LGBTQ Cultural Competency 101: Tools to Improve Patient Communication, Care and Outcomes

2019 Oregon Rural Health Conference

October 3, 2019

Liz James Co-Chair, 2019 SO LGBTQ+ Health & Wellness Summit
Former CEO, Lesbian Health Initiative of Houston, Inc.
I have no conflicts of interest or relationships to disclose.
Agenda

- Relevant background
- Defining LGBTQ identities and issues
- LGBTQ healthcare barriers, disparities, health issues and increased risks
- Creating an LGBTQ welcoming environment
- LGBTQ healthcare provider resources
Objectives for Today’s Session

- Define need for LGBTQ+ cultural competency in healthcare
- Identify current terminology used to describe (LGBTQ+) individuals.
- Describe the challenges faced by LGBTQ+ patients that can result in increases in health issues.
- Discuss how to create an LGBTQ+ welcoming environment for patients.
- Identify healthcare related LGBTQ+ resources.
Background

We are the Community, We are the Change.™
## Mission

Dedicated to eliminating barriers to healthcare and promoting health and wellness for LGBT-identified women and transgender men through Education, Access and Advocacy programs.

## Vision

That by working together, as a community, we will illuminate and eliminate all barriers to ensure all have clear and equal access to the health and wellness services that they need and deserve, regardless of sexual orientation, gender identification or gender expression.
Provide safe, welcoming and LGBT culturally sensitive and competent healthcare access for uninsured LGBT women and transgender men

- Held at/with FQHC (PCP, DDS, BH)
- Heart & Vascular Risk Assessments
- Pap/well person exams
- Blood tests
- Mammograms
- Body & Skin Scans
- Heart & Vascular Risk Assessments
- Behavioral Health Assistance & Resources
- OB-GYN consultations
- ACA Marketplace and CHIP Info/Enrollment
- Health & Wellness Resources
There are so many wonderful resources that I had no idea existed.

Having providers that are sensitive to my sexual orientation is very important to me.

It is a safe and comfortable environment.

I have not had insurance in over 2 years and have not kept up with health issues.

Many years ago I had an unpleasant pap smear from two different male physicians. Both were homophobic and not sensitive regarding exam.

Laid off from job - no longer have insurance.
LHI’s Education & Access Programs - adaptable, evidence-based, collaborative, replicable and transformative service delivery and system change vehicle recognized as an HHS AHRQ Innovation March 2015

Collaborative Health Education and Access Events Offer No-Cost Screenings and Navigation Services To Connect Lesbian, Gay, Bisexual, and Transgender Individuals With Medical Homes Offering Culturally Competent Care

The impetus for the current, more comprehensive program came in 2011, with the passage of the Affordable Care Act and the incorporation of goals related to LGBT health issues in the Healthy People 2020 objectives. In this environment, LHI leaders saw an opportunity to extend the organization’s reach and effectiveness by connecting people to health insurance and a culturally competent source of ongoing care. To that end, LHI hired its first employee and began forming partnerships with national and local organizations, with the goal of reducing health disparities and enhancing access to care for the LGBT community.
Economic Impact of LGBT

National data suggests that health disparities faced by the LGBT community, coupled with poverty, result in greater economic impact.

Some of the risk factors identified in the LGBT population include:
- increased rate of negative health behaviors such as smoking
- increased in emergency care utilization as a result of a lack of health insurance
- higher rates of expensive chronic health conditions due to low rates of preventive care and delay in seeking care

These factors also contribute to absenteeism or poor work performance.

Examples of LGBT Health Disparities

Increased:
- Tobacco use
- Alcohol and other substance use
- Mental health concerns, including suicide attempts
- Cancer
- Experience of violence and other abuse
- HIV/AIDS infection
- Care from emergency departments

Decreased:
- Insurance coverage
- Medical care
- Preventive screening

Beginning in 2016, the Texas Behavioral Risk Factor Surveillance System (BRFSS) will include questions of sexual identity and gender identity which will provide local data on personal health behaviors that affect premature morbidity and mortality.

Healthy People 2020

In 2012, two objectives were added with the goal of gathering data and improving the health, safety, and well-being of lesbian, gay, bisexual, and transgender (LGBT) individuals.

OBJECTIVE LGBT-1.1 Increase the number of population-based data systems used to monitor Healthy People 2020 objectives that include in their core a standardized set of questions that identify lesbian, gay, and bisexual populations.

OBJECTIVE LGBT-1.2 Increase the number of population-based data systems used to monitor Healthy People 2020 objectives that include in their core a standardized set of questions that identify transgender populations.

Note: As of the time of this publication, baseline and target data were not available.

