LGBTQ+ Older and Aging Adult Cultural Competency 101 – Tools to Improve Patient Communication, Care and Outcomes

2020 Forum on Aging in Rural Oregon

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Member, RVCOG SDS Senior Advisory Council
I have no conflicts of interest or relationships to disclose.
Agenda

- Relevant Background
- Who are LGBTQ+ Older Adults
- LGBTQ+ Policy Protections
- LGBTQ+ Terminology and Identities
- LGBTQ+ Older Adult Challenges, Barriers, Disparities and Risks
- Creating a LGBTQ+ Welcoming Environment
- LGBTQ+ Healthcare Provider Resources (after Q&A slide)
Objectives for Today’s Session

- Describe health disparities faced by LGBT older adults.

- Explain how policy changes can improve health care and elder services for this population.

- Describe how health systems, including providers can advocate and care for their LGBT older patients.
Background

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

LHI’s Advocacy Work, Success and Impact

The State of Health
Houston & Harris County
2015 - 2016

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.

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: 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, bisexual populations.

OBJECTIVE LGBT-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.

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/lgbthealth/index.htm
The Williams Institute: http://williamsinstitute.law.ucla.edu/

http://www.houstonstateofhealth.com/content/sites/houston/Houston_Harris_County_State_of_Health_2015-2016.pdf
How many LGBTQ+ adults are there in the U.S.?

- 10,388,000* adults in U.S. identify as gay, lesbian, or bisexual
- 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 Oregon LGBTQ+ adults are there?

185,760* Oregon adults identify as LGBT people
(*estimate - Gallup, Williams Institute, & 2018 Census Estimates)

19,750* adults in Oregon identify as transgender

LGBT % of State Adult Population: 5.6%

Percent of LGBTQ Adults (25+) Raising Children: 23%
Gallup/Williams 2019

http://www.lgbtmap.org/equality_maps/profile_state/OR
Who are LGBTQ+ Older Adults in the U.S.?

LGBT older Americans live in all sizes of cities, towns, suburbs and rural areas, but they seek out LGBT-friendly local communities, even within more conservative regions of the country.

AARP 2018 Survey
LGBTQ+ People in Rural America

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
Transgender People in Rural America

WHERE WE CALL HOME: TRANSGENDER PEOPLE IN RURAL AMERICA
November 2019

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WHERE WE CALL HOME:
LGBT PEOPLE OF COLOR IN RURAL AMERICA

September 2019

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Who are LGBTQ+ Older Adults in the U.S.?

2030: 3.8-7.2 million (Harley & Tester, 2016)

Three Generations

• Invisible
• Silenced
• Pride / Proud

https://www.lgbtmap.org/lgbtq-older-adults
Who are LGBTQ+ Older Adults in the U.S.?

Invisible - the oldest old, 85+

- Came of age and experienced the Great Depression (1929–1939)
- Many fought in WWII
- A time LGBT identities were largely absent from public discourse
Who are LGBTQ+ Older Adults in the U.S.?

**Silenced – greatest generation, 75-80**

- Came of age in the 1940s & 1950s

- 1950s McCarthy trials & “lavender scare,” sexual & gender minority identities cast as a threat to the security of the nation

- Same-sex behaviors were criminalized

- 1952 American Psychiatric Association had classified homosexuality as a psychiatric disorder

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[https://www.lgbtmap.org/lgbtq-older-adults](https://www.lgbtmap.org/lgbtq-older-adults)
Who are LGBTQ+ Older Adults in the U.S.?

**Pride/Proud - baby boomers & beyond**

- Came of age at a time of great social change - Stonewall riots (1969)
- The 1960s the beginning of decriminalization of same-sex behavior
- 1973 homosexuality removed as a psychiatric disorder from Diagnostic and Statistical Manual of Mental Disorders (DSM-II-R)
- 1980’s the AIDS pandemic began

[https://www.lgbtmap.org/lgbtq-older-adults](https://www.lgbtmap.org/lgbtq-older-adults)
New research shows that LGBT people are more likely to have a disability than the general population.

In a survey of more than 26,000 transgender people, 39% reported having a disability.

One in three lesbians and one in three bisexual women report having a disability in a population-based survey in Washington.

https://www.lgbtmap.org/lgbt-people-disabilities
AN ESTIMATED 3-5 MILLION LGBT PEOPLE HAVE DISABILITIES

Figure 3: Transgender People, Including in Rural Areas, Are More Likely to Have a Disability
% of Each Group That Has One or More Disabilities

U.S. Population
U.S. Rural Population
Transgender People
Rural Transgender People
Rural Transgender People of Color

Note: Disabilities are those as described in the American Community Survey (ACS).
LGBTQ is NOT One Word & NOT a Community

More than 2 in 5 LGBT Adults Are People of Color
% of LGBT Adult Population That is Each Race/Ethnicity

- White, 58%
- Hispanic or Latino, 21%
- Black, 12%
- Multiracial
- Asian, 2%
- American Indian or Alaska Native, 1%
- Native Hawaiian or Pacific Islander, 1%

Source: Gallup Daily Tracking Poll, analyzed by Williams Institute’s LGBT Demographic Data Interactive (Jan 2019).

https://www.lgbtmap.org/file/rural-lgbt-poc-2-figure-02-b.png
Who are LGBTQ+ Older Adults in the U.S.?

