

LGBT Sensitive Care

2017

Learning Objectives

At the completion of this lesson you will be able to:

- Develop a basic understanding of the Joint Commission standards related to LGBT patient's right to support person of their choice
- Increase your awareness of the Healthcare Equality Index (HEI) and its importance in helping to promote equitable and inclusive care for LGBT patients
- Identify the needs of the LGBT patient population for sensitive communication and care
- Describe strategies for creating a safe and welcoming environment for LGBT patients and their families

HOUSE RULES!!!



Understanding Cultural Competence

“Cultural Competence is an ‘inside out approach’ to being effective in cross-cultural situations. The best way to describe cultural competence is that it is a state of mind where we respond to each other in a way where we appreciate one another’s culture. There is reciprocal space, where people look to understand one another.”



Dr Franklin Campbell Jones

Safe Spaces Create.....

A reciprocal space of understanding



LGBTQ 🤔

- How do people think of themselves sexually?
 - Identity, attractions, experiences, situations
 - Gender identity vs. sexual orientation
- The LGBTQ community is very diverse
- Ultimately, one of the most consistent feelings / identifications may be as part of a minority, and “other”
- As a community, LGBTQ people share a history of discrimination and difficulty accessing culturally sensitive health care



Personal Biases, Values, & Attitudes

- How would you feel if an established patient suddenly came out as lesbian, gay, bisexual, or transgender?
- Have you ever stopped yourself from doing or saying something because you might be perceived as gay, lesbian, too masculine, or too feminine?
- Do you think being gay, bisexual, or lesbian is a lifestyle choice?
- Would you be upset if someone thought you were gay, lesbian, bisexual, or transgender?



Discussing LGBT Status Using Terminology

Lesbian, Gay, Bisexual, Transgender

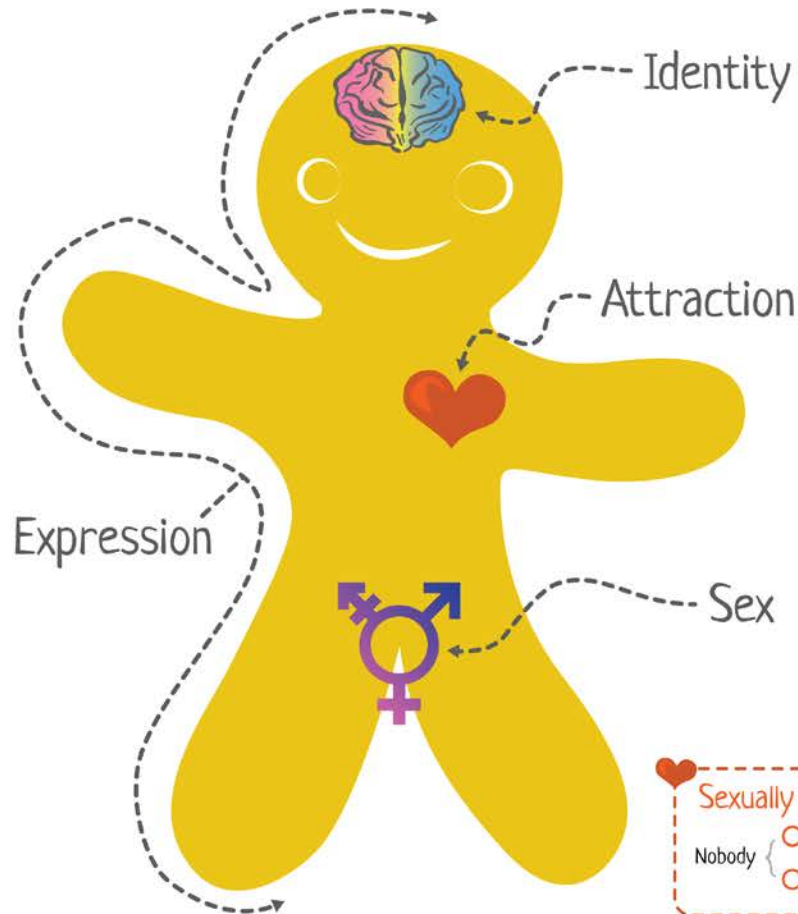
- **Sexual Orientation** – Describes a person's physical and emotional attraction to another person
- **Gender Identity** – One's personal sense of being a man or woman
- **Gender Expression** – External manifestation of gender identity
- **Transgender** – People whose gender identity/expression differs from the sex they were assigned at birth (Transsexual, GID)
- **Transitioning** – Complex process of altering one's birth sex



