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Meeting the Health Care Needs of Homeless Lesbian, Gay, Bisexual, and Transgender People

Part II: Creating Change

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Learning Objectives

- List strategies to collect data on sexual orientation and gender identity in clinical settings.
- Describe what you can do to improve care for LGBT people at your health center.
- Identify how to create an environment supportive of LGBT staff and patients.

Overcoming Barriers

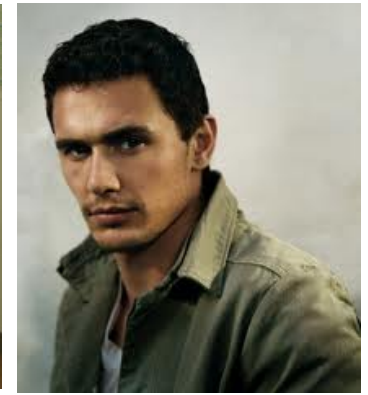


HAVE
YOU EVER
FELT
INVISIBLE
BEFORE

How well do you know those coming for care? How do you find out?



New Patients



**New Lesbian/Gay/
Bisexual/Transgender
Patients**

How do clinicians and staff feel
and what do they do when
learning this?

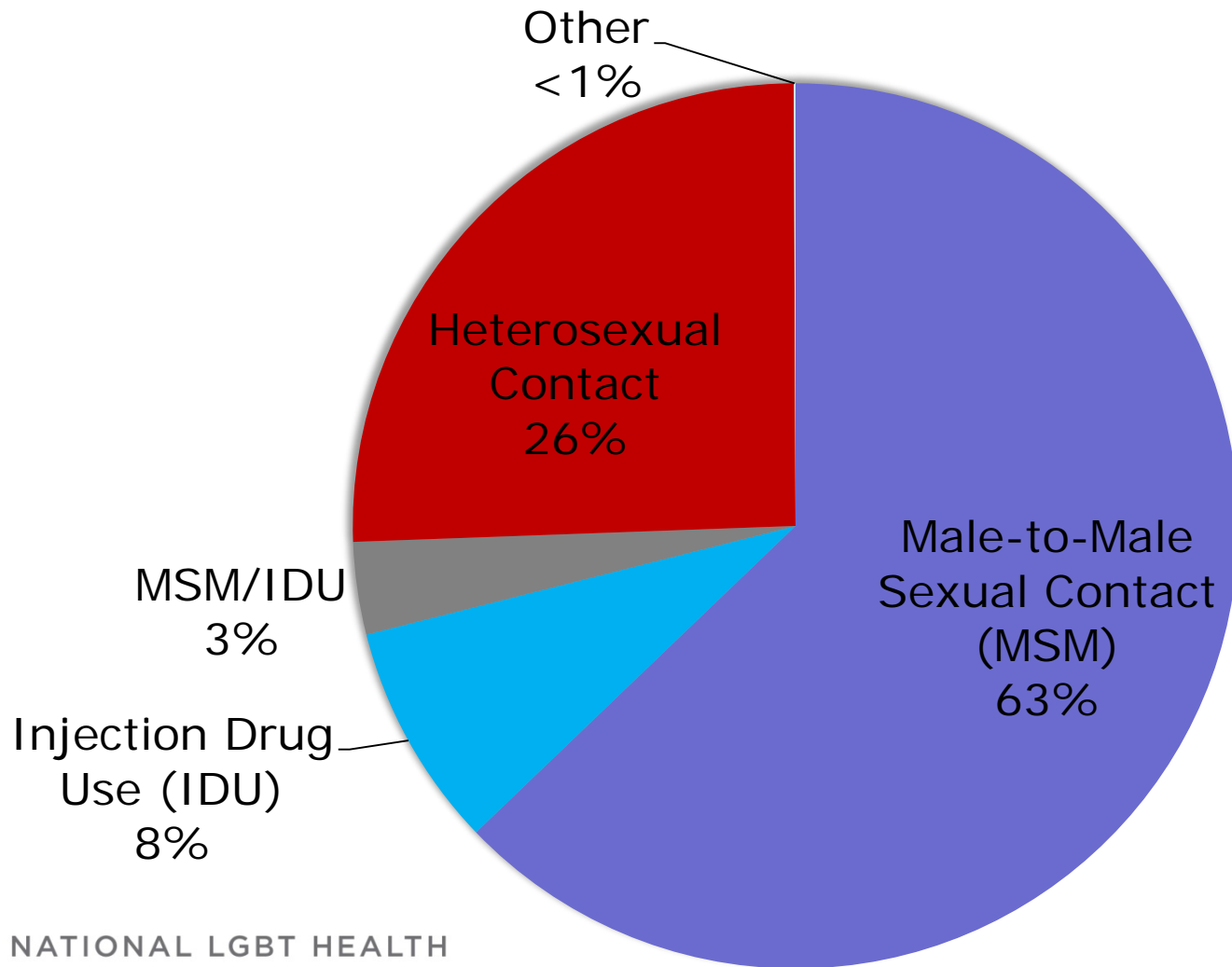
I. Prevention: Improve Access, Quality, and Outcomes