One-third of LGBT older adults live at or below 200% of the federal poverty level.

Including...

- 40% of LGBT adults 80 and older
- 40% of African American LGBT older adults
- 40% of Hispanic LGBT older adults

- 47% of bisexual older men
- 48% of bisexual older women
- 48% of transgender older adults

Where people live and how they identify matters

- LGBTQ+ people experience poverty at a higher rate in rural areas than in urban areas.
- 1 in 5 LGBTQ+ people in urban areas are living in poverty compared to 1 in 4 living in poverty in rural areas.

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 2½ 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?

- There is a long history of anti-LGBT bias in healthcare which continues to shape health-seeking behavior and access to care for LGBT individuals, despite increasing social acceptance.

- **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?

LGBTQ+ Patient Policy Protections

Federal & Oregon Policies

- Patient Protection and Affordable Care Act (ACA)
- Marriage Equality, Obergefell v. Hodges
- Older Americans Act
- Oregon OHP (Medicaid Expansion)
- Oregon RHEA
- Oregon DFR2016-1
The ACA, the key to LGBTQ+ 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

https://obamawhitehouse.archives.gov/blog/2012/02/23/road-philadelphia-focus-lgbt-health
The ACA, the key to LGBTQ+ Health Equity

ACA implementation has proven this true

- Under the ACA, the uninsured rate for LGBTQ individuals making less than $45,000 per year has been cut in half.

- Overturning the ACA will jeopardize the health care of more than 20 million Americans, including millions of LGBTQ people, in the midst of a pandemic.

Medicare & Obergefell v. Hodges

- Obergefell v. Hodges *June 26, 2015* Supreme Court of the United States ruled that the fundamental right to marry is guaranteed to same-sex couples by both the Due Process Clause and the Equal Protection Clause of the Fourteenth Amendment to the United States Constitution.

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

Program Standards

VI. Priority populations to be served

The Older Americans Act prioritizes services to at-risk older adults including those who are frail and at risk for institutional placement; low-income, socially isolated, or minority individuals; Native American elders; older adults with limited English proficiency; those residing in rural areas; and Lesbian, Gay, Bisexual, or Transgender (LGBT) older adults.

Updated February 28, 2018
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
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 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.
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, **A** – asexual, same gender loving, pansexual
Sexual Orientation - How a person identifies their physical and emotional attraction to others

- **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

- **Queer** is a word that describes sexual and gender identities other than straight and *cisgender* and is evolving.

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

- **Sex:** Biological and anatomic differences assigned at birth, generally male or female. Some people’s sex doesn’t fit in to male or female, intersex.

- **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?) It’s a feeling that begins early in life.
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 (cisgender), 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 have surgery
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 – *LISTEN 1st*
- It is ok to feel awkward as you learn to ask
LGBTQ+ Barriers to Healthcare

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

- 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
Black & Latino LGBT adults have compound discrimination concerns about the quality of their healthcare as they age.
LGBTQ+ Disparities & Risks

Health Disparities & Risks

- Tobacco
- Alcohol
- Mental Health
- Cancer
- Obesity
- Cardio Vascular Disease
- HIV
- Drugs
Dramatically higher cancer risk factors

- Tobacco
- Alcohol
- Obesity
- Nulliparity
- HPV
- HIV
- Lack of access

High Smoking Rates

Adults in U.S
20.6% LGB and
35.5% Transgender
vs.
14.9% non-LGBT
smoke cigarettes

https://truthinitiative.org/research-resources/targeted-communities/tobacco-use-lgbt-communities
Mental Health – Increased Risk

LGBT individuals have 1.5x higher risk of depression and anxiety disorders than heterosexual individuals.

https://www.mhanational.org/issues/lgbtq-communities-and-mental-health
Lower Cancer Screening Rates

Dramatically lower screening rates

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

https://www.lgbthealtheducation.org/publication/cervical-cancer-screening/
LGBTQ Older Adults and Dementia

LGBT Older Adults and Dementia

LGBTQ people have greater health disparities, many of which are risk factors for dementia, including:
- Depression
- Obesity
- Alcohol and tobacco
- Lower rates of preventive screenings
- Cardiovascular disease
- HIV/AIDS

LGBT adults living with dementia face unique challenges in accessing support:
- 40% report that their support networks have become smaller over time
- 34% live alone
- Up to 30% experience lower rates of access to care

https://www.lgbtagingcenter.org/resources/resource.cfm?r=968
Key Challenges for LGBTQ+ Older Adults

**Cornerstones of Successful Aging**
- Economic Security
- Social Connections
- Health and Well-Being

**Key Challenges for LGBT Older Adults**
- A lifetime of discrimination, especially in housing and employment, and a long-term lack of legal and social recognition combine to create deep economic insecurity for LGBT elders.
- A reliance on chosen family, due to family rejection and legalized discrimination, creates social isolation and vulnerability for LGBT elders.
- Long-term discrimination, combined with a lack of competent, inclusive health care, leads to specific mental and physical health disparities.

