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Trends in scientific output on the lesbian, gay, bisexual, and transgender (LGBT) community research: A bibliometric analysis of the literature

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Abstract

Introduction: Lesbian, Gay, Bisexual, and Transgender (LGBT) represent a diverse group with special needs due to the unusual developmental experiences and social inequalities. This paper aims to explore and outline a future research direction in LGBT issues through tracing our historical understanding of this population from an aspect of scientific research.

Methods: LGBT-related peer-reviewed documents were retrieved from the PubMed database and the study period was set from the inception to 2021. Python-based methods were then performed to analyze the publication metadata and extract the most prominent research topics based on the abstract contents. Key points covered in the study were the development and trend of scientific effort and research themes in the LGBT topic, identified through the Bigram model and Latent Dirichlet Allocation algorithm.

Results: A total of 21,221 publication records were retrieved from the PubMed database. Literature analyses demonstrated that scientific research in LGBT had grown gradually but began to gain momentum since 2010, evidencing increased attention to this demographic in the last decade. Regarding the region-wise scientific effort in LGBT, the United States (U.S.) was the most productive country (with > 45% of the total publications), followed by the United Kingdom (UK), Canada, Australia, and the Netherlands. Furthermore, Peru and Thailand, besides the U.S., Australia, and Canada, were the top countries that had relatively allocated more of their scientific efforts to LGBT research based on the calculated activity indices. Topics attracting the most attention in LGBT research over time were "male sexuality and risk", followed by "sexual development", "health care service", "social experience", and "intervention strategies".

Discussion: This study provided a broad view of the developmental trends in LGBT research from invisibility to attention through a bibliometric lens and could serve as a data-based guideline for policymakers and social scientists.

Take-home message: As shown by this bibliometric analysis, scientific research in Lesbian, Gay, Bisexual, and Transgender (LBGT) had grown gradually but began to gain momentum since 2010, evidencing increased attention to this demographic in the last decade.

Key words: Activity index; bibliometric analysis; LGBT; research; topic modeling.

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INTRODUCTION

The lesbian, gay, bisexual, and transgender (LGBT) community has endured more negative experiences of social inequality compared to the general population [1]. This inequality is often reflected in occupational segregation, healthcare disparities, labor rights, and gender issues. Therefore, it is vital for social scientists and policymakers to learn more about the LGBT population to improve this social and health outcomes. The inequality can basically be attributed to societal rejection of LGBT individuals due to a poor understanding of this population, at least from a scientific perspective; therefore, attempts at solving this inequality require a better understanding of the LGBT community through a lens of science and research [2,3]. By characterizing the current status and historical trend of a scientific field, a bibliometric study can provide guidance to social scientists for policymaking [4,5] and researchers for proposing future research directions [6]. A number of bibliometric studies have been conducted for LGBT research from varying stances, covering the scientific output of gender issues in areas such as family business [7] and child adoption [8], psychological research methods [9], health [10–12] and healthcare-related disparities [10,12,13], and occupational segregation [14]. While previous bibliometric studies in LGBT research have focused primarily on topics such as major influential contributors like countries, journals, institutions, and authors from different perspectives [15], the bibliometric analysis to investigate trends of themes in LGBT research remains elusive until today. Therefore, the present study aims to fill this research gap in LGBT through bibliometric analysis using Python-based methods.

This study set out to (a) evaluate the global research effort in different LGBT topics over time as well as relative scientific contributions from different countries; (b) explore and trace the development of major themes in LGBT research over time. The outcomes of the study should serve as an up-to-date guidance for scholars and policymakers to use when looking ahead to next research or policy agendas regarding the LGBT community.

METHODS

Database and search strategy

Publication records of LGBT research were collected from the PubMed database and covered a period from the inception to November 21, 2021. The search method and criteria were inspired by previously published bibliometric studies [10,16]. The phrase used for the query was "(LGBT [TIAB] OR Lesbian [TIAB] OR Gay [TIAB] OR Bisexual [TIAB] OR Transgender [TIAB]) AND (has abstract [FILT])" This allowed for the extraction of citations containing the terms "lesbian, gay, bisexual, transgender, or LGBT" in either the title or the abstract. The retrieved dataset included a .csv (comma separated values) metadata file containing information such as the "title", "author", "affiliation", "publication year", "abstract", etc. The search strategy was validated by reviewing the top and bottom 200 abstract records to ensure their relevancy to the LGBT topic. *Data tools*

The data analyses were carried out with Python through the Jupyter Notebook environment [17,18]. The GraphPad prism (7.0) programs were used to generate figures for the data obtained from the analyses. Utilization of Python in this bibliometric review was based on consideration of several benefits [19]. First, Python has the ability to handle big metadata from an enormous number of publications. Also, it provides natural language processing (NLP) packages for content analysis through artificial intelligence technology that can transform free text into normalized data suitable for computer processing, a procedure that aids in bibliometric review of large amounts of quantitative data. The main Python packages used for the topic modeling in this study included Pandas, a powerful and flexible open source data analysis tool built on top of the Python programming language [20]; NumPy, a package performing mathematical operations on arrays [21]; Gensim, the richest Python's natural language processing package used for topic modeling [22]; Mallet, a Java-based package for statistical natural language processing [23]; and Spacy, a very useful package for splitting text into words [24].

Metadata analysis

The .csv metadata file retrieved from the PubMed was loaded into Pandas and preprocessed as a data frame. The data frame contained column headers for the metadata fields including "Title", "Author", "Publication Year", "Abstract" and "Affiliation". Publication records with empty or non-English abstracts were removed from the data frame. Duplicate records with the same authors, title, journal, and publication year were eliminated to keep only one in the data frame. In addition to manually reviewing the top and bottom records to validate the search strategy as mentioned above, the field "Abstract" in the data frame was queried with terms "lgbt", "lesbian", "gay", "bisexual" or "transgender" to further verify that each record in the dataset was related to LGBT research before the downstream topic modeling as describe later. The "describe" and "count" methods in Pandas were used for descriptive analysis of the 'Publication Year' field to calculate the number of research articles in LGBT over time. The "for" loop and "dictionary" function were used for iterating over the "Affiliation" field to extract publication information of authorship and countries. The relative research output in LGBT from a country or a certain period of time was evaluated through comparison with the data of publication information in all the research fields that were available in PubMed.