- ❑ IOM: Lesbians and bisexual women may use preventive health services less frequently than heterosexual women.
 - How can we insure adequate care if we don't routinely gather data that from individuals that is population specific?
 - How can we help clinicians and consumers learn more about optimizing care if we don't gather information and use what we learn as teachable moments?

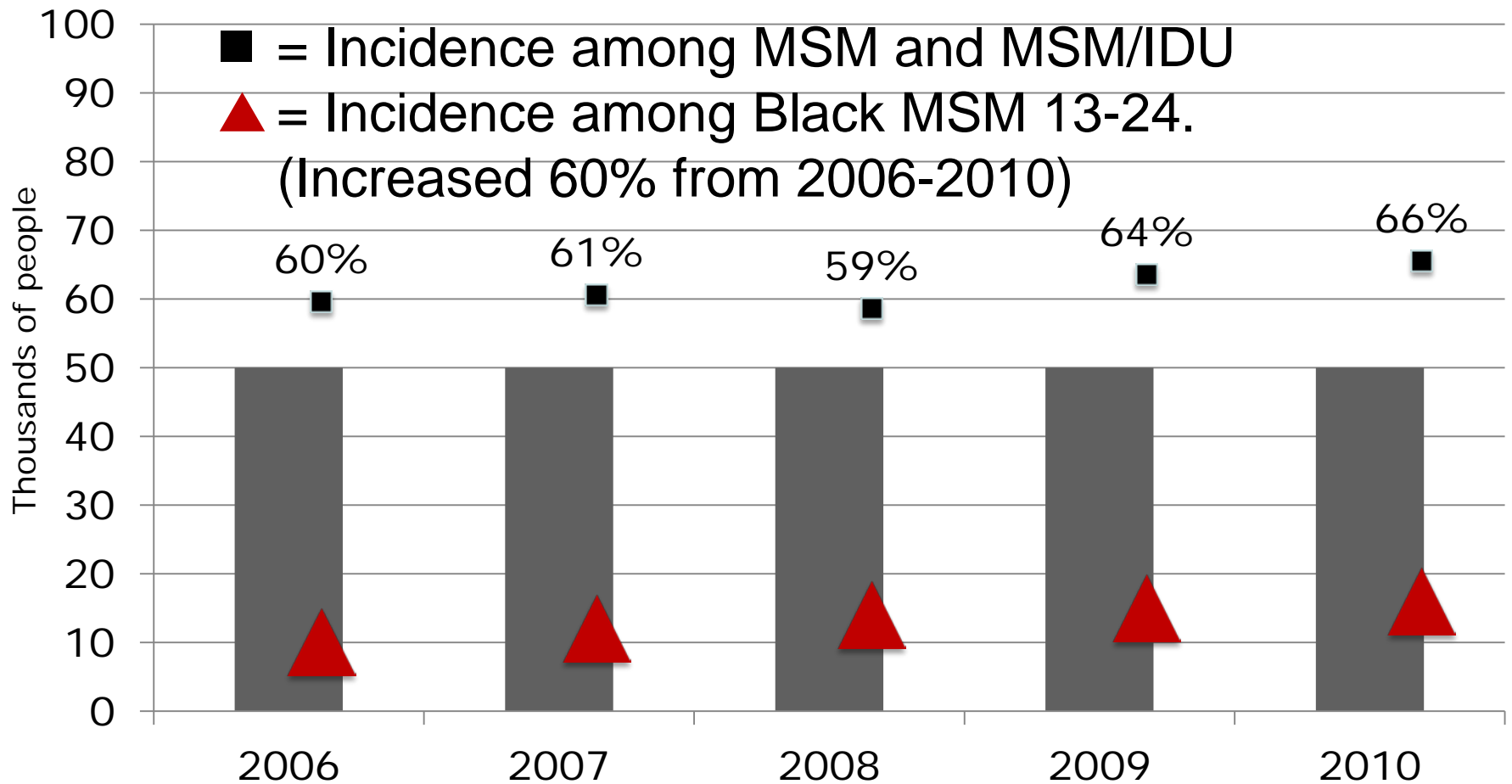
II. Clinical Practices to Improve HIV Prevention and Care for MSM:



HIV Incidence by Transmission Category, United States, 2010



HIV Incidence in the United States, 2006-2010



Why is HIV incidence highest among black MSM?

- ❑ Sexual risk behaviors and substance use **do not** explain the differences in HIV infection between black and white MSM.
- ❑ The most likely causes of disproportionate HIV infection rates are:
 - Low frequency of recent HIV testing
 - High HIV prevalence in black MSM networks
 - High prevalence of other STI's which facilitate HIV transmission
 - Barriers to access health care



What we need to know to provide quality care

- ❑ Understand cultural diversity among MSM (all LGBT people)
- ❑ How to reach underserved populations
- ❑ How to help people discuss identity and behavior in clinical settings
- ❑ How to use this information to improve effective prevention and care
 - Ensure HIV testing and counseling
 - Ensure screening for STD's
 - Develop effective linkages to treatment

III. Quality Care for Transgender People-Louise M

- ❑ Louise M is a 50-year-old woman who developed a high fever and chills after head and neck surgery
- ❑ Infection source was prostate gland (acute prostatitis), but no one knew that she had this anatomy
- ❑ No one asked her about her gender identity, so no one knew she was transgender

IV: Appropriate Screening: Ari R's story

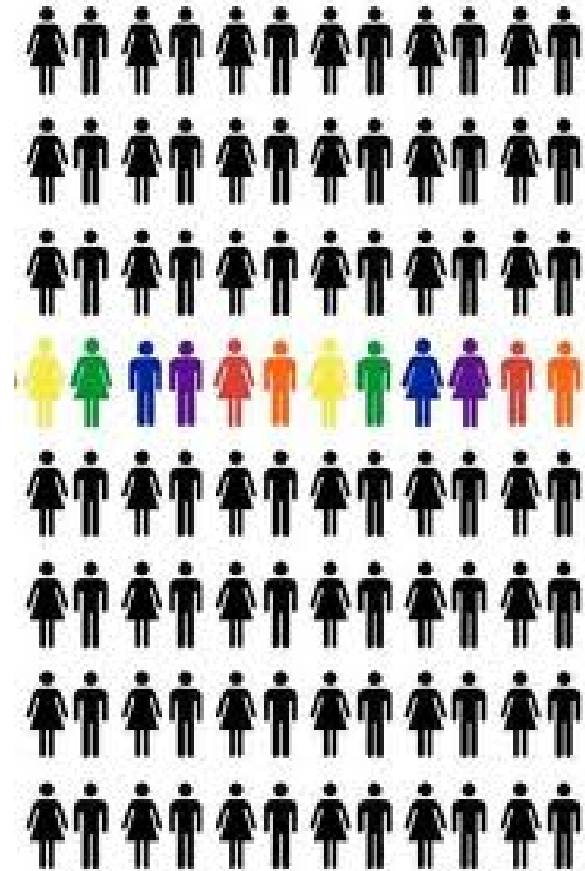
- ❑ Ari R is a 55-year-old man who came in with pain and on x-ray what appeared to be metastases from a unknown primary cancer
- ❑ Evaluation ultimately showed that he had developed cancer in his residual breast tissue after “top surgery” to remove his breasts
- ❑ No one knew Ari was a transgender man, so he had not known to have routine breast screening, even though his mother and sister also had breast cancer

