



It's Not Always a Straight Path: Mobile Health and the LGBTQ Community

Presenter:

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ASU '00



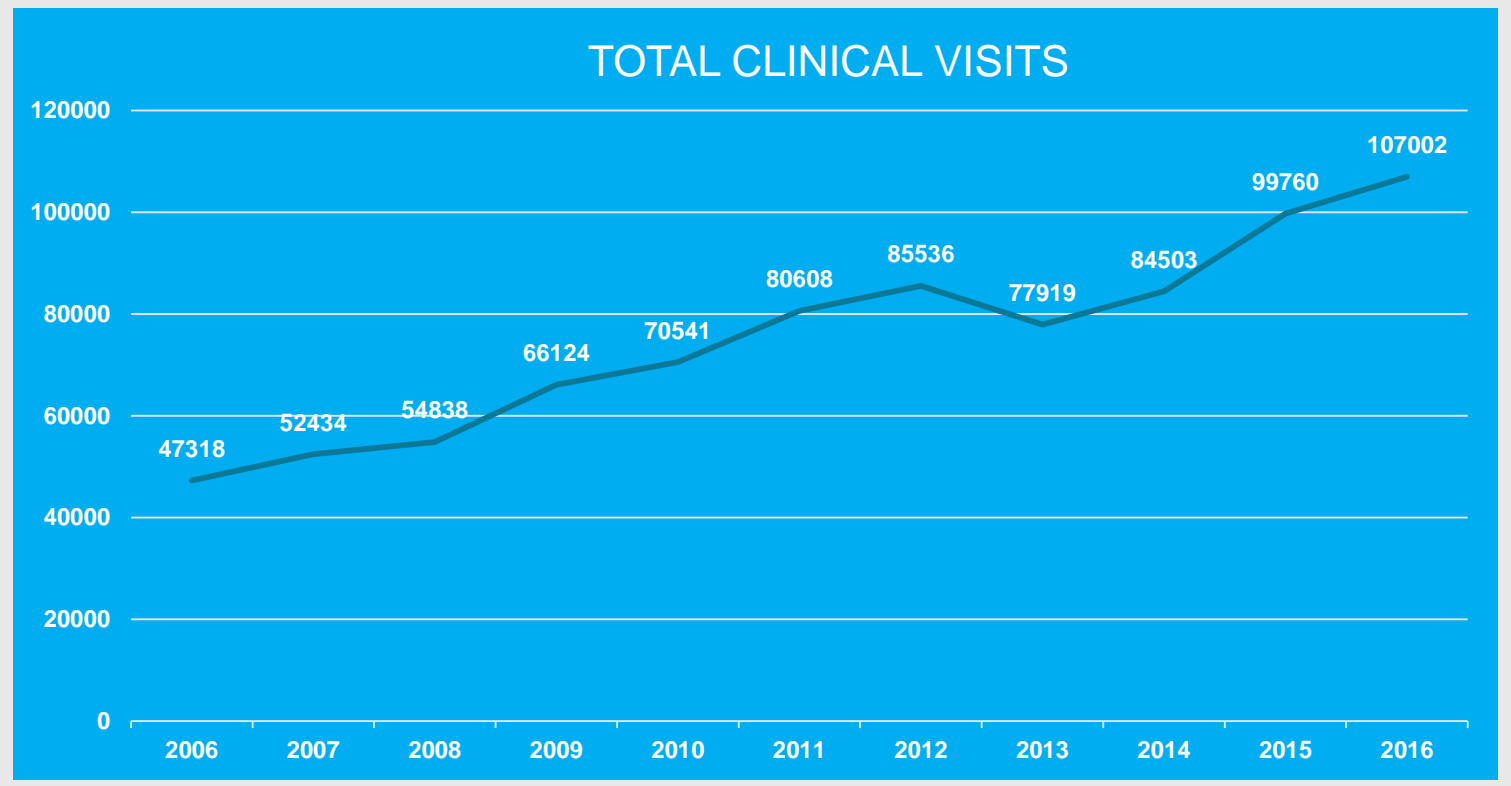
CalLEN-LORDE COMMUNITY HEALTH CENTER





PATIENT AND VISIT VOLUME

In 2016, the health center provided services for 17,812 unique patients, who made 107,002 visits for our comprehensive and integrated services.



*Callen-Lorde underwent major renovations in 2013, reducing usable clinical space for the year.