LGBTQ+ Older Adult Health Issues & Risks

- Twice as likely to be single and living alone
- More likely to be estranged from family
- Four times less likely to have children
- More likely to be caregivers for their friends.

LGBTQ+ Older Adult Health Issues & Risks

- More likely to have health problems like HIV, depression and substance abuse

- Nearly 1/3 living at or below poverty level

- 9 in 10 expect healthcare providers to discriminate against them

- LGBT people face high levels of discrimination in assisted living and affordable housing facilities.

Key Disparities among LGBT Older Adults

- Elevated risk of social isolation compared to heterosexuals
- Income not commensurate with education
- More lifetime discrimination and victimization
- Higher rates of physical limitations, weakened immune system, mental distress
- Lesbian and bisexual women: Higher rates of disability, cardiovascular disease, overweight, poor general health
- Gay and bisexual men: Twice as likely to live alone; higher risk of cancer, HIV
- Transgender older adults: Higher rates of discrimination, victimization, mental distress, poor health, less support
- Bisexual older adults: Higher stigma, less likely to disclose identity, lower income, less support
- Older adults of color, and those with lower income and education: Elevated risk of health disparities
- Limited access to aging, health, support services

Challenges for LGBTQ+ Older Adults

Figure 9: LGBT Older Adults Face Discrimination and Harassment in Care Facilities

<table>
<thead>
<tr>
<th>Experiences Related to Resident’s Real or Perceived Sexual Orientation and/or Gender Identity</th>
<th>Percent of All Instances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbal or Physical Harassment From Other Residents</td>
<td>23%</td>
</tr>
<tr>
<td>Refused Admission or Re-admission, Attempted or Abrupt Discharge</td>
<td>20%</td>
</tr>
<tr>
<td>Verbal or Physical Harassment From Staff</td>
<td>14%</td>
</tr>
<tr>
<td>Staff Refused to Accept Medical Power of Attorney from Resident’s Spouse or Partner</td>
<td>11%</td>
</tr>
<tr>
<td>Restriction of Visitors</td>
<td>11%</td>
</tr>
<tr>
<td>Staff Refused to Refer to Transgender Resident by Preferred Name or Pronoun</td>
<td>9%</td>
</tr>
<tr>
<td>Staff Refused to Provide Basic Services or Care</td>
<td>6%</td>
</tr>
<tr>
<td>Staff Denied Medical Treatment</td>
<td>6%</td>
</tr>
</tbody>
</table>

LGBT Older Adult Issues & Challenges
AARP 2018 Survey

Older LGBT adults live in communities of all sizes, but access to LGBT services varies.

- **Big Cities**: 95% access to LGBT resources, 48% access to LGBT senior resources
- **Towns**: 90% access to LGBT resources, 24% access to LGBT senior resources
- **Suburbs**: 84% access to LGBT resources, 22% access to LGBT senior resources
- **Rural Areas**: 57% access to LGBT resources, 10% access to LGBT senior resources

Challenges for Rural LGBTQ+ People

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.

- Hospital: 41% (Non-metro LGBT people) vs 18% (All LGBT people)
- Community Health Center: 31% (Non-metro LGBT people) vs 17% (All LGBT people)
- Pharmacy: 17% (Non-metro LGBT people) vs 8% (All LGBT people)

Source: Center for American Progress, 2018, “Discrimination Prevents LGBTQ People From Accessing Health Care.”

LGBTQ Rural Health Issues & Risks

LGBT Adults in Rural Areas Have Less Access to LGBT-Specific Services

<table>
<thead>
<tr>
<th>% With Access to LGBT Health Center</th>
<th>% With Access to LGBT Senior Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>11%</td>
<td>10%</td>
</tr>
<tr>
<td>57%</td>
<td>48%</td>
</tr>
</tbody>
</table>


LGBTQ Rural Health Issues & Risks

Figure 5: Transgender People In Rural Areas Are Significantly More Likely to be Uninsured

Transgender people are 2x more likely to be uninsured

&

Transgender people of color are more than 3x likely to be uninsured

...than their rural neighbors.


Transgender Rural Health Issues & Risks

In the past year...

1 in 3 transgender people in rural areas were mistreated by their healthcare provider in one or more ways, including:

23% who had to teach their provider about transgender people in order to get the care they needed

14% whose provider asked unnecessary or invasive questions about their transgender status that were unrelated to the reason for their visit

11% whose provider refused to give transgender-related treatment

5% who were verbally harassed in a healthcare setting (such as hospital, office, or clinic)


Source: MAP original analysis of USTS 2015
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 LGBTQ+ publications/health literature in waiting room

- **LEARN more**
  - Read more about the LGBTQ+ community
  - Learn about LGBTQ+ 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?”
It is okay to make mistakes, as long as you are considerate towards the person you are addressing.