Topic modeling

The Latent Dirichlet Allocation (LDA) algorithm [25] and the Bigrams model from Gensim, along with Mallet's implementation in Python, were applied for NLP of the "Abstract" field in the dataset to stratify the most popular research topics (Figure 1) [26]. In brief, the abstract contents were first cleaned by removing unnecessary characters such as punctuations, numbers, and section keywords like "background", "method", "result", "conclusion", etc. The cleaned contents were converted to lowercase text and split into lists of words. After removing the English stop words, Bigram model was used to create corpus data of terms co-occurrence frequency for topic modeling. LDA models were trained on the corpus data by feeding with different numbers of topics, and the Spacy package helped normalize and optimize the modeling process to provide better topic segregation. The most favorite model was finally selected through the best topic coherence score corresponding to the modeling outcome which would cover all the major themes without having too many overlaps [22]. Moreover, distribution of an identified topic across the publications was

calculated by measuring the percentage of research articles that covered the topic, to judge how widely the topic was discussed as compared to others. The detailed Python codes used for the data analysis in this study would be available from the corresponding author on reasonable request.



Figure 1. The flow chart showing the data processing for LDA topic modeling.

RESULTS

Historical attention to LGBT research

The LGBT query in the PubMed database resulted in a total of 22,121 records by 11/21/2021. The earliest record could be traced back to year 1892, after which few studies were reported until 1975. The number of publications increased from 4 in 1974 to 18 in 1975, marking a milestone in the record history of LGBT research. Annual growth in research development in the LGBT topic experienced a few waves, with the first one from 1984-1992, the second one from 2005-2010, and the third one from 2010 to present. LGBT research was relatively slow from 1993 to 2004 (Figure 2). The growth of research output has gained momentum since 2010, evidencing a current period of increasing scientific attention being paid to LGBT research. A concept of activity index [27,28] was further adapted to view the historical trend of relative productivity in LGBT research. In this study, the activity index for a given year was calculated as "(LGBT publications in that year / All publications from all the fields in that year) / (All the LGBT publications / All publications in all the fields)". A lower activity index would indicate a relatively less productivity, with a value of 1 corresponding to an average research effort across all the fields. In this study, the activity in LGBT research in recent years compared to other fields (Figure 2). This finding coincides with current trends in the world of

advancing for greater social equality in well-developed regions, which contribute the most to scientific research in general.



Figure 2. The trend of scientific publications in LGBT research over time. The number of articles and the activity index in each year indicate the relative scientific attention to LGBT as compared with all the research fields. The yearly activity index in LGBT was calculated as (Publications of LGBT topic in a year / All the publications in that year from all the fields) / (All publications of LGBT topic / All the publications in all the fields). A lower activity index would indicate a relatively less productivity, with a value of 1 corresponding to an average research effort across all the fields.

Regional attention to LGBT research

The total number of publications from a country might serve as a simple indicator of how much research-related resources the country has put into a specific field. Over 85% of the publications came from the top 20 countries that have contributed the most to LGBT studies, with 9 from Europe (the UK, the Netherlands, Italy, Germany, Belgium, Spain, France, Sweden, and Switzerland), 4 from Asia (China, Israel, India, and Thailand), 2 from North America (the USA and Canada), 3 from South America (Brazil, Mexico, Peru), 1 from Australia (Australia), and 1 from Africa (South Africa), in no particular order. The USA was the most productive country (with > 45% of the total publications), followed by the UK, Canada, Australia, and the Netherlands (Figure 3). However, in another opinion, the number of studies a country conducts should be taken with a grain of salt. With differences in the population, economies, cultures, technologies, etc. between nations, it would make more sense to evaluate a weighted research effort for a given country. Therefore, a concept of activity index would be useful for indicating a country's relative activity in a certain field [27,28]. Herein, activity indices were calculated to compare relative effort in countries that have contributed the greatest number of publications in LGBT research (Figure 3). Peru, the USA, Thailand, Australia, and Canada were the top 5 countries that had relatively allocated more of their scientific effort to LGBT research.



Figure 3. The most productive countries and their activity indices in LGBT research. The number of articles contributed by countries and their activity indices indicate their relative effort in LGBT research. The activity index in LGBT research for a country was calculated as (a country's publications in LGBT research / the country's total publications in all fields) / (world output of publications in LGBT research / world total output of publications in all fields). A lower activity index would indicate a relatively less research effort, with an index value of 1 corresponding to the global average. *Theme trend in LGBT research (topic modeling)*

Topic modeling is an artificial intelligence technology used to identify the main topics of large volumes of text. In this study, LDA with bigrams models were built through Gensim package in Python to identify major topics of LGBT research over time. The dataset of LGBT literature was divided into 6 time periods (1892-1999, 2000-2009, 2010-2014, 2015-2017, 2018-2019, and 2020-2021), with each one containing around 3000-4000 publication records. Optimized LDA with bigrams models corresponding to high coherence scores were built to refine topics and their weighted distribution in each section. The analysis identified 8, 8, 8, 20, 20, and 20 topics from the above timelines, respectively (Supplementary Information Box 1), where each topic was inferred from a combination of 10 keywords and their weight of contribution. For instance (**Table 1**), the "Topic 1: Health - mental health and young adult suicide $^{0.0467"}$ in the period of "2020-2021" was represented as " $^{0.058}$ adult + $^{0.039}$ age + $^{0.036}$ report + $^{0.029}$ depression + $^{0.022}$ high + $^{0.022}$ symptom + $^{0.022}$ anxiety + $^{0.020}$ disorder + $^{0.018}$ suicide".

