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LGBTQ CULTURAL COMPETENCE

Improving care to the LGBTQ community

OBJECTIVES

The objectives for this webinar

1. Explain the importance of identifying LGBTQ patients/clients.
2. Discuss benefits of valuing the diversity within the LGBTQ community.
3. Explain the link between discrimination and health.
UNIT II
THE BASICS

The components of our gender and sexual identities

WHY DO WE NEED TO KNOW WHO OUR LGBTQ CLIENTS AND PATIENTS ARE?

* Improve service delivery
* Increase knowledge
* Encourage trust

Patients/clients who don’t come out to their providers are more likely to LIE or LEAVE.
There are more than **9 MILLION** LGBTQ people in the United States. It’s fair to assume you see LGBTQ people regularly.

**WHY DON’T WE KNOW THEM?**

Most forms don’t permit disclosure, you can’t tell by looking,

...and we rarely **ask**.
WHO TOLD THEIR PROVIDER?

* 45% of transgender patients have not told their family physician that they are transgender

* 24% of LGBT adults said they had deliberately withheld information about their sexual practices from their doctor or other health care professional

* While 70% of lesbians disclosed their sexual orientation to their provider, only 29% were asked by their provider.

NYC GAY AND BISEXUAL MEN DOWN LOW

<table>
<thead>
<tr>
<th>Characteristics of men who have sex with men</th>
<th>% have not disclosed to doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>39%</td>
</tr>
<tr>
<td>White</td>
<td>19%</td>
</tr>
<tr>
<td>Black</td>
<td>60%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>48%</td>
</tr>
<tr>
<td>Asian</td>
<td>47%</td>
</tr>
<tr>
<td>Self-identified as homosexual</td>
<td>22%</td>
</tr>
<tr>
<td>Self-identified as bisexual</td>
<td>100%</td>
</tr>
</tbody>
</table>

100% of the bisexual men in this study did NOT come out to their doctor.
It’s YOUR JOB to find out who is LGBTQ. It’s your job to make it SAFE, and your job to ASK EVERYONE.
SEXUAL ORIENTATION

* **LESBIAN** an identity label for women who have primary sexual, romantic and relational ties to other women.

* **GAY** an identity label for men who have primary sexual, romantic and relational ties to other men.

* **BISEXUAL** an identity label for people who are attracted to people of the same gender and different genders.
BEHAVIOR VS. IDENTITY

9.4% of men who identified as “straight” had sex with another man in the prior year.

They were more likely to...
- Belong to minority racial/ethnic groups
- Be of lower socio economic status
- Be foreign born
- Not use a condom

77-91% of lesbians had at least 1 sexual experience with men

8% in the prior year

DEFINING OUR TERMS

The subjective experience of one’s own gender
GENDER IDENTITY

The persistent internal sense of being a man or a woman or some other gender.

- We all have a gender identity
- For cisgender people, this gender identity matches the sex assigned at birth

Transgender people have a gender identity that does not match the sex assigned at birth.

- Our gender identity may or may not match our appearance, our body, or others’ perceptions of us

There are approximately 1.4 million transgender people living in the United States.

TRANSITION is the process of changing one’s gender presentation to match one’s internal sense of gender

* Transgender people may decide to transition at any age
* Not all transgender people wish to transition completely to the other sex
* They may or may not change their name/pronouns
* They may or may not use hormones or surgery
CONSTRUCTS OF GENDER IDENTITY

Biological Construct
- Gender reassignment or transition
- Gender identity begins here

Patient-centered Construct
- Gender affirmation

OTHER TERMS
- pansexual
- queer
- LGBTQIA+
- SGL
- DSD/Intersex
- two spirit
- gender variant
- genderqueer
WHERE DO YOU FIT?

Biological Sex
- Male
- Female
- Intersex/DSD

Attracted to women
- Attracted to both
- Attracted to men

Sexual Orientation

Gender Expression
- Masculine
- Androgynous
- Feminine

Gender Identity
- Man
- Woman
- Genderqueer/two spirit/third gender

UNIT III

INTERSECTIONALITY

Diversity within the community
Everyone’s **IDENTITY** is made up of different **components**.

