

MENTAL HEALTH OF LGBT ELDERLY PEOPLE AND PSYCHOLOGICAL MANAGEMENT THROUGH SPORTS PRACTICE

SAUDE MENTAL DE IDOSOS LGBT E MANEJO PSICOLÓGICO ATRAVÉS DA PRÁTICA ESPORTIVA

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Abstract

Aging is a natural process that can develop healthily, maintaining functional capacity and mental health, or marked by senility, characterized by loss of autonomy. Among the protective factors that contribute to active aging, physical activity stands out, especially for vulnerable populations such as the LGBT+ community, often exposed to minority stress resulting from discrimination, prejudice, and social exclusion. This study aimed to analyze the relationship between LGBT+ older adults and physical activity, identifying benefits, barriers, and intervention possibilities. This is a narrative review conducted based on searches in the SciELO, BVS, CAPES, and PubMed databases, using the descriptors in Portuguese and English "LGBT idosos 'atividade física'" and "LGBT elderly 'physical activity'." After applying inclusion and exclusion criteria, 16 articles published since 2020 were analyzed. The results show that physical activity contributes to reducing depressive symptoms, increasing self-esteem, strengthening resilience, and improving the quality of life of LGBT+ older adults. However, significant barriers persist, such as homophobia, ageism, a lack of inclusive spaces, negative past experiences, and economic hardship. It was also observed that different subgroups within the community have specific vulnerabilities and motivations: lesbian and bisexual women, for example, face higher rates of obesity and health problems, while gay men often experience sports participation influenced by aesthetic and ageism concerns. Community strategies, such as collective dance interventions, have proven effective in promoting belonging and social support. It is concluded that physical activity is a powerful resource in promoting the physical and mental health of LGBT+ seniors, as long as it is accompanied by inclusive policies, professional support, and collective strategies that consider the community's internal diversity.

Keywords: Aging; Physical activity; LGBT+ population; Mental health; Inclusion.

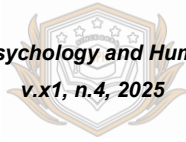
Resumo

O envelhecimento é um processo natural que pode se desenvolver de forma saudável, pela manutenção da capacidade funcional e da saúde mental, ou de maneira marcada pela senilidade, caracterizada pela perda de autonomia. Entre os fatores protetivos que contribuem para um envelhecimento ativo, a atividade física se destaca, sobretudo para populações vulneráveis como a comunidade LGBT+, frequentemente

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exposta ao estresse minoritário decorrente de discriminação, preconceito e exclusão social. Este estudo teve como objetivo analisar a relação entre idosos LGBTQ+ e a prática de atividade física, identificando benefícios, barreiras e possibilidades de intervenção. Trata-se de uma revisão narrativa realizada a partir de buscas nas bases SciELO, BVS, CAPES e PubMed, com os descritores em português e inglês “LGBT idosos 'atividade física'” e “LGBT elderly 'physical activity'”. Após aplicação de critérios de inclusão e exclusão, foram analisados 16 artigos publicados a partir de 2020. Os resultados evidenciam que a atividade física contribui para a redução de sintomas depressivos, aumento da autoestima, fortalecimento da resiliência e melhora da qualidade de vida de idosos LGBTQ+. Entretanto, persistem barreiras significativas, como homofobia, etarismo, falta de espaços inclusivos, más experiências passadas e dificuldades econômicas. Observou-se também que diferentes subgrupos da comunidade apresentam vulnerabilidades e motivações específicas: mulheres lésbicas e bissexuais, por exemplo, enfrentam maiores índices de obesidade e problemas de saúde, enquanto homens gays frequentemente vivenciam a prática esportiva mediada por questões estéticas e etarismo. Estratégias comunitárias, como intervenções coletivas em dança, mostraram-se eficazes para promover pertencimento e apoio social. Conclui-se que a atividade física é um recurso potente na promoção da saúde física e mental de idosos LGBTQ+, desde que acompanhada de políticas inclusivas, acolhimento profissional e estratégias coletivas que considerem a diversidade interna da comunidade.

