



Social Determinants of Health for LGBTQ People and Creating an Inclusive Clinical Environment

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Objectives

To understand what a social determinant of health is.

To be educated on health care disparities that affect the LGBTQ+ community.

To be educated on the development and implementation of an inclusive clinical environment.



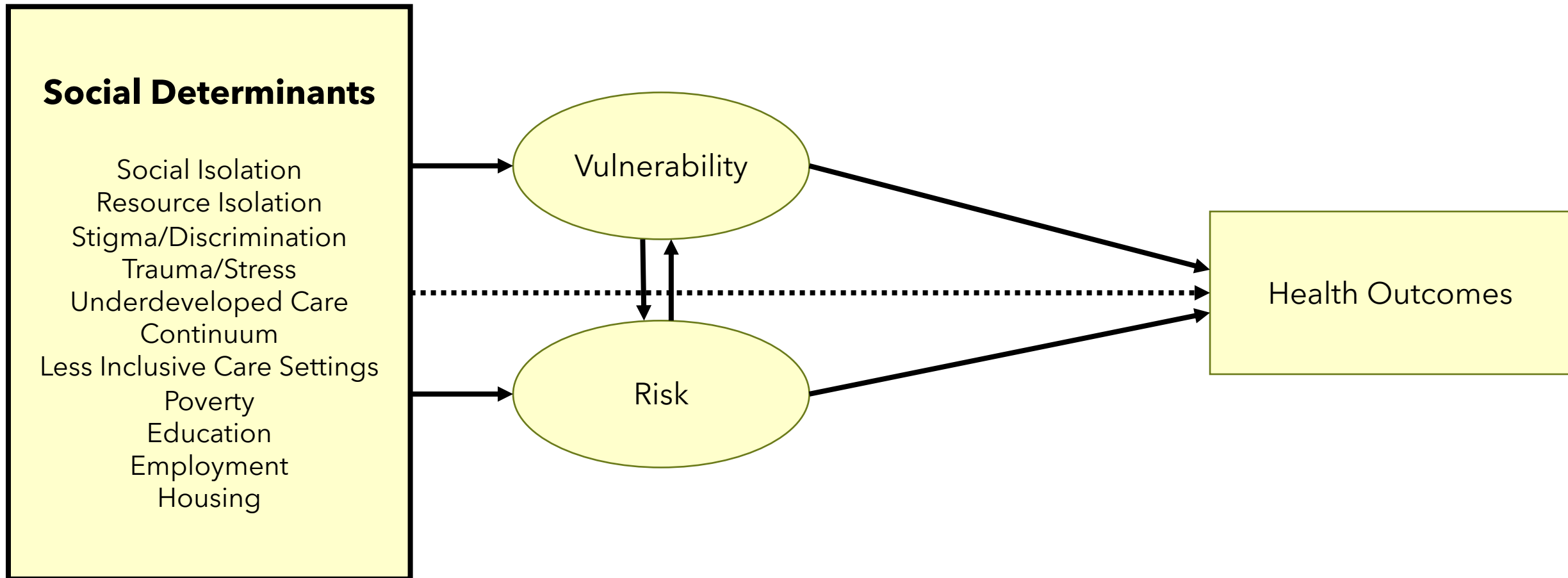
I have no conflicts of interest.

