CREATING INCLUSIVE HEALTH CARE ENVIRONMENTS FOR LGBT PATIENTS AND STAFF

March 26, 2014

Heidi Holland, Program Manager
National LGBT Health Education Center
OBJECTIVES FOR TODAY

By the end of today’s session participants will be able to:

1. Define key terminology, health disparities and demographics of the LGBT population.
2. Discuss disparities impacting LGBT people.
3. Describe strategies and model policies for creating an inclusive environment for LGBT patients and employees in health centers and other health care settings.
Polling Question 1

What is your role at your health center or other health care setting?

a) Human Resources
b) Other Administrative Role
c) Clinical Provider
d) Outreach/Recruitment
e) Other
LGBT DEMOGRAPHICS, CONCEPTS, AND TERMINOLOGY
1.7-5.6% (average 3.5%) identify as lesbian, gay, or bisexual

0.3% of adults (~700,000 people) identify as transgender
  - Based on limited data

(Gates et al., 2011)
SEXUAL ORIENTATION

- How a person identifies their physical and emotional attraction to others (e.g. lesbian, gay, bisexual, heterosexual)
- Terminology continues to evolve (e.g. Queer)
Sex, Gender, and Gender Identity

- **Sex**: Biological and anatomic differences assigned at birth, generally male or female
- **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?)
GENDER IDENTITY ≠ SEXUAL ORIENTATION

- All people have a gender identity and a sexual orientation
- Gender identity is not the same as sexual orientation
TRANSGENDER

- Transgender: An Umbrella Term
  - Gender identity or expression not congruent/aligned with assigned sex at birth
  - Alternate terminology
    - Transgender women, trans woman
    - Transgender men, trans man
    - Genderqueer (fluid, non-binary gender identity)
  - Transsexual: historically a term used to describe transgender individuals who have undergone or used hormone treatment and/or some form of gender affirmation surgery
  - Gender affirmation – process by which individuals are affirmed in their gender identity.
    - Social, medical, legal
FAMILY MATTERS

Marriage

Relationships

Parenting
FAMILY MATTERS

- 17 states plus DC currently recognize same-sex marriage; 3 states have civil unions or domestic partnership
- About 6 million Americans have an LGBT parent
- 19% of same-sex couples are raising children
  - 73% of these are biological children; 21% are adopted or stepchildren
- Same-sex couple parents and their children are more likely to be racial and ethnic minorities
- States with the highest proportions of same-sex couples raising biological, adopted or step-children include Mississippi, Wyoming, Alaska, Idaho, and Montana (The Williams Institute, 2013)
AGING ISSUES: POLICY CHANGES

- Until recently, same-sex couples could not access government benefits that older people rely on.
- In September 2013, HHS announced that legally married same-sex couples on Medicare will be eligible for equal benefits and joint placement in nursing homes around the country.
- Additionally, Medicare now applies equally to all married couples, regardless of where the couple resides.
DISPARITIES IMPACTING LGBT PATIENTS & STAFF
BIAS IN HEALTH CARE PERSISTS

- 24% of transgender people denied equal treatment at a doctor’s office or hospital (Grant et al, 2011)
- ~70% of medical residents too uncomfortable to ask adolescents about sexual orientation (Kitts, J Homosexuality, 2010)
- 15% of medical students witnessed mistreatment of LGBT students at schools (AAMC reporter, 2007)
- 17% of LGBT medical students experienced hostile environments (AAMC reporter, 2007)
LGBT HEALTH DISPARITIES: HEALTHY PEOPLE 2020

- LGBT youth
  - 2 to 3 times more likely to attempt suicide
  - More likely to be homeless (20-40% are LGBT)
  - Risk of HIV, STD’s
- MSM are at higher risk of HIV/STDs, especially among communities of color
- LGBT populations have high rates of tobacco, alcohol, and other drug use
- Lesbians are less likely to get preventive services for cancer
LG BT HEALTH DISPARITIES: HEALTHY PEOPLE 2020