Palavras-chave: Envelhecimento; Atividade física; População LGBTQ+; Saúde mental; Inclusão.

1 INTRODUCTION

Aging is a process that shows itself and will be present in every existence, regardless of any respect, but always presenting intrinsic challenges of time. Although there is a physical and mental decline in a natural and slow way, called by Mantovani (2007) of senescence, there is also an unhealthy aging, characterized by manifestation of the loss of functional capacity and pathologies that can disrupt the autonomy and performing activities of everyday life, called by the author of senility. It is through its own care and interventions to reduce the impacts of senility that a healthier aging can be developed, such as maintaining mental health through physical activity. In Brazil, the elderly are considered any and all individuals 60 years or older, according to the Ministry of Health and the Statute of the Elderly (Brazil, 2022) and, according to the Brazilian Institute of Geography and Statistics - IBGE, there has been a growth of the Brazilian elderly of 56% in the last 15 years.

When thinking of marginalized individuals, such as those belonging to the community of lesbians, gay, bisexual, transvestites and others (LGBT+), there are

specific stressors as well explained by the theory of minority stress, present in the work of Hajo, Capaldi and Liu (2024), who say that people from the LGBT+ suffer from stress specifically derived from prejudice and homophobia. Such stressors may be responsible for decline in the mental health of these individuals in many cases, unlike what happens when compared to people not belonging to the community, who deal with the natural stressors of life.

These realities and particularities make it important to think of specific interventions for this community, in order to provide improvements in mental health through physical activity in this critical process of life. This work, therefore, aims to understand what are the relationships between LGBT+ and physical activity, especially how it can be perceived by elderly people and the plurality of the community, as well as to understand what barriers that can disrupt the access and practice of physical activities by the LGBT+ population and, finally, seek the understanding of what are ways to go through such barriers, thinking of exits to reduce, or even eliminating such difficulties as a proposal to expand repertoire and promote future research.

2 PROCEDURES AND METHODS

To perform this narrative research work, searches were made in the Scientific Research Directories Scientific Library Online Scielo, BVSalud Regional Portal or BVS, Capes and Pubmed journal Portal, of the National Library of Medicine, researched the term in Portuguese 'LGBT elderly', however, in favor of encompassing the larger amount of results was also searched, also the term in English 'LGBT ELERLY" Physical Activity ", jointly so that the results are more adherent to the focus of research. The survey of these research terms returned 51 articles, 12 by BVS through the research of such terms in Portuguese and 22, also by BVS, through the research of English terms, followed by 2 by CAPES and 15 by Pubmed, both through research by English terms.

This extract was submitted to selection criteria, considering only works published from 2020, which reduces the sample to 30 works, then comprising 7 works by the BVS directory through the research of terms in Portuguese and 16, also, by BVS, but through research of English terms. Still applying such a selection criterion, CAPES work was selected by researching the terms in English and 6 other works by PubMed. As a second selection criterion, such research was worked only with

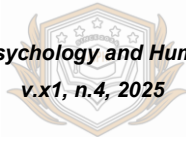
complete scientific articles, which diminished the sample to 27 works, 7 from the BVS directory for the Portuguese searches and 14 of the English searches, added to 1 work from the Capes Directory and another 5 of PubMed. Exclusion criteria were also applied, such as duplicate work and 2 other works were excluded, 1 from the BVS directory and 1 from the CAPES directory, due to the content not presenting significantly relevant data to the focus of this production, which was built from 16 integer scientific works.

From the search and selection of the works to be studied for the construction of this work, it began the readings and files in order to understand what the experiences of LGBT+ persons are, most itself of the elderly belonging to the community, when it comes to physical activity. The stage of the analysis of the works was done inductively, that is, through the model of bottom-up data capture, a model in which the search for information is made from reading, in order to point out the most relevant questions present in the material, based on the objectives of this work. It is noteworthy that the described methods meet ethical research procedures, using works previously published in scientific repositories.