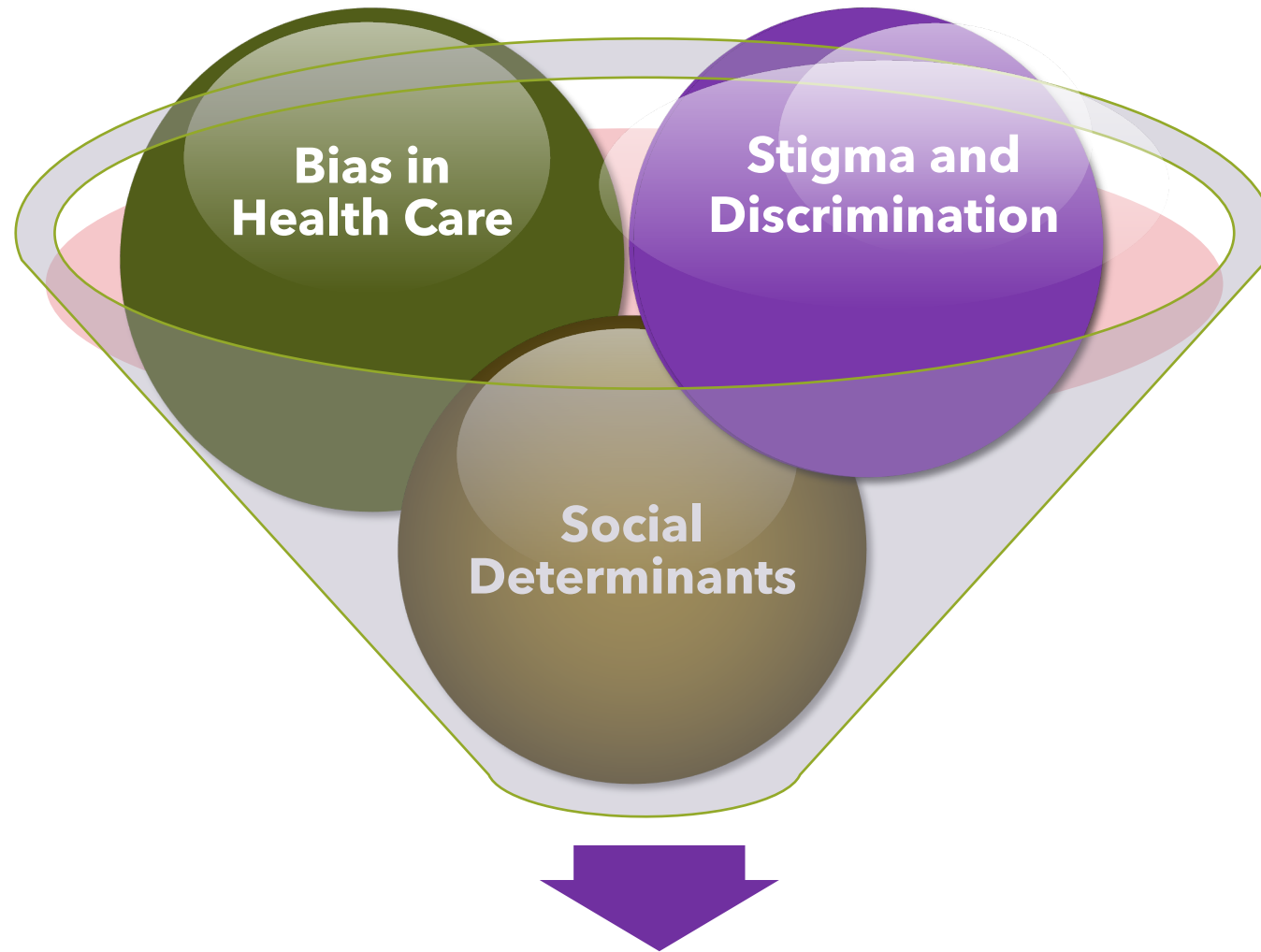
What is a social determinant?

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.


An excerpt from Healthy People 2020: “our health is also determined in part by access to social and economic opportunities; the resources and supports available in our homes, neighborhoods, and communities; the quality of our schooling; the safety of our workplaces; the cleanliness of our water, food and air; and the nature of our social interactions and relationships.

Social Determinants





Health Care Disparities



LGBT Demographics

- 3.5% of US adults identify as lesbian, gay or bisexual
- 0.3% of adults identity as transgender
- This amounts to approximately 9 million individuals (Gates 2011)
- There are higher rates of people reporting same sex attraction
 - In one national survey of 18-44 year olds, 8.8% reported history of same sex sexual behavior and 11% reported same sex attraction (Chandra 2011)
- 2010 US Census data indicates that more than 600,000 households across the country are headed by same-sex couples
 - There is a least one such household in 99% of all US counties

Why is this important?

There is a long history in the US of anti-LGBT bias in healthcare which shapes the healthcare seeking behaviors of LGBT patients and their access to care.