Preparation for Collecting Data in Clinical Settings

- ❑ Clinicians: Need to learn about LGBT health and the range of expression related to identity, behavior, and desire. Staff needs to understand concepts.
- ❑ Patients: Need to learn about why it is important to communicate this information, and feel comfortable that it will be used appropriately.
- ❑ Data Collection: Critical, and has to be done sensitively without assumptions routinely **on all**, along with other demographic data.

Population Health: Ending LGBT Invisibility in Health Care

- How many of you have ever been asked to discuss your sexual history during a primary care visit?
- Has a clinician ever asked you about your sexual orientation?
- Has a clinician ever asked about your gender identity?



Tools for Change!

POLICY FOCUS:

WHY GATHER DATA ON
SEXUAL ORIENTATION
AND GENDER IDENTITY
IN CLINICAL SETTINGS

POLICY FOCUS:

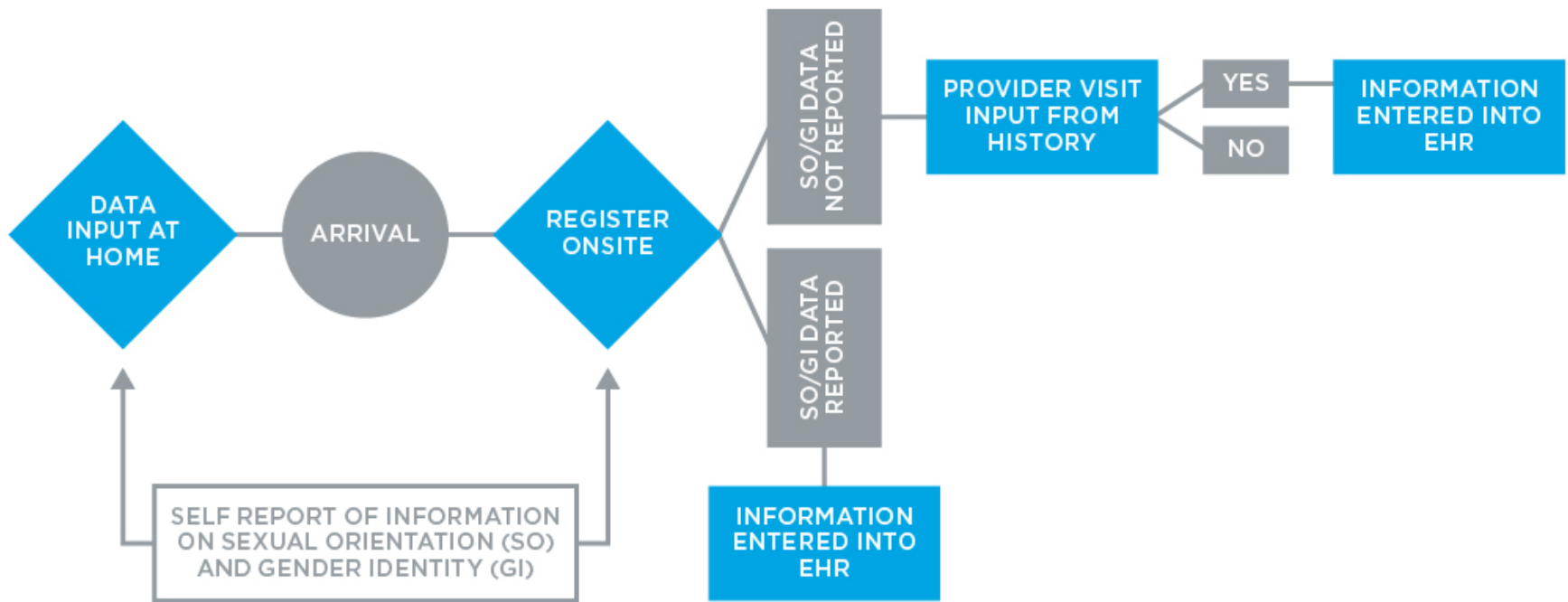
HOW TO GATHER DATA
ON SEXUAL ORIENTATION
AND GENDER IDENTITY
IN CLINICAL SETTINGS