3 LITERATURE REVIEW

3.1 The psychosocial relationship of LGBT+ people with physical activity

Participation in regular physical activity has the power to reduce risks of various diseases, including heart disease, infarction, diabetes, certain cancers and not only diseases of purely physical dimensions, but also mental, as depression according to present data from Curran and Prochnow work (2024). Pharr *et al.* (2020) corroborates with benefits of physical activity, when they postulate in their work that there is scientific proof that the individual's self-efficacy is able to improve mental health through exercise, which in turn can increase this individual's self-esteem because of their self-referenced notion of effectiveness through the mastery of skills to improve mental health results. When it comes specifically of the LGBT+ population, the authors also add that for individuals in this community, the skills and domain achieved through physical activity can lead to significantly improvement of mental health, when the results of their work indicated that it is through psychological mechanisms, including stress relief such as problem distraction or self-efficacy, that this population can use



these mechanisms to reduce psychological suffering due to minority stress lived exclusively by LGBT+ people.

The LGBT+ acronym itself is plural and, likewise, its functioning and needs are heterogeneous, a statement that can prove through the statistical data of various studies about how each community group has its relationship with the world, with physical activity, its benefits or lack of it. Kratzer *et al.* (2024) demonstrates in their work that both lesbian and bisexual cisgender women, and transgender men are more likely to excess body weight compared to cisgender heterosexual women. Still in this same study, the authors indicate that cisgender gay and bisexual men have the opposite, with data that they would have less prevalence of overweight. The health data of lesbian and bisexual women also presented higher indicators for chronic obstructive pulmonary disease and heart problems in the studies of Hutchcraft *et al.* (2021), including higher tobacco uses, risky use of alcohol and obesity, with lesbian women reporting worse health self -assessment when compared to heterosexual women. Adams *et al.* (2025) describe data from the New Zealand National Health System that point to greater use of alcohol, cigarette/smoking and LGBT+ substances, while also reporting that LGBT+ people are less likely to do physical activity and follow healthy diet and eating compared to cisgender heterosexual people.

When the studies mentioning the behavior of gay men are observed in the face of physical activity, there are considerable changes, as Lindstrom and Rosvall (2020) mention, which show in their studies that the low -time physical activity index did not differ significantly among gay participants and heterosexual men in the model of their studies. This differs from Kendrick *et al.* (2020), in which the authors demonstrate that gay men practice less physical activity than the average population but highlights an important psychological relationship with practice by pointing out that those who practice, make it for the desire to be physically attractive, being the motivating factor for it. This specific relationship of gay man has a better explanation for the presence of ageism, according to data from the work of Brennan *et al.* (2021), when the authors point out that the emphasis on being attractive to gay men is pervasive as culturally relevant factors, factors that are capable of shaping social experiences of gay men in the community. In a specific cut of the gay subdivision for men bears, the studies of Mijas *et al.* (2021) indicates positive psychosocial characteristics with significantly greater individual resilience and self-esteem in such individuals, as it is a particularly receptive culture to older and heavier men of sexual

minorities. This causes gay men bears to have better mental health naturally, without physical activity so present in their daily lives, but the authors describe this relationship as a risk to physical health due to increased risk of cardiovascular disease, with differences that can contribute to disproportionate morbidity and mortality, and it is important to encourage a healthier lifestyle rather than focus on weight loss.

By approaching the impact of Covid-19 pandemic, the studies of Braga *et al.* (2022) also raise information on the deterioration of lifestyles of some LGBT+ groups, such as worsening physical activity among those who joined the mask because of the difficulty of breathing while doing physical activity, the increase in smoking between individuals who reported chronic health conditions and, the most impactful, results found that there was a reduction in regular physical activity by almost 50% of the LGBT+ population, compared to only 18% of the Brazilian population in general. The authors then point out a very important conclusion that these results suggest that the prolongation of the pandemic, along with social distance measures can impact the health deterioration rate among the LGBT+ population. Finally, there is another factor that has also impacted the health of LGBT+ adults that lasts after pandemic, which is the active use of social networks, being associated by Vogel *et al.* (2024) depressive symptoms, smoking, insufficient sleep and physical inactivity, regardless of social condition, with the objective of maintaining their social connections.