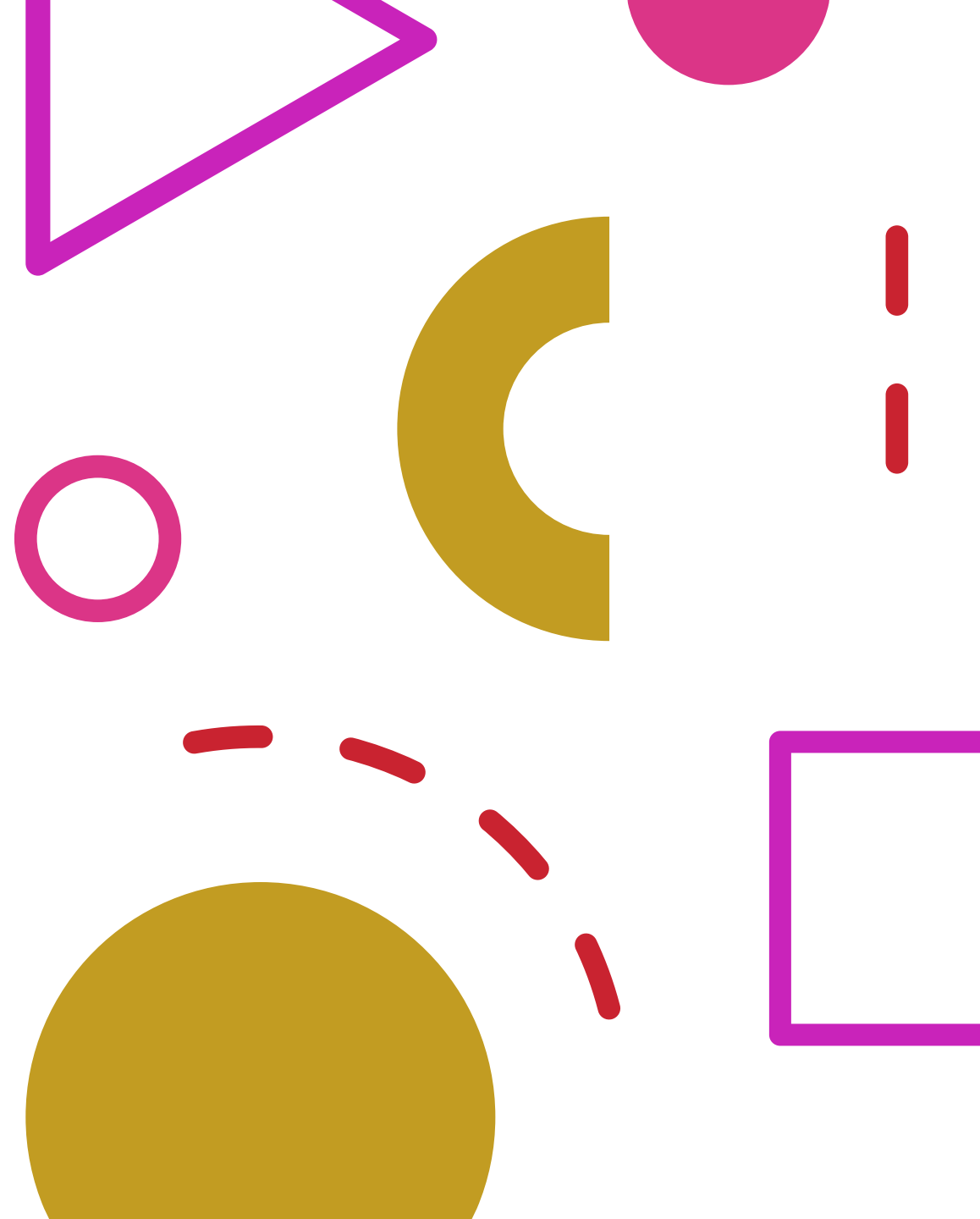
Due to prior experiences of bias or the expectation of mistreatment, many LGBT patients express reluctance to reveal their gender identity or sexual orientation to their physicians, despite the importance of this information for their healthcare.

The existence of multiple health disparities that affect the LGBT populations which are thought to stem from lack of informed healthcare and minority stress.

The effects of minority stress – social bias, stigma, shame, secrecy, loneliness and rejection by potential sexual partners can interfere with the negotiation of healthy sexual interactions. Minority stress has also been linked to mental health problems and other adverse health outcomes.