Topic	0: Sexual orientation and gender - adolescent sexual identity 0.0615
Keywords	^{0.145} sexual + ^{0.069} minority + ^{0.065} youth + ^{0.036} identity + ^{0.030} behavior + ^{0.025} adolescent +
	^{0.019} victimization + ^{0.018} school + ^{0.016} student + ^{0.015} examine
Topic	1: Health - mental health and young adult suicide 0.0467
Keywords	^{0.058} adult + ^{0.039} age + ^{0.036} report + ^{0.031} young + ^{0.029} depression + ^{0.022} high + ^{0.022} symptom +
	^{0.022} anxiety + ^{0.020} disorder + ^{0.018} suicide
Topic	2: Health - transgender treatment 0.0513
Keywords	$^{0.048}$ study + $^{0.047}$ treatment + $^{0.031}$ include + $^{0.023}$ transgender + $^{0.021}$ population +
	^{0.021} literature + ^{0.018} evidence + ^{0.018} therapy + ^{0.015} hormone + ^{0.013} article
Topic	
Keywords	
	· ·····
Topic	19: Sexual orientation and gender - male sexuality and risk 0.0584
Keywords	$^{0.038}$ test + $^{0.032}$ infection + $^{0.025}$ testing + $^{0.023}$ high + $^{0.023}$ msm + $^{0.022}$ population + $^{0.020}$ screen +
	^{0.019} positive + ^{0.019} man + ^{0.017} prevalence

|--|

Note: The table shows major research topics of LGBT and their distribution weight across publications in chronological section 2020-2021. Each topic was inferred by a combination of 10 keywords and their weights to the topic. A complete list of research topics identified in this study was summarized in the supplementary information of Box I.

It was interpreted as this topic was addressed by 4.67% (0.0467) of the publications in the period 2020-present and the publications in this topic mainly discussed the issue of mental health and young adult suicide. The top 10 keywords that contributed to this topic were "adult", "age", "report", "young", "depression", "high", "symptom", "anxiety", "disorder" and "suicide" and the weight or importance of the term "suicide" on the topic was 0.018. The topics garnering the most attention in LGBT research over time were "male sexuality and risk", followed by "sexual development", "health care service", "social experience", and "intervention strategies" (Figure 4). The topic of "sexual orientation" has understandably captured attention since 2000 and increased attention has also been paid to the theme "sexual orientation in youth" since 2010. Topics in relation to "transgender" began to get attention in the period 2010-2014. The topics "mental health", "transgender identity", "LGBT parenting", etc. began to receive attention since 2015 and "mental health in youth and minority" since 2020. On the other hand, some topics have faded from the research spotlight over time, such as "female sexuality and family relationship", which was not captured in this study as a major theme after 2015. Evaluating the shift in the major themes of LGBT studies could be used to predict and

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forecast future research attention. For example, topics that have taken up significant parts of LGBT research in recent years included "mental health in youth and minority", "intervention strategies", "queer", "risk factors", "medical student education", "body development', "LGBT parenting", etc. These topics would likely continue to be popular in the near future. This information could therefore be used to help researchers and policymakers focus their efforts on nascent topics, or to divert their attention to fields that are less well researched.





Figure 4. Weighted distribution of major topics allocated to LGBT research chronologically. To trace the research themes over time, the dataset of LGBT literatures was divided into 6 time periods (1892-1999, 2000-2009, 2010-2014, 2015-2017, 2018-2019, and 2020-present) with each one containing around 3000-4000 publication records. Optimized LDA with bigrams models corresponding to high coherence scores were built to refine topics and their weighted distribution in each section. Weighted distribution of a topic across publications in each time period shown in the heat chart provided information about how widely the topic had been researched during that period.

DISCUSSION

The present study has provided a comprehensive overview of LGBT research literature and traced scientific attention to LGBT in terms of the evolutionary trend of research effort and themes. To the author's knowledge, this should be the first bibliometric study conducted to chronologically follow the scientific attention and research effort surrounding the LGBT community. The curve of growth trajectory for LGBT literature showed that the scientific reactivity in LGBT research began to gain momentum in 2010 and began to become significantly more popular since 2014 based on the

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activity indices. Most of the dominant contributors to scientific effort in LGBT research came from well-developed countries including the USA, the UK, Canada, Australia, the Netherlands, etc. This is most likely because of the greater number of resources available to researchers in these countries, as well as the fact that many scientific journals are home to these countries. Thus, it is worth noting that, although Peru and Thailand did not contribute a high number of publications, they were the top two countries in terms of how much of their scientific effort, relative to their research capabilities, was dedicated to LGBT research. In agreement with the growth trajectory, there was a much greater array of distinct, major topics identified in publications after 2015 (with 8 topics for each time period pre-2015 versus 20 topics for each periodpost-2015). Together, these results highlight the rising scientific efforts to better understand the LGBT community in an effort to find more progressive solutions to the social inequality they face.

The identified topics in this study reflecting the direction of research effort could be grouped into six general thematic areas: "Sexuality", "Health", "Society", "Culture", "Rights" and "Issues". The first dominant thematic area was "Sexuality" which covered multiple topics identified in the study, including sexual orientation and development, identity, queer, transgender etc. The second prominent thematic area was "Health" which covered aspects of health care, mental health, healthcare service, intervention, medical education, etc. Three topics including AIDS infection disease, risk factors, and gay stigma were identified for the theme "Issues". The theme "Society" included two topics of social experience and social medium. It appears that more future research would be in the direct need for the themes "Culture" and "Rights", which only compromise a single topic of community and parenting, respectively. The major topics and themes from LGBT publications would represent past and current research effort that had been put into to understand and reduce the social inequality. For a representative example, when it was realized that medical providers and health professionals had been often lacking necessary education and trainings required to address sexuality issues [1,29], the topic "medical student education" began to capture scientific attention in the LGBT research since 2015 (Figure 4). Another example would be research topic on transgender. In agreement with the result in this study that the topic of transgender began to dominate since the 2010-2014 chronological section, the number of publications on the topic of transgender had doubled in 2011 after a noticeable growth in the decade of 2000s [10]. On the contrary, topics shown in general social media but irrelevant to the list of keywords distilled in this study (Supplementary Information Box 1) might suggest a lack of sufficient scientific attention to them in LGBT research. For instance, keywords relating to the LGBT rights and health topics like marriage, sport, adoption, religion, and reproduction were not captured from this study; it would recommend that further research attention might be needed on these keywords-relevant topics. Together, the outcomes of the trend in research attention conclude that a comprehensive review is necessary to provide evidence-based guidance for scholars and policymakers to adjust their responses to the next move in LGBT.