Why gather data on sexual orientation and gender identity?

- ❑ Increases ability to screen, detect, and prevent conditions more common in LGBT people
- ❑ Helps develop a better understanding of patients' lives
- ❑ Patients may feel safer discussing their health and risk behaviors once they've been asked, even if they haven't disclosed
- ❑ Allows comparison of patient outcomes within health care organizations and with national survey samples of LGBT people



Gathering LGBT Data During the Process of Care: New Opportunities to Gather Data from All



Collecting Demographic Data on Sexual Orientation

<p>1. Which of the categories best describes your current annual income? Please check the correct category:</p> <p><input type="checkbox"/> <\$10,000</p> <p><input type="checkbox"/> \$10,000–14,999</p> <p><input type="checkbox"/> \$15,000–19,999</p> <p><input type="checkbox"/> \$20,000–29,999</p> <p><input type="checkbox"/> \$30,000–49,999</p> <p><input type="checkbox"/> \$50,000–79,999</p> <p><input type="checkbox"/> Over \$80,000</p>	<p>2. Employment Status:</p> <p><input type="checkbox"/> Employed full time</p> <p><input type="checkbox"/> Employed part time</p> <p><input type="checkbox"/> Student full time</p> <p><input type="checkbox"/> Student part time</p> <p><input type="checkbox"/> Retired</p> <p><input type="checkbox"/> Other _____</p>	<p>3. Racial Group(s):</p> <p><input type="checkbox"/> African American/Black</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Caucasian</p> <p><input type="checkbox"/> Multi racial</p> <p><input type="checkbox"/> Native American/Alaskan Native/Inuit</p> <p><input type="checkbox"/> Pacific Islander</p> <p><input type="checkbox"/> Other _____</p>	<p>4. Ethnicity:</p> <p><input type="checkbox"/> Hispanic/Latino/Latina</p> <p><input type="checkbox"/> Not Hispanic/Latino/Latina</p> <p>5. Country of Birth:</p> <p><input type="checkbox"/> USA</p> <p><input type="checkbox"/> Other _____</p>
<p>6. Language(s):</p> <p><input type="checkbox"/> English</p> <p><input type="checkbox"/> Español</p> <p><input type="checkbox"/> Français</p> <p><input type="checkbox"/> Português</p> <p><input type="checkbox"/> Русский</p>	<p>7. Do you think of yourself as:</p> <p><input type="checkbox"/> Lesbian, gay, or homosexual</p> <p><input type="checkbox"/> Straight or heterosexual</p> <p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Something Else</p> <p><input type="checkbox"/> Don't know</p>	<p>8. Marital Status:</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Partnered</p> <p><input type="checkbox"/> Single</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Other _____</p> <p>8. Veteran Status:</p> <p><input type="checkbox"/> Veteran</p> <p><input type="checkbox"/> Not a veteran</p>	<p>1. Referral Source:</p> <p><input type="checkbox"/> Self</p> <p><input type="checkbox"/> Friend or Family Member</p> <p><input type="checkbox"/> Health Provider</p> <p><input type="checkbox"/> Emergency Room</p> <p><input type="checkbox"/> Ad/Internet/Media/Outreach Worker/School</p> <p><input type="checkbox"/> Other _____</p>

Collecting Demographic Data on Gender Identity

- 1. What is your current gender identity?
(Check an/or circle ALL that apply)**
 - Male
 - Female
 - Transgender Male/Trans Man/FTM
 - Transgender Female/Trans Woman/MTF
 - Genderqueer
 - Additional category (please specify):