- Transgender individuals experience a high prevalence of HIV/STI’s, victimization, mental health issues, and suicide
  - They are also less likely to have health insurance than heterosexual or LGB individuals
- Elderly LGBT individuals face additional barriers to health because of isolation, fewer family supports, and a lack of social and support services
BIAS IN THE WORKPLACE

- 26% of transgender people reported losing job because they were transgender (Task Force 2011)
- 48% of LGBT people reported harassment and discrimination at work (Williams Inst. 2011)
BARRIERS FOR LGBT EMPLOYEES

- Concerns about harassment or discrimination at work
- Many feel the need to hide their sexual orientation or transgender identity at work to avoid bias (Williams Inst 2011)
- Some lack access to family health insurance plans and other benefits, such as family and medical leave
POLLING QUESTION 2

How comfortable do you think it is to be a lesbian, gay, bisexual, or transgender employee at your health care organization?

a) Very comfortable
b) Pretty comfortable
c) Not comfortable
d) Very uncomfortable
e) Not sure
STRUCTURAL APPROACHES TO CREATING A WELCOMING AND INCLUSIVE ENVIRONMENT

Five Areas Across the Organization
1. Leadership & Policy
2. Care & Services
3. Workforce
4. Data Collection
5. Engagement with the LGBT community
LEADERSHIP

- Implement staff and management assessments to understand knowledge, skills and attitudes
- Assess policies & protocols
- Share policy changes that support LGBT people with the entire organization; use as an opportunity for taking a public stance
- Mandate LGBT cultural competency training for staff at all levels
Leadership

- Appoint openly LGBT people to board of directors and consumer advisory board
- Recognize Pride Month, LGBT Health Week, Transgender Day of Remembrance & other key events
- Appoint an LGBT Champion or support an employee resource group
THE AFFORDABLE CARE ACT & LGBT PEOPLE

OPTIMIZING LGBT HEALTH UNDER THE AFFORDABLE CARE ACT:
Strategies for Health Centers
November 2013

NATIONAL LGBT HEALTH EDUCATION CENTER
A PROGRAM OF THE FENWAY INSTITUTE
Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community

A Field Guide
TJC: PATIENT-CENTERED COMMUNICATION
STANDARDS FOR HOSPITALS

- RI.01.01.01: The hospital respects, protects and promotes patient rights.
  - EP 29: The hospital prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.
INCLUSIVE POLICY

We do not discriminate on the basis of:

- Race
- Ethnicity
- Age
- Sex
- Gender Identity/Gender Expression
- Sexual Orientation
- Socioeconomic Status
- Religion
- Insurance Status
- Country of Origin
- Physical Ability
- Mental Ability
SAMPLE EMPLOYEE NON-DISCRIMINATION POLICY

Discrimination or harassment against any member of ABC Health Care Center community (i.e., employee, faculty, house staff, student, or patient) because of age, ancestry, color, disability as defined by Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act, gender, gender identity and/or expression, marital or parental status, national origin, pregnancy, race, religion, sexual orientation, veteran's status or any other categories protected by federal or state law is prohibited and will not be tolerated, nor will any person for those reasons be excluded from the participation in or denied the benefits of any program or activity within the ABC Health Care Center.
WHEN AN EMPLOYEE TRANSITIONS GENDER ON THE JOB

**Proactively**

- Remove health insurance exclusions
- Appoint a point person within HR

**Senior leadership demonstrates support**

- Create a timeline for information
- Develop a communication flow with colleagues and patients
ADDITIONAL ISSUES TO ADDRESS WHEN AN EMPLOYEE TRANSITIONS

- Address gossip, rumors and harassment
- Provide staff training
- Name change
- Pronouns
- Personnel records

- Dress codes & restrooms – consistent with gender identity
- Model Policy:
  - US Office of Personnel Policy and Management
EFFECTIVE POLICY SUPPORTING LG BT PATIENTS & STAFF