In many cases, comprehensive reviews however might confront difficulty when manually dealing with massive citation information, and current study thus consequently provided a basis for digesting big metadata from enormous publications through artificial intelligence technology. Moreover, introduction of artificial intelligence into literature analyses would be a trend in future particularly when publication information grows extremely huge. The data analysis procedure

presented here would provide a good framework for quick review of research effort and trend in other areas of interest as well.

Study limitations

To the best of the author's knowledge, the analysis in the present paper has covered the largest collection of LGBT related research records (n = 22,121) compared to the previous studies. At the same time, it should point out that the current study only queried research articles indexed in PubMed and it may have missed some publications in other databases such as Web of Science and Scopus due to the limit of subscription. However, given the substantial number of publication records included in this study, it should be a pretty confident claim that a large part of the LGBT literature has been covered. Another limitation in the present paper could be that the study only considered the records published in the English language, which might have introduced some bias in the analysis. Future analyses covering publications in other languages from all the major collection databases could be considered. Also, as the focus of the present study was on the trend of research outcome and themes, we did not evaluate the metadata such as journals and authors in LGBT research. Nevertheless, the bibliometric analysis in this paper allowed an overview of historical and current status in LGBT research and enabled scholars and policymakers to better understand the LGBT from a scientific viewpoint to prioritize the next agenda.

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Supplementary Information

Box I: Major research topics in LGBT. The box shows major research topics of LGBT and their distribution weight across publications in chronological sections. To trace the research themes over time, the dataset of LGBT literatures was divided into 6 sections (1892-1999, 2000-2009, 2010-2014, 2015-2017, 2018-2019, and 2020-present) with each one containing around 3,000-4,000 publication records. Optimized LDA with bigrams models corresponding to high coherence scores were built to refine topics and their weighted distribution in each section. Each topic was inferred by a combination of 10 keywords and their weights to the topic.

Section 1912-1999 Topic 0: Sexual orientation and gender - female sexuality and family relationship 0.1952 0.051lesbian + 0.044woman + 0.028heterosexual + 0.020sexual + 0.018orientation + 0.017homosexual + 0.015child + 0.015 relationship + 0.015 family + 0.014 identity Topic 1: Sexual orientation and gender - aids infection cases 0.1074 0.052aid + 0.032year + 0.026increase + 0.025man + 0.025case + 0.023time + 0.021rate + 0.020bisexual + 0.018age + 0.015infectionTopic 2: Health - gay health care and social support 0.1606 $^{0.080}$ gay + $^{0.032}$ health + $^{0.026}$ social + $^{0.021}$ community + $^{0.018}$ support + $^{0.018}$ care + $^{0.013}$ provide + $^{0.011}$ people + $^{0.010}$ program + 0.009base Topic 3: Sexual orientation and gender - male sexuality and risk 0.1582 $^{0.083}$ man + $^{0.059}$ risk + $^{0.058}$ sexual + $^{0.042}$ sex + $^{0.036}$ partner + $^{0.033}$ behavior + $^{0.030}$ report + $^{0.021}$ high + $^{0.017}$ bisexual + $^{0.017}$ 0.015 condom Topic 4: Sexual orientation and gender - sexuality and infection disease 0.1347 0.064 patient + 0.044 infection + 0.027 homosexual + 0.024 positive + 0.022 disease + 0.018 infect + 0.017 test + 0.015 bisexual + 0.013 antibody + 0.012 heterosexual Topic 5: Sexual orientation and gender - demographics and population study 0.0962 0.034man + 0.024subject + 0.022level + 0.021relate + 0.020group + 0.019significant + 0.017significantly + 0.016measure + ^{0.016}control + ^{0.016}associate Topic 6: Sexual orientation and gender - biology and sexual orientation 0.0815

^{0.020}population + ^{0.019}bisexual + ^{0.011}cell + ^{0.010}study + ^{0.008}show + ^{0.007}site + ^{0.007}specie + ^{0.007}suggest + ^{0.007}sequence + 0.007 single Topic 7: Sexual orientation and gender - sexual development 0.0661 0.062 male + 0.036 female + 0.032 group + 0.013 development + 0.009 adult + 0.008 response + 0.008 early + 0.007 give + 0.007 week + 0.007 describe Section 2000-2009 Topic 0: Sexual orientation and gender - male sexuality and risk 0.1499 0.082 sex + 0.049 risk + 0.041 sexual + 0.040 partner + 0.035 behavior + 0.026 report + 0.020 msm + 0.017 drug + 0.015 prevention + 0.013 associate Topic 1: Sexual orientation and gender - sexual identity of lesbian and gay 0.1832 0.019 community + 0.014 lesbian + 0.014 gay + 0.013 identity + 0.012 article + 0.009 paper + 0.009 sexuality + 0.009 process + 0.008 focus + 0.008 focus + 0.009 focus ++ ^{0.008}context Topic 2: Health - health care service 0.1278 $^{0.060}health + ^{0.024}care + ^{0.016}people + ^{0.016}include + ^{0.016}provide + ^{0.015}issue + ^{0.014}service + ^{0.012}transgender + ^{0.011}base + ^{0.014}service + ^{0.012}transgender + ^{0.011}base + ^{0.014}service + ^{0.014}service$ 0.010 mental Topic 3: Sexual orientation and gender - sexual development 0.0929 0.025 male + 0.016 female + 0.011 bisexual + 0.010 model + 0.007 development + 0.006 find + 0.006 stage + 0.006 form + 0.006 show + 0.005 potential Topic 4: Sexual orientation and gender - male sexuality and risk 0.1114 $^{0.141}$ man + $^{0.027}$ infection + $^{0.025}$ gay + $^{0.023}$ positive + $^{0.019}$ increase + $^{0.018}$ risk + $^{0.017}$ patient + $^{0.016}$ year + $^{0.015}$ test + $^{0.014}$ case Topic 5: Sexual orientation and gender - sexual orientation identity 0.1266