The Genderbread Person v3.3

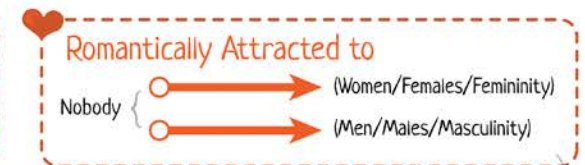
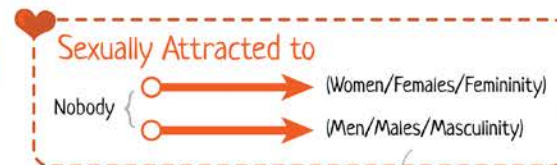
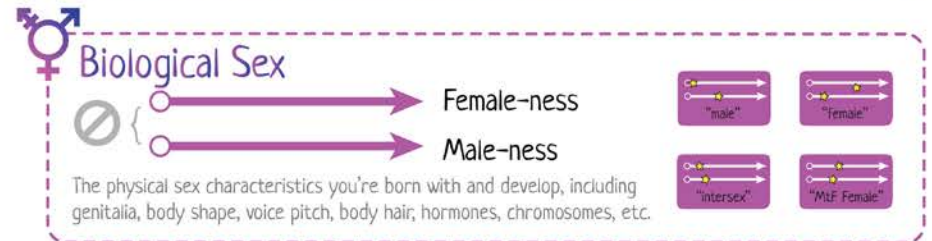
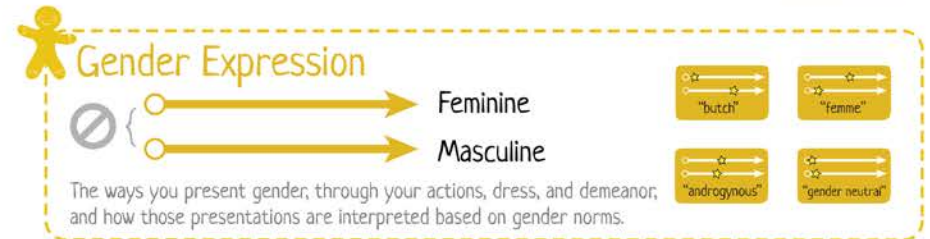
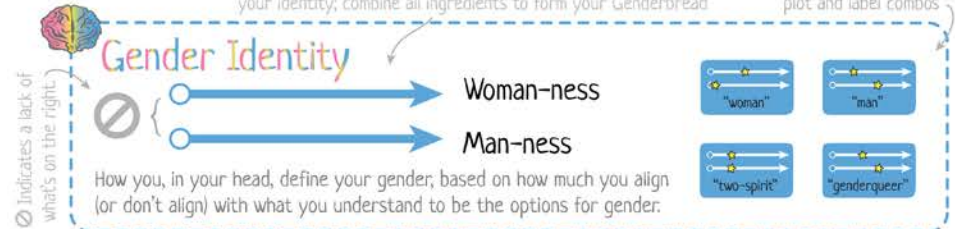
Gender is one of those things everyone thinks they understand, but most people don't. Like *Inception*. Gender isn't binary. It's not either/or. In many cases it's both/and. A bit of this, a dash of that. This tasty little guide is meant to be an appetizer for gender understanding. It's okay if you're hungry for more. In fact, that's the idea.

by *it's pronounced* **METRO**sexual.com



Plot a point on both continua in each category to represent your identity; combine all ingredients to form your Genderbread

4 (of infinite) possible plot and label combos



In each grouping, circle all that apply to you and plot a point, depicting the aspects of gender toward which you experience attraction.

For a bigger bite, read more at <http://bit.ly/genderbread>

LGBT Terminology Continued:

- **Lesbian** – A woman attracted to other women
- **Gay** – A man attracted to other men (sometimes an umbrella term)
- **Bisexual** – A person who is attracted to the two genders, not necessarily equally or simultaneously
- **Questioning** – A person who is exploring their sexual identity or orientation
- **Ally** – A person who advocates for/supports the LGBT community
- **Queer** – used as an umbrella term to describe individuals who don't identify as straight. Also used to describe people who have non-normative gender identity or as a political affiliation. Due to its historical use as a derogatory term, it is not embraced or used by all members of the LGBTQ community. The term queer can often be use interchangeably with LGBTQ.
- **Homophobia** – The irrational fear/intolerance of LGBT people
- **Heterosexism** – Assuming everyone is heterosexual