3.2 Barriers and difficulties

Having understood the relationship of the LGBT+ community with physical activity and its psychosocial aspects, it is essential to discuss the barriers and difficulties that individuals in the community face in engaging in physical activity and improving their mental and physical health. These barriers stem from systemic inequalities such as ageism and homophobia, as mentioned by Curran and Prochnow (2024), even though physical activity itself can help manage stress, such as that experienced by minorities.

The authors also trace parallels between LGBT+ and people with disabilities (PCDs), saying that such groups experience higher rates of both victimization and social scrutiny, which influence their skills of engaging in physical activities with barriers composed of psychophysiological factors, biological processes and systemic oppression, which present themselves as unique challenges for distributing the

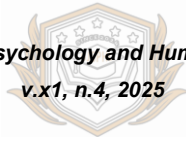
benefits of activity equally distributing the benefits of activity. physical. The absence of physical activity association in the research model of these authors may suggest that elderly LGBT and factors such as the status of disability have greater relationships in the perceived view of accessibility of the environment than of physical activity levels itself.

The work of Kendrick *et al.* (2020) indicates that homosexual adults who have experienced discrimination and prejudice based on their sexuality are less likely to engage in physical activities due to the presence of institutionalized homophobia, including microaggressions such as heteronormative assumptions in sports and targeted homophobic verbal discourse, and overt aggression such as physical abuse, as the main barriers.

Gay elderly men were reported having strong frictions with past experiences of exercise programs, which made them retract their engagement in physical activity, since today's elderly people lived at a time when homosexuality was less accepted than today. Another point that both Kendrick *et al.* (2020), how much Lindstrom and Rosvall (2020) point out is that LGBT+ individuals have social barriers and economic adversities as implications for health behaviors and engagement in physical activity, and should be precisely increased physical activity, the objective of health promotion measures for such a population.

UBED-COLOMER *et al.* (2020) contribute to studies indicating different types of barriers that lead LGBT+ individuals to have less adherence to physical activity, such as relational-environmental barriers, where interaction with other people will probably cause them feelings of discomfort, exclusion or rejection. Organizational-environmental barriers are those that address institutional and organizational aspects of sports academies, clubs and organizations, which may not allow family affiliations for lesbian partners or are at risk of attributing incorrect pronoun to a transgender person. Intrapersonal barriers are that the fear of rejection or harassment is constantly presenting itself. Finally, again the economic situation is mentioned, because several studies point out health disparities resulting from inequality of opportunities for LGBT+ people throughout their lives.

For LGBT+ lives, physical activity contexts can be in itself, a source of stress rather than escape, contexts resulting from barrier constituents such as discrimination, stereotypes and homophobias, fear of bullying, violence, rejection, harassment or misunderstanding, according to studies by Pharr *et al.* (2020). The authors also score



details that increase these barriers in bodybuilding academies, such as lack of same - sex couples, neutral associations or changing rooms, gender binary activities and lack of sensitivity among local professionals.

3.3 Motivators and possibilities

Although there are barriers to engagement in physical activity by LGBT+ people, studies that have achieved active individuals show that such engagement is positively associated with connections with the community itself, as well as benefits such as better perceptions of self -image of the body and age, and important psychological interventions to promote connection between LGBT+ individuals are important. These are data from the studies of Brennan-ET *et al.* (2021) and the authors also add that interventions and services like these have the potential to generate support and psychological well-being, as well as reduce social loneliness and isolation as well as health in the aging process.

The benefits of physical activity, ideal sleep and sufficient food intake were associated with the best mental health of elderly LGBT+ through the studies of Nelson *et al.* (2024), while such studies even suggested association with greater resilience of individuals who practice such attitudes and make them part of their lifestyle. Such data is corroborated by studies of UBED-COLOMER *et al.* (2020), where they postulate that participants of the above research participating in physical and sports activities report lower punctuations in all barriers worked in their article. Also contributing to similar data were the authors Fredriksen-Goldsen *et al.* (2022), because its work also presents that interventions that consider sufficient physical activity and food intake are very important behavioral health factors, whose research results suggest that physical activity when regularly practiced is not only associated with a better quality of life related to both psychological and physical health, but also slows the decline of health over time, leading to a greater difference in psychological and physical life in later years.