 $^{0.076}$ sexual + $^{0.068}$ woman + $^{0.054}$ bisexual + $^{0.045}$ heterosexual + $^{0.030}$ orientation + $^{0.022}$ lesbian + $^{0.022}$ male + $^{0.019}$ difference + $^{0.017}$ report + $^{0.017}$ homosexual

Topic 6: Sexual orientation and gender - demographics and population study 0.0724

 $^{0.033}\text{group} + ^{0.023}\text{high} + ^{0.021}\text{level} + ^{0.018}\text{factor} + ^{0.016}\text{individual} + ^{0.016}\text{treatment} + ^{0.016}\text{low} + ^{0.015}\text{effect} + ^{0.015}\text{associate} + ^{0.013}\text{studv}$

Topic 7: Society - social experience and family support 0.1359

 $\label{eq:social} {}^{0.081}gay + {}^{0.033}lesbian + {}^{0.031}relationship + {}^{0.029}social + {}^{0.027}experience + {}^{0.023}family + {}^{0.022}support + {}^{0.017}participant + {}^{0.016}child + {}^{0.013}life$

Section 2010-2014

Topic 0: Health - community intervention strategy 0.0801

 $^{0.027}$ intervention + $^{0.024}$ base + $^{0.021}$ participant + $^{0.021}$ population + $^{0.017}$ increase + $^{0.017}$ prevention + $^{0.016}$ group + $^{0.013}$ community + $^{0.012}$ strategy + $^{0.011}$ include

Topic 1: Sexual orientation and gender - sexual development 0.0741

 $^{0.034}$ male + $^{0.031}$ female + $^{0.011}$ bisexual + $^{0.010}$ development + $^{0.010}$ case + $^{0.008}$ early + $^{0.008}$ change + $^{0.006}$ show + $^{0.005}$ control + $^{0.005}$ flower

Topic 2: Sexual orientation and gender - male sexuality and risk 0.1932

 $^{0.071}$ sex + $^{0.066}$ man + $^{0.040}$ partner + $^{0.039}$ risk + $^{0.033}$ msm + $^{0.024}$ report + $^{0.019}$ high + $^{0.018}$ test + $^{0.018}$ infection + $^{0.017}$ behavior

Topic 3: Society - social experience 0.1669

 $^{0.032}$ social + $^{0.025}$ experience + $^{0.021}$ identity + $^{0.019}$ community + $^{0.014}$ article + $^{0.012}$ stigma + $^{0.012}$ explore + $^{0.011}$ work + $^{0.011}$ focus + $^{0.010}$ interview

<u>**Topic 4**</u>: Sexual orientation and gender - adolescent sexual orientation $^{0.1702}$ $^{0.060}$ sexual + $^{0.025}$ bisexual + $^{0.025}$ minority + $^{0.022}$ health + $^{0.019}$ risk + $^{0.019}$ high + $^{0.019}$ orientation + $^{0.018}$ youth + $^{0.016}$ age + $^{0.016}$ heterosexual

Topic 5: Sexual orientation and gender - female sexuality and family relationship 0.0765

 $^{0.071}$ woman + $^{0.047}$ lesbian + $^{0.037}$ relationship + $^{0.029}$ heterosexual + $^{0.019}$ family + $^{0.017}$ couple + $^{0.016}$ study + $^{0.016}$ difference + $^{0.015}$ child + $^{0.015}$ group

Topic 6: Health - transgender health care 0.1337

 $^{0.063}$ health + $^{0.036}$ transgender + $^{0.032}$ care + $^{0.021}$ people + $^{0.019}$ gender + $^{0.017}$ patient + $^{0.017}$ service + $^{0.017}$ treatment + $^{0.016}$ include + $^{0.013}$ individual

Topic 7: Sexual orientation and gender - male sexuality 0.1052

 $^{0.096}$ gay + $^{0.060}$ man + $^{0.060}$ sexual + $^{0.027}$ bisexual + $^{0.023}$ participant + $^{0.013}$ orientation + $^{0.012}$ negative + $^{0.012}$ measure + $^{0.011}$ finding + $^{0.011}$ gender

Section 2015-2017

Topic 0: Issues - gay stigma 0.047

 $^{0.048}$ gay + $^{0.041}$ stigma + $^{0.033}$ perceive + $^{0.027}$ relate + $^{0.024}$ level + $^{0.023}$ negative + $^{0.020}$ perception + $^{0.018}$ attitude + $^{0.016}$ disclosure + $^{0.015}$ examine

Topic 1: Sexual orientation and gender - demographics and population study 0.0386

 $^{0.053}$ study + $^{0.053}$ population + $^{0.043}$ include + $^{0.031}$ identify + $^{0.023}$ evidence + $^{0.022}$ literature + $^{0.021}$ people + $^{0.017}$ base + $^{0.015}$ key + $^{0.015}$ country

Topic 2: Sexual orientation and gender - demographics and population study 0.0195

 $^{0.113}$ participant + $^{0.057}$ report + $^{0.047}$ survey + $^{0.036}$ sample + $^{0.034}$ identify + $^{0.034}$ online + $^{0.026}$ recruit + $^{0.022}$ complete + $^{0.019}$ status + $^{0.019}$ positive