Outlining the disparities

- These disparities stem from structural and legal factors, social discrimination and lack of culturally competent care.
- Members of the LGBT community are more likely to experience difficulty accessing healthcare.
- Those in same-sex relationships are more likely to not have health insurance and more likely to have unmet health needs.



Outlining the disparities

MSM are <10% of the male population and 2% of the general population

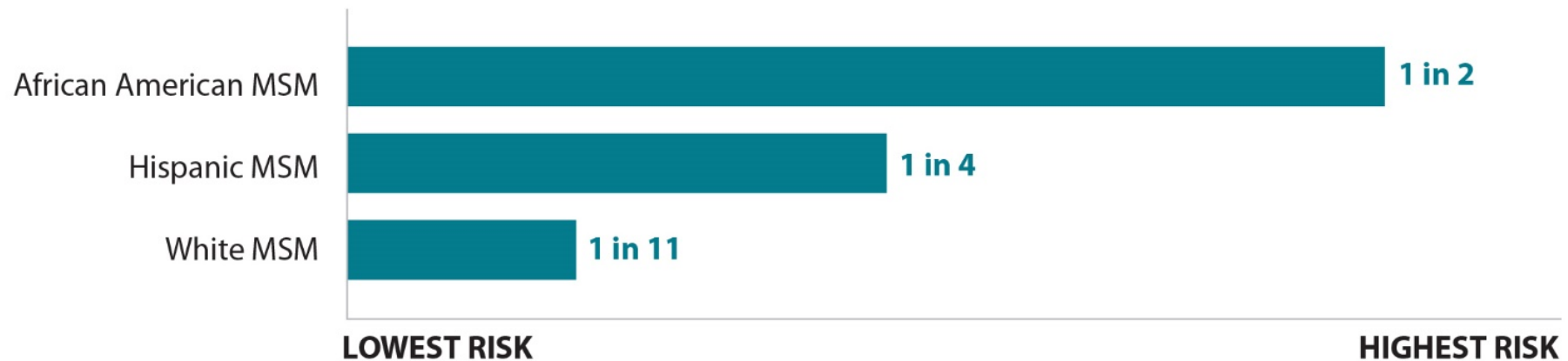
- They account for 58% of new syphilis infections and 70% of new HIV infections.
- Antibiotic resistant gonorrhea is more common in MSM than MSW.
- They face a disproportionately increased risk for anal cancer.

Transgender women

- 21.6% HIV prevalence in high income countries
- 56.3% prevalence among African-American transgender women in the US.