WORKSHOP GOALS

- Increase your LGBTQ cultural fluency
- Build empathy for your LGBTQ patients
- Dig a little deeper into gender as a construct
- Gain tools that can improve the service delivery of your mobile health practice
(*clinicians, administrators, support staff*)
- Challenge yourself!

PLEASE

- Make a note of questions that you would like to ask during the Q&A at the end of the presentation
- Feel free to email me with any follow-up: ajdesimone@callen-lorde.org
- Have an open mind and an even more open heart!

INTRODUCTIONS

Name

Your Pronoun

- When I refer to you in the third person, which word should I use in place of your name?
- Ex. – My pronouns are He, Him, His

Where are you from?

Which organization do you represent? What is your role there?

- Which community or communities do you serve?

Who is your favorite LGBT Celebrity/Public Figure?

- Bonus points if your answer is not Ellen, although Ellen is awesome!

HELPFUL DEFINITIONS



- ❑ **Asexual** - an identity label for people without sexual feelings, associations, or desires.
- ❑ **Queer** - An umbrella term sometimes used by LGBTQA people to refer to the entire LGBT community. An alternative that some people use to challenge the idea of the labels and categories such as lesbian, gay, bisexual, etc.
 - It is important to note that the word queer is an in-group term, and a word that can be considered offensive to some people, depending on their generation, geographic location, and relationship with the word.
- ❑ **Pansexual** - A person who experiences sexual, romantic, physical, and/or spiritual attraction for members of all gender identities/expressions, not just people who fit into the standard gender binary (i.e. men and women).
- ❑ **Sapiosexual** - A person who finds intelligence sexual attractive or arousing, sometimes regardless of gender identity/expression.
- ❑ **Transgender** - a term for denoting a person who's gender identity does not correspond to their sex as it was assigned at birth
 - **Transgender man** (transmale, transman) – assigned female at birth but identifies or lives as a man
 - **Transgender woman** (transfemale, transwoman) – assigned male at birth but identifies and/or lives as a man
- ❑ **Non-binary** - An identity label which does not fit the male and female binary.
- ❑ **TGNB** - An acronym for Transgender and Gender Non-Binary. The TGNB acronym is an attempt to include as many identities and experiences as possible along the gender spectrum: like transsexual, transgender, trans, genderqueer, Two Spirit, and more.
 - This may also be represented as TGNC (Transgender and Gender Non-Conforming) however the use of the phrase “non conforming” has been challenged by those within the community
- ❑ **Cisgender** - a term for denoting a person whose gender identity corresponds with their sex as it was assigned at birth
 - **This is not a derogatory term.** Latin prefix “cis-” meaning “on this side of.” It is the opposite of “trans-” which means “across from.”