Topic 3: Sexual orientation and gender - male sexuality and HIV risk 0.0692

 $^{0.075}$ msm + $^{0.047}$ test + $^{0.044}$ man + $^{0.042}$ infection + $^{0.033}$ testing + $^{0.031}$ high + $^{0.027}$ risk + $^{0.018}$ hiv + $^{0.017}$ prevalence + $^{0.016}$ diagnosis

Topic 4: Health - intervention and prevention strategies 0.0581

 $^{0.058}$ intervention + $^{0.039}$ prep + $^{0.031}$ prevention + $^{0.016}$ strategy + $^{0.016}$ base + $^{0.016}$ reduce + $^{0.013}$ effective + $^{0.010}$ improve + $^{0.010}$ program + $^{0.010}$ target

Topic 5: Sexual orientation and gender - male sexuality and risk 0.0608

0.180 sex + 0.083 man + 0.079 partner + 0.050 sexual + 0.027 behavior + 0.027 risk + 0.024 relationship + 0.022 report + 0.020 condom + 0.017 male

Topic 6: Sexual orientation and gender - demographics and population study 0.0168

 $^{0.063}$ age + $^{0.057}$ adult + $^{0.041}$ rate + $^{0.038}$ group + $^{0.035}$ compare + $^{0.029}$ year + $^{0.028}$ time + $^{0.027}$ difference + $^{0.026}$ population + $^{0.020}$ prevalence

Topic 7: Health - health care service 0.0744

0.197health + 0.103care + 0.050service + 0.033provider + 0.029access + 0.024healthcare + 0.018patient + 0.018mental + 0.016experience + 0.015barrier

Topic 8: Sexual orientation and gender - queer 0.0964

 $^{0.016}$ context + $^{0.016}$ queer + $^{0.015}$ article + $^{0.015}$ sexuality + $^{0.015}$ social + $^{0.014}$ work + $^{0.013}$ community + $^{0.013}$ approach + $^{0.013}$ interview + $^{0.012}$ experience

Topic 9: Sexual orientation and gender - transgender identity 0.0428

 $^{0.181}$ transgender + $^{0.140}$ gender + $^{0.087}$ individual + $^{0.058}$ identity + $^{0.055}$ people + $^{0.028}$ experience + $^{0.022}$ person + ^{0.016}transition + ^{0.015}tran + ^{0.014}cisgender Topic 10: Health - mental health 0.0623 0.043 support + 0.039 mental + 0.033 health + 0.028 depression + 0.028 social + 0.027 stress + 0.025 discrimination + 0.024 model + 0.022 relationship + 0.022 associate Topic 11: Sexual orientation and gender - sexual development 0.0408 0.052 male + 0.040 female + 0.011 show + 0.007 development + 0.007 bisexual + 0.006 find + 0.006 potential + 0.006 specie + ^{0.006}structure + ^{0.006}pattern Topic 12: Health - risk factors 0.0554 0.073risk + 0.059high + 0.045associate + 0.036factor + 0.029report + 0.028substance + 0.025aor + 0.024drug + 0.021alcohol + 0.020odd Topic 13: Sexual orientation and gender - sexual orientation identity 0.0334 0.167 woman + 0.139 man + 0.116 gay + 0.109 bisexual + 0.069 lesbian + 0.053 heterosexual + 0.019 difference + 0.013 finding + ^{0.013}compare + ^{0.010}identify Topic 14: Health - surgery treatment 0.0534 0.054 patient + 0.036 treatment + 0.020 female + 0.017 male + 0.013 transgender + 0.012 level + 0.012 surgery + 0.011 therapy + 0.011 therapy + 0.012 level + 0.012 surgery + 0.011 therapy + 0.012 level + 0.012 surgery + 0.012 therapy + 0.012 surgery ^{0.011}case + ^{0.011}hormone Topic 15: Society - medical student education 0.0544 0.035 student + 0.029 knowledge + 0.024 education + 0.020 practice + 0.019 school + 0.018 program + 0.018 medical + 0.017 issue + 0.017lgbtq + 0.015provide Topic 16: Sexual orientation and gender - adolescent sexual orientation 0.0576 0.249 sexual + 0.071 orientation + 0.066 minority + 0.053 youth + 0.034 heterosexual + 0.027 bisexual + 0.027 bisexual + 0.025 adolescent + 0.025 identity + 0.025 experience + 0.022 behavior Topic 17: Society - parenting 0.0514 0.043 family + 0.029 couple + 0.028 child + 0.019 relationship + 0.019 parent + 0.014 support + 0.013 important + 0.013 concern + ^{0.011}client + ^{0.010}legal Topic 18: Culture - community 0.0361 0.056 young + 0.054 social + 0.038 community + 0.027 black + 0.023 group + 0.020 live + 0.018 network + 0.018 base + 0.013 medium + 0.013 examine Topic 19: Sexual orientation and gender - sexuality scales 0.0314 $^{0.042}$ measure + $^{0.023}$ scale + $^{0.023}$ life + $^{0.020}$ score + $^{0.019}$ analysis + $^{0.018}$ satisfaction + $^{0.016}$ assess + $^{0.015}$ show + $^{0.015}$ group + 0.014 quality Section 2018-2019 Topic 0: Sexual orientation and gender - queer 0.0897 0.020 queer + 0.013 sexuality + 0.012 article + 0.011 policy + 0.010 cultural + 0.008 practice + 0.008 work + 0.008 identity + 0.008 legal + 0.008 change Topic 1: Sexual orientation and gender - male sexuality and risk 0.0507 0.141sex + 0.055man + 0.054partner + 0.040risk + 0.036sexual + 0.030drug + 0.023msm + 0.020associate + 0.016behavior Topic 2: Sexual orientation and gender - demographics and population study 0.0359 0.025 effect + 0.025 individual + 0.024 model + 0.014 show + 0.014 find + 0.014 response + 0.013 measure + 0.013 perceive + 0.013 level + 0.012role