Public Health Actions

- Gather sexual orientation and gender identity data to monitor LGBT health status.
- Educate the public about LGBT populations.
- Develop policies and plans that support efforts to improve LGBT health, decrease disparities, and increase cultural competency among those working with LGBT persons.

For More Information:

CDC, LGBT Health: [http://www.cdc.gov/lgbt/](http://www.cdc.gov/lgbt/)

The Williams Institute: [http://williamsinstitute.law.ucla.edu/](http://williamsinstitute.law.ucla.edu/)
How many LGBTQ+ patients are there?

1. 10,388,000* adults in U.S. identify as gay, lesbian, or bisexual
2. 1,397,500* adults in U.S. identify as transgender

Over 11 million* U.S. adults identify as LGBT people
(4.5% of adult U.S. population)

*Estimated Williams Institute 2018

How many LGBTQ+ patients are there?

**Millennials (18-34)**

- More than 2X as likely to identify as LGBTQ as Boomers (52-71)
- 56% more likely to identify as LGBTQ a Gen Xers (35-51)
- 12% identify as transgender or gender nonconforming

GLAAD 2017 Accelerating Acceptance Survey

How many LGBTQ+ patients are there?

How Many LGBT Older Adults?

- **Today:** 1.4–3.8 million in U.S. (Harley & Tester, 2016)
- **2030:** 3.8-7.2 million in U.S. (Harley & Tester, 2016)

**Three Generations**

- **Invisible** – came of age during Great Depression - WWII
- **Silenced** – greatest generation – same sex behavior criminalized/APA disorder
- **Pride** – baby boomers & beyond - Stonewall – removal of APA disorder and on
This map shows the estimated percentage of each state's adult population that identifies as LGBT, based on a 2018 analysis by The Williams Institute.

http://www.lgbtmap.org/equality-maps/lgbt_populations
How many LGBTQ+ patients are there?

- 169,000* adults in Oregon identify as gay, lesbian, or bisexual
- 19,750* adults in Oregon identify as transgender

185,760** Oregon adults identify as LGBT people
(5.6% of adult Oregon population - 2nd behind DC 9.8%)

* Estimate - Williams Institute 2018 analysis
**Williams Institute 2018 analysis & 2018 Census Bureau Estimates

How many LGBTQ+ patients are there?

**OREGON 2017 Healthy Teen Survey**

- **17%** 11th Graders identified as LGBTQ
  - 7.5% identified as Bisexual
- **5%** Identified as questioning
- **6%** Reported as non-binary or multiple gender

This map shows the percent of LGBT people raising children in each state, based on data collected by Gallup and analyzed by the The Williams Institute.
How many LGBTQ+ patients are there?

WHERE WE CALL HOME: LGBTQ+ PEOPLE IN RURAL AMERICA

RURAL AMERICA IS HOME TO MANY LGBT PEOPLE

LGBT people are a fundamental part of the fabric of rural communities, working as teachers, ministers, small business owners, and more. For many of these millions of LGBT people, living in a rural community may be just as or more important to their identity as is being LGBT. Rural America is where many LGBT people choose to call home.

http://www.lgbtmap.org/rural-lgbt
LGBTQ is NOT One Word & NOT a Community

- Reside in 99% of all counties in U.S. (2010 Census)
- All races/ethnicities, faiths, cultures, and education and income levels
- Single, divorced, partnered/married, parent/family
- Uninsured, under-insured and insured
Why do we need to know who our LGBTQ patients are?

- Provides you increased knowledge about patients’
  - Health risks
  - Support system

- Those who come out are more likely to access healthcare, adhere to treatment, and develop trust in the facility
  - Women who were open with their primary care doctors and gynecologists about their sexual orientation were nearly 2 1/2 to three times more likely to have routine screening than those who did not disclose it*

Why do we need to know who our LGBTQ patients are?

- **31% transgender individuals** that had healthcare reported that none of their health care providers knew they were transgender. (2015 US Transgender Survey)

- **40% of gay men** (NYC, 2008) have not told their doctor they are gay

- **70% lesbians** do disclose their sexual orientation to their provider, although only 29% were asked by their provider (Stein, 2001)
Why do we need to know who our LGBTQ patients are?

Policies

- Affordable Care Act
- Oregon OHP (Medicaid Expansion)
- Oregon RHEA
- Oregon DFR2016-1
The ACA, the key to LGBT Health Equity

“The Affordable Care Act may represent the strongest foundation we have ever created to begin closing LGBT health disparities.”

Ex-HHS Secretary, Kathleen Sebelius, quote from early 2012 speech

ACA implementation has proven this true
Why do we need to know who our LGBTQ patients are?