ACTIVITY #1

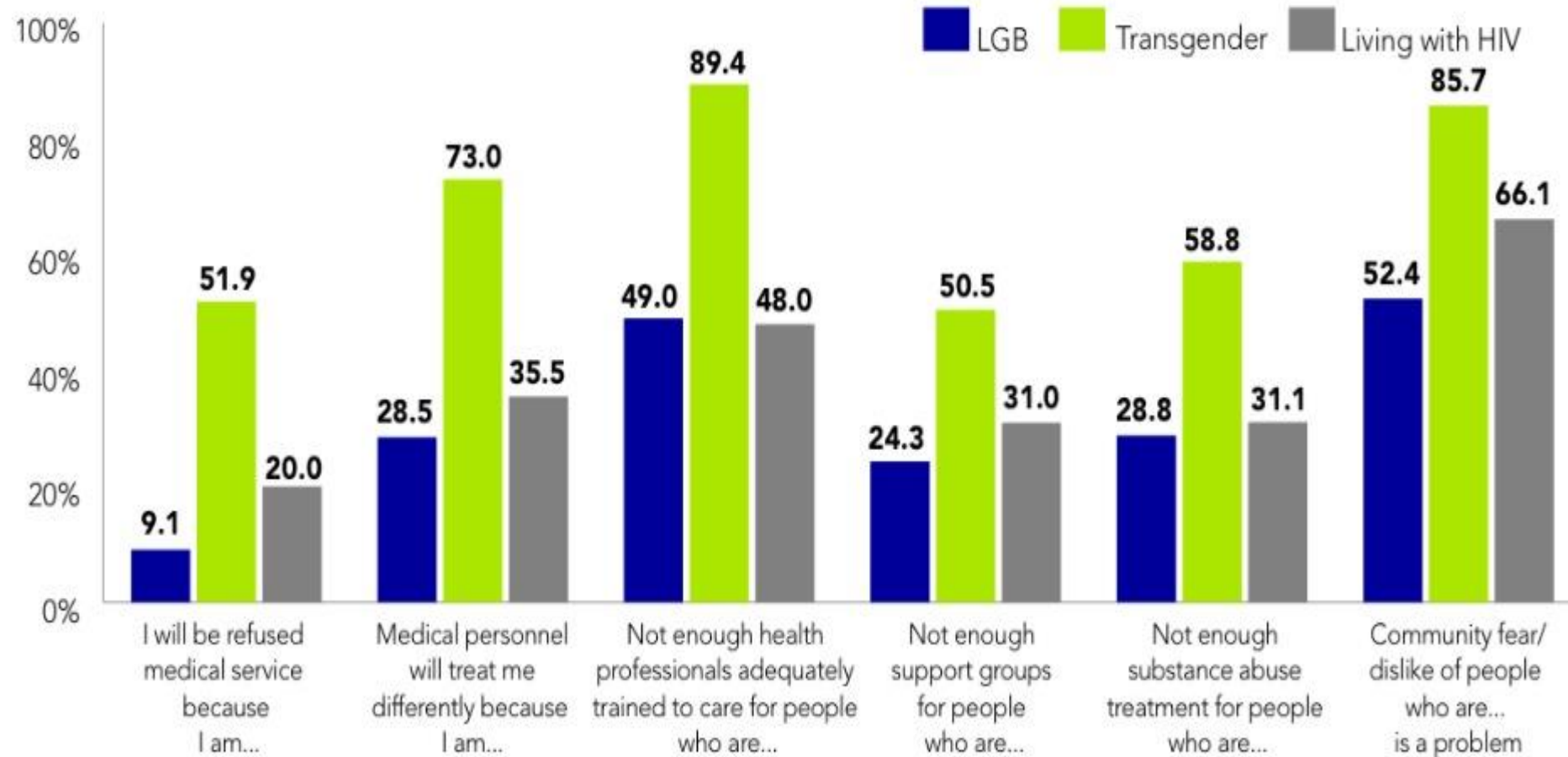


WHY IS LGBTQ COMPETENCY IMPORTANT?

- ❑ We are Mobile Health Care Providers
 - We serve communities who have been historically marginalized from mainstream health care system
 - Our work eliminates barriers to care and seeks to reduce health care disparity
- ❑ Many LGBT people are in need of social services, medical care and basic access to employment and housing. LGBT people face many barriers to adequate service and health care, including discrimination, ignorance, poverty, prejudice, and fear.
- ❑ Many LGBT folks, especially transgender people avoid care for preventive and urgent/life-threatening conditions
- ❑ There are very few health providers and hospitals in the country that have supportive and sensitive health services for LGBT people.
 - This is changing!!

EXPERIENCES IN HEALTHCARE

Table 6: Fears and concerns about accessing health care



WHEN HEALTH CARE ISN'T CARING



LAYERS OF BARRIERS

- The individual barrier
- Health care provider
- Health care facility
- Systemic

EXAMPLES OF BARRIERS

- Lower income/lower health insurance rates
- Previous negative experiences in healthcare settings
- Lack of provider information and knowledge about LGBT health needs and risks
- Lack of LGBT-specific research, policies and procedures
- Multiple stigma:** race, class, ability, geographic location, immigrant status, etc.