HIV: An Example

Lifetime Risk of HIV Diagnosis among MSM by Race/Ethnicity



Source: Centers for Disease Control and Prevention



Outlining the disparities

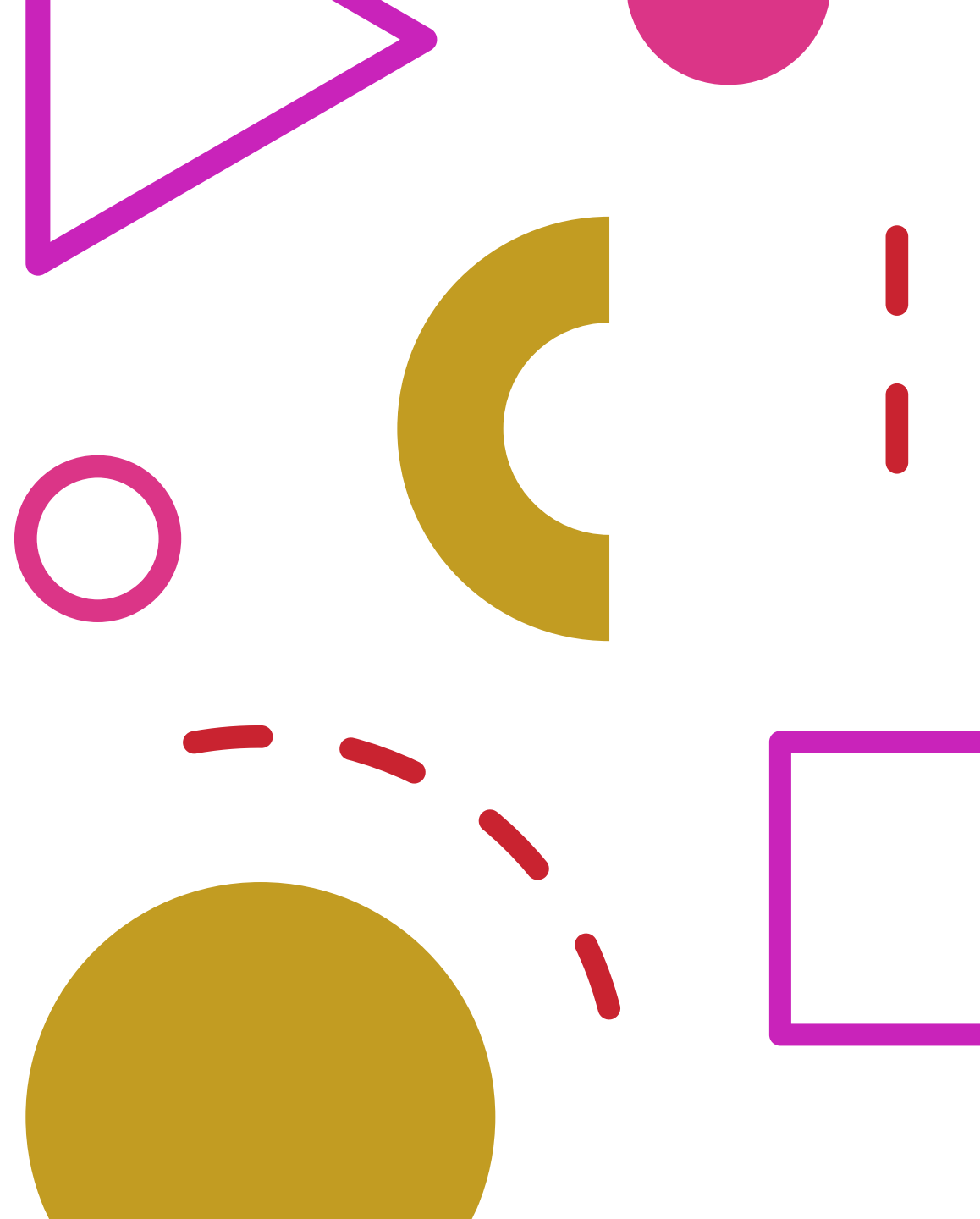
- According to the 2015 US Trans Survey:
 - 31% said none of their healthcare providers knew that they were transgender
 - 17% said some knew
 - 13% said most knew
 - 40% said all their current HCP knew

Outlining the disparities

- According to Healthy People 2020:
 - LGBT youth
 - 2 to 3 times more likely to attempt suicide.
 - More likely to be homeless (20-40% are LGBT)
 - LGBT populations have the highest rates of tobacco, alcohol, and other drug use
 - Gay men are at higher risk of HIV/STDs, especially among communities of color.
 - Lesbians are less likely to get preventive services for cancer.
 - Lesbians and bisexual females are more likely to be overweight or obese.

Outlining the disparities

- It is important to consider patient's trauma history - approach sexual trauma and assault treatment from the position of the patient's identity instead of their anatomy.
- A physician should also consider that many people of the LGBT+ community have experienced a negative event related to healthcare including sexual assault.



ORIGINAL ARTICLE

Open Access

Experiences of Stigma by Gay and Bisexual Men in Rural Oklahoma

Randolph D. Hubach,^{1,*} Joseph M. Currin,² Zachary Giano,¹ Hunter J. Meyers,¹ Kyle R. DeBoy,¹ Denna L. Wheeler,¹ and Julie M. Croff³

“The doctor I had gave me a card to go down and go to church.”

There are gay people out where I live but they don't want to be found...for example, when you get on dating apps you'll see them kind of around you within like 15 or 20-mile radius, but they won't have face pictures, won't have text in their profiles...they don't want any type of relationship, they just want sex. It's very isolated out here.

“You have the stigma of having sex at all; because we live in rural conservative Oklahoma...then you have the stigma attached to maintaining your sexual health—like getting tested...then you have to tack on the stigma of being a sexual minority.”

“I did have one experience, a while back, where a doctor had a negative reaction when I brought up my sexuality. Since then I have been more a private person about it...sometimes not telling the truth.”

Where do we go from here?