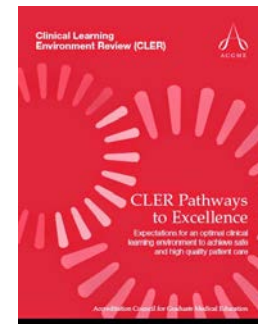
ACGME

CLER provides frequent on-site sampling of the learning environment that will:

- increase the educational emphasis on patient safety demanded by the public; and,
- provide opportunity for sponsoring institutions to demonstrate leadership in patient safety, quality improvement, and reduction in health care disparities



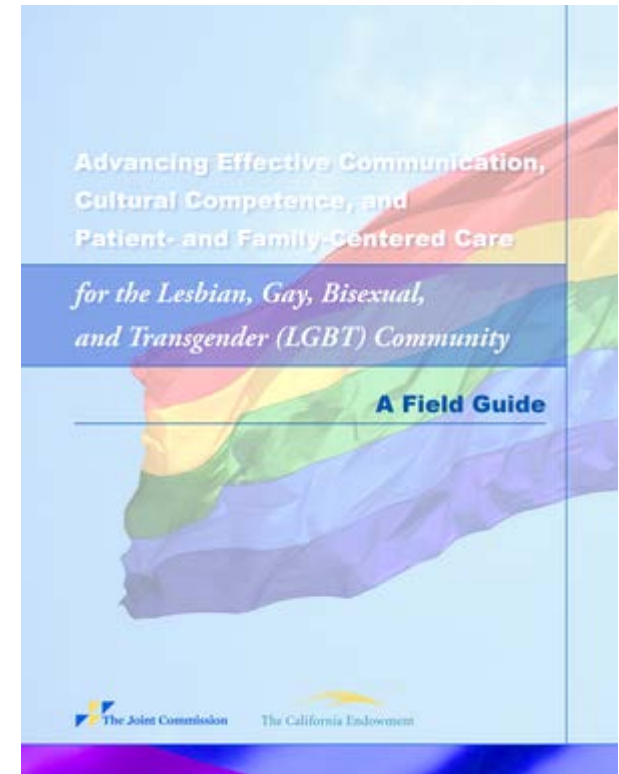
Accreditation Council for
Graduate Medical Education



Yale
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Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community

The Joint Commission field guide was released in 2009 and updated in 2011 points healthcare facilities to the HRC's Healthcare Equality Index (HEI) as a resource on best practices in LGBT patient-centered care.



Health Care Equality Index (HEI)



<http://www.youtube.com/watch?v=RNNy17AGpo0&feature=autoplay&list=PL93D710A2A4222ECB&playnext=2>

The HEI Also Asks About...

- LGBT patient services
- Transgender patient services
- LGBT patient self-identification
- Medical decision-making
- LGBT employment benefits & policies
- Community engagement



HUMAN
RIGHTS
CAMPAIGN
FOUNDATION

HEALTHCARE
EQUALITY
INDEX

PATIENT-CENTERED
CARE FOR
LGBT AMERICANS

Yale
NewHaven
Health

Why is This Important?

A recent literature review found that self-identified **LGB individuals** are **more likely than heterosexuals** to rate their health as **poor**, have more **chronic conditions**, and have **higher prevalence and earlier onset of disabilities**.

<http://kaiserfamilyfoundation.files.wordpress.com/2014/01/8539-health-and-access-to-careand-coveragefor-lesbian-gay-bisexual-and-transgender-individuals-in-the-u-s.pdf>

Why is This Important?

International Population based studies indicate that **LGB adults** are **six times more likely** than heterosexuals to attempt **suicide**.

www.ncbi.nlm.nih.gov/pmc/articles/PMC3662085

Why is This Important?

“Lesbians are less likely to get preventative services for cancer”

<http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=25>

Why is This Important?

“**GBT** men smoke 50% more than other men, and **LBT** women smoke almost 200% more than other women”

GLMA “Guidelines for Care of Lesbian, Gay, Bisexual, and Transgender patients”

Why is This Important?

“Refusal of care: 19% of transgendered individuals sampled reported being **refused medical care** due to their transgender or gender non-conforming status, with even high numbers among people of color in the survey.

Uninformed Doctors: 50% of the sample reported having to **teach their medical providers** about transgender care.”