 - Decline to answer
- 2. What sex were you assigned at birth?
(Check one)**
 - Male
 - Female
 - Decline to answer
- 3. What pronouns do you prefer (e.g., he/
him, she/her)? _____**

Center of Excellence for Transgender Health, UCSF

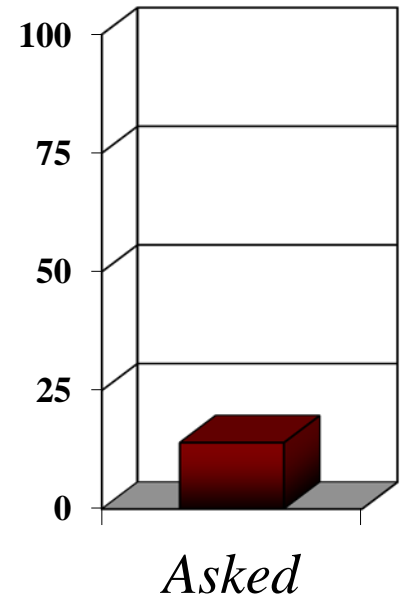
Getting to Know Patients in Clinical Settings



Proportion of Physicians Discussing Topics with HIV-Positive Patients

- ❑ Adherence to ART 84%
- ❑ Condom use 16%
- ❑ HIV transmission and/or risk reduction 14%

4 US Cities (n=317)



(*AmJPublicHealth*. 2004;94:1186-92)

Ask Screen Intervene

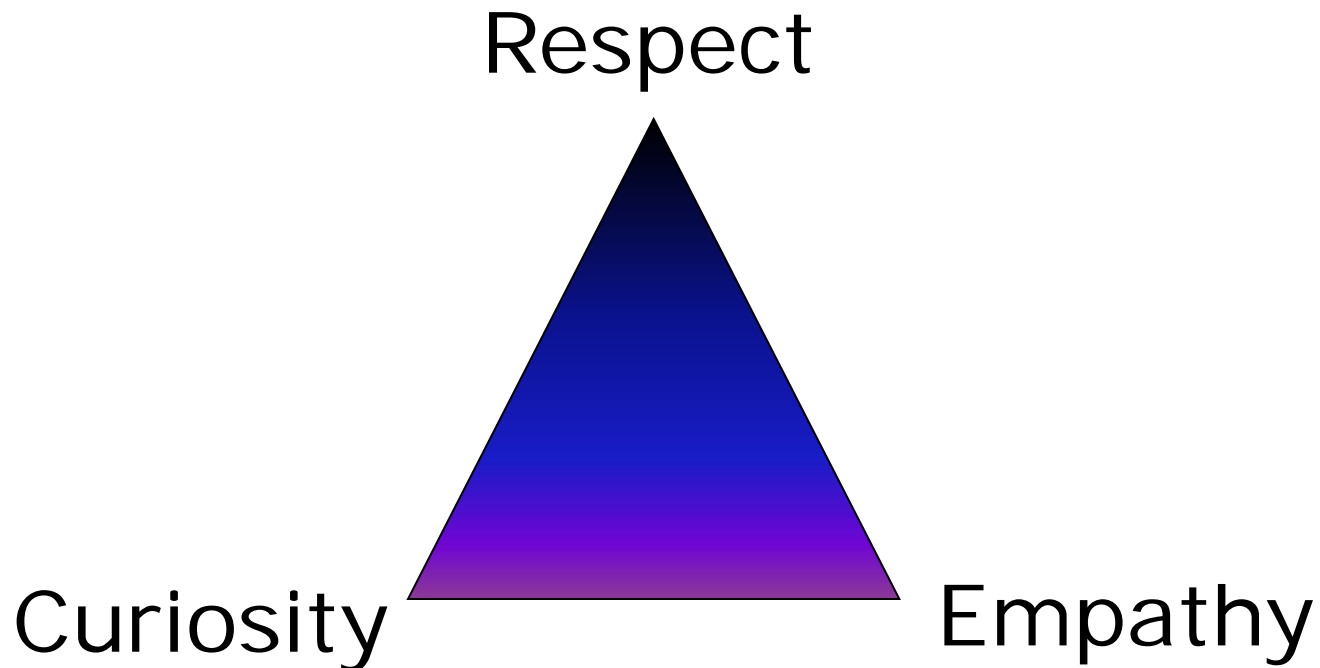
Discomfort as a Barrier

“Ironically, it may require greater intimacy to discuss sex than to engage in it.”