01

Ending LGBTQ+ invisibility in healthcare

02

Using inclusive language and understanding terminology related to gender identity and sexual orientation

03

Making an inclusive sexual health history part of the normal language in your office

04

Creating an inclusive clinical environment



“Community Standards of Practice for the Provision of Quality Health Care Services to LGBT Clients”

- Created by the LGBT Health Access Project
- Has 6 subject areas each with a set of standards relating to that subject area



Practice
Standards



Personnel

Standard 1. The agency shall establish, promote and effectively communicate an inclusive, non-discriminatory workplace environment for gay, lesbian, bisexual and transgendered employees.

Standard 2. The agency shall support and encourage visibility of gay, lesbian, bisexual and transgendered employees.

Standard 3. The agency shall work towards ensuring that gay, lesbian, bisexual and transgendered employees of all ages are subject to the same terms and conditions of employment, including the same benefits and compensation, as all other employees.



Client's Rights

Standard 4. The agency shall assure that comprehensive policies are implemented to prohibit discrimination in the delivery of services to gay, lesbian, bisexual and transgendered clients and their families. The agency shall ensure that all staff use, and all written forms and policies employ, culturally appropriate language when dealing with gay, lesbian, bisexual or transgendered clients and their families. For the purpose of these standards the terms "family" and "families" shall be broadly construed and shall include but not be limited to relatives by blood, adoption, marriage or declaration of domestic partnership.

Standard 5. The agency shall ensure that it has comprehensive and easily accessible procedures in place for clients to file and resolve complaints alleging violations of these policies.



www.thewelcomingproject.org




www.TrueColorsFund.org



Physical Environment

- LGBT patients report they often search for subtle cues in the environment to determine acceptance
- Include inclusive imagery in the office
- Include brochures related to LGBTQ health concerns
- Post a nondiscrimination statement which includes language related sexual orientation and gender identity



Design an effective policy related to addressing bias patients might encounter. As part of this policy, develop a way for patients to report bias they may have experienced. Post these policies where they are visible to patients and staff.



Creating an
inclusive
clinical
environment

Our physicians and staff support the American Medical Association nondiscrimination policy, in that:

This office appreciates the
diversity of human beings and
does not discriminate based on
race, age, religion, ability,
marital status, sexual orientation,
sex or gender identity.



Intake and Assessment

- Standard 6. The agency shall develop and implement or revise existing intake and assessment procedures to ensure that they meet the needs of gay, lesbian, bisexual and transgendered clients of all ages and their families.