Topic 3: Health - mental health and anti-LGBT issues 0.0646

0.057 health + 0.051 mental + 0.041 experience + 0.026 depression + 0.023 stress + 0.023 violence + 0.021 physical + ^{0.020}discrimination + ^{0.020}life + ^{0.019}victimization Topic 4: Sexual orientation and gender - demographics and population study 0.0441 0.086 prep + 0.076 participant + 0.024 follow + 0.022 month + 0.017 increase + 0.013 cohort + 0.013 baseline + 0.012 pre exposure + ^{0.012}adherence + ^{0.012}time Topic 5: Sexual orientation and gender - sexual development 0.0287 ^{0.085}male + ^{0.068}female + ^{0.014}sex + ^{0.011}case + ^{0.010}development + ^{0.009}analysis + ^{0.007}size + ^{0.006}cluster + ^{0.006}obtain + 0.006 difference Topic 6: Health - transgender treatment 0.0835 0.059 patient + 0.024 treatment + 0.019 transgender + 0.017 surgery + 0.016 hormone + 0.012 testosterone + 0.012 procedure + ^{0.012}therapy + ^{0.012}outcome + ^{0.011}undergo Topic 7: Society - medical student education 0.0515 $^{0.035}$ student + $^{0.035}$ knowledge + $^{0.028}$ education + $^{0.023}$ transgender + $^{0.020}$ survey + $^{0.019}$ medical + $^{0.019}$ patient + ^{0.018}practice + ^{0.017}training + ^{0.017}lgbtq Topic 8: Health - community intervention 0.0369 0.066 intervention + 0.028 community + 0.022 base + 0.021 treatment + 0.021 population + 0.020 strategy + 0.020 prevention + ^{0.017}reduce + ^{0.015}program + ^{0.014}key Topic 9: Sexual orientation and gender - adolescent sexual orientation 0.0497 0.232 sexual + 0.087 minority + 0.064 youth + 0.059 orientation + 0.040 identity + 0.035 heterosexual + 0.029 bisexual + ^{0.025}behavior + ^{0.022}adolescent + ^{0.019}disparity Topic 10: Health - health care service 0.0784 0.160 health + 0.126 care + 0.049 service + 0.049 provider + 0.033 access + 0.031 healthcare + 0.026 barrier + 0.019 patient + 0.016 provide + 0.026 barrier + 0.019 patient + 0.016 provide + 0.026 barrier + 0.026 barrier+ 0.013 include Topic 11: Sexual orientation and gender - male sexuality and risk 0.0682 0.042test + 0.040msm + 0.039infection + 0.029testing + 0.029man + 0.022high + 0.021increase + 0.021positive + 0.017risk + 0.016 prevalence Topic 12: Sexual orientation and gender - transgender identity 0.0464 0.191 gender + 0.021 transgender + 0.021 transgender + 0.021 transition + ^{0.016}person + ^{0.015}treatment Topic 13: Sexual orientation and gender - demographics and population study 0.04 0.049 study + 0.029 population + 0.029 include + 0.025 literature + 0.021 scale + 0.019 article + 0.018 evidence + 0.017 identify + ^{0.017}measure + ^{0.014}quality Topic 14: Society - parenting 0.0489 0.048 family + 0.046 relationship + 0.040 child + 0.026 parent + 0.012 couple + 0.016 disclosure + 0.015 role + 0.015 desire + ^{0.014}important + ^{0.012}gay Topic 15: Society - social medium 0.0269 0.034 online + 0.029 information + 0.022 base + 0.022 identify + 0.021 social + 0.019 survey + 0.016 medium + 0.015 sample + ^{0.014}public + ^{0.012}recruit Topic 16: Health - risk factors 0.0384 $^{0.063}$ associate + $^{0.059}$ factor + $^{0.058}$ high + $^{0.057}$ risk + $^{0.037}$ low + $^{0.030}$ substance + $^{0.028}$ level + $^{0.020}$ sample + $^{0.019}$ association + 0.018 analysis Topic 17: Society - social experience 0.0497

 $^{0.064}$ experience + $^{0.026}$ social + $^{0.040}$ support + $^{0.032}$ stigma + $^{0.032}$ participant + $^{0.028}$ community + $^{0.026}$ interview + $^{0.019}$ qualitative + $^{0.018}$ explore + $^{0.017}$ live

Topic 18: Sexual orientation and gender - sexual orientation identity 0.0297

 $^{0.149}$ woman + $^{0.144}$ man + $^{0.120}$ gay + $^{0.093}$ bisexual + $^{0.038}$ heterosexual + $^{0.037}$ lesbian + $^{0.022}$ black + $^{0.020}$ group + $^{0.015}$ compare + $^{0.015}$ examine

Topic 19: Sexual orientation and gender - demographics and population study 0.0397

 $^{0.054}$ adult + $^{0.053}$ age + $^{0.053}$ compare + $^{0.035}$ group + $^{0.034}$ report + $^{0.030}$ high + $^{0.024}$ population + $^{0.021}$ prevalence + $^{0.020}$ young + $^{0.020}$ rate

Section 2020-2021

Topic 0: Sexual orientation and gender - adolescent sexual identity 0.0615

0.145 sexual + 0.069 minority + 0.065 youth + 0.036 identity + 0.030 behavior + 0.025 adolescent + 0.019 victimization + 0.018 school + 0.016 student + 0.015 examine

Topic 1: Health - mental health and young adult suicide 0.0467

 $^{0.058}adult + ^{0.039}age + ^{0.036}report + ^{0.031}young + ^{0.029}depression + ^{0.022}high + ^{0.022}symptom + ^{0.022}anxiety + ^{0.020}disorder + ^{0.018}suicide$