- If you do make a mistake, simply apologize, explaining: “I am sorry, I did not mean to disrespect you. How would you like me to refer to you?”

- If a patient responds negatively even after a well-intentioned mistake, a thoughtful apology can go a long way in changing their experience, even beyond your interaction.

Organizational – Level Changes

- Provide visible LGBTQ+ symbols and literature in waiting room
- Customize patient intake forms to include Sexual Orientation and Gender Identity (SOGI)
- Incorporate all LGBTQ+ –defined “family” members into the treatment and recovery process
- Have current list of LGBTQ+ referrals available
- Implement and LGBTQ+ task force or committee
Inclusive Policies:

- LGBTQ older adults should be specifically addressed in education and outreach.
- Make sure that policies are inclusive of chosen family.
- Transgender older adults should be gendered correctly and treated with respect.
- Inclusion is medically necessary.

Addressing Specific Health Needs:

- HIV
- Smoking
- Help transgender older adults maintain access to hormone therapy and other transition related healthcare

Resilience and Mental Health:

- Recognize and support resilience.
- Prevent social isolation.
- Be responsive to LGBTQ older adults’ trauma.

https://www.lgbtagingcenter.org/resources/resource.cfm?r=994
Building LGBTQ+ Inclusive Rural Practices

2016 Journal of the American Board of Family Medicine article offers guidance to primary care providers to improve LGBTQ care delivery.

Stakeholders’ Recommendations to Improve Patient-centered “LGBTQ” Primary Care in Rural and Multicultural Practices

Miria Kano, PhD, Alma Rosa Silva-Bañuelos, BA, Robert Sturm, MA, and Cathleen E. Willging, PhD

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.

https://www.jabfm.org/content/29/1/156.long
At 14, I wouldn’t tell the doctor my orientation because I’d know he or she would have said, ‘well I want you to keep this 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/
LGBTQ+ Adult Resources

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PREPARE TO CARE
A PLANNING GUIDE FOR CAREGIVERS IN THE LGBT COMMUNITY

https://www.aarp.org/content/dam/aarp/home-and-family/caregiving/2017/05/prepare-to-care-guide-lgbt-aarp.pdf
PROMOTING THE BEHAVIORAL HEALTH OF LGBT OLDER ADULTS

MAY 2019

Individual / Practitioner LGBTQ+ Older Adult Health Resources

- Only handbook for hospice & palliative care professionals looking to enhance their care delivery or their programs with LGBTQ-inclusive care.

- Provides clear, actionable strategies for hospice and palliative physicians, nurses, social workers, counselors, and chaplains.

https://www.amazon.com/LGBTQ-Inclusive-Hospice-Palliative-Care-Transforming/dp/1939594146
This guide helps to answer the question: “How can our mainstream aging organization ask questions about sexual orientation and gender identity in safe and respectful ways to better inform our services and programs?”

Written with suggestions, tips and practical ideas, this guide will assist in your organization's path to asking fully inclusive questions to all of your clients.

https://lgbtagingcenter.org/resources/resource.cfm?r=601
Other Suggested Changes

- Post and enforce LGBTQ+ inclusive nondiscrimination policies.
- Offer staff continuing education on LGBTQ+ health
- Hire LGBTQ+ 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
DATA COLLECTION

**Two-year actions:**

1. Expand the use of baseline data to identify underutilization of services by race, ethnicity, language, disability and geography, and develop data on understudied populations, such as LGBT older adults and people with disabilities.

**Long-term actions:**

1. Conduct periodic needs assessments and utilize predictive modeling to anticipate future development of materials in other languages and alternative formats and monitor consistency of these materials across programs.

2. Recruit providers of all types who have capacity and training to serve underrepresented groups, including younger adults with disabilities, LGBT consumers and rural and frontier communities.

Oregon Resources

- SAGE Metro Portland [friendlyhouseinc.org/programs/safety-net-services/sage/](friendlyhouseinc.org/programs/safety-net-services/sage/)
- Oregon Home Care Commission *Diversity Awareness: Challenges, Facing Lesbian, Gay, Bisexual and Transgender Adults* - Understanding and awareness of LGBT issues and healthcare challenges; terms and definitions; how to create a welcoming and inclusive working relationship
- Biennial *Meaningful Care Conference* (Portland) LGBTQ+ Health [meaningfulcare.org](meaningfulcare.org)
- Oregon Aids Education and Training Center (AETC) [oraetc.org](oraetc.org)
- OHSU – Transgender Health Program [ohsu.edu/transgender-health](ohsu.edu/transgender-health)
- Oregon LGBTQ Veterans Coordinator, [Nathaniel Boehme](mailto:NathanielBoehme@odva.state.or.us) at (503) 373-2327 (office) or (971) 720-9016 (cell) or [LGBTQVets@odva.state.or.us](mailto:LGBTQVets@odva.state.or.us)
National Resources

- **Health Profession Training:** National LGBT Health Education Center “Caring for LGBT Older Adults” [lgbthealtheducation.org/courses/caring-for-lgbt-older-adults/](https://lgbthealtheducation.org/courses/caring-for-lgbt-older-adults/)

