 nss alcohol, 1.8-2.9 for other variables,</p>	<p>Complex pattern. Generally all SM subgroups more at risk, some ss, but also some reversed effects (including some ss).</p>	<p>No clear difference</p>	

				<p>some ss. moHO 0.5 ss alcohol, 1.4-3.1 other variables, some ss, HO 0.9 alcohol, 1.3-2.4 for other variables, some ss.</p> <p>Behavior, B 0.4 ss for alcohol, 1.3-2.8 for other variables, some ss. HO 0.6 ss alcohol, 1.1 nss opioids, 1.3 -1.8, some ss, for other variables</p>			
McCabe, Hughes, Bostwick, Morales, & Boyd (2012)	2077 adults, age n.a., who completed both the 3- and 5 category item on SO.	+++ 11.4% identified as SM: LG (1.1%), moLG (0.9%), B (1.3%), moHET (8.1%). One forth of participants received an additional item on identity (LG, B, HET). Here, 3.6% identified as LGB (1.7% L, 1.9% B). Web survey	Past month cigarette use, binge drinking (≥ 5 drinks in a row, ≥4 for women) in past two weeks, marijuana use in past year, other illicit drug use in past year	<p>Women</p> <p>impact of 3 vs. 5 categories of SO had a minor impact except for L (all nss except when marked). Smoking: moHET 2.5 ss, B 2.9 ss vs. 2.2, moL 2.5, L 3.7 v. 8.0 ss; binge drinking: mHET 1.3, B: 1.0 vs. 1.3, moL 0.9, L 0.7 vs. 0.6; Marijuana mHET 2.8 ss, B: 4.1 ss vs. 2.4, moL 1.8, L 2.3 vs.8.4; other drugs: moHET 3.6 ss, B: 4.0 ss vs.6.5 ss, moL 6.2 ss L 3.3 vs. n.a.</p> <p>Men</p> <p>impact 3 vs. 5 categories substantially for B men. Smoking: moHET 2.9 ss, B 2.3 vs.0.7, moG 0.8, G 0.8 v. 0.7; binge drinking: mHET 1.4, B: 1.1 vs. 0.4, moG 0.9, G 0.4 ss vs. 0.4; Marijuana mHET 2.0 ss, B: 2.7 vs. 1.0, moG 0.9, G 0.7 vs. 0.6; other drugs: moHET 4.5ss, B: 6.6 ss vs.1.6, moG 6.0 ss, G 1.8 vs. 0.8.</p>	<p>For women, comparable effects, rather independent of 3 vs. 5 categories although among L increase of effects for 5-categories.</p> <p>For men, larger effects for B than G in 3-category SO, but B and G comparable in 5-category SO and moHET had largest effect.</p>	Women had larger effects for smoking, no clear difference for other outcomes	Impact of categories (3: LGB vs. 5: moHET/B/moL G/LG)
National Alcohol Survey (NAS)	Adults, USA, random sample	Telephone Interview					
Drabble, Midanik, & Trocki (2005)	3,723 adults, mean 30.2-45.3 years-old (depending on subgroup) 1999-2001	+++ 4.5% SM in sample: 1.2% HO identified, 1.1% as B, 2.0% as heterosexual with same-sex sexual relationship in the past 5 years (HetHo), and 95.5% HET identified with only HET relationships in the past 5 years telephone interview	Items on drinking status, mean # drinks past year, mean # of days with ≥ 5 drinks (heavy drinkers), drunkenness ≥ 2 times past, drinking with social consequences ≥ 2 past year, DSM-IV AD	<p>Women</p> <p>All SM women less abstinent (0.4, nss). Heavy drinking: L 5.2, B 5.8, HetHo 3.3 Other variables: elevated for LB women. AD: L 5.3 ss, B 8.3 ss, HetHo 1.8 nss</p> <p>Men</p> <p>Male descriptives not given because of nss except that G were less likely abstinent (0.3). AD: G 2.1, B 1.2, HetHo 2.2, all nss</p>	<p>Women: comparable levels of alcohol use between subgroups, for alcohol dependency, B women somewhat elevated compared to L and HetHo.</p> <p>Men: Larger effects for G compared to G</p>	SO differences larger among SM women than SM men.	
Ericksen & Trocki (1994) ^b	1,861 adults, mean age 44 years-old, survey 1990	1.8% of men and 2.1% of women identified as HO or B, telephone interview	Problem drinking when ≥ 3 positive items in an 8-item index about AD smptoms.	Men: 9.7, ss Women: 1.3, nss	None reported	Substantially larger effects for men than women	
Midanik,	7,612 adults, ≥ 18 years-old	+++	Only DSM-IV AD reported here.	Women	For identity, LG and B are	For identity, larger	Term "inter-

Drabble, Trocki, & Sell (2007) ^b	(mean age n.a.) Surveys 1999-2001	2.1% of women and 2.4% of men identified as LGB; 3.1% of women and 4.6% of men had sexual intercourse in the past 5 years		identity: L 5.5 ss, B 8.5 ss, behavior: HO 1.2 nss, B 6.1 ss Men (all nss) identity: G 1.9, B 0.9, behavior: HO 1.8, B 2.3.	comparable. For behavior, B had larger effects.	effects among women but comparable for behavior.	course” appropriate?
Netherlands Mental Health Survey and Incidence Study (NEMESIS)	Representative of population in Netherlands. Stratified random sample.		Composite International Diagnostic Interview (CIDI). Administered by trained interviewers who are not clinicians.				
de Graaf, Sandfort, & ten Have (2006) ^b	7046 adults (18-64 years), survey 1996	2.8% of men and 1.4% of women had HO contacts in the past year. 7% of those men and 14% of those women were B active in the past year, F2F interview	Lifetime SA from the CIDI	Men 10.2, ss Women: 1.5, nss	Not reported	Large effect for men but not women.	
T. G. M. Sandfort, de Graaf, Bijl, & Schnabel (2001) ^b	5,998 adults, 18-64 years old (mean ca. 40)	2.8% of men and 1.4% of women had HO contacts in the past year. 7% of those men and 14% of those women were B active in the past year. Telephone or F2F (???) interview.		Effects (past year, lifetime) Men Mood disorder: 2.9 ss, 3.1 ss MD: 2.0 nss, 2.3 ss, Dysthymia: 2.7 nss, 2.3 nss Bipolar disorder: 5.0 ss, 7.3 ss Anxiety disorder: 2.6 ss, 2.7 ss Agoraphobia (no panic): 6.3 ss, 4.5 ss Simple phobia: 3.8 ss, 3.6 ss Social phobia: 2.0 nss, 2.3 ss, PD: 2.7 nss, 4.2 ss, GAD: 1.4 nss, 2.9 ss, OCD: 7.2 ss, 6.2 ss SUD: 0.9 nss, 0.8 nss Alcohol abuse 0.6 nss, 0.5 ss Drug abuse: 1.1 nss, 1.3 nss AD: 1.4 nss, 1.2 nss, DD: n.a., 2.5 nss Women: Mood disorder: 1.0 nss, 2.4 ss MD: 1.0 nss, 2.4 ss, Dysthymia: 0.8 nss, 1.6 nss Bipolar disorder: 1.8 nss, 0.9 nss Anxiety disorder: 1.0 nss, 1.0 nss Agoraphobia (no panic): 1.9 nss, 1.4 nss Simple phobia: 1.0 nss, 1.3 nss Social Phobia: 1.0 nss, 1.8 nss, PD: 0.7 nss, 0.8 nss GAD: n.a., 0.8 nss, OCD: n.a., n.a. SUD: 4.1 ss 3.4 ss, Alcohol abuse 3.5 nss, 2.0 nss	None reported	For mood and anxiety disorders, larger SO differences among men than women, reversed for substance use disorders	

				Drug abuse: n.a., 1.9 nss AD: 3.7 nss, 3.6 ss, DD: 4.4 nss, 8.0 ss			
Gevonden et al. (2014)	5,927 (NEMESIS 1) and 5,300 (NEMESIS 2) adults, 18-64 years-old (mean ca. 40)	2.0% (NEMESIS 1) and 2.2% (NEMESIS 2) were classified as SM based on HO contact in the past year. NEMESIS 2 also assessed sexual attraction and 2% were then SM.	Any psychotic symptom, CID I interview only or, if possible, follow-up telephone interview with SCID in case of positive responses to psychotic symptoms in CID I.	All effects ss NEMESIS 1: 3.3 NEMESIS 2: 2.7 for behavior 2.3 for attraction	None reported	None reported	
National Health Interview (NHIS)	Representative sample of the civilian, noninstitutionalized adult population in the US. Surveys 1997 and 2012.	All responses are self-reported in a face-to-face interview					
Gonzales & Henning-Smith (2015)	49,462 older cohabiting adults, ≥ 50 years-old, surveys 1997 and 2012.	0.5% were living together with someone of own sex in same household who was described as husband, wife, or partner, F2F interview.	Mental distress in past month with Kesslers scale (cutoff ≥ 7 points, combined mild to severe distress).	Compared to HET married individuals, ss effects among SM men (1.9) and women (1.6). However, compared to unmarried partnered HETs, near zero effect among men and reversed effect among women.	None reported	Smaller effect among women	Small number of SO individuals
Reczek, Liu, & Spiker (2014)	181,581 adults, 18-65 years-old, 1997-2011 surveys.	Same-sex married (0.1%): 124 men (15.2% of male same-sex couples), 90 women (11.5%) of female same-sex couples). Same-sex cohabiting (0.8%): 693 men, 692 women.	Alcohol use: lifetime abstainers, current light drinking (0-3 drinks per week), current moderate (4-14 drinks weekly), current heavy drinking (> 14 weekly drinks). Psychological distress with the Kessler scale	Men in regression (numerous demographic control variables), the following RRs (all vs, HET married) are for current heavy, moderate, light drinkers and former drinker: Same-sex marr.: 1.4, 0.7, 0.7, 0.8 , all nss. Same-sex cohab.: 3.0ss, 2.2ss, 1.8ss, 1.5nss Oppos.-sex cohab.: 3.3, 2.4, 1.7, 1.5. all ss. Distress (reference: HET married) Same-sex marr. d = 0.1 Same-sex cohab.: d = 0.3 Oppos.-sex cohab.: d = 0.2 Women Same-sex marr.: 2.0, 1.8, 1.0, 0.9 , all nss. Same-sex cohab.: 3.7, 2.6, 2.0, 2.3, all ss. Oppos.-sex cohab.: 4.1, 3.1, 2.0, 1.5, all ss. Distress (reference: HET married) Same-sex marr: d = 0.2 Same-sex cohab.: d = 0.2 Oppos.-sex cohab.: d = 0.3	Similar results for same-sex and opposite sex cohabiting. Given that same-sex married couples form a small minority of all same-sex couples (13.6%), and that opposite sex married form the majority of opposite sex couples (81.6, Goodwin et al., 2010, 2002 data), all same-sex couples would more closely approximate the RR results of same-sex cohabiting couples (86.4% of SM couples) vs. HET married couples (81.6% of HET couples). See Goodwin, Mosher, & Chandra (2010)	Larger effects among women. Reversed effects among men but not among women.	
National Epidemiologic	Adults ≥ 20 years, USA, random sample, complex	Home based F2F interviews	AUDADIS-IV Interview to assess DSM-IV disorders, in past year				

Survey on Alcohol and Related Conditions (NESARC)	sampling design, representative of the US population		and lifetime, SA with one item				
Barnes, Hatzenbuehler, Hamilton, & Keyes (2014)	34,653 adults, wave II	1.7% identified as LGB	Past year and lifetime disorders	All effects ss, (< bachelor, ≥bachelor) Past year disorders: Any axis I disorder: 3.5, 1.8 any mood disorder: 3.0, 1.4 any anxiety disorder: 2.9, 1.6 any substance disorder: 3.3, 2.3 any comorbidity, 3.9, 2.3 Comparable results for lifetime	None reported	Larger effects for women for any axis I disorder and for any substance disorder (in online supplemental)	Unadjusted results used, (adjusting for marriage is problematic)
Bolton & Sareen (2011) ^b	34,345 adults, Wave II	+++ 2% identified as LGBQ (0.9% LG, 0.6% B, 0.5% Q).	Lifetime DSM-IV disorders and SA (any mood disorder, MD, dysthymia, mania, hypomania, any anxiety disorder, PD (with / without agoraphobia), social phobia, specific phobia, GAD	Effects ss if not marked as nss Men (G, B, Q) Any mood disorder 3.0, 2.4, 1.9: any anxiety disorder: 2.7, 2.1, 2.1; any SUD: 1.8, 1.3 nss, 0.8 nss; any PD: 1.8, 1.7 nss, 2.5; psychotic spectrum: 2.9, n.a., 3.8, any personality disorder: 1.8, 1.7, 2.5; Cluster A: 1.4 nss, 2.3, 3.5; Cluster B: 2.2, 1.8, 3.1; Cluster C: 1.3, 1.3, 0.7, all nss, SA: 4.4, 4.4, 3.4. Women (L, B, Q). Any mood disorder: 1.6, 2.7, 1.2 nss, any anxiety disorder: 1.5, 3.1, 1.2 nss; any SUD: 3.4, 3.9, 1.9; any PD: 1.7, 2.1, 1.7 nss; psychotic spectrum: n.a, 3.2, n.a., any personality disorder: 1.7, 2.1, 1.7 nss, Cluster A: 2.5, 2.1, 1.5 nss, Cluster B: 1.6 nss, 2.7, 2.4, Cluster C: 1.1 nss, 1.7, 1.5 nss. SA: L 3.0, B 5.9, Q 2.3 nss.	Among men, similar or somewhat smaller SO differences for B compared to G men. Q men had smaller SO differences except for PD. Among women, similar or somewhat larger SO differences for B than for L women and generally smaller SO differences for Q women.	Complex pattern, for substance abuse disorders larger effects among women,	Adjusting for marital status, but changes in results are minor.
Bostwick, Boyd, Hughes, & McCabe (2010) ^b	34,653 adults, Wave II	+++ 5.8% were nonheterosexual attracted (1.4% only same-sex, 0.4% mostly same-sex, 1.0% equal to both sexes, 3% mostly opposite sex); 4.4% were nonheterosexual active in lifetime (1.5% only same-sex, 1.9% B), 1.9% identified as LBGQ (0.8% LG, 0.6% B, 0.5% Q)	Any lifetime and any past year DSM-IV mood and anxiety disorders.	Men: Identity (G, B, Q) Lifetime mood disorder: 2.4, 2.1, 2.1, all ss Lifetime MD: 3.4, 3.1, 1.9, all ss Lifetime anxiety disorder: 2.7, 2.7, 2.2, all ss Past year mood disorder: 1.8 ss, 1.7 nss, 4.0 ss Past year anx. disorder: 2.3 ss, 2.4 ss, 2.0 nss Attraction (HO, moHO, B, moHET) Lifetime mood disorder: 1.7, 2.6, 2.3, 1.7, all ss Lifetime MD: 2.1, 2.8, 2.3, 1.5, all ss. Lifetime anx: 2.2 ss, 3.3 ss, 1.6 nss, 1.5ss	Men: behaviorally B men but not B identified man had somewhat larger SO differences, and also moHO attracted men. Women: B women had the largest SO differences among all dimensions and there were reversed SO differences for HO attracted	Smaller SO differences among women. HO behaving and attracted men had higher risk than heterosexuals but the reversed was true among women (small effects).	Effects adjusted for marital status and health insurance status – may be biased Results for lifetime MD are given