- Staff and patients are aware of these policies and the process that they can utilize to address any bias they might encounter
- Policies are posted in places that are highly visible for patients and staff
- Training around policies and rationale for policies and implementation are ongoing
CARE & SERVICES
FIVE WAYS THE AFFORDABLE CARE ACT HELPS IMPROVE LGBT HEALTH

DATA COLLECTION
NON-DISCRIMINATION PROTECTIONS
PREVENTION AND WELLNESS
INSURANCE MARKET REFORMS
NEW COVERAGE OPTIONS

STRATEGIES FOR EnROLLING LGBT PEOPLE IN COVERAGE UNDER THE AFFORDABLE CARE ACT

IN THE HEALTH CENTER

Attract LGBT people into your health center.
Create a welcoming environment for LGBT patients at your health center.
Train front desk and program staff to work with LGBT community members and their families.
Connect patients to patient service staff who can enroll them in coverage.
Consider using patient surveys and program evaluation forms to give LGBT individuals the option of identifying themselves as lesbian, gay, bisexual, and/or transgender.

OUTSIDE THE HEALTH CENTER

Reach LGBT people where they already go for social support, services, and goods.
Use mobile technology to enroll on-site.
Advertise in the local LGBT press and develop communications strategies that incorporate new media.
Connect people to care at your health center.
WELCOMING ENVIRONMENT

What is the patient experience from the moment they walk in the door at every point within their encounter?

- How are patients addressed at reception?
- Do forms and intake procedures reflect the reality of patients lives/identities?
- Are there gender neutral restroom facilities?
- Do signs, symbols, literature indicate that this is a welcoming place?
- How does the provider interact with the patient (language, sexual history, openness?)
LG BT SPEC IFIC HEALTH PROGRAMS

Examples include:

- Targeted prevention and wellness that addresses specific health needs of LGBT (e.g. address disparities mentioned earlier)
- Offer transgender specific health care services
- A comprehensive approach to family planning that includes the needs of those wanting to have children and their various options
- Behavioral health services that are versed on the specific needs of LGBT people
OFFER RESOURCES

- LGBT specific patient education materials
- Up to date referrals for LGBT specific community resources
- Help connect folks to LGBT media and social networking sites
STAFF TRAINING

- Includes employees at all levels of the organization
- Endorsed and promoted by senior managers
- Focuses on both individual level and systems level

- Addresses:
  - Knowledge
  - Skills
  - Attitudes

- Integrates LGBT content into staff orientation, sexual harassment, diversity and clinical training
RECRUITING FOR DIVERSITY

- Develop relationships and connections with the community & key organizations
- Utilize LGBT media and social networking sites
- Attend & support events
- Co-sponsor events and programs
A COMMITMENT TO NON-DISCRIMINATION & EEOC

Fenway Health believes in and supports this philosophy and makes affirmative efforts to attain the goal of hiring and retaining a diverse work staff, which includes, but is not limited to, the recruitment and hiring of minority, female, lesbian, gay, bisexual, transgender, Vietnam-era veterans and disabled persons which exist in the community. Fenway complies fully with all federal, state and local laws relating to equal employment opportunity and affirmative action.
BENEFITS: SAME-SEX COUPLES & LGBT HEADED FAMILIES

- Inclusive of same-sex partners/spouses
- Adoption Benefit
- Family, Medical and Bereavement leave – recognizes family structures
BENEFITS: TRANSGENDER STAFF

- Health insurance policy that covers medical and necessary cosmetic procedures
- Health insurance policy that does not categorize transgender as a “pre-existing” condition
DATA COLLECTION: COLLECTING DATA ON SEXUAL ORIENTATION & GENDER IDENTITY
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
STUDY ON COLLECTION OF DATA