Transgender Patient's Story



Common Disparities in Health Care Experienced by LGBT Patients

- Less access to insurance and health care services, including preventive care (such as cancer screenings)
- Lower overall health status
- Higher rates of smoking, alcohol, and substance abuse
- Higher risk for mental health illnesses, such as anxiety and depression
- Higher rates of sexually transmitted diseases, including HIV infection
- Increased incidence of some cancers

Common Disparities in Health Care Experienced by LGBT Patients

- Refusal of care
- Delayed or substandard care
- Inequitable policies and practices
- Little or no Inclusion in Health Outreach or Education
- Inappropriate restrictions or limits on visitation.
- Inequalities may be even **more pronounced for LGBT people from racial/ethnic minorities or due to other characteristics such as education level, income, geographic location, language, immigration status, and cultural beliefs.**

Culturally Competent Intake

How can I take an
LGBT-sensitive social history?



Culturally Competent Intake Questions

Try to normalize but not apologize

Use words and questions you are comfortable with. The most important thing is to ask:

- ✓ “Do you have a **partner** or **significant other**?”
- ✓ “What name would you prefer to be called?”
- ✓ “What kind of support structure do you have?”
- ✓ “What should I know about your current sexual activity?”
- ✓ “What concerns, if any, do you have about sexual issues?”
- ✓ “Do you think of yourself as straight, gay, bi or something else?”
- ✓ “Do you have a romantic partner? What is your partner’s name?”
- ✓ “Do you currently, or have you ever, used hormones?”

REMEMBER: LGBT patients have often faced negative reactions to “coming out” and may fear being criticized or judged. But they are not looking for your “approval” – just respect and understanding that this is who they are.

Activity Time

Non-Gender Specific Dating Conversation

- Pick a Partner and discuss the last date that you had with a significant other or friend using non-gender specific language.
- The following words are **NOT** allowed to be used:
 - He
 - She
 - Boy
 - Girl
 - His
 - Her
 - Man
 - Woman

Activity Time - Debrief

Was this easy or difficult?

Why is disclosure important?

- Trust and Strong Relationship leads to adherence
- Awareness of health care needs / risks
- More likely to access important preventive services and manage chronic disease more effectively
- Ability to incorporate partners / spouses in care planning
- Psychological wellbeing
- Hiding one's identity takes mental energy and may increase stress. These detract from attaining health goals.

Culturally Competent Intake Questions

- ✓ Ask your patient to clarify any terms or behaviors you may be unfamiliar with. – “Help me understand?”
- ✓ Address each interview showing empathy, open mindedness and reservation of judgment.
- ✓ ***Stress the confidential patient-provider interaction***

Protect
Patient
Information



HIPAA
COMPLIANT

Confidentiality

Why is assuring
confidentiality so important
to LGBT Patients?

Confidentiality

- Physical Threats
- Risk of Being Stereotyped
- Troubling Discrimination In Health Care
- Loss of Social Support
- Risk of Losing Employment

Physical Threats

According to 2012 FBI published reports,
Sexual orientation ranks as the second-
highest motivator for hate crime incidents
(19.6% of reported cases)

<http://www.fbi.gov/news/stories/2013/november/annual-hate-crime-statistics-show-slight-decrease/annual-hate-crime-statistics-show-slight-decrease>