				<p>Past y. mood: d: 1.1nss, 2.2ss, 2.5ss, 2.2ss Past y. anx.: 1.6 nss, 4.0ss, 1.4nss, 1.6nss Behavior (HO, B) Lifetime mood disorder: 1.6, 3.2, all ss Lifetime MD: 1.7, 3.2, all ss Lifetime anxiety disorder: 1.5, 2.5, all ss Past year mood disorder.: 1.3 nss, 2.3 ss Past year anxiety disorder: 1.2 nss, 2.1 ss Women Identity (L, B, Q) Lifetime mood disorder: 1.5 ss, 2.6 ss, 1.2 nss Lifetime MD: 1.9 ss, 3.7 ss, 1.2 nss Lifetime anxiety disorder.: 1.4 nss, 2.7ss, 1.2nss Past year mood disord.: 1.6 nss, 2.1 ss, 1.1 nss Past year anxiety disorder: 1.7, 2.2, 1.8, all ss Attraction (HO, moHO, B, moHET) Lifet. mood: 0.7nss, 1.4nss, 1.1nss, 1.5nss Lifetime MD: 0.7 ss, 1.5 nss, 1.0 nss, 1.5ss Lifetime anx: 0.7nss, 1.5nss, 1.4ss, 1.2ss Past y. mood.: 0.8nss, 2.1ss, 1.2nss, 1.6ss Past y. anx.: 0.8nss, 2.0nss, 1.3nss, 1.4ss Behavior (HO, B) Lifetime mood: 0.6 ss, 2.3 ss Lifetime MD: 0.5ss, 2.8 ss Lifetime anxiety: 0.6 nss, 2.3 ss Past year mood.: 0.7 nss, 2.2 ss Past year anxiety: 0.6 nss, 2.1 ss</p>	and HO behaving women.		unadjusted
Gattis, Sacco, & Cunningham-Williams (2012)	34,058/34,012 (depending on definition of SO) adults, Wave II	1.6% were classified as behaviorally concordant HO (becoHO), i.e., identified as HO and were ever HO active, and 2.0% were behaviorally heterosexual discordant (bedischET), i.e., identified as HET and were ever HO active. Similarly, 1.4% were concordant HO regarding sexual attraction (attrcoHO) and 1.6% were discordant for sexual attraction and identity (attrdiscHET).	Lifetime DSM-IV disorders including MD, GAD, PTSD and substance use disorders (alcohol, narcotics, depressants, stimulants, hallucinogen, inhalants).	<p>HET concordant and HO concordant were used as baseline. <i>Behavioral Discordance:</i> Men: bedischET: SUD 1.3-3.0 (except AD 0.8 ss and depressants 1.1 nss), MD 1.9 nss, GAD 1.3 nss, PTSD 2.1 ss. compared to HET. BedischET had had lower risk than beconHO (0.3-0.9, ss for AD 0.5 and GAD 0.4). Women: bedischET SUD 3.3-8.3: MD, GAD and PTSD (1.4-2.4, all ss). BedischET had smaller risk than beconHO (0.7-1.0, all nss except MD) for all disorders except inhalants (2.5, nss) and PTSD (1.1, nss). <i>Attraction discordance:</i> Men: attrdiscHET SUD 0.2-0.4, all nss except</p>	<p>HET identified with HO experience generally were between concordant HETs (lowest risk) and concordant HO (highest risk). In contrast, HET identified with HO attraction were at generally at lower risk than concordant HET and much lower than concordant HO, except among men for MD, GAD, and PTSD (comparable levels with</p>	<p>Concerning behavioral discordance, discordant men were closer to HETS and discordant women were closer to concordant HO. More complex pattern for attraction discordance</p>	Multiple measure of SO

				AD; MD 1.4, GAD 1.3, PTSD 1.1 (all nss), attrdiscHET had lower risk compared with attrconHO (0.1-0.5), most ss. Women: attrdiscHET SUD (0.7-0.9 all nss), MD (0.4, nss), GAD, PTSD (all 0.6, ss) and they were at lower risk than attrconHO (0.2-0.3, nearly all ss)	concordant HETS).		
Hatzenbuehler, Keyes, & Hasin (2009), ^b same as Barnes, et al. (2014)	34,653 adults, wave II	Similar to Barnes et al (2014)	Similar to Barnes et al (2014)	All effects ss except for Dysthymia 1.4. Any disorder: 2.4, more than to disorders: 3.7, any mood disorder: 2.3, MD: 2.5, mania: 2.0, any anxiety disorder: 2.3, GAD: 2.4, social anxiety: 2.9, specific phobia: 1.9, PTSD: 2.2, PD: 3.5, any SUD: 2.6, AD: 2.9, DD: 5.7.	None reported	None reported	ORs slightly larger than in paper (adjusted for marriage status)
Hughes, McCabe, Wilsnack, West, & Boyd (2010)	34,653 adults, wave II	+++ 2% identified as LGBQ (0.9% LG, 0.6% B, 0.5% Q).	Any SUD in past year (AD and DD dependency/abuse)	Effects all RRs: Women: L 4.4 ss, B 4.2 ss, Q 2.2, nss. Men: G 2.0 ss, B 1.8 nss, Q 1.1 nss	LG comparable with B, smaller effects for Q	Larger SO difference for women than men	
McCabe, Hughes, Bostwick, West, & Boyd (2009) ^b	34653 adults, Wave II	+++ 2% identified as LGBQ, 4% had a least one lifetime same-sex sexual partner, and 6% were sexually attracted to some degree to the same sex.	Past year AD, marijuana dependency, other DD (past year heavy drinking, marijuana use and other drug use not reported for simplicity).	Women: Identity: AD: L 3.6 ss, B 3.9 ss, Q 0.7 nss; marijuana: L 11.3 ss, B 1.1 nss, Q 3.2 nss, other DD: L 12.4 ss, B 2.1 nss, Q n.a. Attraction: AD: HO 2.0 nss, moHO 6.2 ss, B: 2.0 ss, moHET 2.3 ss; marijuana: HO 7.2 ss, moHO 7.8 ss, B 1.0 nss, moHET 5.0 ss; other DD: HO 2.3nss, moHO 17.6ss, B 1.7nss, moHET 1.4nss. Behavior: AD: HO 1.3 nss, B: 2.7 ss; marijuana: HO 2.8 nss, B 2.9 nss; other DD: HO n.a., B 1.4 Men: Identity: AD: G 2.9 ss, B 4.2 ss, Q 0.6 nss; marijuana: G 0.7 nss, B 1.3 nss, Q 17.0 ss, other DD: G 4.2 ss, B 6.3 ss, Q n.a. Attraction: AD: HO 1.8 ss, moHO 1.7 nss, B 1.5 nss, moHET 1.1 nss; marijuana: HO 0.3 nss, moHO 1.7 nss, B 1.9 nss, moHET 5.5 ss; other DD: HO 2.5 nss, moHO 3.3 nss, B n.a., moHET 3.1 ss. Behavior: AD: HO 1.2 nss, B: 1.9 ss; marijuana: HO 0.4 nss, B 1.5 nss; other DD: HO 2.1 nss, B 1.8 nss.	Among women, B generally smaller effects than L or moL (except behavior) and not sure somewhat smaller effects. Large effects among moHET attracted and L identified. Among men, B identified somewhat larger effects than G but comparable for attraction and behavior. No clear pattern for Q identified or other subgroups.	Somewhat larger effects among women but not for all subgroups.	
National Health	Adults, cluster-stratified,	At home visits and in mobile					

and Nutrition Examination Survey (NHANES)	multistage probability sample, USA	trailers, Questionnaires, Interviews (mental disorders), sensitive information with ACASI and CAPI (since 1992/1993)					
CDC (2013) ^b	7,011 men (20-59 years-old). Surveys 1999-2008	5.1% of men were classified as SM based on HO contacts, lifetime.	Having ever used a needle to take street drugs or having used a needle to inject drugs not prescribed by a doctor.	SM men were overrepresented among injecting drug users compared to nonusers (10.5 vs. 4.7%, RR 2.2, ss?).	None reported	-	
Cochran & Mays (2000a) ^b "Lifetime prevalence..."	3,648 men (17-39 years-old), Surveys 1988-1994	2.2% of men reported "sexual intercourse" with other men, 87% of them also reported intercourse with women.	Lifetime Affective DSM-III Disorders and SA with Diagnostic Interview Schedule,	MD 2.4 nss, single episode MD 1.9 nss, recurrent MD 3.6 nss, Bipolar I 0.6 nss , Atypical bipolar 2.3 nss, Dysthymia 1.2 nss , SA: 5.4 ss	None reported	-	Low % SM, "sexual intercourse" problematic
Cochran & Mays (2011)	5,574 men (17-59 years-old), survey 1988-1994, matched with National Death Index in 18 year follow up period	1% were classified as SM based on any same-sex sexual contact	Death by suicide	No SM men died by suicide compared to 0.3% of heterosexual men, very weak evidence, Bayesian OR 2.3 (Credible Interval 0.1 - 13.4) (see Plöderl et al., 2013 for calculation details).	None reported	-	Low % SM, "sexual intercourse" problematic
Farmer, Bucholz, Flick, Burroughs, & Bowen (2013)	7,078 men (≥ 20 years-old), USA, Surveys 2001-2010	5.2% identified as LGB or had at least one same-sex sexual partner in life. Q and "something else" were excluded	Current smoking status, illicit drug use excluding marijuana (ever, lifetime), current risky drinker based on NIAAA criteria	Near similar rate of smoking status , drug use (1.8 ss), reversed effect for risky drinking (0.9, nss) .	None reported	-	Mixture of SO dimensions.
Farmer, Jabson, Bucholz, & Bowen (2013) ^b	5,793 adult women (≥ 20 years-old), USA, Surveys 2001-2008	8.2% identified as LGB (or "something else") or had at least one same-sex sexual partner in life, Q were excluded	Current smoking status, illicit drug use excluding marijuana (ever, lifetime), current risky drinker based on NIAAA criteria	All effects ss Smoking (2.1), drug use (2.2), and risky drinking (2.8).	None reported	Comparable (Farmer et al. 2013a) for drug use, larger effects for women for smoking/ drinking	Mixture of SO dimension, "something else"-defined included
Przedworski, McAlpine, Karaca-Mandic, & VanKim (2014) ^b	Women subsample, women (≥ 20 years-old) 2001-2010	+++ 9.3% were classified as L women who have sex with women (WSM), B WSW, and HET WSW	Alcohol, average ≥ 7 drinks per week in past year, ≥ 1 day binge drinking in past year, smoking (> 100 cigarettes, lifetime).	Effects are all unadjusted RRs not including relationship status, provided by the author (pers. comm.) All effect ss if not marked as nss. Heavy alcohol use: L 2.2, B 2.0, HET WSW 1.8 Binge drinking: L 1.4 nss, B 1.5, HET WSW 1.6 Smoking: L 1.5, B 1.7, HET WSW 1.8	Comparable effects among all subgroups.	-	
Nurses Health Study	Registered female nurses, USA						Very few SM women in sample
Case et al. (2004) ^b	90,823 women (28-43 years-old), survey 1995	1.2% SM women, 0.8% of the women identified as L, 0.3% B,	Medical Outcome Study Short Form (SF-36 mental index ≤	All effects RR (Prevalence Ratios) Current smoking: L 2.0, B 2.2, O 1.3, all ss	No difference for smoking, Comparable effects for	-	

		and 0.1% that none applied, postal questionnaire	52), ever using antidepressants. Smoking status and number of cigarettes per day Alcohol: estimated grams daily, Heavy drinking defined as ≥60 drinks per month	Current ≥ 15 cig.daily: L 1.1ss, B 1.0nss Alcohol use (> 15g /day): L 1.9 ss, B 2.7 ss, O 0.5 nss Heavy drinkers: L 1.7 ss, B 3.2ss, O 0.7nss SF MH Index: L 1.4, B 1.6, O 1.3, all ss Antidepressants: L 1.8, B 1.7, O 1.4, all ss	amounts of alcohol. B more likely heavy drinkers. Comparable for depression and use of antidepressants		
Jun et al. (2010)	Around 62,200 (# differs by outcome variable), 25-42 years-old. Survey 2001	+++ Identified as L (0.8%) or B (0.3) ("other" respondents and those who preferred not to answer were excluded)	Early Smoking (by age 14) and between 15 and 19, Early drinking (by ages 15-17).	Early smoking (RRs L 2.2, B 3.2). Smoking age 15-19 and early drinking (both RRs L: 1.5, B 1.6). # Cigarettes daily (15-19 years): L d = 0.2 ss, B d = 0.3 ss Grams daily alcohol (15-19 years): L d = 0.3 ss, B d= 0.1 nss	No ss difference between L and B	-	Early alcohol use and smoking
SEPARATE STUDIES							
Bagley & Tremblay (1997), (1998)	750 adult men, age 18-27 years-old, Canada, Calgary, 1992. Stratified random sample.	+++ 10.9% identified as homo- or bisexual or had same sex contacts in the past 6 months. Computer questionnaire in private space.	Depression (CES-D Scale, Cut-Off ≥ 28), items on lifetime SA (with intent to die).	SA: 14.4, ss Depression (≥ 28): Sexual active: HO: 2.5 nss, B: 4.6 ss Celibate: HO 3.1 nss Depression (dimensional): ss, effect size Sexually active: HO d=0.1, B d=0.2 Celibate: HO: d = 0.2	B slightly more SA and depression.	-	Stronger definition of SA
Berg et al. (2014)	24,055 College students, USA, mean age 23.5 years-old, from 6 southeast colleges, random sample	2.9% identified as HO, 3.7% as B, web survey	Alcohol and drug use similar to the YRBS, alcohol or drug use before sexual intercourse in this study	Alcohol/drugs prior to last sexual intercourse: HO 1.7 and B 2.0, all ss	Comparable SO-differences for B and HO participants	None reported	Low response rate (21%)
Bloomfield (1993)	445 adult women, 18-50 years-old, USA, San Francisco, 1987, random sample	15% identified as B (1%), moHO, or HO, 85% as moHET or HET, Mailed questionnaires	Single items (Cahalan et al., 1996) on amount of alcohol in past month, perceived drinking status (non-drinker, problem drinker etc.), frequency bar-going, alcohol before sexual encounter	SM more problematic levels: Recovering alcoholics 4.8 ss Frequent bar goers, BF = 18.29. Perceived problem drinker: 26.1 ss Heavy drinking 2.1 nss Evidence for zero effects: BF 4.8 for # of drinks, BF 4.1, mean drinks per day BF 5.7, and drinking before sexual encounter, BF 3.2	Not reported	-	
Bloomfield, Wicki, Wilsnack, Hughes, & Gmel (2011)	34,270 adults (mostly > 18 years-old), 14 different countries 2000-2007, GENACIS study. For every SM individual, 15 HET were matched. Different sampling	0.7% categorized as SM according to having romantic same-sex partners recently or in the past year. Questionnaire	High volume drinking according to WHO and heavy/binge drinking by using amount of alcohol for certain time periods	For high volume drinking, and for all countries together, ss effect for SM women (2.2) but not men (1.0 nss). Ss effect for women only in North America (3.6) and New Zealand but not in Europe. For men, only ss effect in New Zealand. For binge drinking, SO women had higher odds	None reported	SO difference rather among women but not/less/reversed among men	Few individuals classified as SM