LGBT HEALTHCARE DISPARITIES

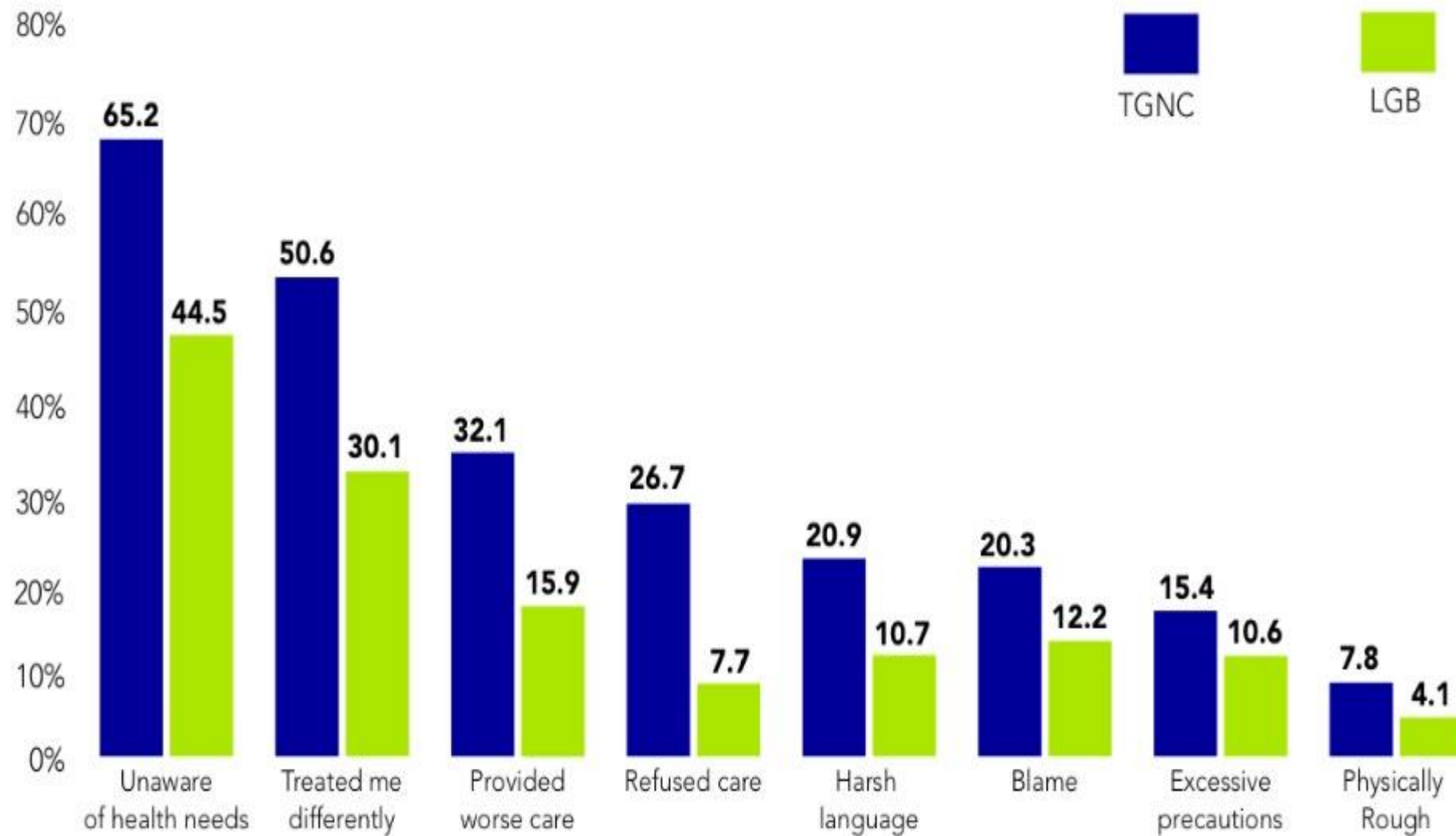
- Smoking, alcohol, and substance abuse
- Mental health illnesses, such as anxiety and depression
 - Suicidality among adolescents
- Sexual and Reproductive Health
- Eating Disorders, Obesity
- Cardiovascular Health
- Higher rates of sexually transmitted infections
- Increased cancer risks, decreased screenings
- Limited evidence based research on hormones
- Intimate Partner Violence

BARRIERS SPECIFIC TO THE TGNB COMMUNITY



- Denied health care
- Lack of informed care, research, and data
- Health care coverage (gender marker)
- Sex segregated services
- Inappropriate name or pronoun use
- Invasive questions about genitalia or transgender status
- Access to hormones and surgery
- Patients trans status often overshadows other significant medical needs (overstepping clinical boundaries)
- Intake/Registration forms
- Confidentiality & Privacy

Experiences of Discrimination and Substandard Care: Transgender or Gender-nonconforming Compared to Lesbian, Gay and Bisexual



Lambda Legal: When Health Care Isn't Caring (2010)

<http://www.lambdalegal.org/publications/when-health-care-isnt-caring>

ACTIVITY #2

PART 1: THE GENDER LENS

Take a moment to reflect on the questions below:

- What expectations were placed on you because of gender as a child?
- What expectations are placed on you because of gender as an adult?
- What has happened when your behavior is not in line with the expectations of your gender?
- How might our experience of gender play a part during your interaction with a patient?