- **LGBT Older Adult Resources:** [www.lgbtagingcenter.org](http://www.lgbtagingcenter.org) & [www.sageusa.org](http://www.sageusa.org)

- **National Resource Center on LGBT Aging** [https://www.lgbtagingcenter.org/](https://www.lgbtagingcenter.org/)

- **LGBT Older Adult Hotline number:** 1-888-234-SAGE

- **AARP Research:** “Maintaining Dignity: Understanding and Responding to the Challenges Facing Older LGBT Americans” [aarp.org/dignitysurvey](http://aarp.org/dignitysurvey)

- **Caregiving:** Prepare to Care: A Planning Guide for Caregivers in the LGBT Community [aarp.org/preparetocare](http://aarp.org/preparetocare)
Thank You!

Q & A

Contact information:
Liz James
LizJamesAdvocacy@gmail.com
Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community

A Field Guide

https://www.lgbtagingcenter.org/resources/resource.cfm?r=420
# OHCC LGBT Training Course

<table>
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<th>Course</th>
<th>Description</th>
<th>Length</th>
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<tr>
<td>Diversity Awareness – Challenges Facing</td>
<td>Learn terminology &amp; definitions, gain an understanding of the lives of LGBT adults, and learn ways to be welcoming and inclusive.</td>
<td>3 hrs</td>
<td>HCW, PSW, ICP</td>
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<td>Lesbian, Gay, Bisexual, Transgender Adults</td>
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<tr>
<td>(LGBT) *AFC CEUs</td>
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[https://www.oregon.gov/DHS/SENIORS-DISABILITIES/HCC/PSW-HCW/Pages/Course-Descriptions.aspx](https://www.oregon.gov/DHS/SENIORS-DISABILITIES/HCC/PSW-HCW/Pages/Course-Descriptions.aspx)
LGBTQ+ Health/Healthcare Education Resources

2019 Southern Oregon LGBTQ+ Health and Wellness Summit
A Conference for Healthcare Professionals
May 9-10, 2019
Location: Jackson County
Health & Human Services
140 S. Holly Street
Medford, OR 97501
Additional Information and Online Registration:
www.SOLGBTQHealthSummit.org

Next
Southern Oregon LGBTQ+ Health & Wellness Summit Conference
Spring 2021 (COVID may delay)

2020 Southern Oregon
LGBTQ+ Health and Wellness Lecture Series

Using Gender Inclusive Language

https://solgbtqhealthsummit.org/
LGBTQ+ Health/Healthcare Education Resources

A day-long training event for healthcare and social service professionals, the Meaningful Care Conference aims to promote LGBTQ+ cultural competency in healthcare 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/
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.

8th Annual GLMA Nursing Summit
THE POWER OF LGBTQ+ NURSES AND MIDWIVES
Virtually: September 23, 2020 12pm-4pm EST
Register at www.GLMA.org/Conference

38th GLMA Annual Conference on LGBTQ Health

Coming to you VIRTUALLY, September 23 – 26, 2020

http://glma.org/
LGBTQ+ 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/
LGBTQ+ Health/Healthcare Education Resources

Transgender Health Program

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
LGBTQ+ Health/Healthcare Education Resources

WPATH

STANDARDS OF CARE VERSION 7

FREE PDF version

Available in 18 Languages

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The World Professional Association for Transgender Health

Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People

https://www.wpath.org/publications/soc
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...

https://www.oraetc.org/
LGBTQ+ Adult Resources

Available Health Care Services

- There is an LGBT VCC at every facility to help you get the care you need. Contact the LGBT VCC at your nearest facility.

- VA health care includes, among other services:
  - Hormone treatment
  - Substance use/alcohol treatment
  - Tobacco use treatment
  - Treatment and prevention of sexually transmitted infections/PrEP
  - Intimate partner violence reduction and treatment of after effects
  - Heart health
  - Cancer screening, prevention and treatment

https://www.patientcare.va.gov/LGBT/
LGBTQ+ Adult Resources

Oregon Health Centers

- Portland VAMC
- Roseburg VA Health Care System
- Southern Oregon Rehabilitation Center & Clinics

https://www.patientcare.va.gov/LGBT/VAFacilities.asp
LGBTQ+ 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

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.

14% of lesbians and 17.6% of bisexual women have reported ever having had any cancer, compared with 11.9% for heterosexual women.

Bisexual women have the highest rate of breast cancer at 8.4%.

Men who have sex with men have a higher prevalence of anal cancer than men in the general population.

HIV/AIDS continues to exact a severe toll on men who have sex with men (MSM), with black and Latino men being disproportionately affected.

LGBTQ+ Health/Healthcare Education Resources

- 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

- 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

This report outlines these disparities in health, wealth, isolation and trust that make reaching LGBT older adults with Alzheimer’s disease particularly challenging, while also highlighting their tremendous resilience and ability to thrive when provided with appropriate resources and supports.