ACA Health Reform Highlights for LGBT

- **Nondiscrimination:** The ACA prohibits discrimination on the basis of sexual orientation and gender identity by Marketplaces, consumer assisters, and qualified health plans.

- **Financial assistance:** advanced premium tax credits Medicaid expansion (OHP)

- **Fair access to coverage:** Plans may not refuse coverage or charge higher premiums

- **Essential Health Benefits and no co-pay preventative care:** ACA requires inclusion in all plans.

- **Family coverage:** all Marketplace plans that offer spousal or family coverage must offer it to same-sex spouses.
Why do we need to know who our LGBTQ patients are?

- **Medicare** now applies equally to all married couples, regardless of where the couple resides.

- **Joint Commission Standards for Patient Centered Communications** - Visitation and Non-Discrimination in Care (RI.01.01.01 EP 28 & EP 29)
Why do we need to know who our LGBTQ patients are?

On January 1st, 2015, Oregon extended coverage for most transition-related healthcare under the **Oregon Health Plan (OHP)**, the State’s Medicaid Program.

- These services include coverage for:
  - puberty suppression
  - primary care and specialist doctor visits
  - mental health care visits
  - cross-sex hormones, anti-androgens
  - lab work
  - some surgeries
Why do we need to know who our LGBTQ patients are?

The Bill includes prohibition of services on the basis of actual or perceived race, color, national origin, sex, sexual orientation, gender identity, age or disability.

- For example, an individual who was assigned female at birth and identifies as male goes into a provider for cervical cancer screening, but his insurance only covers these screenings for females.

- The RHEA ensures insurance must cover services for this individual, regardless of his name, or what gender is on his driver’s license or his birth certificate.
Why do we need to know who our LGBTQ patients are?

OREGON DIVISION OF FINANCIAL REGULATION BULLETIN DFR 2016-1

TO: All Entities Transacting Insurance in Oregon

RE: Nondiscrimination Related to Transgender Persons in the Transaction of Insurance in Oregon

The purpose of this bulletin is to clarify prohibitions against unfair discrimination in the transaction of insurance in Oregon and to reiterate expectations of the Department of Consumer and Business Services (DCBS) about how insurers and other licensees, and authorized entities must address issues related to transgender persons.
The Good News

You don’t have to be an expert on LGBTQ culture to offer culturally competent care

- You just need
  - Basic information
  - A willingness to learn
  - An openness to hear what your patient is trying to tell you
LGBTQ – Defining the Alphabet

- **L** – Lesbian (sexual orientation)
- **G** – Gay (sexual orientation)
- **B** – Bisexual (sexual orientation)
- **T** – Transgender (gender identity)
- **Q** – Queer

**Other letters/terms:** Q - questioning, I - intersex, 2S - 2 spirit, same gender loving, pansexual
LGBTQ – Defining the Alphabet

Sexual Orientation

- How a person identifies their physical and emotional attraction to others
  - Lesbian
  - Gay
  - Bisexual
  - Heterosexual
  - Queer – terminology continues to evolve
**LGBTQ – Defining the Alphabet**

**Sexual Orientation**

- **Lesbian** – an *identity* label for women who have primary sexual, romantic attraction towards women

- **Gay** – an *identity* label for men* who have primary sexual, romantic and relational attraction towards men

- **Bisexual** – an *identity* label for people who have sexual, romantic attraction toward with either men or women.

- **Pansexual** – an *identity* label for people who have romantic or emotional attraction towards people regardless of their sex or gender identity

* Some women refer to themselves as Gay
Sex, Gender, and Gender Identity

- **Sex**: Biological and anatomic differences assigned at birth, generally male or female

- **Gender**: A social construct that refers to the rules and norms that a society assigns to varying degrees of maleness and femaleness

- **Gender Identity**: A person's internal sense of their gender (do I feel male, female, both, neither?)
Gender Identity

- All people have a gender identity

- A person’s internal sense of their gender (do I consider myself male, female, both or neither)

- For many this matches the sex assigned at birth, for transgender people it does not

- Our gender identity may or may NOT match one’s appearance, body, or other’s perception

- Gender identity is increasing described as being on the spectrum
Gender Expression

- How one presents themselves through their behavior, mannerisms, speech patterns, dress and hairstyle
- May be on the spectrum
Transgender people

- Gender identity not congruent with the assigned sex at birth
- Alternate terminology
  - Transgender man, trans man, female to male (FTM)
  - Transgender women, trans woman, male to female (MTF)
- Non-binary, genderqueer, gender neutral
  - Genderqueer person
- Trans masculine, Trans feminine
- May decide to transition at any age
- May or may not change their names/pronouns
- May or may not use hormones or surgery
LGBTQ – Defining the Alphabet

Gender Identity ≠ Sexual Orientation

- All people have a gender identity and a sexual orientation
  - How people identify can change
  - Terminology varies

- Gender identity is not the same as sexual orientation
Remember

It is not always obvious who is LGBTQ!