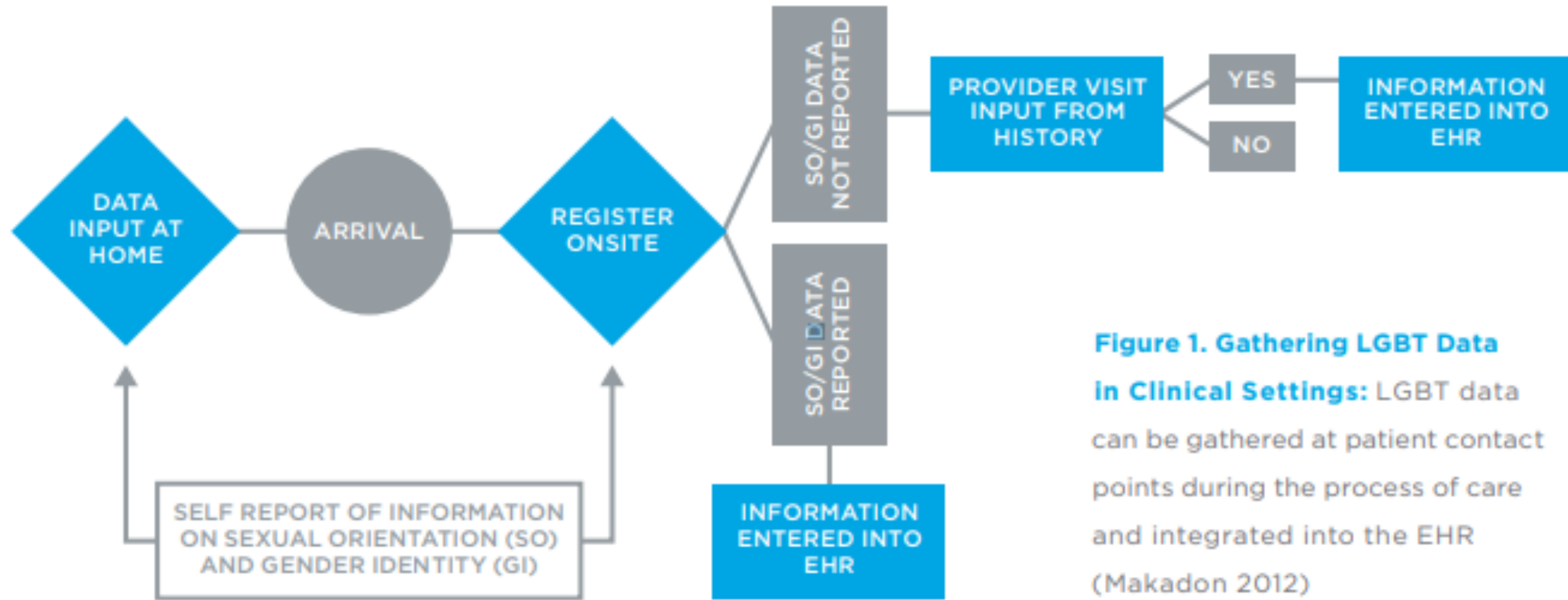




Figure 1. Gathering LGBT Data In Clinical Settings: LGBT data can be gathered at patient contact points during the process of care and integrated into the EHR (Makadon 2012)


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- This starts with intake forms:
 - Ask about sex assigned at birth, gender identity and sexual orientation
 - Ask about the patient's preferred name
 - Front office staff should ask the patient what they prefer to be called and address the patient as such.
 - This preference should be communicated to the nursing staff that are responsible for rooming the patient.
- 

Client Registration

required for release of information except in the case
of a court order.

Legal Name*		Last	First	Middle Initial	Name used:
Legal Sex (please check one)* <input type="checkbox"/> Female <input type="checkbox"/> Male <small>*While Fenway recognizes a number of genders / sexes, many insurance companies and legal entities unfortunately do not. Please be aware that the name and sex you have listed on your insurance must be used on documents pertaining to insurance, billing and correspondence. If your preferred name and pronouns are different from these, please let us know.</small>					Pronouns:
Date of Birth	Month	Day	Year	Social Security #	State ID # or License # (if applicable)
	/	/			

This information is for demographic purposes only and will not affect your care.

<p>1.) What is your annual income? _____ <input type="checkbox"/> No income</p> <p>1a.) How many people (including you) does your income support? _____</p>	<p>2.) Employment Status</p> <p><input type="checkbox"/> Employed full time <input type="checkbox"/> Employed part time <input type="checkbox"/> Student full time <input type="checkbox"/> Student part time <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Other _____</p>	<p>3.) Racial Group(s) (check all that apply)</p> <p><input type="checkbox"/> African American / Black <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian / White <input type="checkbox"/> Native American / Alaskan Native / Inuit <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other _____</p>	<p>4.) Ethnicity</p> <p><input type="checkbox"/> Hispanic/Latino/Latina <input type="checkbox"/> Not Hispanic/Latino/Latina</p> <p>5) Country of Birth</p> <p><input type="checkbox"/> USA <input type="checkbox"/> Other _____</p>
<p>6.) Preferred Language (choose one:)</p> <p><input type="checkbox"/> English <input type="checkbox"/> Español <input type="checkbox"/> Français <input type="checkbox"/> Português <input type="checkbox"/> Русский Other _____</p>	<p>7.) Do you think of yourself as:</p> <p><input type="checkbox"/> Lesbian, gay, or homosexual <input type="checkbox"/> Straight or heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Something else <input type="checkbox"/> Don't know</p>	<p>8.) Marital Status</p> <p><input type="checkbox"/> Married <input type="checkbox"/> Partnered <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Other _____</p> <p>9.) Veteran Status</p> <p><input type="checkbox"/> Veteran <input type="checkbox"/> Not a Veteran</p>	<p>10.) Referral Source</p> <p><input type="checkbox"/> Self <input type="checkbox"/> Friend or Family Member <input type="checkbox"/> Health Provider <input type="checkbox"/> Emergency Room <input type="checkbox"/> Ad/Internet/Media Outreach <input type="checkbox"/> Work or School <input type="checkbox"/> Other _____</p>
<p>11.) What is your gender?</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Genderqueer or not exclusively male or female</p>	<p>12.) What was your sex assigned at birth?</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male</p>	<p>13.) Do you identify as transgender or transsexual?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know</p>	<p>Please turn over</p> 

Service Planning and Delivery

Standard 7. All agency staff shall have a basic familiarity with gay, lesbian, bisexual and transgender issues as they pertain to services provided by the agency.