LGBTQ+ Virtual Caregiver Support Group

Presented by:
Alzheimer’s Association
Oregon & Southwest Washington

First Wednesday of the month
6 p.m. - 7 p.m.

Register to receive Zoom call details at
800-272-3900
https://bit.ly/AlzORLGBTCare

Visit alz.org/orowwa to learn more about caregiver programs and resources.
Oregon & Washington LGBTQ Memory Loss Support & Research

**Sign up today!**

**CALL US NOW**

1-888-655-6646

**Safe Communication**
Safe, easy, video chatting

**Completely Free**
Available in Washington, Oregon and California

**Receive up to $125**
* for completing five phone interviews

**Aging with Pride: IDEA**
IDEA = Innovations in Dementia Empowerment and Action

CALL US NOW
1-888-655-6646

Coaches provide nine virtual sessions designed to improve health and well-being.

Either the person with memory loss or care partner must be LGBTQ.

You do not need a care partner to participate.

Call us at 1-888-655-6646 or email ageIDEA@uw.edu. Visit ageidea.org for more information

Community partners include CarePIDE, Openhouse, Family Caregiver Alliance, and LA LGBT Center.

Are you or someone you know experiencing memory loss or difficulty remembering?

- Check out a free six-week program to reduce stress and increase physical activity.
- Coaches provide nine virtual sessions using safe and easy video chatting.
- Participants will be compensated up to $125 for their time.
- Either the person with memory loss or care partner must be LGBTQ.

https://ageidea.org
LGBT Older Adult Resources

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https://www.aarp.org/content/dam/aarp/home-and-family/caregiving/2017/05/prepare-to-care-guide-lgbt-aarp.pdf
Individual / Practitioner LGBTQ+ Older Adult Health Resources

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https://lgbtagingcenter.org/resources/resource.cfm?r=601
LGBTQ+ Older Adult Resources

Common Terms & Definitions

Acquired Immune Deficiency Syndrome (AIDS): The last stage of the infection from Human Immunodeficiency Virus (HIV) that attacks a person’s white blood cells. This means they can no longer fight off sickness and disease.

Ally: A person who works for social change for a group that faces injustice or disadvantage. The ally is not a member of that oppressed group but supports and fights for equality on behalf of the group, e.g. heterosexuals who support LGBT rights.

Bisexual, Bi*: An individual who is physically, romantically, and/or emotionally attracted to both men and women. “Bisexual” does not suggest having equal sexual experience with both men and women. In fact, some people who identify as “bisexual” have not had any sexual experience at all.

Cisgender: Individuals whose gender identity and/or gender expression do align with their biological or assigned sex. If someone was assigned the sex female at birth and lives comfortably as a woman, she is likely cisgender.

Closed, In the Closet or Stealth*: Describes a person who does not share with others, or only shares with a few “safe” people, that they are lesbian, gay, bisexual and/or transgender.

Coming Out*: A lifelong process of self-acceptance of one’s sexual or gender identity that may include a sharing of that identity with others. How much people are “out” may differ by setting, people they are with, and life stage. The coming out process is unique for each individual, and is the choice of each individual. LGBT older adults often hide their sexual orientation or gender identity from their health care and social service providers (do not “come out”) for fear of being treated badly.

Discrimination*: Unfair and unequal treatment in favor of or against an individual or group based on group identity, e.g. African American, female, Arab, youth, or LGBT. Discrimination is the actual behavior towards the individual(s).

Dyke: Slang for a lesbian. It originated as a negative label for a masculine or butch woman, and this usage still exists. It has been reclaimed by some as a positive word.

Faggot/Fag: An offensive, negative slang sometimes used to describe gay men.

https://www.lgbtagingcenter.org/resources/resource.cfm?r=957
LGBTQ+ Older Adult Resources

10 Tips for Finding LGBT-Affirming Services

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 respected and comfortable.

2. Contact your local SAGE Affiliate or LGBT aging provider, LGBT Community Center, PFLAG chapter or other LGBT organizations and ask for referrals to providers they have worked with in their networks.

3. Look to see if there are service providers that advertise in your local LGBT newspapers and magazines (either print or online) or have signed up as sponsors, members, etc. with local LGBT groups.

4. Reach out to your local HIV/AIDS service providers, who often have close connections to LGBT affirming home care agencies and other services.

https://www.sageusa.org/resource-posts/10-tips-for-finding-lgbt-affirming-services/
LGBTQ+ Older Adult Resources

Residents’ Rights and the LGBT Community: Know YOUR Rights as a Nursing Home Resident

The federal 1987 Nursing Home Reform Law requires that every nursing home provide residents with the rights to be free from discrimination and for each resident to be treated with dignity and respect. The rights of all residents should be honored and respected, regardless of gender identity expression. Understanding your rights, learning about the federal and state regulations, and knowing how to get help if issues arise is the first step in ensuring that your rights are protected.