- The form is not going to tell you what you need to know.
- It is OK to ask questions about partners, gender, preferred pronouns, language used for body parts.
- It is ok to feel awkward as you learn to ask.
Barriers to Healthcare

- Lack of health insurance, including lack of spousal benefit
- Being afraid to tell your doctor about your sexuality or your sexual history
- Having a healthcare provider who does not know the disease risks or the issues that affect LGBTQ individuals
- Multiple stigma: ethnicity/race, gender, ability, citizenship, etc.
- Not understanding one’s risk for health issues and disease
- Lack of knowledge about available health and wellness resources - from benefits to providers
LGBTQ Disparities & Risks

Health Disparities & Risks

- Tobacco
- Alcohol
- Mental Health
- Cancer
- Obesity
- Cardio Vascular Disease
- HIV
- Drugs
High Smoking Rates

Adults in U.S
20.6% LGB and
35.5% Transgender
vs.
14.9% non-LGBT
smoke cigarettes
Mental Health – Increased Risk

LGBT individuals have 1.5x HIGHER RISK of DEPRESSION and ANXIETY DISORDERS than heterosexual individuals.

MHA
Mental Health America

USC Social Work
LGBT Cancer Risks

Dramatically higher cancer risk factors

- Tobacco
- Alcohol
- Obesity
- Nulliparity
- HPV
- HIV
- Lack of access
Lower Cancer Screening Rates

Dramatically lower screening rates

- Mammograms
- Cervical Pap/Well Person exams
  - LB women 10 x less likely to have Pap tests
- Anal Pap Smears
- Colonoscopies

The Fenway Institute analysis, titled Promoting Cervical Cancer Screening among Lesbians and Bisexual Women.
Increased Breast Cancer Risk

Is there an increased risk?

Lesbian, gay, bisexual women and transgender people have a greater risk of breast cancer than other women. The risk is not because of their sexual orientation. Rather, it is because some risk factors for breast cancer and barriers for breast cancer detection — never having children and not seeing a doctor on a regular basis — occur more often in these populations.

http://ww5.komen.org/BreastCancer/WhoDoesItAffect.html#Lesbians
LGBT Women Almost Twice As Likely Than Non-LGBT Women to Lack a Personal Doctor

Percentage in U.S. Without a Personal Doctor, by LGBT Status and Gender

Do you have a personal doctor? (% No)

<table>
<thead>
<tr>
<th></th>
<th>LGBT %</th>
<th>Non-LGBT %</th>
<th>Difference (pct. pts.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All adults</td>
<td>29</td>
<td>21</td>
<td>8</td>
</tr>
<tr>
<td>Men</td>
<td>29</td>
<td>27</td>
<td>2</td>
</tr>
<tr>
<td>Women</td>
<td>29</td>
<td>16</td>
<td>13</td>
</tr>
</tbody>
</table>

Gallup-Healthways Well-Being Index
Jan. 1-June 23, 2014

The 2015 U.S. Transgender Survey (USTS) is the largest survey examining the experiences of transgender people in the United States, with 27,715 respondents from all fifty states, the District of Columbia, American Samoa, Guam, Puerto Rico, and U.S. military bases overseas.

http://www.ustranssurvey.org/reports
LGBTQ Health Issues & Risks

2015 U.S. TRANSGENDER SURVEY

Adult Experiences

- 31% reported none of their health care providers knew they were transgender
- 23% did not see a doctor when they needed to because of fear of being mistreated as a transgender person
- 33% who saw a health care provider in the past year reported having at least one negative experience related to being transgender - higher % for people of color & people with disabilities
- 29% living in poverty (vs. 12% in the U.S. pop) - 38-43% trans people of color were living in poverty
- 30% experienced homelessness at some point in their lives
- 68% reported none of their IDs had the name and gender they preferred
- 47% of respondents were sexually assaulted at some point in their lifetime
- 40% have attempted suicide (vs. 4.6% U.S. pop)

http://www.ustranssurvey.org/reports
LGBT Health Issues & Risks

Kindergarten - K12 Experience

- 77% of those who were out or perceived as transgender experienced some form of mistreatment
- 54% of those who were out or perceived as transgender were verbally harassed
- 24% of those who were out or perceived as transgender physically attacked
- 13% sexually assaulted in K–12 because of being transgender
- 17% faced such severe mistreatment as a transgender person that they left a K–12 school

http://www.ustransssurvey.org/reports
2019 LGBTQ Teen Survey - 12,000 respondents 13-27 from 50 states & DC