	(regional, national, probability/ replacement) and modes of administration).			overall (2.5, ss) and in most regions (1.9-23.6) whereas partly reversed effect for men 0.9, nss (0.9-1.7 in different regions)			
Booth et al. (2012)	1,004 female veterans, USA, 20-52 years-old, Midwestern Veterans Affairs register.	11.1% had partnership with females or with both males and females before, during, or after military service; computer assisted telephone interview	Current MD according DSM-IV with CIDI-SF, current PTSD with the self-report PTSD scale, lifetime SUD with the Substance Abuse Outcomes Module	SM status correlated significantly with depression (r = .12), PTSD (r = 0.10), current SUD (r = 0.06).	None reported	-	
Bowring, Vella, Degenhardt, Hellard, & Lim (2015)	3793 (66% female), 16-29 years-old (median 18.9), 2011-2013, music festival Melbourne Australia;	9% of males and 11% of females were identifying as GLBQ or Queer, questionnaire	Drinking alcohol per week, smoking, illicit drug use, ever injecting drugs, substance use, sexual risk behavior, mental health problems	All effects ss. Drinking ≥ 6 drinks in a row weekly 1.6, Smoking 2.1, recent drug use 1.7, ever injected drugs 5.7, mental health problems in the past six months 2.7; rated mental health as fair or poor 3.0	None reported	None reported	Not sure if prespecified sample but rates of SM comparable to population.
Browne, Clubb, Wang, & Wagner (2009)	1837 African American male freshmen (17-19 years-old); 2001 HBCU Survey; south and mid Atlantic US	6% of men had same-sex sexual contacts, Self-administered survey questionnaire.	Substance use before recent sexual encounter	Ss effect 1.8	None reported	-	
Burgard, Cochran, & Mays (2005)	11,204 adult women (> 18 years-old), California Womens Health Survey, three waves combined: 1998,1999, 2000. Random digit dialing telephone sample.	3.8% of the women had at least one HO partner in the past 5 years (wave 1998), or lifetime (waves 1999, 2000). Among the HO experienced women, in the 1999-2000 subsample, 33.5% reported only female sexual partners in the past year, 16.6% both male and female sexual partners, 11.6% no sexual partners, and 38.3% only male sexual partners. Assessed by telephone interview.	Single items for any current smoking status and on alcohol use in past month, binary variables created: any alcohol, once or more a week, 5-7 days per week, engaged in binge drinking, engaged in heavy drinking (≥ 5 binge drinking). Ordinal variables: Number drinking days, Number of drinks per drinking day, Number of binge drinking day.	Smoking status: 1.8, ss, #drinking days: d = 0.2 ss #drinks per drinking day: d = 0.3 ss #binge drinking days: d = 0.3 ss Alcohol at least weekly 1.8 ss, Average 5-7 days drinking / week: 1.1 nss Binge drinking: 2.2 ss Heavy drinking: 2.7 ss For alcohol, the effects were larger among 26-35 year olds	No difference for smoking For alcohol, the SO differences were larger among B active women	-	
Burgess, Tran, Lee, & van Ryn (2007)	7884 adults, mean age ca. 40 years-old, SHAPE survey, 2003, Minneapolis Minnesota. Stratified random sample of households, and one person randomly from households.	3.7% of women and 9.1% of men identified as LGBT. Telephone interviews.	Mental health diagnoses by doctor (ever), past month days with psychological distress, # smoking and binge drinking in past month.	Ss effects for smoking (RR 1.5), Past month binge drinking (OR 1.6 ss), mean # cigarettes, mean # days with poor mental health, diagnoses of depression (RR 2.1 ss), anxiety disorders (RR 2.1 ss)	None reported	None reported	
Chakraborty,	7461 adults,	8.7% were SM based on	Neurotic symptoms, common	All effects ss if not marked as nss.	Comparable effects for the	None reported	

McManus, Brugh, Bebbington, & King (2011)	representative sample of the population living in private UK households (APMS, 2007)	identification (LG, B, moHET) and 8.9% based on having had any same gender sexual partners. Interviewer-administered structured interview and computer assisted questionnaire.	mental disorders (CIS-R) in the week prior to the interview, probable psychosis (SCAN), lifetime SA, past year AD and DD.	Identity: neurotic disorders 1.5, MD 1.8, GAD 1.5, OCD 2.2; phobic disorder 1.9, probable psychosis 3.8, SA 2.2, AD 2.1, and DD 1.7. Behavior: neurotic disorders 1.5, MD 1.9, GAD 1.5, OCD 2.8; phobic disorder 1.9, probable psychosis 3.1, SA 1.9, AD 1.3 nss, DD 1.4 nss.	identity and behavior measures of SO except for AD and DD (smaller effects for behavioral measures)		
Cochran, Mays, Alegria, Ortega, & Takeuchi (2007)	4649 Latino and Asian, ≥ 18 years-old, National Latino and Asian American Survey (NLAAS)	4.8% were classified as SM based on LGB identity or past year sexual behavior. F2F interview.	Past year and lifetime psychiatric morbidity (depressive disorders, anxiety disorders, substance use disorder, eating disorder); SA using modules from the WMH-CIDI	Men Lifetime: depressive disorder, AD, DD, any SUD, any eating disorder and any psychiatric disorder (0.4-0.9, all nss), anxiety disorder 1.9, SA 3.4. Past year: AD 0.2 nss, DD 0.3 nss, any SUD 0.1 ss, eating disorder 0.4. Nss for any depressive disorder 1.1, any anxiety disorder 1.5, any psychiatric disorder 1.1. SA 6.4, ss. Women Lifetime disorders and SA: 1.4-2.4, except anxiety disorder (0.8, nss). Past year: any depressive disorder 1.9 ss, any anxiety disorder 1.2 nss, AD 1.0 nss, any SUD 2.6 ss, any eating disorder 1.5 nss, any psychiatric disorder 1.5 nss, SA 5.0 nss, DD 12.1 ss.	None reported	Larger effects among women, several reversed effects among men.	
Cochran & Mays (2000b)	9,908 adults, USA, random sample, National Household Survey of Drug Abuse (NHSDA), 1996	2.4% of men and 1.6% of women had sex with same-sex persons in the past year, about one third among these had sex with men and women Interview	Interview-Scales with cutoff-values with high correspondence to DSM-III/IV classification, disorders for the past 12 months, detailed assessment of AD according to Cochran et al. (2000)	All mental health disorders (MD, GAD, agoraphobia, panic attack, AD, DD, any disorder): 1.3-4.9. Ss effects for MD (men only), Panic attacks (men only), DD (women only), AD (women only), any psychiatric syndrome (men only).	Reported as not being different, but related statistics not given.	Larger effects among men except AD/DD where men had smaller effects.	Nearly all SM suicide attempters in age group 17-29.
Cochran, Sullivan, & Mays (2003)	2,917 adults (25-74 years-old), random sample, USA, MIDUS-Survey	2.9% of men and 2.3% of women identified as HO or B (1.1% as B), questionnaire	DSM-III-R disorders in past year with CIDI (Composite International Interview), items for AD/DD according to DSM-IV, distress indicators with single items, diagnosis of anxiety/depression/other emotional disorder (combined) or alcohol/drug problem)	Alle effect ss it not marked as nss Men MD 3.8, GAD 1.7 nss, PD 6.0, AD 1.6, DD 3.4, ≥ 1 disorder 3.4, ≥ 2 disorders 4.5, high current distress: 3.4, Diagnosis: Emot: 3.8, Alc./Drug: 3.4 Women MD 2.4, GAD 4.0, PD 2.1 nss, AD 3.5 nss, DD 4.0 ≥ 1 disorder 2.3, ≥ 2 disorders 3.9, high current distress: 1.1 nss, Diagnosis: Emot: 1.0 nss, Alc./Drug: 3.7 nss	None reported	SO-Differences for MD, PD, one or more disorders: m > w For GAD, AD, DD: w > m	Unadjusted ORs calculated because in paper adjustment for relationship status.
Cochran & Mays (2015)	17,886 adults, ≥ 18 years-old, 1988–2002 General Social	4.8% were classified as SM based on any lifetime number of same-	Death by suicide	SM men had lower rates of suicides (0.2 vs. 0.6%, RR 0.3, adjusted HR 0.4, nss).	None reported	Large SO difference among	

	Surveys (representative multistage probability sample) linked with the National Death Index with social security numbers	sex partner or in the year before the interview. Self administered questionnaire or computer assisted self-interview (CASI).		SM women had higher rates of suicides (0.9 vs. 0.1%, RR 9.0, adjusted HR 6.3 ss). Unadjusted RRs were calculated, because HRs in paper were adjusted for mental health which would biases the results.		women, reversed effect among men	
Cheng, Gipson, Perez, & Cochran (2014)	1,112 young adults, 20-22 years-old, Philippines, Cebu Longitudinal Health and Nutrition Survey (CLHNS), all index children of pregnant women in 33 communities 1982/83	15.1% of sexually experienced were classified as SM based on lifetime HS behavior or same-sex romantic relationship. Assessment methods: described as interview, but CES-D scale is questionnaire.	CES-D Scale, ever consuming nicotine, alcohol, drugs.	CES-D: women d=0.2, men d=0.1 , all nss Smoking: women 3.6 ss, men 2.8 ss Alcohol: women 2.3 nss, men n.a. Drugs: women 6.2 ss, men 1.8 ss	None reported	For substance abuse, larger effects for women	
M. Eisenberg & Wechsler (2003)	10,301 young adults, mostly 18-22 years-old, randomly selected from undergraduate students, USA, 1999 CAS (College Alcohol Study)	+++ 6% SM, 2% of women and 3% of men only had HO behavior; percentages for both same-and opposite sexual behavior was 5 and 2%, respectively. Self-administered questionnaires mailed to students.	Tobacco, alcohol and marijuana use with single items, binge drinking as 4 or 5 drinks in a row. (Note: see Ford & Jasinski, 2005, for additional analyses)	Smoking : B women 2.1, ss, all other SM groups 1.1-1.2 , all nss. Binge drinking: B women 1.4 ss, HO women 1.0 nss , B men 0.5 ss , HO men 0.6 nss . Marijuana use: B women 2.8 ss, B men 1.3 nss, HO men and women 0.8 nss	Slightly larger SO differences for B men and women except for binge drinking among men (no difference) and marijuana use among women (effects clearly larger for B than HO women).	SM men have lower rates of binge drinking than HET men.	
Frisell, Lichtenstein, Rahman, & Langstrom (2010)	17,379 adult twins (20-47 years-old), Sweden, national twin registry/STAGE study, all living twins born 1959–1985, survey 2005/2006	SM based on any same-sex sexual partners in life. Mostly web-survey but also interview and written questionnaire	Lifetime MD, GAD, AD with SCID according to DSM-IV, ADHD according to DSM-IV, current depression with CES-D	All effects ss (men, women) MD 1.8, 2.0, GAD 3.3, 1.9, AD 1.6, 3.0, ADHD 1.4, 1.5. CES-D scale, ss effects: men d = 0.3, women d = 0.3	None reported	Comparable for MD and ADHD, larger effect for women for AD, lower for GAD	
Ford & Jasinski (2006)	9,389 students, USA, age n.a. but typically ≥ 18 years-old, Harvard School of Public Health College Alcohol Study, 1999, nested random sampling, representative of US colleges/universities.	+++ 2.4% HS and 3.7% B based on lifetime sexual behavior (those sexually inexperienced excluded). Self-administered questionnaire.	Past month marijuana and other illicit drug use in past month,	Marijuana: HO men 0.7 , HO women 0.8 , all nss, B men 1.3 nss, B women 2.8 ss. Drug use: HO men 1.6, HO women 1.2 , B men 2.2, B women 3.4	B students had clearly larger SO differences than HO students.	Comparable for HO, but for B, larger effects for women	
Gilman et al. (2001)	4,910 youth and adults (15-54 years-old), USA, random sample, National Comorbidity Survey (NCS) 1990-1992	2.5% SM, 1.0% had "sexual intercourse" only with persons of the same sex in the past 5 years, 1.6% with both men and women, Interview	Mental disorders (DSM-III-R), lifetime and past year, assessed with the CIDI, SA with single items for past year and lifetime	12-Month (women, men) GAD: 3.9 nss, 0.8 nss , PD: 2.1 nss, 1.1 nss , PTSD 4.4ss, 0.7nss , MD: 3.7 ss 1.6 nss, AD: 4.4 ss, 0.9 nss , DD: 2.0 ss, 2.6 ss, SA: n.a., 2.5 ss. Lifetime GAD: 3.2 ss, 2.8 nss, PD: 2.6 nss, 1.2 nss , PTSD 2.7 ss, 1.1nss , MD: 1.9 ss, 1.5 nss, AD: 2.2	None reported	Larger SO differences for women	Low power, Sexual intercourse may be inappropriate for SM

				nss, 1.4 nss, DD: 1.7, 2.2 ss, SA: 1.5 nss, 2.4 nss			
Grant et al. (2014)	2,011 students, 18-58 years-old (mean 22.6) from a large Midwestern University, USA, 2011, random sample from enrollment list.	5.6% identified as LGB or queer, Q were excluded, Web-survey	Minnesota Impulsive Disorders Interview (MIDI), depressive symptoms with the PHQ-9, perceived stress scale for stress in past month, lifetime diagnosis of MD and social anxiety.	Strong evidence for depression (BF = 13.9) and stress (BF 11.7) ss larger risk for diagnosis: MD (2.6) social anxiety disorder (4.0)	None reported	None reported	
Gruskin & Gordon (2006)	12,729 adults, USA, mean age 42 years-old, stratified random sample, 1999 and 2002, from members of the Kaiser Permanente Medical Care Program, representative of the non-Medicaid insured adults in Northern California	1.6% identified as L and 3.4% as gay men. B orientation was only solicited in the 2002 survey and was excluded to allow pooling. Self-administered questionnaire	Items on current/past smoking, heavy drinking (typical ≥ 4 drinks for women and ≥ 5 for men in one occasion). Items on feeling depressed ≥ 2 weeks in past year or taking antidepressants, mental distress most of the time in past year.	Effects for men, women Smoking: men 1.6, women 2.4, all ss. Drinking: 1.5, 2.1, all ss. Depressed/Depressants: 3.9 ss, 1.5 ss Distress: 1.5 ss, 1.2 nss	None reported	Larger effects among women for smoking, But reversed for depression and distress.	
Herrell et al. (1999)	3,328 adult male twin-pairs from the Vietnam Era Twin Registry, Hines, Ill, USA	1.8% had a sexual relation with men since the age 18. 103 pairs were discordant in their SO. Telephone interview	Lifetime SA with single item	SM men in discordant pairs had more SA (6.5, ss), similar result in whole sample (7.5, ss).	None reported	-	Excellent matching
Husky, Guignard, Beck, & Michel (2013)	27,653 mostly adults (10% > 20 years-old), France, Household random sample	Not stated, 1.2% classified as LGB and 15.2% as having no sexual activity Telephone survey,	SA lifetime and in past year – only lifetime results given.	RR 4.0 for men and 2.8 for women. Adjusted OR 3.0 for men (nss) and 0.9 for women (nss, but 2.5% for LGB vs. 0.9% for HET).			ORs adjusted for marriage in paper, thus RR calculated.
Jorm, Korten, Rodgers, Jacomb, & Christensen (2002)	4,824 adults, two age groups (20-24 and 40-44 years-old), Australia, electoral rolls, Canberra (PATH Through Life Project)	1.0% of men and 1.8% of women aged 20-24 identified as HO (1.6 and 2.0% among those aged 40-44, respectively). 1.8% of men and 2.7% of women aged 20-24 identified as B (0.8% of men and women aged 40-44). Questionnaire, delivered by at-home visits of interviewers.	Anxiety and depression symptoms (Goldberg scale), alcohol use (AUDIT), emotional well-being with PANAS scale	Elevated levels (ss, effect sizes n.a.) for all mental health variables (anxiety, depression, alcohol use), and for both bisexual and homosexual groups. Only exception: no effect for levels of alcohol misuse among younger HO.	B had poorer mental health than the HO group	None discussed	
Julien, Jouvin, Jodoin, L'Archeveque, & Chartrand (2008)	8,875 sexually active adult women, Quebec Health Survey 1998, representative random survey	2% were classified as SM based on their sexual behavior (1% HO, 1% B). Each SM mother was matched to a HET mother based on age, income, residence, same procedure for nonmothers.	Current psychological distress was assessed with the EMMDP23. # times seriously drunk in past year and illicit drug use in past year (any)	Ss effect for SO but not motherhood-status in ANOVA. Distress: among mothers $d = 0.5$, Among nonmothers: $d = 0.3$ Ss effect for both alcohol/drug use (RR 2.0, ss in ANOVA).	None reported		