The Hidden Epidemic
Institute of Medicine, 1997

Ask Screen Intervene

The Core of the Cross-cultural Interview



Adapted from Betancourt and Green



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Taking a History

- ❑ The core comprehensive history for LGBT patients is the same as for all patients (keeping in mind unique health risks and issues of LGBT populations)
- ❑ Get to know your patient as a person (e.g., partners, children, jobs, living circumstances)
- ❑ Use inclusive and neutral language
 - ***Instead of:*** “Do you have a wife/husband or boy/girlfriend?”
 - ***Ask:*** “Do you have a partner?” or “Are you in a relationship?”
“What do you call your partner?”
- ❑ For all patients
 - Make it routine
 - Make no assumptions
 - Not to be equated with learning about LGBT health



Taking a Sexual History

- ❑ Ask about behavior and risk
 - Have you had sex with anyone in the last year?
 - Did you have sex with men, women, or both?
 - How many partners did you have?

- ❑ Ask about sexual health
 - Do you have any concerns about your sexual function?
 - How satisfied are you sexually?
 - Have you had any changes in sexual desire?

- ❑ Assess comfort with sexuality
 - Do you have any concerns or questions about your sexuality, sexual identity, or sexual desires?



Discuss Gender Identity

- Can be complex due to fluidity of expression for some and rapidly changing terminology
- Information on gender identity may be best obtained in advance of visit, self report at home or at registration
- In clinical settings, a provider can ask if patient has questions about gender identity
- Follow up as appropriate

Creating Change at Home: Affirmative, Inclusive Environments for Caring, Learning, and Working



The Joint Commission

**Advancing Effective Communication,
Cultural Competence, and
Patient- and Family-Centered Care**

*for the Lesbian, Gay, Bisexual,
and Transgender (LGBT) Community*

A Field Guide



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Creating a caring and inclusive environment

- Are clinicians and staff taught about the health needs of LGBT people?
- Do LGBT employees feel respected and safe at work?
- Do forms reflect the full range of sexual and gender identity and expression
- Is there a non-discrimination policy inclusive of sexual orientation and gender identity for patients and staff?
- Are there educational brochures on LGBT health topics?
- Are there unisex bathrooms?

Education for all Staff



Affirmative Care for Transgender and Gender Non-Conforming People: Best Practices for Front-line Health Care Staff

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 Post this sheet on your wall or desk as a helpful reminder.

Best Practices for a Transgender-Affirming Environment





BEST PRACTICES	EXAMPLES
Avoid using gender terms, like "sir" or "ma'am" when addressing patients	"How may I help you today?"
Avoid gender terms or use gender neutral words such as "they" when talking about patients. <i>Never</i> refer to someone as "it".	"They are here for their 3 o'clock appointment." "The patient is here in the waiting room."
Politely ask if you are unsure about a patient's preferred name or pronoun	"What name would you like me to use?" "I would like to be respectful—how would you like to be addressed?"
Ask respectfully about names if they do not match in your records	"Could your chart be under another name?" "What is the name on your insurance?"
Did you goof? Politely apologize	"I apologize for using the wrong pronoun. I did not mean to disrespect you."
Only ask information that is required	Ask yourself: What do I know? What do I need to know? How can I ask in a sensitive way?

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Adding Same Sex Imagery and Content to Education and Marketing Materials



Our Challenge: Quality Care for All, Including LGBT People





The National LGBT Health Education Center at The Fenway Institute: We are here to help you!



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