- 77% reported feeling depressed or down over the past week

- 95% reported trouble sleeping at night

- > 70% reported feelings of worthlessness and hopelessness in the past week

- 77% reported they’ve heard family members make negative comments about LGBTQ people

- LGBTQ youth of color and transgender teenagers experience unique challenges and elevated stress – only 11% of youth of color surveyed believe their racial or ethnic group is regarded positively in the U.S., and over 50% of trans and gender expansive youth said they can never use school restrooms that align with their gender identity

LGBTQ Health Issues & Risks

LGBTQ+ Youth

- 2 to 3 times more likely to attempt suicide
- More likely to be homeless (20-40% LGBTQ)
- Risk of HIV, STDs
LGBTQ Health Issues & Risks

- How do sexual orientation and gender identity impact health for rural residents?
  - Not accessing healthcare due to anticipated, internalized and enacted stigma
  - Privacy and confidentiality concerns
  - Patients not disclosing sexual orientation or gender identity to a provider, which could impact provision of needed urgent and preventative care
  - Limited training of healthcare providers related to LGBT health-related issues
  - Provider bias or discrimination, which can be more problematic in a rural area with fewer providers to choose from

https://www.ruralhealthinfo.org/topics/social-determinants-of-health#lgbt
Why do we need to know who our LGBTQ patients are?

Figure 17: More Difficult for Rural LGBT People to Find Health Care If They Are Discriminated Against

% of LGBT people saying that, if they were turned away by each provider, it would be “very difficult” or “not possible” for them to find those services somewhere else.

Creating a Welcoming Environment & Overcoming Barriers
Individual / Practitioner Level Interventions

- DON’T ASSUME anything about a patient
  - Gender and gender identity
  - Sexual orientation
  - Relationship status
  - HIV/AIDS status

- Change your LANGUAGE
  - Use gender-neutral language “partner”, “spouse”.
  - Mirror the language people use for themselves, their partners and their body parts
Individual / Practitioner Level Interventions

- **Show your OPENESS**
  - Assure confidentiality to make coming out safe
  - Have LGBT publications/health literature in waiting room

- **LEARN more**
  - Read more about the LGBT community
  - Learn about LGBT families and health risks
What to do when you meet transgender or non-binary customers?

- Ask for name if different from legal name on file
- If unsure, politely ask for name and pronoun they would like you to use
- Listen and/or ask and use preferred names for their body parts
- Avoid invasive unnecessary questions
- In case of mistake, say I’m sorry, I didn’t mean to be disrespectful and move on
Examples of How to Identify your LGBT Patients

- Instead of “Are you married”
  - “Are you in a relationship?”
  - “Are you seeing someone now?”
  - “Do you have a significant other?”
  - “Your partner...?”

- Instead of “Who is his mother and father?”
  - “Who are your parents?”

- Instead of using the gender/name found on forms
  - “I would like to be respectful, what name and pronoun would you like me to use?”
Tools to Help you Engage Your LGBTQ Patient

Pocket Guide to the Gender Neutral Patient

Transgender Cancer Patient Project

Inclusive Healthcare, Community Building, Patient Advocacy

https://transcancerzine.com/zines/
At 14, I wouldn't tell the doctor my sexual orientation because I'd know he also sees my parents, I think I'd feel the opposite if he would have said, 'well I want you to know this is confidential and I ask this of everyone.' That's a very different conversation.

5 simple tips to improve LGBTQ patient-provider interactions

- Change office environment to include positive LGBTQ artwork, pamphlets, etc.
- Use culturally appropriate and specific terminology and pronouns that stretch across the sexual/gender spectrum on intake forms and in exchanges
- Encourage respectful, direct, and open-ended questions in patient-provider interactions
- Provide training on LGBTQ issues for all staff
- Reflect on assumptions, biases and preconceived notions. Perspectives can be changed and unlearned.

Sources:

https://www.ruralhealthinfo.org/rural-monitor/lgbtq-healthcare/
Organizational –Level Changes

- Provide visible LGBT symbols and literature in waiting room
- Incorporate all LGBT –defined “family” members into the treatment and recovery process
- Have current list of LGBT referrals available
- Implement and LGBT task force or committee
ACS LGBT Brochures

Cancer Facts for Lesbians and Bisexual Women

Share this with someone you care about.

Tobacco and the LGBT Community

Protect yourself and the people you care about.

Cancer Facts for Gay and Bisexual Men

Protect yourself and the people you care about.