		Self-administered questionnaire					
McCabe, Boyd, Hughes, & d'Arcy (2003)	3,571 undergraduates, age n.a., from the University of Michigan, USA. Random sample	3.3% identified as LGB (75% of SM women and 30% of SM men identified as B). Internet- and questionnaire survey	Alcohol and illicit drug use with different items. Detailed analysis for women subsample see McCabe et al. (2004), for ecstasy-use see Boyd et al. (2003).	<p>Women: Effects for nearly all indicators except drinking ≥ 4 drinks per occasion (0.8 nss), ranging from 1.2 for heavy episodic drinking to 4.2 for alcohol use past year, and ss for past year smoking (3.6), marijuana use before college (1.9), marijuana use in past month (2.7) or past year (3.9), ecstasy use past year (3.8), illicit drug use the past year (4.8).</p> <p>Men Reversed effects for heavy drinking (0.4 ss) and ≥ 4 drinks per occasion (0.6, nss). For all other variables, effects ranging from 1.1 nss for marijuana use before college to 6.9 ss for ecstasy use before college and were ss for marijuana use in past year (2.0) and past month (4.5) and past year (3.1), but not illicit drug use (n.a.)</p>	No differences calculated due to lacking power	Slightly larger SO differences for alcohol and marijuana use among women, reversed gender difference for ecstasy use.	
Mercer et al. (2007)	6,399 women, 16-44 years-old, UK Natsal 2000 survey, stratified probability sample survey of the general population	+++ 4.9% classified as HO or B based on HO behavior (lifetime) Face-to-face interviews and CASI.	Smoking status, (non/ former smoker vs. light/heavy smoker), alcohol (≥ 15 units weekly), injecting drugs (ever, past 5 years, past year)	Smoking status: HO 1.2 nss, B 2.0 ss Alcohol: HO 1.6 nss, B 2.0 ss Injecting drugs (n.a. for HO) B: ever 10.0 ss, past 5 years 11.3 ss, past year 24.6 ss	Somewhat larger effects for smoking and alcohol, n.a. for drugs.	-	
Lhomond & Saurel-Cubizolles (2006)	6,970 adults women, 20-59 years old, France. National Survey on Violence against Women in France) Representative sample	1.1% classified as SM based on lifetime same-sex sexual behavior. Telephone interview	Smoking, items on drinking behavior, past year and lifetime marijuana use and drug use. High psychological distress (General Health Questionnaire score ≥ 5) SA (past year, lifetime)	Smoking (1.3 nss). Substance use, all ss: drinking a lot in difficult moments 6.2, believing drinking should be reduced 4.3, marijuana past year 12.7 (lifetime 13.8), other illicit drug use past year 9.3 (lifetime 9.2); high distress (1.3, nss) Lifetime SA 2.9 ss, past year SA 28.1 ss	None reported	-	
Lhomond, Saurel-Cubizolles, & Michaels (2014)	9,622 adults, 18-69 years-old, France, Random sample	+++ 3.5% of men and women had any same sex sexual contacts, 1.3% of women identified as LB and 2.1% of men as GB; 4.9% of women and 2.0% of men were somewhat attracted to the same sex. Telephone survey	Items on problematic alcohol use in past year based on ≥ 2 positive responses to the CAGE scale; past year cannabis use, lifetime other illegal drug use, having been depressed in past year (single item).	<p>Women For all subgroups (attraction: moHET, B, HO; behavior: combined B/HO; identity: L, B): alcohol, cannabis, other illegal drug use RRs 3.2 – 12.1. Depression: RRs 1.3-1.9.</p> <p>Men For all subgroups, except other illegal drug use (RRs 2.6-4.2). Reversed effect for HO attracted men (RR 0.6) and G men (0.8) for alcohol, B attracted men for cannabis. Identity: chronic depression: G: 3.1, B 2.9</p>	Among women, comparable effects for B and L (identity) and B, HO, and moHET (attraction). Among men and for substance abuse, slightly larger effects among moHET attracted but not B attracted men and for B identified men.	For substance abuse, substantially larger effects among women than men. For depression and psychotropic drug use similar effects.	

				depression past year: G 2.3, B 1.7 Attraction: Chronic depr.: HO 3.3, B 6.0, moHET 1.3, Depr. p. year: HO 2.3, B 1.7, moHET 1.3			
King & Nazareth (2006)	1479 adults, 18-75 years-old (mean 31.4-35.9, depending on subgroup), UK, London, consecutive people attending their primary care physicians over 4-8 weeks in each practice	+++ 14.1 % of men (5.3% B and 8.76% G), and 10.6% of women (8.1% B and 2.5% L) stated other than entirely HET experience (Likert type item from entirely HET to entirely HO)	Psychological distress with the General health questionnaire (cutoff ≥ 3); CAGE alcohol abuse questionnaire (cutoff ≥ 2); current smoking status	Men (G, B) Smoking: 1.6 nss, 2.4 ss, distress: 2.6 ss, 0.7nss, alcohol 1.1 nss: 1.8 nss, Women (L, B) Smoking: 2.4 ss, 2.3 ss, distress: 1.1 nss, 1.3 nss alcohol: 2.1 nss, 3.3 ss	Among men, B less distressed than G, Among women comparable effects for B and L.	Larger effect for alcohol/smoking among women.	
Lian, Zuo, Lou, Gao, & Cheng (2015)	Adolescents/young adults (15-24 years-old), Asia, from three cities (Hanoi, n=6,363, Shanghai, n=6,299, Taipeh, n=4,354)	Identified as SM (based on feelings). HET category includes moHET, LGB category includes B, moHO, and HO. F2F interviews, CASI for sensitive questions.	SA in past year	Hanoi 2.9 nss Shanghai 2.0 ss Taipeh 1.6ss	None reported	None reported	
Mattocks et al. (2013)	335 adult female veterans (mean age n.a.), USA, Womens Veterans Cohort Study, 2008-2011	10.4% identified as LB (asexual or Q excluded). Questionnaire and electronic medical record.	Smoking (yes/no) and hazardous drinking (AUDIT score ≥ 8). ICD-9 codes from medical records.	Bipolar disorder (6.2 ss), anxiety disorder (1.8 nss), MD (2.0 nss), PTSD (1.3 nss), any mental health disorder (1.9, nss), smoking (2.5, ss), drinking (2.4, ss).	None reported	-	
Pope, Ionescu-Pioggia, & Pope (2001)	796 seniors of a New-England Colleges, US, 1999 and previous replications in 1969, 1978, 1989.	5% reported at least one same-sex sexual contact until orgasm since college age. Questionnaire	Alcohol and substance use with single items.	More SM students used drugs (2.3, ss).	None reported	None reported	
Priebe & Svedin (2012)	3,423 high school seniors, 16-22 years old (mean 18.5), Sweden, Youth, Sex and Internet Project	9.5% identified as LGBQ and 15.8% were classified as SM based on current emotional/sexual HO or B attraction (Likert scale from 1-5). HO attraction: low score (<3) on the opposite sex scale and a high score (≥ 3) on the same-sex scale. B attraction: high score (≥ 3) on both scales. Asexual: low score on both scales (<3). SM consisted of HO, B, and asexual attracted.	SCL-25	For identity, ss effects among both victimized and non-victimized. SS effects also in multivariate regression (ORs > 2.1 , ss). Similar results for attraction and identity.		None reported	
Rath, Villanti, Rubenstein, & Vallone (2013)	4,159 adults, 18-34 years-old, USA, Legacy's Young Adult Cohort Study 2011,	2.9% identified as HO, 3.3% B, 0.3% T, 2.3% Q, 1.2% as other (O)	MD (PHQ-2), GAD (GAD-2), current use of alcohol, marijuana, other drugs, past	Smoking.: HO 1.6, B 1.4, T 1.5, 0.9, Q 0.4 Alcohol: HO 1.3, B 1.5, T 1.6, 0.8, Q 0.4 Marijuana: HO 1.0, B 3.3, T n.a., O 1.3, Q 0.5	HO and B comparable. T comparable for smoking and alcohol but lower for	None reported	Very few T and O identified - Results likely

	representative sample of households with cellphones		month and current smoking,	Other drugs: HO 3.8, B 4.7, T n.a., O 1.7, Q 2.0 MD: HO 1.5, B 1.6, T 0.3, O 1.2, Q 2.2 GAD: HO 1.4, B 1.4, T n.a., O 0.7, Q 1.3	MD (other n.a.) Smaller effects among "other" defined and Q (some effects reversed)		not representative.
Reed, Prado, Matsumoto, & Amaro (2010)	998 young adults, majority < 21 years-old (likely > 18), random sample from all enrolled undergraduates in a Boston University, 2005.	4.2% identified as LGB (57% of them as B). Web survey.	Past month alcohol use, binge drinking (≥5 drinks men, ≥ 4 drinks women in one sitting in typical week). Number of different drugs and # drug use in past month. Consequences of alcohol/drug use (RAPI) Index. SA or suicide plans (past year).	Alcohol 1.5 nss binge drinking OR 1.0, nss illicit drug use 2.0 ss suicide attempt/planning 6.6 ss # illicit drug use past month d = 0.3 ss # of different drugs past month d = 0.4 ss Consequences drug/alcohol d = 0.5 ss	None reported	None reported	Also includes adolescents
Rhodes, McCoy, Wilkin, & Wolfson (2009)	4,167 adult men, mean age 20.5 years-old, 81% white, Students, North Carolina, Random cross-sectional sample	4.9% identified as G or HO, B, T, or O; only G/HO were analyzed. Questionnaire via computer	Past month binge drinking, current alcohol use, drunkenness in typical week, past month smoking, marijuana, methamphetamines, cocaine, GHB, other drugs	Heavy drinking (1.1, nss), alcohol use (0.9, nss), smoking (1.5, ss), marijuana (1.3, nss), methamphetamines (4.3, ss), cocaine (1.7, nss), GHB (8.3, ss), other drugs (1.9, ss)	-	-	
Ridner, Frost, & LaJoie (2006)	772 adults, 18–24 years old, Kentucky, USA	4.1% of women identified as LB, 9.3% of men as GB. Excluded: 0% T and 1% Q, Web survey.	Current smoking, drinking, marijuana, see ACHA-NCHA instrument	Women: smoking (4.9, ss), drinking (10.7, ss), marijuana (4.9, ss), ORs close to 1 among men	None reported	Larger effects for women (zero-effects for men)	
Said, Kypri, & Bowman (2013)	6,379 young adults, mean 26.5 years-old, Australia, students enrolled in University of Newcastle, 2010.	Classified as HO (6.1%) or B (2.5%), not further specified. Web Survey	Current disorders with the Patient Health Questionnaire (PHQ): Depression, Anxiety Disorder. Eating Disorder according to DSM IV criteria, harmful drinking with the AUDIT.	Depression: HO 2.0 ss, B 4.2 ss Anxiety: HO 1.8 ss, B 2.4 ss Eating disorder: HO 1.4 nss, B 0.9 nss Harmful drinking: HO 1.9 ss, B 1.7 ss	Larger effect among B than among HO for depression and anxiety, but reversed for Eating disorder and harmful drinking.	None reported	
Schauer, Berg, & Bryant (2013)	3,892 young adults, mean age ca. 23 years-old, college students, USA, random sample of college students from six colleges in southeastern Universities,	+++ 6.4% identified as HO (2.9%) or B (3.5%). Web survey.	Depressive symptoms with the Patient Health Questionnaire (PHQ-2). # of past month drinking, marijuana, smoking, and binge drinking, all dichotomized (yes/no), and a summary measure of all those dichotomized items.	Depression PHQ-2 (Cohen's d): Men: HO 0.2, B 0.7; Women: HO 0.1, B 0.4 Substance abuse index: (Cohen's d): Men: HO 0.1, B 0.2; Women: HO 0.4, B 0.5 Other variables (all ORs): Men (HO, B): alcohol 1.6, 1.5, binge drinking 0.7, 1.3, marijuana 1.3, 1.5, smoking 0.7, 1.2, any substance 0.8, 0.9. Women (HO, B): alcohol 1.7 nss, 2.1 ss, binge drinking 1.6 nss, 1.8 ss, marijuana 3.0 nss, 3.4 ss, smoking 1.5 nss, 2.6 ss, any subst 1.9 ss, 2.2 ss	B had ss higher depression than HO. For substance abuse index and individual substance use variables, somewhat larger effect for B than HO.	Small and sometimes reversed effect for substance use for men but not women.	

Skegg, Nada-Raja, Dickson, Paul, & Williams (2003)	942 young adults, 26-years-old, New Zealand, birth cohort study, Dunedin Multidisciplinary Health and Development Study	11% of men and 26% of women had other than exclusive HET attraction (currently or sometimes in the past). Among men, 1.7% had persistent HO attraction, 9.4% minor HO attraction (1.9% and 23.8% among women, respectively). Computer based questionnaire (SO) and interview (psychiatric symptoms)	Depressed mood and substance abuse in the past year with single items. SA (self harm with and without intent to die) in lifetime.	Men (persistent HO, B). Depressive mood: 1.1 nss, 2.6 ss Substance abuse: 0.8 nss, 3.3 ss SA: 2.9 nss, 5.3 nss Women: Depressive mood: 4.1 ss, 1.3 nss Substance abuse: 4.0 nss, 2.8 ss SA: 4.9 nss, 1.2 nss	Men, SO differences larger for B than persistent HO for depression and substance use but not for SA. Women, SO differences larger among HO women.	Smaller SO differences for women. Larger SO differences for B compared to HO men (except SA), reversed effect among women.	
Talley, Sher, Steinley, Wood, & Littlefield (2012)	2,068 young adults, first year college students, mean age 18.8 years-old (SD 0.47), followed yearly over the next 5 years.	+++ 11.0, 13.2, 13.1, 13.0% (year 2-5 of survey) identified as SM (moHET, B, moHO, HO), 4.5, 6.1, 5.4, 7.5% were SM based on behavior (general, no time specified) and 10.3, 12.4, 14.3, 17.1% based on attraction with similar 7-scaled items. Latent class analysis with all three SO dimensions: women: 1.6% HO/B, 9.7 moHET, 27.2% increasingly becoming moHET (inc.moHET) over time. For men only two SM classes: 3.2% HO/B, 16.0% and inc.moHET emerged. Paper & Pencil questionnaire at first assessment, then web surveys.	Frequency of alcohol use in past 3 months, typical # drinks when drinking, binge drinking, # being drunken in past month, 37 consequences of alcohol in past month.	Women: In first year, moHET ss more alcohol quantity and binge drinking (but decrease in second year). No ss effects for drunkenness. Inc.moHET and moHET had more neg. consequences across all years, also compared to HO/B. Men: Ss reversed effect for inc.moHET over the years for alcohol quantity but they had elevated neg. consequences. Effect sizes n.a.	MoHET women more at risk, but mixed finding among moHET males (less at risk for alcohol quantity but more for negative consequences of drinking).	None reported	Special SO variable created from latent class analyses
Ueno (2010a) "Mental Health Differences between Young Adult..."	1,492 young adults recontacted from previous Adolescent Transitions Study carried out in Miami Dade County, 9% between 19-21 years-old, random sample with corrections made.	4.3% classified as SM based on having reported less than 100% opposite-sex sexual partners in the past Transitions Study, meaning all present study mental health results represents post 'having had same-sex partner(s)' outcomes.	Depression with the CES-D, summary score of past month different drug use.	Ss effects for depression d = 0.7 and drug use d = 0.7	Not reported	Note reported	
Wang, Hausermann, Wydler, Mohler-Kuo, & Weiss (2012)	22,191 males, mostly 20 years-old, Second Swiss Recruit Survey on health (ch-x, 2002, 03); 50% of compulsory recruits	SM based on attraction, see Wang et al. (2014). Results reported for "HO/B" (1.6%) vs. "only HET". 91.7% only HET, 5.3% moHET, 0.9% B, 0% HO, 0.7% only HO,	SA lifetime	SA, OR: 4.1, ss.	Not reported	-	

	surveyed	and 1.2% non-response. Questionnaires					
Wang et al. (2014)	5,990 young adult men, Switzerland, recruited from mandatory evaluations for military service and additional voluntary study participation.	+++ 8.6% were classified as SM based on some degree of HO attraction (5.6 moHET, 1.1% B, 0.7% moHO, 1.1% HO). Questionnaire	Mental health in past month with the MOS-SF 12 scale, MD in past week with the MDI, past year ADHD with the ASRS-V1.1 scale from the CIDI, lifetime antisocial personality disorder from the MINI. Past year SA with a single item.	Effects in this order: moHET, B, moHO, HO MD: 1.6 nss, 2.8 ss, 8.7 ss, 4.5; ADHD: 2.0 ss, 1.2 nss, 1.9 nss, 3.5 ss.; Antisocial PD: 1.9 ss, 0.9 ss, HO 1.3 nss, 0.6 nss SA: 2.2 ss, 8.3 ss, 2.0 nss, HO 4.1	Larger effects for HO than B except for SA and antisocial PD.	-	
Wichstrom & Hegna (2003)	2,924 young adults, mean age 22.1 years-old, highschools. Random sample, data from third wave (1999) used here, Young in Norway study	Sexual orientation classified with same-sex sexual contacts since age 12 (6.5%), sexual attraction (15.5%) and identification (11.4%), Questionnaire	SA lifetime (separated from parasuicides, i.e., overdoses)	Behavior: 4.7, ss Both attraction and identity: 2.7 ss	None reported	Women had higher risk for future SA than men	