The federal nursing home regulations provide the following resident rights and requirements that may be of particular importance to lesbian, gay, bisexual, or transgender individuals living in a nursing home. State nursing home regulations and various anti-discrimination laws may provide additional protections (see "Resources" section for link to federal nursing home regulations).

https://www.lambdalegal.org/publications/fs_nursing-home-residents-rights
Six Things Every LGBT Older Adult Should Know About Cardiovascular Disease and Hypertension

Cardiovascular conditions can have serious consequences, but the good news is that there are many ways to diminish the risks associated with these diseases. Read these six important points, and see the reverse for some simple tips to reduce your risk and keep your heart healthy.

1. One Name for Many Diseases

The term cardiovascular disease actually refers to any of the diseases that affect the cardiovascular system. The most common of these is hypertension, a chronic condition in which blood pressure within the arteries is elevated. However, this term also encompasses: heart failure, which means the heart isn't pumping blood as well as it should,
LGBTQ+ Older Adult Resources

- This article describes the need for LGBT equity in and access to care in aging services.

https://www.lgbtagingcenter.org/resources/resource.cfm?r=959
Building Inclusive Rural Practices

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/
Creating a Welcoming Environment & Overcoming Barriers

Creating an LGBTQ-friendly practice

Physicians who create an environment where all patients feel welcome can better meet their patients’ often complex health care needs. Find recommended standards of practice with lesbian, gay, bisexual or transgender patients and additional resources to assist making your practice LGBTQ-friendly.

Provide a welcoming environment

1. Provide visual clues for LGBTQ patients that your practice is a safe place.

Simple ways to create an inclusive office environment include:
   - Display brochures and educational materials about LGBTQ health concerns.
   - Visibly post a nondiscrimination statement (PDF).
   - Display posters from nonprofit LGBTQ or HIV/AIDS organizations.

Consult the Guidelines of Care for Lesbian, Gay, Bisexual and Transgender (LGBT) Patients (PDF), created by the Gay and Lesbian Medical Association, for advice on communicating with LGBTQ patients, guidelines for forms and patient-provider discussions and more.
Creating a Welcoming Environment & Overcoming Barriers

10 TIPS FOR FINDING LGBT-AFFIRMING SERVICES

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:

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Two-year actions:

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2. Recruit providers of all types who have capacity and training to serve underrepresented groups, including younger adults with disabilities, LGBT consumers and rural and frontier communities.
LEARNING TO ADDRESS IMPLICIT BIAS TOWARDS LGBTQ PATIENTS: CASE SCENARIOS

https://www.lgbthealtheducation.org/publication/learning-to-address-implicit-bias-towards-lgbtq-patients-case-scenarios/
GUIDELINES AND TIPS FOR COLLECTING PATIENT DATA ON SEXUAL ORIENTATION AND GENDER IDENTITY

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/
PROVIDING INCLUSIVE SERVICES AND CARE FOR LGBT PEOPLE - A Guide for Health Care Staff

https://www.lgbthealtheducation.org/publication/learning-guide/
Why am I being asked for my sexual orientation, gender and gender identity?

There are some states mandated by law to ask for this information. In other states some agencies are being proactive in capturing as much information as possible about the communities they serve. It’s important for service providers to not assume everyone identifies as heterosexual or straight (sexual orientation) and as their sex assigned at birth, male or female, (gender). When these assumptions are wrong, they can affect access to services.

Why is it essential to ask demographic questions?

Every day decisions are made based on data. As older adults, you may be completing an intake form at a community center, health provider, or other service organization and encounter demographic or data questions, such as race, ethnicity, educational background, income, relationship status, emergency contact, sexual orientation, gender, and gender identity. These are all data questions that help service providers get to know you better and understand any unique challenges you may experience. For example, research has shown that older African American and Latino persons are at higher risk of developing Alzheimer’s. Older people who are single and do not have children may be at higher risk for social isolation. When programs know the people they are working with may be at a higher risk for chronic illness, social isolation, and poverty, for instance, they can work to ensure their programs are meeting the needs of the community they serve.

For older people who identify as a lesbian, gay, bisexual, and transgender (LGBT), research has shown that they may also be at higher risk for chronic illness and social isolation. Historically, LGBT older people have been mostly invisible in programs for older people. This invisibility often leaves LGBT family, friends, and neighbors, fearful of accessing services and at increased risk for chronic illness and social isolation.

How has access to this information?

Common Terms

https://www.lgbtageringcenter.org/resources/resource.cfm?r=956
Why the HEI? To help LGBTQ patients find LGBTQ-friendly healthcare facilities

In addition to being a valuable tool and resource for healthcare facilities, the HEI is used by LGBTQ patients and their loved ones to find facilities that provide equitable and inclusive care. The ratings for each participating facility are published in the annual HEI report, available on our website and promoted to HRC’s more than 3 million supporters.

Consumers can easily search our online database or our interactive map to see how facilities near them rate — giving patients the ability to choose where they would like to receive care in their time of need.