Other Suggested Changes

- Post and enforce LGBT-inclusive nondiscrimination policies.
- Offer staff continuing education on LGBT health
- Hire LGBT staff
- Collect data on LGBT patients and conduct research on LGBT health
- Pursue Human Right’s Campaign (HRC’s) Healthcare Equality Index (HEI) rating
  - VA Portland Medical Center, Oregon Health & Science University Hospital, Kaiser Permanente Hospitals, Legacy Health – all 100
LGBT Health/Healthcare Education Information and Resources

- Health People 2020 LGBT page
- OWH, Lesbian and Bisexual Health
- Hospital Visitation policy
- Affordable Care Act
- CDC LGBT health pages
- Joint Commission LGBT Field Guide
- Institute of Medicine report *The Health of LGBT People*
- HHS LGBT Issues Coordinating Committee 2012 Report
- *When Health Care Isn’t Caring*, Lambda Legal
- HRC HEI
2016 *Journal of the American Board of Family Medicine* article offers guidance to primary care providers to improve LGBTQ care delivery.

**Purpose:** Individuals among gender/sexual minorities share experiences of stigma and discrimination, yet have distinctive health care needs influenced by ethnic/racial minority and rural realities.
LGBT Health/Healthcare Education Resources

Conference Registration Opens Fall 2019

2020 LGBTQ+ MEANINGFUL CARE CONFERENCE

MARCH 11, 2020

A day-long training event for healthcare and social service professionals, the Meaningful Care Conference aims to promote LGBTQ+ cultural competency in health care and social services, share current LGBTQ+ best practices, and to develop and diversify networks of LGBTQ+ culturally competent health care and social service providers.

PORTLAND AIRPORT SHERATON

8235 NE Airport Way, Portland OR 97220

https://meaningfulcare.org/
LGBT Health/Healthcare Education Resources

Affirming health care for trans communities

The OHSU Transgender Health Program provides safe, comprehensive, affirming health care for the transgender and gender nonconforming communities. Learn more.

https://www.ohsu.edu/transgender-health
Welcome to the Oregon AETC!

The Oregon AIDS Education and Training Center (AETC) is a program of the Mountain West AETC funded in part by the Oregon Health Authority (OHA) and the Health Resources and Services Administration (HRSA) to offer provider education to improve patient health outcomes for people at risk or living with HIV while preventing new infections in our community.

Currently serving 12 counties in Oregon and SW Washington, the OREGON AETC continues to expand our efforts statewide.

See Upcoming Events!

What We Do...

COMING SOON

2019 HIV CONTINUUM OF CARE CONFERENCE

September 24 - 25, 2019

Upcoming Events

Contact

LOCATION

Portland VA Research Foundation
3710 SW Veterans Hospital Road
Portland, OR 97239

CONTACT

Dayna K. Morrison, MPH, Program Manager
dayna@oraetc.org
971.200.5266
LGBT Health/Healthcare Education Resources

- Certified to offer prescribed credits from the American Academy of Family Physicians.

- Prescribed credit is accepted by the AMA & the American Nurses Credentialing Center.

http://www.lgbthealtheducation.org/
LGBT Health/Healthcare Education Resources

For Patients
- Find a Provider
- Healthcare Equality Index
- 10 Things Gay Men Should Discuss with Their Healthcare Providers
- 10 Things Lesbians Should Discuss with Their Healthcare Providers
- 10 Things Bisexuals Should Discuss with Their Healthcare Providers
- 10 Things Transgender Persons Should Discuss with Their Healthcare Providers
- Lambda Legal
- Trans Health Resources
- Hepatitis
- Depression

For Providers & Researchers
- Join the Provider Directory
- Crystal Meth
- Physician Survey Project
- Trans Health
- Provider Guidelines for Creating a Welcoming Environment
- Healthy People 2010 Companion Document
- American Cancer Society: Research Proposals Directed at Poor and Underserved Populations
- www.gaydata.org

GLMA: Health Professionals Advancing LGBTQ Equality (previously known as the Gay & Lesbian Medical Association) is the world's largest and oldest association of lesbian, gay, bisexual, transgender and queer (LGBTQ) healthcare professionals.

http://glma.org/
Handbook on LGBT physical and mental health created by the world's oldest and largest association of lesbian, gay, bisexual, and transgender health care professionals.