One study that stood out as a possible approach to interventions for LGBT+ older adults was the work of Beselt *et al.* (2023). In this study, the authors explored interventions using square dancing, a collective dance where one person gives instructions through song, and the others dance accordingly. These interventions yielded very successful results in terms of positive social support interactions for

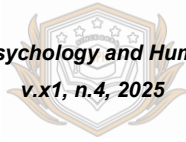
individuals experiencing inclusion and belonging, even those whose identities might otherwise lead to marginalization. Participation in the intervention provided opportunities to actively include others and, together, combat exclusion and feelings of inadequacy.

The study showed that in this intervention emerged feelings of acceptance that affirmed the sense of identity and authenticity of the participants, being reported by the study that the actions of other participants promoted belonging even in newly arrived people there. Such benefits came through physical touch, according to the authors, being interpreted in different ways by each one, but which was significant for individuals to feel welcomed in the group, regardless of their skills or limitations.

4 FINAL CONSIDERATIONS

The promotion of mental health is allied with physical activity, which, through the scientific work studied and structured here, shows the potential to reduce stress, improve quality of life and slow down the decline of quality -related quality of life over time, resulting in greater advantage in quality of life. However, when it comes to interaction between LGBT+ people and studies forms as such individuals experience physical activity, it is possible to understand as environments and others outside the community can negatively intervene in the mental health of LGBT+ individuals. One of the important aspects of the work was that physical activity can promote resilience in the face of minority stress, with relevant mental benefits, including reduction of social isolation and strengthening self -esteem.

Relations between LGBT+ and physical activity individuals are as heterogeneous as the aspects that differ each individual belonging to the community, demonstrating that the barriers that these relationships show us are essential aspects to think about mental and physical health promotion interventions for this community. Bisexual women and transgender men showed greater vulnerabilities through greater body weight, negative body self -image and tobacco and alcohol use. By studies, such individuals have demonstrated greater needs regarding physical structure, such as inclusive toilets to transgender people, as well as needs for the best welcome from professionals who serve them for more assertive treatment with such people. The lack of preparation to welcome LGTB+ people was mentioned in various works as an important barrier to be overcome so that this population can have more access to



sports, as well as experience better quality of life. Barriers such as discrimination, homophobia, ageism and bad experiences of the past, can also be worked through better receptions of sports professionals, in order to improve quality of care specific to LGBT+ people.

On the other hand, gay men experience physical activity in a positive way, promoting belonging and connection, as benefits already actually exposed of physical activity. What could be observed, on the other hand, was that much of this relationship may have been beneficial in using physical activity as a way to combat ageism, not in order to accept the aging process and search for senescence, but to mask the aspects of aging by aesthetics through sole and exclusively of the bodybuilding. This can have a contrary effect in many cases, to promote social isolation and self -image misrepresentation. For gay men bears, they have a greater connection with each other, even more open to older people, but less opening for physical activity such as other gay groups and aggravating physical health is also present. For this portion of the gay community, interventions aimed at greater health care may be of greater incentive than weight loss or aesthetic issue.

As motivating factors and intervention possibilities, studies bring the benefits of promoting community connection for engagement in physical activity, to extract the most of its benefits. The greatest example of this was the gang dance and its benefits that showed significant results in belonging, identity and well-being. This shows that it is possible and very positive to think collective interventions for LGBT+, if it is intended to build a stronger and more resilient community, with more mental health through the practice of physical activity.

This study was a narrative review through bibliographic review, which systematizes recent data, offering an up -to -date view on the interface between physical and mental health, aging, population and LGBT+ community and physical activity. It also indicates existing gaps as a limitation, such as the need for longitudinal studies, greater sample diversity and specific evidence -based practices for this population.

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