PART 2: TRADITIONAL GENDER MODEL

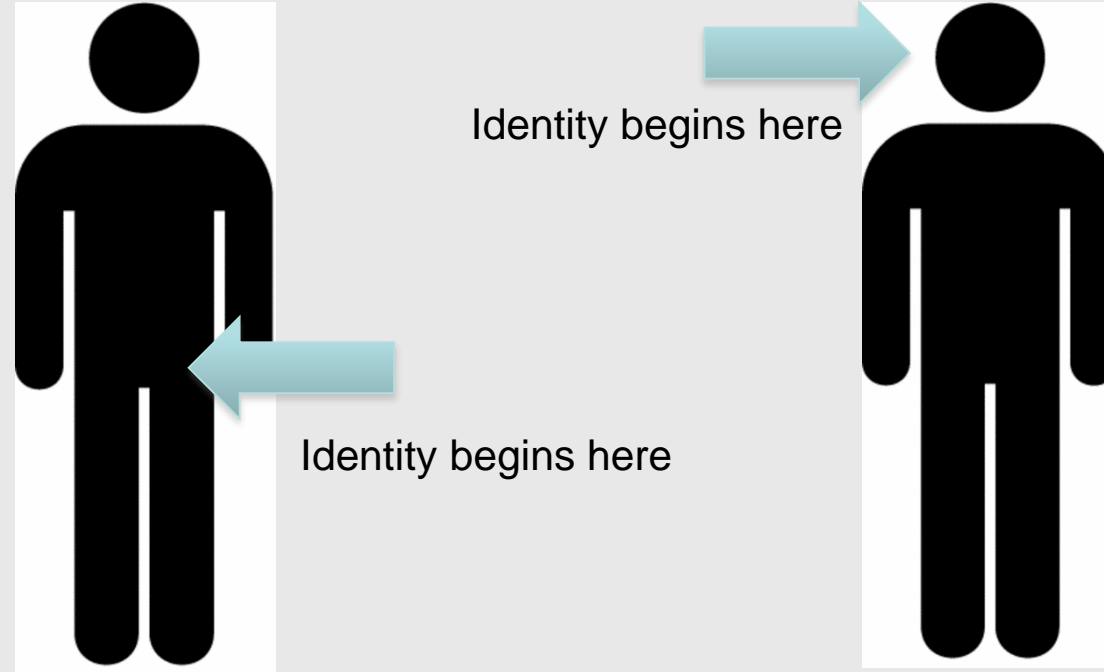
Sex	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Gender Expression	<input type="checkbox"/> Masculine	<input type="checkbox"/> Feminine
Gender Identity	<input type="checkbox"/> Man	<input type="checkbox"/> Woman
Sexual Orientation	<input type="checkbox"/> Attracted to Women	<input type="checkbox"/> Attracted to Men
Sexual Behavior	<input type="checkbox"/> Sex <u>only</u> with women	<input type="checkbox"/> Sex <u>only</u> with men

Thinking about yourself in the context of this model, fill out your own personal “**Diagram of Sex and Gender.**”



GENDER

CONSTRUCTS OF GENDER IDENTITY



Medical Construct:
Gender reassignment or transition

Patient-centered Construct:
Gender affirmation

GENDER AFFIRMATION

- When a transgender person takes steps to start living as the gender with which they identify, the process is called transitioning.
- A person who does not identify as male or female may identify as genderqueer, gender non-conforming, or non-binary.
- An interpersonal, interactive process whereby a person receives social recognition and support for their gender through social interactions.

GENDER TRANSITION

- The process of changing gender expression and/or physical appearance to align with gender identity. This can involve changing one's name and/or gender designation on legal documents and/or medical intervention, etc. Transition happens on many levels.

ALWAYS REMEMBER

- Gender ≠ Sexual Orientation
- Sexuality and gender can change many times over time
- Some trans people identify as LGBTQ, some identify as heterosexual

IN TRANSITION

Psychological Transition	Adjusting to changes in thinking, emotions, behavior, and relationships resulting from mental shift of accepting one's gender identity
Social Transition	Coming out to people in your life as transgender, letting people know that you identify as male/female/other, letting people know that you have a new name, etc.
Legal Transition	Changing the name and gender on identity documents such as you Birth Certificate, DMV ID, Passport, Social Security Card, etc.
Medical Transition	Accessing transition related health treatments such as hormone therapy, surgery, etc.