Adolescent Samples

YOUTH RISK BEHAVIOR SURVEYS

Author (Year)	Sample, Sampling Method	Percentage of Sexual Minority Individuals, Dimensions of Sexual Orientation, Assessment Method	Outcome Variables	Main Results (SM vs. HET) All Effects ORs if not other specified	Subgroup Differences	Gender Differences	Note
Bostwick et al. (2014) ^{b+}	72,671 adolescents, US, Pooled data 2005 and 2007 from 14 regions in the US,	8.4% were classified as SM, i.e., they reported a nonheterosexual identity, any same-sex behavior, or any same-sex attractions	Past year SA	Ss effect 3.9 SO differences also were apparent among all racial subgroups. <i>Within</i> SM, elevated SA rates, compared to Whites, were observed among Alaskan/Pacific islander (1.7 ss), Latino (1.5 ss), multiracial (1.2 nss), and somewhat lower among Asian or Black adolescents (both 0.9, nss).	None reported	For total sample, comparable SO differences: boys OR 4.6, girls OR 3.8 (based from Table 2, weighted data)	
Button, O'Connell, & Gealt (2012)	6,636 adolescents, 11-18 years-old (mostly 15-16), US, Delaware, 2003, 2005, 2007	5.3% identified as SM (1.1% HO, 3.1% B, 1.1% Q)	Substance use (any vs. none) based on # drink past month, # binge drinking, # marijuana SA (lifetime)	Alcohol: HO 1.1 nss, B 2.0 ss, Q 0.7 nss Binge drinking: HO 1.7 ss, B 2.0 ss, Q 1.2 nss Marijuana: HO 1.3 nss, B 2.7 ss, Q 1.0 nss SA: HO 5.7, B 6.2, Q 6.4, all ss	Larger effects for B than HO for alcohol, binge drinking and marijuana but not SA	None reported. Within SM, no ss difference for substance abuse.	
DuRant, Krowchuk, & Sinal (1998)	3,886 male adolescents, US, random sample, Vermont YRBS 1995	8.7% had at least one „sexual intercourse“ with another male. Questionnaire	SA (past year), substance use past month	Significant correlation of # of male sexual partners and SA attempt (r .3), alcohol use (r .2), Marijuana (r .2), tobacco (.2)	None reported	-	Effects only given for # of HS-partners
Faulkner & Cranston (1998)	1,668 adolescents, mean age 16 years-old, USA. Random sample, Massachusetts YRBS 1993	6.4% ever had same-sex sexual contacts. Questionnaire	SA (past year), substance use past month	Tobacco use (regular smoker ever or current smoker 0.9, current regular smoker 1.4, all nss), for alcohol use in past month or current episodic drinking 1.1 nss, daily drinking 58.1 ss, ≥ 10 times heavy drinking 4.6 ss, past month marijuana 1.0, ≥ 40 times marijuana use 4.1 ss, cocaine use at least one 7.1 and ≥ 10 times 21.5, SA 2.5, ss.	None reported	None reported	
Garofalo, Wolf, Kessel, Palfrey, & DuRant (1998)	3,365 adolescents, USA, random sample, Massachusetts YRBS 1995	3.8% identified as LGB (0.6% LG and 1.9% B) and additional 1.5% as Q, Questionnaire	SA (past year), substance use past month	All effects ss: Cigarette smoking 2.7, alcohol use 2.4, binge drinking 1.7, marijuana use 2.5, cocaine use 2.0, SA 5.1.	None reported. No substantial difference if Q were included in the HET group or excluded.	None reported	
Hatzenbuehler,	55,599 adolescents, USA,	0.8-2.% identified as LG, 3.0-5.4%	SA (past year)	All effects ss:	Larger SO difference for B,	None reported	

Birkett, Van Wagenen, & Meyer (2014) ^{b+}	2005 and 2007 from 8 regions	as B, 1.3-4.9% as Q, Questionnaire		LG 3.9, B 5.7, Q 2.4	smaller for Q compared to LG		
Jiang, Perry, & Hesser (2010)	2,210 adolescents, USA, Rhode Island 2007	10.3% Identified as LGBTQ	Having felt sad/hopeless in past year, SA past year	Feeling sad/hopeless 3.8 ss, SA 6.4 ss	None reported	None reported	
Kann et al. (2011) ^b	418,117 adolescents from selected sites (states and cities pooled from 2001, 2003, 2005, 2007, 2009). 9 Sites assessed sexual identity, 12 sites sexual behavior.	Median over all sites: Identity: 7% SM: 1.3% LG, 3.7% B, 2.5% Q Sexual Behavior: 5.8% SM: 2.5% HO, 3.3% B, 40.5% no sex	Having felt sad/hopeless in past year, SA past year, Past month cigarette use, current frequent cigarette use (≥ 20 days in past month), past month alcohol use and binge drinking (past month), Past month marijuana and cocaine use, ever injecting illegal drug.	All results are RR Having felt sad/hopeless: identity (LG 1.7, B 2.3, Q 1.5), behavior (HO 1.4, B 1.9). SA: identity (LG 4.0, B 2.9, Q 2.9), behavior (HO 2.3, B 3.5). Cigarette use: identity (LG 2.2, B 2.3, Q 1.3), behavior (HO 1.2, B 2.0) Frequent cigarette use: identity (LG 3.0, B 3.2, Q 1.4), behavior (HO 1.1, B 3.1). Alcohol use: identity (LG 1.3, B 1.5, Q 0.9), behavior (HO 1.0, B 1.2). Binge drinking, identity (LG 1.3, B 1.6, Q 1.0), behavior (HO 0.9, B 1.4). Marijuana: identity (LG 1.6, B 1.7, Q 1.2), behavior (HO 1.1, B 1.5). Cocaine use: identity (LG 9.2, B 6.1, Q 6.2), behavior (HO 3.2, B 5.7). Injecting illegal drug: identity (LG 9.9, B 5.1, Q 6.9) and behavior (HO 3.2, B 5.7).	LG and B identified are comparable (except hard drug use where LG have higher levels). For behavior, B have larger SO differences than HO. Q have smaller effects than HO or B, sometimes reversed effect Larger effects for identity than behavior	None reported (only within SO group gender differences).	For tabulated OR/RR suicidality results see http://people.ucalgary.ca/~ramsay/gay-more-risk-suicide.htm
Matthews, Blossnich, Farmer, & Adams (2014)	9860 adolescents, USA, grade 9-12, Massachusetts YRBS, 2003, 2005, 2007	+++ 5.6% were classified as SM based on lifetime sexual behavior (2.1% HO, 3.5% B) and 6.3% as LGBTQ (1.2% LG, 3.1% B, 2.1% Q).	Past month smoking and methamphetamine use	Behavioral measure of SO: Women: smoking HO 1.0 nss, B 3.8 ss, methamphetamine HO 1.1 nss, B 5.3 ss. Men: smoking: HO 1.4 nss, B 3.5 ss; methamphet.: HO 1.0, nss, B 10.2, ss. Identification as SO: All effects ss Women: smoking L 9.9, B 6.0; methamphetamine G 10.4, B 6.4. Men: smoking G 2.8, B 3.0, methamphetamine G and B 5.1	For behavioral measure of SO, larger effects for B than HO. For identification, comparable or even larger effects for LB than their B counterparts.	For identification measure of O, larger effects for girls, but not so for behavioral dimension of SO.	
Mustanski, Andrews, Herrick, Stall, & Schnarrs (2014) ^{b+}	16977 male adolescents, YRBS from 11 regions 2005 and 2007	+++ 7.2% were classified as SM based on lifetime sexual behavior (4.0% HO, 3.2% B).	Having felt sad/hopeless nearly daily for two weeks and stopped doing some usual activities, binge drinking (> 3 days past month), past month marijuana use (≥ 20 times) and cocaine	All effects RRs Sadness: HO 1.7 ss, B 2.1ss, binge drinking: HO 1.1 nss, B 1.8 ss, marijuana: HO 0.6 nss, B 2.3 ss, cocaine: HO 3.4 ss, B 8.2 ss SA: HO 3.1 ss, B: 6.7 ss	Larger effects among B compared to HO	-	SA with injuries

			use (≥ 3 times), past year SA with injuries that had to be treated by doctor/nurse.				
Newcomb, Birkett, Corliss, & Mustanski (2014) ^{b+}	49,307 adolescents, 2005 and 2007 YRBS, from 3 cities and 5 states. Analytic sample size varied with each variable.	Identity (GL, B) and behavior (HO, B)	Any lifetime use of marijuana, cocaine, inhalants, methamphetamine, heroin, and MDMA (separate variable for each drug).	Effects 1.3-5.8, mostly > 2, ss if not marked nss Identity (LG, B, Q) Marijuana: 1.4 nss, 1.7, 0.8 nss Cocaine: 1.8, 2.0, 2.2, Inhalants: 1.9, 2.1, 2.6, Methamphetamines: 2.1, 3.5, 3.0, Heroin: 2.7, 2.8, 4.7, MDMA: 1.7, 2.1, 2.3 Behavior (HO, B): Marijuana: 0.9 nss, 1.7, Cocaine: 1.7, 3.4, Inhalants: 1.3 nss, 2.3, Metamphet. 2.3, 4.1, Heroin: 3.3, 5.6 ss, MDMA: 1.8, 3.7	Identity: effects for B slightly larger than for LG. Behavior: larger differences of effects between B and LG	None reported	
Olshen, McVeigh, Wunsch-Hitzig, & Rickert (2007)	8080 adolescents, ≥ 14 years-old, New York City YRBS	+++ Identity (LG, B, Q)	SA in the past year with single item	Girls: all ss except L 0.9; B 5.3, Q 2.4; Boys: all effects ss, G 6.2, B 12.8, Q 6.8	Larger effects for B than L or G.	Larger effects among boys than girls.	
Pinhey & Millman (2004)	1,381 adolescents, grade 9-12, Guam, USA, 2001, 95% of all high school students surveyed	3.5% of Boys and Girls identified as LGB and 96.5% as HET or Q, Questionnaire	SA in the past year with single item	GB boys 5.0 ss, LB girls 2.6 ss	None reported	Smaller SO difference for girls.	
Robin et al. (2002)	7,458 adolescents, USA, Vermont YRBS 1995+1997 and 4,176 youth from Massachusetts YRBS 1995+1997	8% of adolescents had same sex "sexual intercourse", 5% of the Massachusetts YRBS had same sex sexual contacts. Questionnaire	SA (past year) and binge drinking and marijuana (past month), cocaine use (lifetime)	HO: nss effects: binge drinking 0.9-1.0, marijuana 1.1-1.2, cocaine 1.1-1.8 and SA 1.5-1.7 B: binge drinking 1.4-1.6, marijuana 1.9-2.3, cocaine 5.4-6.1, and SA 5.7-7.8	Larger SO differences for bisexual than compared to homosexual adolescents	No ss interactions with gender	Results from Table 1 used (OR in paper controlled for forced sex – may be bias)
Seil, Desai, & Smith (2014)	8,919 adolescents from the New York City YRBS	10.8% identified as LGBQ	Past month drinking (any in past month) or marijuana, lifetime other illicit drug use, past year depressive mood (≥ 2 weeks) and past year SA	All effects ss: Alcohol 1.5, marijuana 2.2, other illicit drugs 2.5, depressive mood 1.9, SA 2.8	None reported	None reported	
Shields, Whitaker, Glassman, Franks, & Howard (2012)	2,154 adolescents, San Francisco YRBS 2009	?% identified as LGB (Q excluded).	Ever using alcohol or marijuana, hard drugs (cocaine, heroin etc), past year feeling depressed/sad (> 2 weeks), past year SA.	All effects ss Alcohol or marijuana 4.9, hard drugs 5.1, feeling depressed 3.3 SA (3.6)	None reported	None reported	

Stone et al. (2014) ^b	YRBS, pooled from 5 different locations 2001-2009 (Boston, Chicago, New York City, San Diego, San Francisco).	+++ 7% of boys and 10% of girls identified as LGBQ, and for lifetime sexual behavior, 3.0% of boys and 2.4% of girls reported only HO behavior (B: 2.0% of boys and 5.0% of girls)	SA in past year.	All effects ss Identity Girls: L 4.1, B 4.4, Q 2.3; Boys: G 4.2, B 5.0, Q 3.1: Behavior: Girls: HO 1.8 ss, B 2.6 ss Boys: HO 2.8, B 4.1	Q identified smaller effects than LG or B. For identity, B and LG comparable. For behavior, B larger effects than LG.	Comparable	See also Kann et al. (2011)
Stone, Luo, Lippy, & McIntosh (2014)	3,733 adolescents, Milwaukee 2007 + 2009	12.4 % were SM, based on lifetime sexual behavior	Past year SA	Boys: 3.9, ss Girls: 3.9, ss White: 8.8 ss, Black 3.9 ss, Hispanic 1.9 nss, Other 3.3 ss	None reported	Similar	
Talley, Hughes, Aranda, Birkett, & Marshal (2014) ⁺		+++ SM status if any indicator of SO is HO or B (identity, behavior, attraction). Identity and behavior as additional variables. Q and sexually inexperienced were, if possible, categorized as SM from other SO variables or excluded instead.	Several items on alcohol use, for this report only drinking in past month (any vs. none) and binge drinking in past month.	All effects ss if not marked nss Any indicator: Drinking: 1.5, heavy drinking 1.4 Identity: drinking LG 1.2 nss, B 1.2 nss, HET/Q with HO behav: 1.8, Q no HO behav: 0.5, binge drinking LG 1.9, B 1.6, HET/Q with HO behav: 1.7, Q no HO behav: 0.5 Behavior: drinking: HO 1.1 nss, B 1.6, binge drinking: HO 1.1 nss, B 1.6	For behavior only, larger effects among B than HO	Larger effect among girls.	
Tucker, Ellickson, & Klein (2008)	1,633 girls, 14 years-old in first wave, from 30 schools in California and Oregon, followed up at age 18 and 23.	8.7% classified as B based on attraction in the analytical sample (0.8% as L in the whole sample, excluded from analysis). Method?	Frequency/ quantity of alcohol, tobacco, marijuana. Current use = ever in past month. Problematic use based on # events with problematic outcome as result of drug/alcohol use, e.g. missing school, physical fights etc. Mental Health with the MHI-5 scale.	Current cigarette use with 14, 18, 23 years, all RRs all ss: 1.5, 1.5, 1.8 Current alcohol: 1.3 ss, 1.1 nss, 1.1 nss Current marijuana: 1.3, 1.5 ss, 2.2 ss # Cigarettes: d = 0.2, 0.2, 0.2, all nss # Alcohol: d = 0.1 nss, 0.1 nss, 0.3 ss # Marijuana: d = 0.1 nss, 0.1 nss, 0.2, ss Problematic use: effect size n.a. but ss elevated at age 23 Good mental health (14, 18) d = -0.2, -0.3, all ss	None reported	-	Only B girls

Add-Health Studies

Nationally representative sample of adolescents in grades 7-12 in the United States during the 1994-95 school year. The Add Health cohort has been followed into young adulthood with four in-home interviews.