Risk of Being Stereotyped

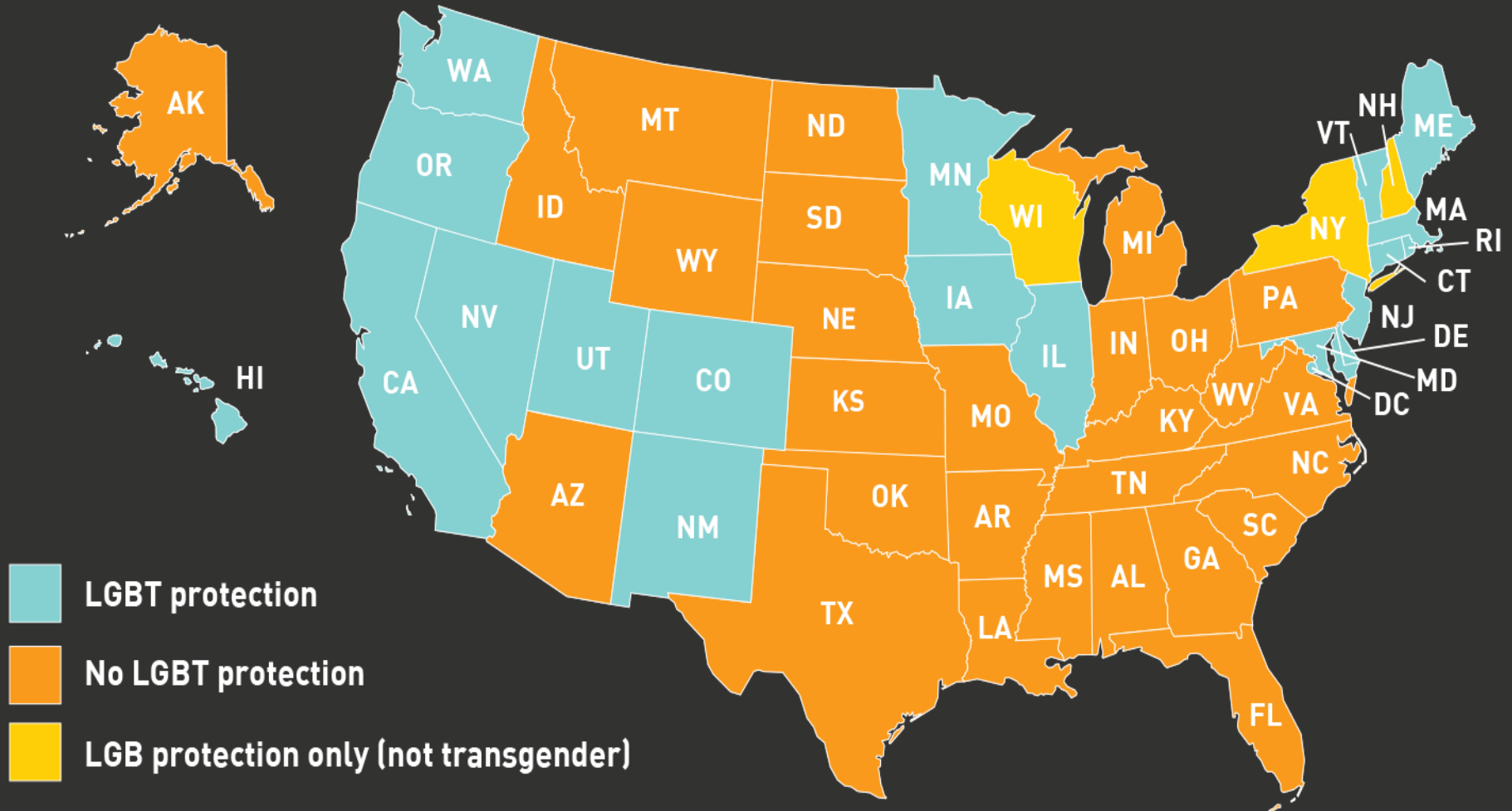
Gay people	Gay Men	Gay Women
<ul style="list-style-type: none">- not religious- non-monogomous- sexually promiscuous- estranged from family- pedophiles/predators- weak- clearly identifiable	<ul style="list-style-type: none">- are all effeminate- all engage in risky sexual behavior- are generally HIV+- HIV is a gay male disease or gay disease	<ul style="list-style-type: none">- masculine- sexually abused as children- negative opinion of men

Risk of Losing Employment

Relationships in a work or health care environment may be affected if an individual chooses to come out. Individuals can **legally be fired** for being **gay** In **29 states**, and in **34 states** for being **transgender**. Consider how this may affect your patients, your colleagues, your coworkers.....

(<http://www.upworthy.com/29-states-can-fire-you-for-being-gay-is-your-state-one-of-them>)

STATES WITH NO LGBT EMPLOYMENT PROTECTIONS



What's An Ally?

Being an Ally:
For Your Patients
&
For Your Community



Who is an Ally?

- A person who is a member of the dominant group who works to end oppression and discrimination of an oppressed population.
- A person who supports and advocates for a group other than her/his own in both her/his private and professional life.

What Can You Do?

- Always ASK and LISTEN
- Use inclusive language in conversation and paperwork
- Post “Safe Zone” or other signals of your acceptance
- Don’t make assumptions
- Educate yourself:
 - Familiarize yourself with resources available to LGBTQ individuals and communities
 - Take time to learn about LGBTQ issues
 - Don't make assumptions
 - **Don't be afraid to ask questions!**



Be Open & Vocal About Support

- Make it known that your clinic, office, home, desk, or personal bubble is a safe space.
- Stand up to homophobic, intolerant, or ignorant language and actions when you see them.
- Challenge stereotypes (your own and those of others).
 - ❖ Always go back to our YNHHS Values...
- Do not make jokes about LGBTQ individuals, and let others know that their jokes are hurtful and inappropriate.

**“To Treat Me You Have To Know
Who I Am”**



Thank You

Time for Questions?