POLICY FOCUS
Asking Patients Questions about Sexual Orientation and Gender Identity in Clinical Settings
A Study in Four Health Centers

THE FENWAY INSTITUTE
CENTER FOR AMERICAN PROGRESS
NATIONAL LGBT HEALTH EDUCATION CENTER
A PROGRAM OF THE FENWAY INSTITUTE
COLLECTING DEMOGRAPHIC DATA ON SEXUAL ORIENTATION

<table>
<thead>
<tr>
<th>1. Which of the categories best describes your current annual income? Please check the correct category:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ &lt;$10,000</td>
</tr>
<tr>
<td>□ $10,000–14,999</td>
</tr>
<tr>
<td>□ $15,000–19,999</td>
</tr>
<tr>
<td>□ $20,000–29,999</td>
</tr>
<tr>
<td>□ $30,000–49,999</td>
</tr>
<tr>
<td>□ $50,000–79,999</td>
</tr>
<tr>
<td>□ Over $80,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Employment Status:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Employed full time</td>
</tr>
<tr>
<td>□ Employed part time</td>
</tr>
<tr>
<td>□ Student full time</td>
</tr>
<tr>
<td>□ Student part time</td>
</tr>
<tr>
<td>□ Retired</td>
</tr>
<tr>
<td>□ Other ________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Racial Group(s):</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ African American/Black</td>
</tr>
<tr>
<td>□ Asian</td>
</tr>
<tr>
<td>□ Caucasian</td>
</tr>
<tr>
<td>□ Multi racial</td>
</tr>
<tr>
<td>□ Native American/Alaskan Native/Inuit</td>
</tr>
<tr>
<td>□ Pacific Islander</td>
</tr>
<tr>
<td>□ Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Ethnicity:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Hispanic/Latino/Latina</td>
</tr>
<tr>
<td>□ Not Hispanic/Latino/Latina</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Country of Birth:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ USA</td>
</tr>
<tr>
<td>□ Other ________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. Language(s):</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ English</td>
</tr>
<tr>
<td>□ Español</td>
</tr>
<tr>
<td>□ Français</td>
</tr>
<tr>
<td>□ Portugês</td>
</tr>
<tr>
<td>□ Русский</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Do you think of yourself as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Lesbian, gay, or homosexual</td>
</tr>
<tr>
<td>□ Straight or heterosexual</td>
</tr>
<tr>
<td>□ Bisexual</td>
</tr>
<tr>
<td>□ Something Else</td>
</tr>
<tr>
<td>□ Don't know</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. Marital Status:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Married</td>
</tr>
<tr>
<td>□ Partnered</td>
</tr>
<tr>
<td>□ Single</td>
</tr>
<tr>
<td>□ Divorced</td>
</tr>
<tr>
<td>□ Other ________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. Veteran Status:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Veteran</td>
</tr>
<tr>
<td>□ Not a veteran</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. Referral Source:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Self</td>
</tr>
<tr>
<td>□ Friend or Family Member</td>
</tr>
<tr>
<td>□ Health Provider</td>
</tr>
<tr>
<td>□ Emergency Room</td>
</tr>
<tr>
<td>□ Ad/Internet/Media/Outreach Worker/School</td>
</tr>
<tr>
<td>□ Other ________</td>
</tr>
</tbody>
</table>
COLLECTING DEMOGRAPHIC DATA ON GENDER IDENTITY

- What is your current gender identity? (check ALL that apply)
  - Male
  - Female
  - Transgender Male/Trans Man/FTM
  - Transgender Female/Trans Woman/MTF
  - Gender Queer
  - Additional Category (please specify)
    __________

- What sex were you assigned at birth? (Check One)
  - Male
  - Female
  - Decline to Answer

- What is your preferred name and what pronouns do you prefer(e.g. he/him, she/her)?
  __________________________

Center of Excellence for Transgender Health UCSF
FORMS REFLECTING DIVERSE FAMILY STRUCTURES