To search the HEI, go to: hrc.org/hei/search

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
LGBTQ+ Health/Healthcare Education Resources

http://www.cancer.org/content/cancer/en/search.html?q=lgbt
LGBTQ+ Resources

- Free and downloadable education reports, infographics, and videos. Some available in Spanish.
- [lgbtmap.org](https://www.lgbtmap.org/lgbt-people)
Affirming Primary Care for Intersex People 2020

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

Neurodiversity & Gender-Diverse Youth: An Affirming Approach to Care 2020

LGBTQ+ Reproductive Health Guides

Adoption & Foster Parenting

Assisted Reproduction: Donor Insemination & IVF

Assisted Reproduction: Surrogacy

Organizational Support for LGBT Parents

Resources

The State of the LGBTQ Community in 2020

A National Public Opinion Study

By Sharita Gruber, Lindsay Mahowald, and John Halpin October 6, 2020, 9:00 am

A comprehensive new study from the Center for American Progress finds that many LGBTQ people continue to face discrimination in their personal lives, in the workplace and the public sphere, and in their access to critical health care.

Maintaining Dignity

Understanding and Responding to the Challenges Facing Older LGBT Americans

An AARP survey of LGBT adults age 45-plus

Report dated March 2018

AARP RESEARCH | AARP.ORG/RESEARCH

https://doi.org/10.26419/res.00217.001
LGBTQ+ Health/Healthcare Education Resources

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/
Highlighted throughout this guide is the work of State Units on Aging and Area Agencies on Aging who engage and include the LGBT community in their planning and services.

The guide includes an extensive list of tools and resources to assist with outreach to LGBT communities, data collection, needs assessments, writing LGBT-inclusive planning goals and objectives, and suggested organizational best practices for LGBT-inclusive planning.

https://www.n4a.org/blog_home.asp?display=433
LGBTQ INCLUSIVE SERVICES READINESS CHECKLIST:
A SELF-ASSESSMENT FOR AREA AGENCIES ON AGING

July 2019 | Aging Ahead, St. Louis Area Agency on Aging, National Resource Center on LGBT Aging

This self-assessment aims to help agencies determine how effectively they are supporting LGBTQ individuals and aid in identifying areas of growth. To get started, mark the boxes next to the actions your agency is taking to be more inclusive to the LGBTQ community. When finished, add up the number of boxes checked to determine your agency’s score. Results for each score, plus related resources, are listed on the last page.

https://www.lgbtagingcenter.org/resources/resource.cfm?r=902
Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs

The LGBT Inclusivity Guide for Area Agencies on Aging

A step-by-step guide for Area Agencies on Aging to provide compassionate and culturally relevant service and support to lesbian, gay, bisexual and transgender older adults

Oregon Agency and AAA LGBTQ+ Inclusion
Best Practices/Programs

Serving Diverse Elders
Strategies for Meaningful Inclusion in Service Planning and Delivery

PRODUCED BY THE NATIONAL CONSORTIUM ON AGING RESOURCES FOR SENIORS' EQUITY MEMBERS

This guide aims to provide the Aging Network with tools and resources needed to be more inclusive of culturally diverse populations of older adults during the planning process.

https://www.lgbtagingcenter.org/resources/resource.cfm?r=1006
47. Do you think of yourself as: (check one)

- Straight or Heterosexual
- Lesbian, Gay or Homosexual
- Bisexual
- Something Else
- Don't Know
- Choose not to disclose

48. What sex were you assigned at birth, as shown on your original birth certificate?

- Female
- Male

49. How do you currently describe yourself? (check one)

- Female
- Male
- Do not identify as female, male, or transgender
- Choose not to disclose
- Additional gender category/or Other), please specify
FOR IMMEDIATE RELEASE
Friday, June 28, 2019

IL Department on Aging Celebrates Pride, Announces New Inclusive Intake Forms

Chicago, IL - During LGBT Pride Month, The Illinois Department on Aging (IDoA) announced that it will include sexual orientation and gender identity questions in its referral and intake processes, expanding the Department’s commitment to LGBT older Illinoisans.

Specifically, when an individual calls the IDoA Senior HelpLine, and completes the referral and intake process for services under the Community Care Program (CCP), among the questions as part of the demographics section, will now include how the individual identifies their sexual orientation and gender identity.
Oregon Agency and AAA LGBTQ+ Inclusion
Best Practices/Programs

LGBT Outreach & Project Visibility
Outreach and support for LGBT elders; trainings for professional groups on becoming more inclusive and responsive to the LGBT community.

LGBT Program Awards
- The 2006 n4a (National Association of Area Agencies on Aging) Aging Innovation Awards for Ethnic and Cultural Diversity
- The 2006 NACo (National Association of Counties) Innovation Achievement Award
- Staff commendations: Emily Lewis, 2012 Elder Abuse Awareness & Prevention Awards; Nancy Grimes, 2013 Big Hearts Award

https://www.bouldercounty.org/families/seniors/services/lgbt/
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 sharing with us high-

Changing the Culture of Long-Term Care: Combating Heterosexism

Susan V. Schwinn, BSN, RN
Shirley A. Dinkel, PhD, APRN, FNP-C, ANP-C
"Many physicians incorrectly believe that lesbian patients do not need cervical cancer screening,"...
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.

 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