Topic 2: Health - transgender treatment 0.0513

 $^{0.048}$ study + $^{0.047}$ treatment + $^{0.031}$ include + $^{0.023}$ transgender + $^{0.021}$ population + $^{0.021}$ literature + $^{0.018}$ evidence + $^{0.018}$ therapy + $^{0.015}$ hormone + $^{0.013}$ article

Topic 3: Sexual orientation and gender - demographics and population study 0.0322

 $^{0.040}$ year + $^{0.029}$ increase + $^{0.027}$ time + $^{0.025}$ participant + $^{0.025}$ change + $^{0.025}$ follow + $^{0.025}$ month + $^{0.019}$ age + $^{0.018}$ cohort + $^{0.016}$ compare

Topic 4: Sexual orientation and gender - male sexuality and risk 0.0754

 $^{0.090}$ sex + $^{0.084}$ prep + $^{0.056}$ man + $^{0.044}$ partner + $^{0.033}$ risk + $^{0.030}$ msm + $^{0.026}$ report + $^{0.024}$ prevention + $^{0.015}$ participant + $^{0.014}$ increase

Topic 5: Society and rights - parenting ^{0.0871}

 $^{0.034}$ family + $^{0.025}$ child + $^{0.020}$ parent + $^{0.013}$ queer + $^{0.012}$ couple + $^{0.010}$ understand + $^{0.010}$ context + $^{0.009}$ article + $^{0.009}$ discuss + $^{0.008}$ explore

Topic 6: Society - medical student education 0.0556

 $^{0.031}$ knowledge + $^{0.029}$ student + $^{0.028}$ education + $^{0.024}$ medical + $^{0.020}$ survey + $^{0.018}$ training + $^{0.017}$ practice + $^{0.015}$ patient + $^{0.014}$ program + $^{0.013}$ regard

Topic 7: Health - transgender surgery 0.0529

 $^{0.107}$ patient + $^{0.027}$ surgery + $^{0.017}$ undergo + $^{0.016}$ transgender + $^{0.016}$ outcome + $^{0.014}$ procedure + $^{0.014}$ surgical + $^{0.014}$ affirm + $^{0.012}$ case + $^{0.012}$ perform

Topic 8: Health - mental health in minority 0.0431

 $^{0.182}$ health + $^{0.071}$ mental + $^{0.031}$ stress + $^{0.030}$ minority + $^{0.029}$ population + $^{0.023}$ outcome + $^{0.020}$ relate + $^{0.017}$ disparity + $^{0.016}$ individual + $^{0.016}$ physical

Topic 9: Health - online intervention strategies ^{0.0414}

 $^{0.056}$ intervention + $^{0.013}$ participant + $^{0.034}$ base + $^{0.018}$ information + $^{0.018}$ online + $^{0.012}$ include + $^{0.011}$ recruit + $^{0.011}$ young + $^{0.011}$ design + $^{0.011}$ conduct

Topic 10: Sexual orientation and gender - sexual orientation identity 0.0392

 $^{0.159}$ woman + $^{0.122}$ man + $^{0.110}$ sexual + $^{0.098}$ gay + $^{0.081}$ bisexual + $^{0.053}$ heterosexual + $^{0.037}$ orientation + $^{0.030}$ lesbian + $^{0.019}$ difference + $^{0.017}$ compare

Topic 11: Sexual orientation and gender - body development 0.0375 $^{0.009}$ development + $^{0.009}$ body + $^{0.008}$ pregnancy + $^{0.008}$ show + $^{0.008}$ analysis + $^{0.007}$ effect + $^{0.007}$ increase + $^{0.007}$ potential + ^{0.007}human + ^{0.007}level Topic 12: Sexual orientation and gender - transgender identity 0.0412 $^{0.203}$ gender + $^{0.182}$ transgender + $^{0.060}$ people + $^{0.046}$ identity + $^{0.043}$ cisgender + $^{0.041}$ individual + $^{0.031}$ tran + $^{0.024}$ affirm + ^{0.023}diverse + ^{0.020}birth Topic 13: Culture - lgbtq community and policy 0.0515 0.047 community + 0.028 lgbtg + 0.012 policy + 0.018 qualitative + 0.017 people + 0.016 interview + 0.015 focus + 0.014 approach + 0.014 theme + 0.013 identify Topic 14: Society - social experience 0.0488 ^{0.086}experience + ^{0.071}social + ^{0.046}support + ^{0.034}stigma + ^{0.034}discrimination + ^{0.033}violence + ^{0.023}participant + ^{0.018}relationship + ^{0.017}relate + ^{0.016}live Topic 15: Health - health care service 0.0619 0.131 care + 0.077 health + 0.057 service + 0.041 provider + 0.039 access + 0.032 health care + 0.031 barrier + 0.023 provide + ^{0.014}include + ^{0.014}primary Topic 16: Health - risk factors 0.0392 $^{0.067}$ risk + $^{0.058}$ high + $^{0.048}$ factor + $^{0.047}$ associate + $^{0.027}$ substance + $^{0.027}$ aor + $^{0.025}$ low + $^{0.024}$ report + $^{0.022}$ odd + 0.022 prevalence Topic 17: Sexual orientation and gender - sexuality scales 0.0474 0.032 measure + 0.025 score + 0.023 sample + 0.022 scale + 0.019 individual + 0.019 relationship + 0.018 analysis + 0.012 measure + 0.012 scale + 0.012 measure + 0.019 m 0.017 effect + 0.016 assess Topic 18: Sexual orientation and gender - sexual orientation identity 0.0279 0.067 male + 0.064 female + 0.062 sex + 0.046 group + 0.027 identify + 0.016 difference + 0.015 base + 0.013 finding + 0.012 find + 0.011 pattern Topic 19: Sexual orientation and gender - male sexuality and risk 0.0584

 $^{0.038}$ test + $^{0.022}$ infection + $^{0.025}$ testing + $^{0.023}$ high + $^{0.023}$ msm + $^{0.022}$ population + $^{0.020}$ screen + $^{0.019}$ positive + $^{0.019}$ man + $^{0.017}$ prevalence