- Instead of husband/wife use, “spouse” or “partner”
- Instead of mother, father use, “parent/parent”
COMMUNITY ENGAGEMENT
DEVELOPING PARTNERSHIPS

- Community Needs Assessments
  - Surveys
  - Focus groups
  - “Town Hall” meetings
- Partner with local LGBT organizations

- Support and be visible at LGBT events
- Co-sponsoring programming in the community
- LGBT focused media
ADDING SAME-SEX IMAGERY & GENDER DIVERSITY TO EDUCATION AND MARKETING MATERIALS
BROCHURE FOR HEALTH CENTER PATIENTS

- How and why to come out to your provider
- Benefits to mental and physical health
- Important sexual and reproductive health outcomes
- Barriers to access care
- Suggested resources
TOOLS FOR CHANGE!

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

Best Practices for a Transgender-Affirming Environment

<table>
<thead>
<tr>
<th>BEST PRACTICES</th>
<th>EXAMPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>When addressing patients, avoid using gender terms like &quot;Sir&quot; or &quot;Ma'am.&quot;</strong></td>
<td></td>
</tr>
<tr>
<td>&quot;How may I help you today?&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>When talking about patients, avoid pronouns and other gender terms.</strong></td>
<td></td>
</tr>
<tr>
<td>&quot;Your patient is here in the waiting room.&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;They are here for their 3 o'clock appointment.&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>&quot;They.&quot; Never refer to someone as &quot;It.&quot;</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Politely ask if you are unsure about a patient’s preferred name.</strong></td>
<td></td>
</tr>
<tr>
<td>&quot;What name would you like us to use?&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;I would like to be respectful—how would you like to be addressed?&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>Ask respectfully about names if they do not match in your records.</strong></td>
<td></td>
</tr>
<tr>
<td>&quot;Could your chart be under another name?&quot;</td>
<td></td>
</tr>
<tr>
<td>&quot;What is the name on your insurance?&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>Did you goof? Politely apologize.</strong></td>
<td></td>
</tr>
<tr>
<td>&quot;I apologize for using the wrong pronoun. I did not mean to disrespect you.&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>Only ask information that is required.</strong></td>
<td></td>
</tr>
<tr>
<td>Ask yourself, &quot;What do I need to know? What do I need to know in a sensitive way?&quot;</td>
<td></td>
</tr>
</tbody>
</table>

NATIONAL LGBT HEALTH EDUCATION CENTER
A PROGRAM OF THE FENWAY INSTITUTE

Tel: 617-227-6554
Web: lgbthealtheducation.org

The Fenway Institute
1540 Boylston Street, 4th Fl Boston, MA 02215
TOOLS FOR CHANGE!

Do Ask, Do Tell

Let your provider know if you are LGBT.
Your provider will welcome the conversation.
Start today!
ADDITIONAL TOOLS & RESOURCES

- Health Care Equality Index
  - [www.hrc.org/hei](http://www.hrc.org/hei)
- Center for American Progress
- Gay and Lesbian Medical Association
  - [www.GLMA.org](http://www.GLMA.org)
- Health Resources Services Administration
- US Office of Personnel Policy and Management
The National LGBT Health Education Center provides educational programs, resources, and consultation to health care organizations with the goal of optimizing quality, cost-effective health care for lesbian, gay, bisexual, and transgender (LGBT) people.

The Education Center is a part of The Fenway Institute, the research, training, and health policy division of Fenway Health, a Federally Qualified Health Center, and one of the world’s largest LGBT-focused health centers.

Free Webinar: Creating Inclusive Health Care

All of our Webinars are Available On-Demand!
QUESTIONS?
WE ARE HERE TO HELP YOU!

Adrianna Sicari, Hilary Goldhammer, Harvey Makadon, Heidi Holland

☎ 617.927.6354
✉ lgbthealtheducation@fenwayhealth.org
🔗 www.lgbthealtheducation.org