Wave I: 1994/1995, adolescents Grades 7-12, aged ? , Wave II: 1996, adolescents, aged?, Wave III: 2001/2002, young adults, 18-26 years, Wave IV: 2007/2008, young adults aged 24-32,

Survey data was collected using a 90-minute CAPI (computer-assisted personal interview) or CASI instrument (CAPI computer-assisted self interview). Sensitive information was assessed with CASI, less sensitive questionnaire sections were administered with the assistance of CAPI.

Author (Year)	Sample	Percentage of Sexual Minority Individuals, Dimensions of Sexual Orientation, Assessment Method	Outcome Variables	Main Results (SM vs. HET) All Effects ORs if not other specified	Subgroup Differences	Gender Differences	Note
Almazan, Roettger, & Acosta (2014)	14,625 young adults, Wave IV	9.5% of women and 4.1% of men reported some degree of HO attraction, 19.9% and 6.4% nonheterosexual identity, 14.2% and 6.0% lifetime HO behavior, 4.4% and 3.1% past 12 month HO sexual behavior	SA in past 12 months, single item.	Women attraction 2.0 nss. Identity 2.1 s, behavior: lifetime 2.1 ss, past year 2.2 ss. Men, all nss attraction 0.2, identity 0.6, behavior: lifetime 0.6, past year 0.7	None reported	Small SO effect among women but none or reversed effect among men.	Later Coming Out process among women responsible?
Cardom, Rostovsky, & Danner (2013) ^b	Wave I and IV. Subset of 1,591 depressed adolescents/ young adults (above cutoff in CES-D) at Wave I who also were assessed for SO at Wave IV	20% identified as SM at Wave IV (14% moHET, 3% B, 1% moG, 1% G).	Depression (past week) with CES-D scale at both waves, SA in past year	Depression (all effects Cohen's d) Wave I: moHET 0.3 ss, B 0.3 nss, moHO 0.3 nss, HO 0.1 nss, Wave IV: moHET 0.4 ss, B 0.5 ss, moHO 0.2 nss, HO 0.1 nss SA (all effects RRs) Wave I: moHET 2.3, B 2.0, moHO 1.9, HO 0.5 Wave IV: moHET: 1.3, B 5.8, moG n.a., G 1.5.	Depression, only ss effects for moHET (Wave I and IV) and B in Wave IV. SA: effects in Wave I for all subgroups except G youth (reversed effect). In Wave IV, effects only pronounced for GB youth.	None reported	SO variable in Wave IV was used also for Wave I analysis.
Everett & Mollborn (2013)	Wave IV	+++ B and moHET were combined (4.1% men and 17.8% of women) as well as moHO and HO (2.7% of men and 1.8% of women).	Past year binge drinking (≥2 times a month), past year drug use, current smoking	Men: Smoking 0.9 for B and G; for binge drinking and drug use 1.2-2.0 and ss except binge drinking for G men. Women: all effects ss, 1.6 -4.9	Comparable for men, but for women, L had larger effects than B for binge drinking and drug use	Clearly larger effects among women	MoHET were grouped with B
Fried, Williams, Cabral, & Hacker (2013) ^b	Wave II (n = 1,648) and III (n = 1,728)	HO attraction, not further specified, no percentages given	SA in past year	Wave II 3.4 ss Wave III 2.0 nss	None reported	None reported	
Hahn, Wong, Huang, Ozonoff, & Lee (2008) ^b	1,169 Asian Americans and Pacific Islanders from Wave II and III	8.7% identified as SM in Wave III (moHET, B, predHO, or HO), asexual and Q were excluded	Regular smoking in past year, binge drinking (at least once in past year), past year marijuana, past year other illicit drugs	Wave II: males (RRs 0.6-1.1 all nss), and reversed effects among females (RRs 0.5-0.8, ss only for binge drinking. Wave III: males (robacco: RR 0.8, nss, binge drinking RR 1.0, nss, marijuana RR 2.3 ss and other drug use RR 3.1 ss).	None reported	Reversed effect for females in Wave II	Emerging SO effect for marijuana and other illicit drug use from Wave II to Wave III

				Females: 1.5, 1.3, 2.4, 6.0, all ss.			
Lindley, Walsemann, & Carter (2012)	Wave IV 14,412 young adults	+++	Depression with CES-D	Women: Identity: ss for moHET, B, moHO but not HO. Attraction: ss effects for B but not HO. Behavior: ss for moHET but not B, moHO, or HO Men: Only ss effects for moHET (identity and behavior). Effect sizes n.a.	Only ss effects for moHET men/women and for moHET men. B men and women comparable	Somewhat smaller effects among men	
Loosier & Dittus (2010)	Wave III 14,322 young adults	5.7% of men and 13.9% of women identified as SM in Wave III. % of same sex romantic partners: HET 0%, moHET 2%, B 15%, moHO 68%, HO 90% across Waves I-III	Depression (CES-D), # of past year drinking,	Depression and alcohol use was elevated among all SO subgroups (effect size n.a.) but only ss (in planned contrast analysis) for B and moHET.	Larger effects for B and moHET	None reported	
Marshal, Dermody, Cheong, et al. (2013)	12379 adolescents / young adults, Waves I – IV Selection based on age for homogeneity (Wave I: 14-18, Wave II: 15-19, Wave III: 20-24, Wave IV: 27-31)	Wave IV information for SO: 13.2 identified as SM in Wave IV (2.1% LG or moLG, 1.5% B, 9.6% moHET)	Depression with CES-D	In latent growth analysis using structural equation modeling, all SM groups differed significantly from HET and the increase was comparable through all waves.	B had ss larger levels than moHET and moHET had ss larger levels than LG/moLG.	Not reported	Ss effects are in contrast to other studies.
Marshal, King, et al. (2012)	7,765 girls/women, Waves I – IV, selection based on age at Wave I (12-18 years)	+++ Wave IV information for SO: 19.6% identified as SM in Wave IV (4.2% L, moL, or B, and 15.5% moHET)	Past month smoking (# days); past year alcohol use and binge drinking, # drunkenness in past year (likert 0-7, never to almost every day)	Ss effects for both LB and moHET girls in Wave I; increasing difference from Wave I to Wave IV into young adulthood.	LG and B comparable (not ss different)	-	
McLaughlin, Hatzenbuehler, Xuan, & Conrond (2012) ^b	13962 young adults, Wave III	3.4% identified as LGB (48% of them as B). moHET were excluded from analysis, LG and moLG were combined.	Depression with the CED-D, past month smoking, illicit drug use since Wave I, binge drinking in past year, consequences of drinking and drug abuse.	For all measures there were elevated levels among SM (ss?, effect size n.a.). Binge drinking (RRs): LG 1.4, B 1.2, illicit drug use: LG 2.5, B 2.4	LG and B comparable for binge drinking and drug use but B somewhat elevated for depression and tobacco use.	Not reported	
Needham (2012)	8,151 adolescents/ young adults, Waves I – IV	Sexual attraction across the 4 waves, classified in consistent SM (1.3%), transition to SM (6.0), transition to HET (5%), consistent HET (87.6%).	Depression (CES-D), past month frequency smoking, past year heavy drinking, past month marijuana	Effects from unconditional growth models, consistent HET as reference group. No ss effects for the rate of change over time for any subgroup. Females: consistent SM and those who transit to SM start with ss elevated depression and nearly all substance abuse variables. Those who transit to HET initially do not have ss increased	Comparable trajectories over time.	Larger effects among females than males.	

				depression but elevated levels of smoking, drinking, and marijuana. Males: consistent SM start with ss increased depression but with nss different substance abuse levels. Nss different levels of depression for those who transit to SM and ss lower levels of smoking and nss differences for other substance abuse. Those who transit to HET have initially ss increased depression and substance abuse.			
Needham & Austin (2010) ^b	11,153 young adults, Wave III Those with no contact to parents and those married excluded	+++ Identified as SM (LG or moLG, B, moHET or HET)	High depression (CES-D \geq 10 for men and \geq 11 for women), binge drinking, past year binge drinking 1-2 times per week, any past month marijuana or hard drug use.	Women: All effects RRs and ss: depression: L 1.4, B 1.8; binge drinking: L 1.5, B 1.9, marijuana: L 2.6, B 2.4; hard drugs: L 4.2, B 3.9 Men: all effects nss: depression: G 1.7, B 2.0; binge drinking: G and B 0.7, marijuana: G 0.9, B 1.4; hard drugs G 1.3, B 1.7	L and B women comparable; B men somewhat elevated than G men.	Comparable for depression, larger effects among women for marijuana and hard drugs.	
Pearson & Wilkinson (2013) ^b	13,140 adolescents, Wave I and II	4.1% of girls and 6.9% of boys reported lifetime attraction towards same-sex persons in Wave I	Binge drinking in Wave II, illegal drug use, both since Wave I.	Depression: girls d = 0.3, boys d = 0.4, all ss. Binge drinking: girls d = 0.2 ss, boys d = 0.0, nss. Illicit drug use: girls d = 0.3, boys d = 0.1, all ss.	None reported	Larger effects for girls for alcohol/drugs but not depression	Measure of SO
Russell & Joyner (2001)	11,940 adolescents, Wave I	8.0% of boys and 6.6% of girls either ever had a same-sex romantic attraction or same-sex romantic relationship.	Past week depression with CES-D scale, 9-item scale on past year alcohol abuse, single items on SA	Ss elevated levels of depression and alcohol abuse (effect size n.a.). SA: 2.5	None reported	Comparable for SA	
Savin-Williams, Cohen, Joyner, & Rieger (2010) ^b	6,615 young adult men, Wave III	+++ 3.2% identified (?) as moHET, 0.6% as B, 1.8 as HO.	Depression with CES-D	Ss effects for moHET (ss, BF 12.8, strong evidence, d = 4.4), B (nss, BF 1.3, weak evidence, d = 2.5) HO (ss, BF 3.3, subst. evidence, d = 3.8).	B somewhat elevated compared to HO.	-	d's may be wrong due to likely wrong SD (0.07) of HET males in paper
Silenzio, Pena, Duberstein, Cerel, & Knox (2007) ^b	14,322 young adults, Wave III	SM based on self-identification (based on attraction) as HO, moHO or B. MoHET and not attracted put in reference group	SA in past year	Ss effect, 3.0.	None reported	None reported	Reference group includes moHET and not attracted.
Strutz, Herring, & Halpern (2015)	13,088 young adults, Wave IV	21.4% had at least one indicator of SM status and 5.6% all three indicators. 3.7% had an attraction indicator plus LGB identity or	Lifetime diagnosis of depression, anxiety/PD, ADHD, and depression on the CES-D (above cutoff).	All effects crude ORs, mostly ss. Women (all effects ss) Any indicator: depression 2.5, anxiety/PD 2.2, ADHD 1.9, depression 2.2.	Larger effects when SM status on all three indicators.	Somewhat larger effects among women.	

		behavioral indicator. Based on number of indicators of SO in Wave IV (any current HO attraction, any lifetime same-sex romantic or sexual partners), identity (any nonheterosexual including moHET).		All indicators: depression 3.4, anxiety/PD 2.8, ADHD 2.7, depression 2.7 Attraction plus other indicators: depression 2.7, anxiety/PD 2.3, ADHD 2.8, depression 2.5 Men Any indicator: depression 2.5 ss, anxiety/PD 1.6 ss, ADHD 1.4 nss, depression 1.5 ss. All indicators: depression 3.6ss, anxiety/PD 2.9ss, ADHD 1.7 nss, depression 1.3 nss. Attraction plus other indicators: depression 3.5 ss, anxiety/PD 2.6 ss, ADHD 1.1 nss, depress. 1.2 nss			
Teasdale & Bradley-Engen (2010)	11,911 adolescents, Wave II	7% classified as SM based on lifetime romantic attraction to person of same sex.	Depression (CES-D)	Ss effect for depression, effect size n.a.	None reported	Not reported	
Ueno (2010b)	Wave I-III	4 categories based on all 3 indicators of SM (identity, behavior, attraction): HET (no SM indicator = baseline), HOadol (any indicator only in adolescence, 6.4% women, 8.8% men), HOyadul (any indicator only in young adulthood 12.7% and 6.2%), HOboth (any indicator in both life-stages 4.1% and 2.0%)	Depression (CES-D), binge drinking in past year and drug use in last month	SM only in adolescence: greater levels of mental health problems in adolescence but no worse mental health changes into young adulthood. SM only in young adulthood: show worse changes. Among females: SM in both life stages associated with worse mental health changes. However, these differences are modest, and substantial amounts of variations in mental health changes are observed within each group.		Larger effects among females	
Williams & Chapman (2011) ^b	18,924 adolescents, Wave I	7.5% SM (if ever having either/or romantic HO attraction, romantic HO relationship, same-sex sexual partner, all in past 18 months)	Depression (CES-D scale ≥ 20), anxiety (6-item scale, cutoff ≥ 18), SA	Ss effects for anxiety 2.0, depression 1.8, SA 2.4	None reported	None reported	

Growing UP Today Study (GUTS)

U.S. longitudinal cohort study of children of Nurses' Health Study II participants, first Wave 1999 at ages 9-14 years (N = 16882), and additional Waves at 2001 (11-16 years?), 2003 (13-18 years?) and biennially until 2014 (24-29 years). Questionnaires were delivered by mail. SO was assessed with the item "What of the following best describes you feelings": (attracted to persons of the opposite sex); mostly heterosexual; bisexual (equally attracted to men and women); mostly homosexual; completely homosexual (gay/lesbian, attracted to persons of the same sex); and not sure.