Standard 8. All direct care staff shall routinely provide general care to gay, lesbian, bisexual and transgendered clients. All direct care staff shall be competent to identify and address, within the scope of their field of expertise, specific health problems and treatment issues for gay, lesbian, bisexual and transgendered clients and their families, to provide treatment accordingly, and to provide appropriate referrals when necessary.

Standard 9. All case management and treatment plans shall include and address sexual orientation and gender identity where it is a necessary and appropriate issue in client care.

Staff Training

Many organizations provide training to various levels of medical providers from physicians to nursing staff to front office staff.

This training is considered LGBT Best Practice certification

<https://healthlgbt.org/education-training/lgbthealthcert/>

- Transgender Health
- Racial and Ethnic Minority Health
- Gay-Bisexual Men's Health
- LGBTQ women's Health



Physician interaction

Taking an open and nonjudgmental sexual and social history is part of the foundation needed to build trust with LGBT patients

Introduce yourself with your preferred pronouns

Ask the patient their preferred pronouns and what name they prefer to be called

Rather than asking if a patient is married, try asking if they have a partner or if they are in a relationship.

This normalizes the discussions of names and pronouns for both the physician and the patient

This can be done with every patient



1

Discuss gender identity and sexual orientation as it pertains to the CC (if relevant)

2

Utilize preventative health visits to address sexual health - important to include inclusive method of obtaining the history

3

Don't make assumptions about the patient's sexual history based on their stated sexual orientation. Research has shown populations of those who identify as straight also having same sex sexual contact.



Confidentiality

Standard 10. The agency shall ensure the confidentiality of client data, including information about sexual orientation and gender identity issues. Gay, lesbian, bisexual and transgendered clients shall be informed about data collection that includes references to sexual orientation and/or gender identity, including in what circumstances such information may be disclosed, whether it may be disclosed as aggregate or individual information whether personal identifiers may be disclosed, and how and by whom such information may be used.

Standard 11. The agency shall provide appropriate, safe and confidential treatment to gay, lesbian, bisexual and transgendered minors, unless the agency's services are inappropriate for all minors. All clients who are minors shall be informed of their legal rights and advised of the possibility and possible consequences of any statutory or otherwise mandated reporting.

Community Relations and Health Promotion

Standard 12. The agency shall include gay lesbian, bisexual and transgendered people and their families in outreach and health promotion efforts.

Standard 13. The composition of the agency Board of Directors and other institutional bodies shall encourage representation from GLBT communities.

Standard 14. Agency community benefits programs shall include gay, lesbian, bisexual and transgendered people in the communities the agency serves.

List Your Practice

Many LGBT patients look to online databases to find inclusive care providers.

The Gay and Lesbian Medical Association has a provider directory which is free to the public.

- <http://glma.org>

The Equality Center has a provider directory called the Equality Health Alliance which you can add your practice to.

- <https://www.okeq.org/equality-health-alliance.html>

Resources

- <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>
- <https://www.ama-assn.org/delivering-care/population-care/creating-lgbtq-friendly-practice>
- <https://www.lgbtqiahealtheducation.org/wp-content/uploads/Creating-an-Inclusive-Health-Care-Environment.pdf>
- http://www.glma.org/_data/n_0001/resources/live/Welcoming%20Environment.pdf
- <https://fenwayhealth.org/wp-content/uploads/FenwayRegistrationForm.pdf>
- <http://www.glbthealth.org/CommunityStandardsOfPractice.htm>
- <https://www.lgbtqiahealtheducation.org/wp-content/uploads/Improving-the-Health-of-LGBT-People.pdf>
- <https://www.lgbtqiahealtheducation.org/wp-content/uploads/LGBTHealthDisparitiesMar2016.pdf>