- Race
- Age
- Health/Ability
- Culture
- Country of Origin
- Gender Identity
- Sexual Orientation
- Appearance
- Ethnicity
- Politics
- Income
- Work
- Religion
HIDDEN IDENTITIES / PUBLIC IDENTITIES

Hidden Identities
- age
- gender
- expression
- health/ability
- race
- sex
- career
- ethnicity
- politics
- national identity
- religion

Public Identities

Privilege

Privilege Card

Name:

N:

1/24/18
### PRIVILEGE

<table>
<thead>
<tr>
<th>Category / Status</th>
<th>Level of Privilege</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Low</td>
</tr>
<tr>
<td>Education</td>
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<tr>
<td>Gender identity</td>
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<tr>
<td>Gender expression</td>
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<tr>
<td>Immigration status</td>
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<td>Race</td>
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<td>Religion</td>
<td>Low</td>
</tr>
<tr>
<td>Sexual orientation</td>
<td>Low</td>
</tr>
<tr>
<td>Skin color</td>
<td>Low</td>
</tr>
<tr>
<td>Socio-economic class</td>
<td>Low</td>
</tr>
</tbody>
</table>

Privilege and Discrimination in One Man's Life
UNIT IV

HEALTH DISPARITIES

We are not at equal risk for disease

SOCIAL DETERMINANTS OF HEALTH
• LGB respondents in states without protective policies were 5x more likely than those in other states to have 2 or more mental disorders.

• LGB people who had experienced “prejudice-related major life events” were 3x more likely to have suffered a serious physical health problem over the next year, regardless of age, gender, employment and even health history.

• LGB people who live in communities with high levels of anti-gay prejudice die 12 years earlier than their peers in other communities.

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LGBTQ Math...

Low income and/or lack of insurance + Homophobia and/or transphobia

Greater health disparities
TRANSGENDER DISCRIMINATION

Snapshots of transgender life

The National Transgender Center for Equality surveyed 6,450 transgender individuals in the US. Full results are available at transequality.org.

CLINICAL CARE SERVICES
HEALTH DISPARITIES CAUSED BY ACCESS TO CARE BARRIERS

Lack of provider knowledge about LGBTQ health

- Average number of hours dedicated to LGBTQ health in an entire medical school education: 5
- Between 2005-2009, only 1% of the articles published in nursing journals focused on LGBTQ health (8 out of 5000)
- Without explicit teaching about LGBTQ issues, physicians and medical students will reflect the same extent of homophobia and heterosexism as exists in the broader society
- 50% of transgender people had to teach their medical provider about transgender care
80% of 1st year medical students expressed implicit bias against lesbian/gay people.

Nearly 50% expressed explicit bias.
When surveyed, transgender Americans report experiencing discrimination in hospitals or doctor’s offices.

- Report being harassed or disrespected: 37%
- Report being physically assaulted: 3%
75% of lesbians report delaying/avoiding healthcare

Individual behaviors that impact LGBTQ health:
- Tobacco
- Drugs
- HIV
- Alcohol
- STI
- Obesity / Eating disorders
LGBTQ TOBACCO STATS

Smoking is the LGBT community’s biggest health burden

33% LGBT Population

20% U.S. Population

LGBT people smoke cigarettes at rates that are than 63% HIGHER the rest of the population

ALCOHOL & DRUG USE

In some studies, alcohol abuse rates were 3X HIGHER than in the mainstream population.
**SEXUALLY TRANSMITTED INFECTIONS**

**HIV / HPV / SYPHILIS**

**EATING DISORDERS AND OBESITY**

Gay males are **7X** more likely to report binging and **12x** more likely to report purging than heterosexual males.

Gay men represent **5%** of the total male population, but **42%** of males with eating disorders identify as gay.

Lesbians have a higher prevalence of overweight and obesity than all other female sexual orientation groups, putting them at greater risk for morbidity and mortality.
MENTAL HEALTH

* LGBTQ people are at elevated risk for depression, anxiety, and suicidality
* LGB youth are 4X more likely to attempt suicide
* 47% of transgender people have attempted suicide

Disparities across the cancer continuum

- Increased cancer risks
- Lower cancer screening rates
- Increased challenges in survivorship

Robin Roberts image courtesy of ABC News
PROTECTIVE FACTORS

UNIT V

BEYOND DIVERSITY

Creating a welcoming environment
“Diversity is inviting everyone to the party. Inclusion is asking them for a dance.”

**FIRST IMPRESSIONS MATTER**

**SAFE ZONE**

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**HOW TO BUILD TRUST IN YOUR ORGANIZATION**

* Co-brand with LGBTQ trusted groups
* Promote your organization through LGBTQ media channels
* Include LGBTQ goals in your action plans
* Give grants to LGBTQ agencies
* Conduct an LGBTQ needs assessment
Create inclusive spaces:

**Gender neutral bathrooms** are not just kind, they **OFFER SAFETY** to transgender and gender nonconforming people.
If you can’t change the form, **CHANGE YOUR USE OF IT.**

---

**IT'S OK TO FEEL AWKWARD AS YOU LEARN**

If this seems **AWKWARD, it's me, not you.**
Stepping on toes is the unintentional pain caused by a NEWFOUND WILLINGNESS to be close with people who are different.