In 2007, there was also an item on sexual behavior "During your life, the persons with whom you have had sexual contact are?" No sexual contact, females, males, or both

Author (Year)	Sample	Percentage of Sexual Minority Individuals, Dimensions of Sexual Orientation, Assessment Method	Outcome Variables	Main Results (SM vs. HET) All Effects ORs if not other specified	Subgroup Differences	Gender Differences	Note
Corliss, Rosario, Wypij, Fisher, & Austin (2008) ^b	13,450 adolescents from waves I, II, III who responded to SO and drug use items in at least one wave. Multivariable generalized estimating equations (GEE) repeated measures modified Poisson regression was used to adjust for dependency of data across waves	+++ 8.5% of boys and 16.1% of girls reported a SM orientation. moHO and HO were combined into LG category, Q were excluded.	Any past month drinking and # of binge drinking episodes; i.e. ≥ 5 drinks (males) or ≥ 4 drinks in a row (females) in past year.	Any past month drinking, RR Males: moHET 1.2 ss, B 1.5 ss, G 1.2nss Females: 1.4 ss, 1.6 ss, L 1.1nss moHE males and females and B females reported greater alcohol use on all 3 outcomes. B males reported greater alcohol use but associations were ss only for any past-month drinking. G reported consuming a larger number of drinks. Compared with HET females, L reported a greater number of drinks usually consumed and binge drinking episodes but the latter was not ss.		For #drinks ss larger SO difference for B females compared to males and for binge drinking larger SO effect among moHET females than males	The RR were adjusted for household adult alcohol drinking
Corliss et al. (2010) ^b	12,664 adolescents from waves I, II, III who responded to SO and drug use items in at least one wave. Statistical modeling as in Corliss, et al. (2008)	+++ moHO and HO were combined into LG category, Q were excluded.	Past year use of different drugs (marijuana, ecstasy, cocaine, heroin, amphetamine, LSD) and medication not prescribed by a doctor. Results only given for marijuana and for any other illicit drug use (because results are comparable)	All effects RRs and ss. Males (MoHET, B, G): Marijuana: 1.9, 1.7, 1.6, Any other illicit drug: 2.3, 2.9, 1.9 Females (MoHET, B, L) Marijuana: 2.0, 2.6, 1.7, Any other illicit drug: 3.4, 5.1, 3.1 [For all drugs and medication, RRs ranged from 1.3-9.4, nearly all were ss. Those 12-17 years old had larger effects differences than those 18-23 y.]	For girls, B had larger SO differences than L or moHET, (which were comparable). For boys, SO differences of B were comparable to G and moHET except for ecstasy and heroin where B had larger SO differences	Overall, SO differences were larger among girls than boys.	Younger SM were more at risk
Roberts, Rosario, Calzo, & Austin (2013)	10,566 adolescents/ young adults, 11-30 years old, 1999-2010 waves, subset of responders to gender nonconformity items in 2005 or 2007.	? % were classified as SM according to identity (LG, B, moHET), and also HET identified with homosexual experiences (HET-HO), Based on 2007 measure, Q excluded.	Depression with CES-D scale	Results only available from multivariate model, adjusted for childhood gender nonconformity, but ss effects among HET-HO, moHET, B, LG	Largest effect among B	None reported	Biased effects due to adjustment
Rosario, Reisner,	5,193 adolescents/ young adults, waves, 2003, 2005,	? % were classified as SM according to identity (LG and	Past year substance use for this paper: smoking (any and >	Effects all ss if note described as nss Smoking: LG 2.6, B 2.8, moHET 2.3	Comparable effects among subgroups		

<p>Corliss, Wypij, Calzo, et al. (2014)</p>	<p>2007 and with mothers reports from 2004 and 2006</p>	<p>mostly LG combined, B, moHET), Q excluded.</p>	<p>weekly), marijuana (any and ≥ monthly), misuse prescription drugs, any illicit drug use, binge drinking (≥4 drinks girls, ≥ 5 drinks boys, ≥ 3 times past year). Depressive Symptoms subscale of the McKnight Risk Factor Survey</p>	<p>Binge drinking: 1.3 nss, 1.2 nss, 1.6 Marijuana: 2.5, 3.4, 27 Other illicit drugs: 3.4, 3.6, 3.0 Prescription drug: 1.6, 2.2, 2.0 Depression, all, ss (all d's): 0.3, 0.5, 0.4</p>			
<p>Rosario, Reisner, Corliss, Wypij, Frazier, et al. (2014)^b</p>	<p>6,122 adolescents/ young adults from wave 2005, plus those with reports from mother 2004 and 2006.</p>	<p>13% were classified as SM base on identification (1.7% identified as LG, 1.7% as B, 10% as moHET)</p>	<p>Depression with the CES-D scale</p>	<p>Ss difference among all subgroups (d's) LG 0.2, B 0.5, moHET 0.4</p>	<p>Larger effect among B and moHET</p>	<p>None reported</p>	
<p>Ziyadeh et al. (2007)^b</p>	<p>9731 adolescents from Wave I (1999)</p>	<p>Identification based on description of feelings, GB combined</p>	<p>Only past year binge drinking for this review. Depressive Symptoms subscale of the McKnight Risk Factor Survey</p>	<p>Binge drinking (all RRs.) Boys: moHET 1.5 ss, GB 1.3 nss, Q 0.7nss Girls: moHET 1.9 ss, LB 2.3 ss, Q 0.4 nss Depression (effect size n.a.) Males: ss for moHET and Q but not GB Females: ss for all subgroups</p>	<p>For girls, somewhat larger effect among LB than moHET, reversed effect for Q. For boys, no clear subgroup difference.</p>	<p>Larger effect among LB girls than BG boys, no clear difference for other subgroups</p>	

Other Adolescent Samples

Author (Year)	Sample, Sampling Method	Percentage of Sexual Minority Individuals, Dimensions of Sexual Orientation, Assessment Method	Outcome Variables	Main Results (SM vs. HET) All Effects ORs if not other specified	Subgroup Differences	Gender Differences	Note
Adolescent Health Surveys							
Konishi, Saewyc, Homma, & Poon (2013) ^b	21,708 adolescents Canada, BC British Columbia Adolescent Health Survey	3.4% identified as LGB, based on romantic attractions	Past month binge drinking (≥ 6 days), marijuana use (≥ 20 days), ≥ 3 post substance use problems in past year	All effects ss (boys, girls) Binge drinking 2.5, 1.7 Marijuana 1.4, 1.7 Consequence: 2.6, 2.4	None reported	Comparable	
Remafedi, French, Story, Resnick, & Blum (1998) ^b	36,254 adolescents, USA, mean age about 15 years, stratified cluster sampling, Minnesota Adolescent Health Survey 1998, each LGB participant was matched with a HET participant	1% of youth identified as LGB (0.7% as B, 0.3% as HO), Questionnaire.	Single item on SA (past year or previously, coded as lifetime attempts)	Boys: 7.1, ss Girls: 1.5, nss	None reported	Larger SO difference for men	Young sample, LGB women tend to come out later
Saewyc et al. (2007) ^b	Several Regions and years: Minnesota 1986 and Minnesota student survey 1992 + 1998, Seattle 1995+1999, British Columbia 1992, 1998, 2003, and National American Indian Adolescent Survey 1990	+++ Categorization based on sexual attraction (2-5% SM), or behavior in past year (7-9%)	SA in past year	All effects median of RR across studies. Girls: L 1.7, B 1.9, moHET 1.2. Boys: G 3.4, B 3.9, moHET 1.3.	Comparable effects LG and B (only marginally increases for B), smaller effects for moHET, especially for males.	Larger effects for GB males than LB women, comparable for moHET	Mixture of Behavior and Identity (see Kann et al. 2011 for related effects)
Boston Youth Survey	Stratified random sample Representative sample of high school students, USA.						
Almeida, Johnson, Corliss, Molnar, & Azrael (2009) ^b	1,032 youth 13-19 years-old	10% identified as being nonheterosexual or transgender	Modified Depression Scale (MDS), self-harm (suicidal intent not assessed) in past year.	Depression: men $d = 0.4$ ss, women $d = 0.3$ ss. Self-harm: men 20.3, women 2.2, all ss	None reported	Comparable for depression, for self-harm much larger effect for men	
Duncan & Hatzenbuehler (2014) ^b	1,198 youth, mean age 16.3 years-old. Survey 2008	9% identified as moHE, B, moHO, or HO, or Q. Survey in classroom	Past-month marijuana and other illicit drug use similar to YRBS	Marijuana use 2.2 ss, other illicit drug use 4.8 ss.	None reported	None reported	

Johnson et al. (2011) ^b	832 girls, survey, 2008, See Duncan & Hatzenbuehler (2014)	11.9% identified as moHE (3.4%), B (4.8%), moHO (<1%), HO (1.1%), or Q (1.6%). Survey in classroom.	Modified Depression Scale	Ss effect for depression d = 0.4	None reported	-	
Minnesota Student Survey	Survey of 9th and 12 th graders, USA	Survey in classroom					
M. E. Eisenberg & Resnick (2006) ^b	21,927 sexually active youth, survey 2004	10.3% were classified as SM because of having had "sexual intercourse" in the past year with at least one same-sex partner	SA in past year and lifetime	Ss effects for lifetime SA for boys 2.5 and girls 2.6.	None reported	Comparable	"intercourse" as definition perhaps not appropriate
Taliaferro & Muehlenkamp (2014)	70,722 adolescents, survey 2010	Past year same-sex sexual behavior (# partners "intercourse")	SA in past year	Comparison of those with SA and those without any suicidality (ideation or attempts): 1.4 nss, Comparing those with SA and those with suicide ideation only: OR 1.5, nss.	None reported	None reported.	"intercourse" as definition, and controlling for depression/hopelessness.
Oregon Healthy Teen Survey	2006 - 2008, random sample from 8 th and 11 th graders, USA						
Hatzenbuehler (2011) and Hatzenbuehler, et al. (2014) ^b	31,852 youth	4.4% identified as LGB (0.9% as G, 3.3% B), Q were excluded Questionnaire	SA in past year	Ss effects: LG 5.6, B 6.4 (Note: slightly deviating results in 2014 paper: LG: 5.9, B: 6.7)	Slightly larger SO difference for B compared to LG	None reported	
Hatzenbuehler, Pachankis, & Wolff (2012) ^b	See Hatzenbuehler, et al. (2014)	See Hatzenbuehler, et al. (2014)	# of 5 symptoms of past year alcohol abuse (present vs. absent), # days smoked in past month (yes/no), depressive period ≥2 weeks in past year.	Ss effect for smoking (d = 0.5) drinking (d = 0.1) depression 3.7	None reported	None reported	SO differences at very young age
Pittsburgh Girls study	Random household sample of 2451 girls in Pittsburgh, USA, first wave 2000 when girls were 5-8 years-old. SO information assessed in 2008.	Home-based, face-to-face, computer-assisted interviews (self-reports).					
Marshal, Sucato, et al. (2012)	527 girls, 17 years-old	6% identified as LB (25.8% of those as B) or as HET but with current HO romantic attraction.	Past year use of cigarette, alcohol, binge drinking, marijuana with the Nicotine, Alcohol, and Drug Use scale; conduct disorder and	All substance use variables: 2.4 – 2.9 Conduct disorder d = 0.5 Oppositional defiant disorder d = 0.4 Depression d = 0.7 Anxiety d = 0.6	None reported	-	

			<p>oppositional defiant disorder with the Adolescent Self-Report Inventory.</p> <p>Depression with the adolescent Symptom Self-Report Inventory; anxiety with the Screen for Child Anxiety Related Emotional Disorders (SCARED);</p> <p>borderline personality with the International Personality Disorder Examination (IPDE), SA (self harm) in past year.</p>	<p>Borderline personality $d = 0.4$</p> <p>SA 7.2</p> <p>All effects ss except for marijuana use.</p>			
<p>Marshal, Dermody, Shultz, et al. (2013)^b</p>	<p>2064 girls, 16-19 years-old from Wave 11.</p>	<p>8.3% identified as LB (81.5% of them as B).</p>	<p>See Marshal et al. (2012). Self-injury (SA?) in past year was assessed with the item from SCID-I</p>	<p>All effects ss: substance (alcohol 2.7, binge drinking 3.0, cigarette use 5.2, marijuana 3.6). Effect sizes n.a. for conduct disorder and oppositional defiant disorder. Depression, anxiety ($d = 0.6$). Borderline personality ($d = 0.4$). Self-injury (SA?): 6.8</p>	<p>None reported</p>	-	
<p>Birkett, Espelage, & Koenig (2009)</p>	<p>7,376 youth, USA, mostly 12-14 years-old, 80% of Dane County Middle School, 7-12 graders,</p>	<p>Question on being confused about being LGB. Those not confused because being sure to be straight (75.2%) or LGB were categorized HET or LGB (10.5%), those being confused at least sometimes were categorized as Q (4.6%).</p>	<p>11-item scale on alcohol/marijuana use (combined), item on suicide ideation/depression in past month combined.</p>	<p>Ss effects (all Cohen's d): alcohol/marijuana: LGB 0.2, Q 0.6 depression/suicidality: LGB 0.4, Q 0.7</p>	<p>Higher levels for Q compared to LGB students</p>	<p>None reported</p>	
<p>Bos, Sandfort, de Bruyn, & Hakvoort (2008)</p>	<p>866 high school students, (479 boys, 387 girls, (mean age 13.6 years old), Netherlands, 2004, representative sample</p>	<p>8.5% had some feelings of same-sex attraction (Likert scaled, 5 options from never to very often). Computer based questionnaire.</p>	<p>Depression with the General Health Questionnaire</p>	<p>Ss correlation of HO attraction with depression, $r = .26$</p>	<p>None reported</p>	<p>None reported</p>	
<p>Collier, Bos, & Sandfort (2013)</p>	<p>513 adolescents, 11-17 years-old; from 8 schools, Amsterdam area, Netherlands</p>	<p>11.1% of girls and 10.8% of boys reported some HO attractions (Likert scale: never to very often)</p>	<p>Psychological Distress (Short Version of the Brief Symptom Inventory)</p>	<p>Ss effect, $d = 0.5$, very strong evidence, $BF = 19.9$</p>	<p>None reported</p>		
<p>Denny et al. (2014)</p>	<p>Adolescents, 13-17 years old, New Zealand high school, 2007, random sampling within schools grades 9-13.</p>	<p>0.9% reported HO attraction, 3.5% B (Q and not attracted excluded). ACASI.</p>	<p>High depressive symptoms (cutoff not given) with Reynolds Adolescent Depression Scale (RAD-SF), SA in past year.</p>	<p>Effects all ss. Depression: HO 2.5, B 4.5 SA: HO 3.9, B 11.2</p>	<p>Clearly larger effect for B compared to HO</p>	<p>None reported</p>	
<p>Fleming,</p>	<p>9,570 Adolescents, mostly 13-</p>	<p>Percentage not given, not clear if</p>	<p>SA in past year</p>	<p>Ss effect 1.8,</p>	<p>None reported</p>	<p>None reported</p>	<p>Likely under-</p>

Merry, Robinson, Denny, & Watson (2007)	16 years, New Zealand Adolesc. Health Survey, Random sample	SM classification based on sexual attraction or self-identification, Multi-Media CASI.		in multivariate model (+) including depression, anxiety, alcohol, violence etc. as covariates.			estimations, bivariate association not given
Hagger-Johnson et al. (2013)	7,698 youth 18-19 years-old, UK, Longitudinal Study of Young People in England (LSYPE) Wave 6 (2009)	+++ 1.1% identified as LG, 1.9% as B, Home visit, web-questionnaire, and telephone interview	Smoking status (yes/no), past year drinking (> 2 times a week vs. less), risky drinking (getting drunk > 52 times a year)	Smoking, G, L, B men and B women: 1.9 - 2.4, all ss except B males. Drinking: G 1.9 ss, L 2.1 nss, B women 1.3, nss, B men 1.0, nss. Risky drinking: G men 2.1 ss, L 1.3 nss, B women 1.4 nss, B men 0.7 nss.	Larger SO difference for LG than compared to B. G men at risk for risky drinking but protective effect for B men.	Comparable	
Hatzenbuehler, Corbin, & Fromme (2008)	2,220 High School students, USA, 17-19 years-old, USA, Texas, assessed last year of high school and in the first two semesters in University, random sample.	5.0% were classified as LGBQ either because of identification as such in any of the three time points or because of having had same-sex sexual contacts in the past 3 months	Alcohol use composite measures out of # drinking days in average week, average # drinks on drinking day, # drinking until intoxication and # binge drinking.	All effects Cohen's d: Girls: # drinking days: high school 0.5 ss, 0.3 nss # drinking until intoxication: 0.2 ss, 0.2 nss # binge drinking: 0.2 ss, 0.2 nss Boys : # drinking days: high school 0.1 ss, 0.1 nss # drinking until intoxication: -0.1 ss, 0.1 ss # binge drinking: -0.1 nss, 0.0 nss	None reported	Changing over time, ss effect for girls in high school but not in university, reversed among boys.	
Hatzenbuehler, McLaughlin, & Nolen-Hoeksema (2008)	1,071 adolescents, 11-14 years-old, USA, from two middle schools in Connecticut, 2005, follow up after 7 months in 2006	2.3% ever having been same sex or both sex romantic-attracted, questionnaire	Children's depression inventory (CDI), multidimensional anxiety scale for children (MASC)	Ss effects (all Cohen's d) Depression: Wave 1: 0.5, Wave 2: 0.6 Anxiety: 0.4 and 0.6	None reported	None reported	
Hidaka et al. (2008)	2,095 youth, 14-24 years-old (mean 19.7 males, 18.9 females), Japan, Osaka, recruited with street intercept method	3.7 identified as LGB, Questionnaire	Lifetime SA	Males: 6.6 ss Females: 2.1 nss	None reported	None reported	
Lampinen, McGhee, & Martin (2006)	590 adolescents, CA, Victoria and Vancouver, randomly sampled from selected high schools, grades 9-12.	2.54% identified as G and B. One categorical item measuring the orientation	Self-reported depression ≥1 month, SA, Past year substance use.	Ss effects for depression 13.5 and SA 17.4. Ss effects for substance use (except alcohol 1.2 and GHB 2.3), marijuana 4.5, cigarettes 3.3, mushrooms 5.0, ecstasy 4.0, cocaine 5.4, ketamine 4.5, crystal meth 20.5, heroine and peyote n.a.	None reported		
Lucassen et al. (2014)	9,011 (2001), 8,002 (2007), 8,167 (2012) youth, New Zealand, High school	Around 6% in all waves (5.9% - 6.1%) were classified as SM, based on sexual attraction.	Depression with RADS (using clinical threshold ≥ 28), binge drinking in past 4 weeks,	Depression over the three waves (2001, 2007, 2012): 2.4, 3.6, 3.7, all ss. Drinking: close to 1.1 and nss in all three waves.	None reported	Larger effect among males for SA but not for	Increasing effects over time for SA