LGBT Health/Healthcare Education Resources

**Publisher:** American College of Physicians; 2 edition (May 8, 2015)

- Principles for taking an LGBT-inclusive health history
- Caring for LGBTQ youth, families, and older adults
- Behavioral Health Care: coming out, intimate partner violence, drug, alcohol, and tobacco use
- Understanding health care needs of transgender people
- Development of gender identity in children and adolescents
- Sexual health and HIV prevention
- Policy and legal issues

LGBT Health/Healthcare Education Resources

STANDARDS OF CARE VERSION 7

Available in 18 Languages

<table>
<thead>
<tr>
<th>Arabic</th>
<th>Chinese</th>
<th>Croatian</th>
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https://www.wpath.org/publications/soc
LGBT Health/Healthcare Education Resources

http://healthcarebillofrights.org
As an LGBT older adult or a caregiver, you and your loved one might be considering home care or long-term care services. However, you might be concerned about finding services and programs that are LGBT affirming. Inviting someone into your home or revealing personal information can be intimidating at any time, and you may be feeling particularly vulnerable at this point in time. It is important to find service providers who understand LGBT issues and can be trusted to provide you with competent, respectful care. Here are ten helpful tips on finding an LGBT-affirming service provider:

1. The best references come from the people you already know and trust. Ask friends with similar circumstances who they have worked with and whether they felt...
HEI 2019 Rating System and Methodology

The Healthcare Equality Index has four core objectives:

- Ensure foundational non-discrimination protection for patients, visitors and staff in patient and staff policies and provide cultural competency training on LGBTQ-inclusion
- Demonstrate progress toward inclusion on LGBTQ patient care services and support
- Cultivate an inclusive workplace by providing LGBTQ-inclusive employee policies and benefits
- Demonstrate engagement with and public commitment to the LGBTQ community

<table>
<thead>
<tr>
<th>Criteria 1 – Non-Discrimination and Staff Training</th>
<th>40 Points Total</th>
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<tr>
<td>This criteria encompasses what was previously considered the Core Four Leader Criteria.</td>
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<tr>
<td>All questions in this section are scored and must be met in order to attain Leader status.</td>
<td></td>
</tr>
<tr>
<td>Patient Non-Discrimination</td>
<td></td>
</tr>
<tr>
<td>a. LGBTQ-inclusive Patient Non-Discrimination Policy</td>
<td>5 points</td>
</tr>
<tr>
<td>• Policy must include the terms “sexual orientation” and “gender identity and expression” (or “gender identity”)</td>
<td></td>
</tr>
<tr>
<td>b. Patient non-discrimination is communicated to patients and staff</td>
<td>5 points</td>
</tr>
<tr>
<td>• Policy is shared in two ways with the public, typically online and in-print</td>
<td></td>
</tr>
<tr>
<td>• Policy is shared with staff in at least one way.</td>
<td></td>
</tr>
</tbody>
</table>

Equal Visitation

https://assets2.hrc.org/files/assets/resources/HEI_Scoring_Criteria.pdf?_ga=2.247120004.1269968112.1565716792-1630196508.1565716792

https://www.hrc.org/hei/hei-scoring-criteria
LGBT Health/Healthcare Education Resources

**Publisher:** Springer; 2015 edition (June 9, 2015)

- First book ever written on cancer in LGBT communities
- Offers an in-depth look at the most up to date research in this field
- Provides a roadmap for future researchers, policy makers, advocates and health care providers

LGBT Health

Quarterly peer-reviewed journal dedicated to promoting optimal healthcare for millions of sexual and gender minority persons worldwide.

Editor-in-chief: William Byne, MD, PhD
ISSN: 2325-8292 • Published Quarterly • Online
ISSN: 2325-8306

http://www.liebertpub.com/overview/lgbt-health/618/
LGBT Health/Healthcare Education Resources

- Guides health professionals in helping lesbian, gay, bisexual and transgender (LGBT) people understand health insurance options, particularly mental health and substance abuse benefits and services, under the Affordable Care Act (ACA) and enroll in plan.
Do Ask, Do Tell
A Toolkit for Collecting Data on Sexual Orientation and Gender Identity in Clinical Settings

ACCESS TO CARE AND RESOURCES

There are many resources for LGBT patients seeking medical care and advice. Here are a few you may be interested in:

Want more information about LGBT health care? The National LGBT Health Education Center has publications and resources for patients and providers. www.gphnhe.edu

Want more information about transgender health issues? The Center for Excellence for Transgender Health has many resources. www.transhealth.ucsf.edu

Want information about health care organizations that demonstrate a commitment to LGBT health care? The Human Rights Campaign (HRC) publishes a Health Equity Index yearly. www.hrc.org/give

Want additional support for your friends or family? Parents and Friends of Lesbians and Gays (PFLAG) publishes lists of organizations that partner with local groups for support, education, and advocacy. www.pflag.org

FREQUENTLY ASKED QUESTIONS

I don’t want anyone besides my provider to know that I’m gay/lesbian/bisexual. Will this information be shared?