	students, Youth2000 surveys, representative sample	Computer assisted survey	SA in past year.	SA: males: 2.9, 7.7, 5.6; females: 1.9, 4.0, 3.7		depression and binge drinking.	
Madge et al. (2011)	30,477 adolescents from six European countries, majority 15-16 years-old; data from CASE study, random sample	None reported: 5.7% worries about sexual orientation (subcategory of live events)	Deliberate self harm in past year (single or multiple combined).	Ss effect 3.7	None reported	None reported	Problematic definition of SO
Martin-Storey & Crosnoe (2012)	957 adolescents, NICHD study of early child care and youth development (SECCYD), sampled via parents of newborns, followed up until age 15.	LGB No percentage reported. Single item: Preferred romantic partners plus one item on harassment due to sexual minority status	Depression (Short Form of the Child Depression inventory)	Ss effect for depression, $d = 0.4$	None reported	Gender considered as control variable	Mediation analysis
McMahon, Reulbach, Keeley, Perry, & Arensman (2012)	1,870 boys, 15-17 years-old, Ireland, Southern region of the Health Service Executive Child and Adolescent Self Harm in Europe (CASE) study	Worries about sexual orientation, % not given. Questionnaire in Classroom	Lifetime self harm	Ss effect among those with lifetime school bullying (5.6) and without (4.7).	-	-	Problematic definition of sexual orientation
O'Connor, Rasmussen, & Hawton (2009)	737 adolescents, 15-16 years-old at first assessment, 500 adolescents at follow up 6 months later, Scotland See O'Conner 2006	3.35% reported sexual orientation worries	Self harm in follow up period (past 6 months)	Ss effect for repeat DSH within follow up period (9.6) Nss for first time DSH in follow up period (OR = 2.2)	None reported	None reported	Problematic definition of sexual orientation
O'Connor, Rasmussen, Miles, & Hawton (2009)	2,008 adolescents, Glasgow, Scotland, random sample	No percentage or number given. Sexual orientation worries	Lifetime deliberate self-harm (DSH)	Girls: 2.6 ss, Boys 3.8 ss. CAVE: ORs adjusted for many risk factors, thus OR's are likely underestimations.	None reported	See main results	Problematic SO-definition, adjusted ORs
O'Connor, Rasmussen, & Hawton (2014)	3,596 adolescents, mostly 15-16 years-old (mean 15), Northern Ireland Lifestyle and Coping Survey, Random sample of high schools	4.2% of girls and 6.3% of boys had worries about their sexual orientation. Questionnaire in Classroom	Lifetime self harm	Ss among girls (4.0) and boys (9.9).	-	Clearly larger effect among male participants	Problematic definition of sexual orientation
Ortiz-Hernandez, Tello, & Valdes (2009)	12,796 adolescents, Mexico	11.6% reported some lifetime homosexual attraction (falling in love). 0.9% identified as LG, 0.7 as B. 1.4% reported lifetime same-sex sexual contacts.	Current cigarette use, smoking ≥ 6 cigarettes a day, Current alcohol use, intake of ≥ 6 drink per week	Attraction: Smoking, 1.6-2.8, ss except > 6 drinks Identity: smoking 2.3 ss, ≥ 6 cigarettes 5.5 ss, drinking 2.2, ≥ 6 drinks 1.0 nss. Behavior: smoking n.a., ≥ 6 cigarettes 3.5 ss, drinking n.a., ≥ 6 drinks 1.3 nss. For men, reversed effects for current alcohol use (0.6, ss) but not for women (3.3, ss).	Not reported	LG behaving women were more likely to consume alcohol No ss significant interactions with gender.	

<p>Pesola, Shelton, & van den Bree (2014)</p>	<p>3,710 adolescents, UK, 15-18 years-old, Avon Longitudinal Study of Parents and Children, 1991/1992 cohort of children (pregnant mothers in Avon).</p>	<p>12% identified as SM at age 15 (9.3% moHET, 1.6% B, 0.6% moHO, 0.3% HO).</p>	<p>Alcohol problems (AUDIT) at age 16 and 18, depression with the SMFQ at age 14 and 16.</p>	<p>Depression: age 14 and 16: d's = 0.5 Alcohol age 16: d = 0.3; age 18 d = 0.1</p>	<p>None reported</p>	<p>Comparable effects.</p>	
<p>Poteat, Aragon, Espelage, & Koenig (2009)</p>	<p>14,439 youth, USA, 14-19 years-old (mean 15.9), high schools of Midwestern county.</p>	<p>7.4% were LGB because they stated not being confused about being LGB, those who were confused to some degree were classified as Q (6.5%).</p>	<p>10-item scale on frequency of substance/alcohol use in past year. Feeling depressed/suicidal</p>	<p>All effects Cohen's d: Depression/suicidal (white, racial minority) Male LGB: 0.1, 0.2, Q: 0.5, 0.5 Female LGB: 0.3., 0.2, Q: 0.8, 0.4 Substance use (white, racial minority) male LGB: 0.2, 0.2, Q: 0.6, 0.8 female LGB: 0.4, 0.4, Q: 0.4, 0.4</p>	<p>Q larger effects than LGB.</p>	<p>Depression: comparable except LGB: female>male Substance abuse: LGB female>male, reversed for Q</p>	
<p>Orenstein (2001)</p>	<p>2,946 youth, USA, grade 9 to 12 from a High-School in Massachusetts, two cohorts (1992, 1994),</p>	<p>7.3% ever had HO romantic attractions, 2.2% identified as LGB, 2.4% had HO contacts in the past year, 5.4 worried about being LGB in the past year and 5.1% worried about being treated differently because of being LGB. For the analyses, responses to the 5 items were added up.</p>	<p>Single items on Alcohol and Drug use in the past month and lifetime. Tabled results for drug and alcohol use given for heterosexual students and 'SM' in three categories: Those having one, two, and three to five indication that one is SM.</p>	<p>Percentages (0, 1, 2, 3-5 indicators of SM) Lifetime: A. Alcohol 67% 60% 68% 66% nss B. Marijuana 25 25 33 48 C. Inhalants 5 8 16 26 D. Cocaine or Crack 2 4 10 27 E. LSD 5 8 11 31, F. Other Psychedelics 3 7 10 24 G. Amphetamines 3 5 7 26 H. Barbiturates 2 2 7 27, I. Tranquilizers 3 3 7 22 J. Heroin 1 1 4 21, K. Other Narcotics 2 3 8 27 L. Any Drug (C to K) 11 18 22 44 Effects (RR): Alcohol: near zero differences Marijuana: 0.0 (maybe SM) to 1.9 (more certainly SM) Past month: A. Alcohol 31% 30% 42% 47% B. 5+ Drinks in a Row 20 22 33 30 C. Marijuana 14 13 20 40, D. Inhalants 2 3 3 19 E. Cocaine or Crack 1 2 6 18 F. LSD 2 2 6 17, G. Other Psychedelics 1 2 4 18 H. Amphetamines 1 2 6 19, I. Barbiturates 1 2 3 19, J. Tranquilizers 1 2 3 14 K. Heroin 1 2 3 16, L. Other Narcotics 1 2 4 20 M. Any Drug (D to L) 4 7 12 32 Effects (RRs) Alcohol: Maybe SM 1.0, nss; more certainly SM: 1.5 Drugs (more certainly SM): One of the drugs:</p>	<p>Those who are certainly SM (having more indicators of SM) are at higher risk than those with only few indicators.</p>	<p>Basic pattern is similar for both genders, but SM females more likely use alcohol (53 vs. 37%) but no such difference in heavy drinking. G males more likely use hard drugs (41 vs. 24%).</p>	<p>Indicator of SM includes worrying about being LG and worrying about being treated differently of being LGB</p>

				19.0 Any one of the 9+ drugs: 2.6, Marijuana: Relative Risk: 0.0 (maybe SM) to 1.9 (more certainly SM)			
Renaud, Berlim, Begolli, McGirr, & Turecki (2010)	55 consecutive youth suicides, 11-18 years-old, Quebec, Canada, matched with 55 living controls	Among suicides, 7.3% were identified as SM, and 0% among living controls. Psychological autopsy method (indirect information from relatives/friends).	Suicides	SM are overrepresented among suicide victims, Bayesian OR = 7.3 and classical ss depends on statistical test used (see Plöderl et al., 2013).	Not reported	Effect among males, not among females	Incorrect interpretation of findings in original study.
T. G. Sandfort, Bos, Collier, & Metselaar (2010)	518 adolescent 12-15 years-old, from 72 secondary schools in Amsterdam.	11% reported some degree of sexual attraction (Likert scaled item). Computer Survey (and paper in few cases).	Mental Health assessed with the Brief Symptom Inventory	SS effect in multivariate analysis (with confounders).	Not reported	Not reported	Univariate results n.a.
Shaffer, Fisher, Hicks, Parides, & Gould (1995)	120 consecutive youth suicides, up to 19 years-old, from New York City area, USA, matched for analysis with 147 living controls.	Among suicides, 2.5% were identified as SM, and 0% among living controls. Psychological autopsy method (indirect information from relatives/friends).	Suicides	SM are overrepresented among suicide victims. Bayesian OR = 6.7 and classical ss depends on statistical test used (Plöderl et al. (2013))	Not reported	Effect among males, not among females	Incorrect interpretation of findings in original study.
Wang, et al. (2012)	4044 males, 16-20 years-old, second Swiss Multicenter Adolescent Survey on Health (SMASH, 2002), post-compulsory schooling, random cluster sampling from most cantons.	SM based on attraction. Results reported for "homosexual / bisexual" (1.6%) vs. "only heterosexual" (72.5%), 72.5% only heterosexual, 23.3% moHET, 0.8% B, 0.4% moHO, 0.4% only HO, and 2.6% nonresponse	SA lifetime and past year	SA: Lifetime: OR: 5.3, ss. Past Year: OR: 2.1, nss.	No results reported, but moHET reported as being comparable with HET.	-	
Zhao, Montoro, Igartua, & Thombs (2010)	1,856 14+ years-old from high school in Montreal, Canada,	3.1% identified as LGB, 3.2% Q, and 6.2 as HET but had some HO/B behavior or attraction (HET-HO)	Felt depression in past year (≥2 weeks that stopped daily activities), past month smoking, alcohol, marijuana, and lifetime hard drugs SA in past year	All effects RRs (LGB, Q, HET-HO) Depressed mood: 1.9 ss, 1.4 nss, 1.5 nss Smoking: 2.2 ss, 2.0 ss, 2.2 ss Alcohol: 1.4 ss, 0.9 nss, 1.2 nss Marijuana: 1.9 ss, 1.4 nss, 1.3 nss Hard drug use: 2.8 ss, 3.8 ss, 2.1 ss. SA: 2.2 ss, 1.6 nss, 1.0 nss	Comparable effects among the subgroups except for SA, where HET-HO and a zero effect	Not reported	

Notes.

Effects are sexual orientation differences, with heterosexuals as the reference group. Marked in green are those effects where there is a close to zero difference or where SM individuals have lower levels than heterosexuals.

Effect size estimation: If effect sizes were not given in the paper, they were calculated. For 2x2 tables, odds ratios were used to estimate the effect size. If frequencies were not given, they were calculated from the percentages with rounding (which could lead to zero table entries where no OR could be calculated). Many papers only report adjusted odds ratios, mostly using demographic control variables (age, gender, income, race, etc.) and we used those ORs. However, if the ORs were controlled for variables that may largely vary with the outcome variable, then we tried to calculate ORs manually. Problematic control variables include health-related variables such as smoking, depression, distress and also marriage status or partnership status (because it is known that SM individuals are less likely in such partnerships than heterosexuals and this is associated with health). If it was not possible to calculate unadjusted ORs, then we either contacted the author or we used the adjusted ORs but noted this in the table.

Risk ratios (RR) are calculated instead of ORs in some instances for convenience - for rare events ORs and RRs are usually comparable. However, we are planning to exchange the RRs with ORs for consistency.

For the comparisons of two means, we calculated Cohen's *d* or the Bayes Factor, using the results from *t*-Test according to <http://pcl.missouri.edu/bf-two-sample>

We used the point estimates of the effects, and, for mere convenience, the statistical significance. In cases of small sample sizes of SM and of smaller actual SO differences, there is a high risk for type I and type II errors. However, by nature of random sampling, such errors cancel out when forming an overall impression. Thus, because of the multitude of studies, the overall impression will be valid.

Effects size interpretation: Following conventions [Breaugh (2003); Ferguson (2009); Haddock, Rindskopf, & Shadish (1998)], we use this interpretation of effect sizes for ORs and RRs: "Zero/close to zero difference" 1.0- 1.2 or 1.0-0.8; small 1.3-2.0 or 0.7-0.5; medium 2.1-3.5 or 0.4-0.3; large > 3.5 or < 0.3. For Cohen's *d*, we use the usual conventions, but consider *d* = 0.1 as "zero/close to zero difference."

Shaded studies are higher quality studies, i.e., with random, representative national samples and standardized clinical interviews or with death by suicide from death registers.

Sample sizes are given for the analytic sample, if given in the paper.

Heavy drinking or binge drinking: if not specified otherwise, refers to having ≥ 5 alcoholic drinks in a row (in one sitting, on one occasion, in a short time).

Some studies are dated 2015 already, because they appeared in print in the meantime, but were electronically available before.

Abbreviations:

ACASI... Audio Computer Aided Self Interviewing
ACHA – NCHA ... American College Health Association-National College Health Assessment
AD...Alcohol dependency disorder
B...Bisexual
BRFSS...Behavioral Risk Factor Surveillance System
CASI...Computer aided self-interview
DD...Drug dependency disorder
DSA... Deliberate Self Harm
G...Gay
GAD...Generalized Anxiety Disorder
HET...Heterosexual
HR..Hazard Ratio
L...Lesbian
MD...Major Depression
moHET...mostly/predominantly heterosexual
moHO...mostly/predominantly homosexual
moG...mostly gay/predominantly gay
moL...mostly lesbian/predominantly lesbian
n.a. Not available
nss...Not statistically significant
OCD...Obsessive Compulsive Disorder
OR...Oddsratio
PD...Panic Disorder
PR...Prevalence Ratio
Q...Questioning/unsure of sexual identity
RR...Risk Ratio
SA...Suicide attempt. Some studies used "deliberate self-harm", especially European studies following the WHO definition, see De Leo, Burgis, Bertolote, Kerkhof, & Bille-Brahe (2006).
SM...Sexual Minority
SUD...Substance use disorder
ss..Statistically significant
SUD...Substance use disorder
YRBS...Youth Risk Behavior Surveys
+++...Studies reporting the results separate for gender and SM subgroups, i.e., at least separate for homosexual and bisexual individuals.

Footnotes:

a...Did not show up in systematic literature search but is relevant.
b...Of studies on the same sample, only this study entered into the estimation of overall effect sizes. This was to avoid double-counting of similar studies.
+ Series of Studies that used the pooled data from 2005 and 2007 and several districts see Mustanski, Van Wagenen, Birkett, Eyster, & Corliss (2014)

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