Your provider will keep conversations you have confidential. Your health care provider is bound by laws and policies to keep your information private. If you are under 18, these laws may vary by state and your situation may vary by medical practice. You can also ask your provider not to share this information with your medical record.

What if my provider saves the wrong name or pronouns when referring to me or my name/partner?

Providers may not always know what terms you prefer to use, but they have been trained to describe you and your partner(s), and they should learn these terms.

What if it’s still not comfortable coming out to my current provider?

There are several ways to find a provider you are comfortable with. Start with your list of friends or use the resources in this brochure. Finding a provider you are comfortable with is essential to your overall health and wellness.

Do Ask, Do Tell:
Talking to your health care provider about being LGBT

Why Collect SO/GI Data?

Question Design Methodology: How to Ask SO/GI Questions

Who Should Use The Toolkit

- Patients & Consumers
- Clinicians
- Front-line Staff
- IT & Medical Informatics Staff
- Leadership
- Quality Improvement Staff
- Clinical Researchers
- Legal Affairs Staff
Sexual Orientation and Gender Identity Data Collection in Clinical Settings and in Electronic Health Records: A Key to Ending LGBT Health Disparities

Sean Cahill, PhD,1,2 and Harvey Makadon, MD3,4

http://online.liebertpub.com/doi/pdfplus/10.1089/lgbt.2013.0001
"Many physicians incorrectly believe that lesbian patients do not need cervical cancer screening, ..."
LGBT Health/Healthcare Education Resources

LGBT Individuals & Communities

Building on recent social and political advances in the U.S. to protect the human rights of same-sex partnership and expand traditional perspectives on gender identity, *Diversity Awareness in Professional Nursing* is privileged to provide what we hope will be a wealth of resources to support nursing practice for

Changing the Culture of Long-Term Care: Combating Heterosexism

Susan V. Schwinn, BSN, RN
Shirley A. Dinkel, PhD, APRN, FNP-C, ANP-C
LGBT Health/Healthcare Education Resources

American Psychological Association

August 6, 2015

APA Adopts Guidelines for Working With Transgender, Gender Nonconforming People

Aim is to ensure well-informed care, treatment and research

The document lays out 16 guidelines aimed at helping professionals better understand the lifespan development, stigma, discrimination and barriers to care faced by this population, as well as the state of research surrounding transgender and gender nonconforming people.

American College of Clinical Pharmacy

Resources

**ACCP White Paper**

Cultural Competency in Health Care and Its Implications for Pharmacy Part 3A: Emphasis on Pharmacy Education, Curriculums, and Future Directions

American College of Clinical Pharmacy

Sexual orientation and gender identification should also be incorporated into the cultural sensitivity pharmacy curriculum. Proposed methods for including lesbian, gay, bisexual, transgender, and/or questioning sexual identity (LGBTQ) cultures and health issues in curriculums include exposure to LGBTQ individuals and the use of standardized patient scenarios, didactic lectures and seminars, guest panel discussions, poster presentations, and student reflections. The LGBTQ curricular content and primary literature analysis that focus on human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) and other sexually transmitted infections as the predominant or exclusive topic of study are not reflective of the overall health care needs of the LGBTQ community and can reinforce stereotypes of sexual risk behavior. Pharmacy faculty should consider adding LGBTQ case scenarios and curricular content to examine and increase student awareness of other health concerns in addition to HIV/AIDS and the sexually transmitted illnesses that affect the LGBTQ community (e.g., smoking, alcohol and substance abuse, obesity, physical abuse, depression, suicide) and issues related to their health care (e.g., appropriate terminology and communications, reasons for avoiding health care providers, consequences of culturally incompetent care).

https://www.accp.com/docs/positions/whitePapers/ACCP_CultComp_3A.pdf
LGBT Health/Healthcare Education Resources

• Guides health professionals in helping lesbian, gay, bisexual and transgender (LGBT) people understand health insurance options, particularly mental health and substance abuse benefits and services, under the Affordable Care Act (ACA) and enroll in plan

LGBT Health/Healthcare Education Resources

Implementing Curricular and Institutional Climate Changes to Improve Health Care for Individuals Who Are LGBT, Gender Nonconforming, or Born with DSD: A Resource for Medical Educators

FIGURE 1.1: STIGMA: A MULTILEVEL CONSTRUCT

- Structural
  - State Policies, Institutional Practices
- Interpersonal
  - Abuse, Rejection, Discrimination
- Individual
  - Self-Stigma, Disclosure

http://offers.aamc.org/lgbt-dsd-health
Thank you!

Q & A
Thank You!

Contact information:

Liz James
Liz.James02@gmail.com