INTEGRATING STRATEGIES INTO YOUR PRACTICE



HEALTHCARE EQUALITY INDEX 2017



Celebrating a
Decade of Promoting
Equitable and Inclusive
Care for Lesbian,
Gay, Bisexual,
Transgender and
Queer Patients
and Their Families



Assessing Your Mobile Unit

- Scan the environment
 - Know what it is like for your patient before they enter the door
- Relevant and appropriate health information and brochures
 - Does your literature address disparities?
- Culturally competent signs and posters
 - Acknowledge days such as World AIDS Day, LGBT Pride Day, and National Transgender Day of Remembrance
 - Openly display signs of LGBT acceptance (images, rainbow flag)
- If you're starting from scratch. . . ASK YOUR PATIENTS
- Do you have good SOGI data?
- Bathrooms





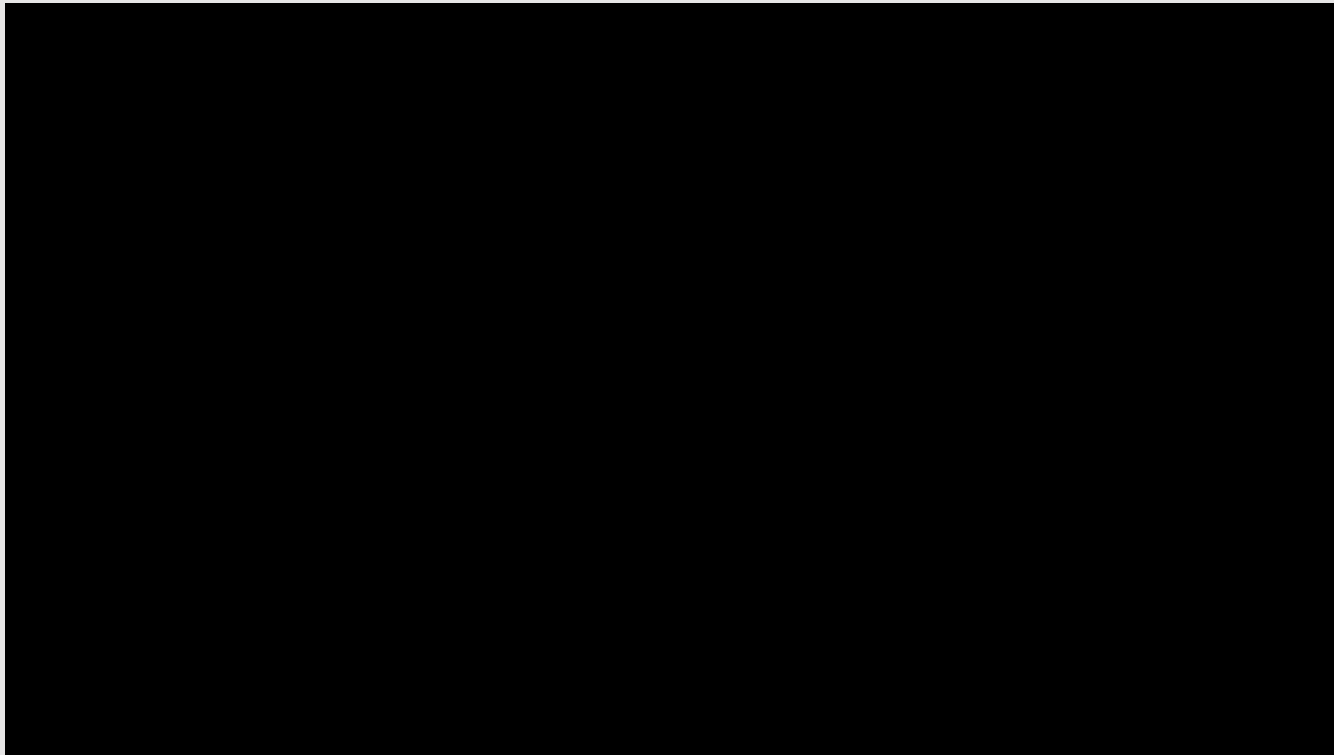
Names and Pronouns

- ❑ Legal name vs. preferred name
- ❑ Always use a transgender person's chosen name.
- ❑ Always use a transgender person's preferred pronoun. When in doubt, ask what pronoun a person prefers.
- ❑ A gender non-conforming or genderqueer patient may go by a pronoun that you are not accustomed to, such as "they."
 - Zie/hir, or even no pronoun

ALWAYS ASK!

CASE STUDY: CALLEN-LORDE

Pronouns Matter Campaign



LGBT SENSITIVE REGISTRATION FORM

Legal last name:	Legal first:
Chosen first name (if different):	Date of Birth:

“We require the following information for the purposes of helping our staff use the most respectful language when addressing you, understanding our population better, and fulfilling our grant reporting requirements. The options for some of these questions were provided by our funders. Please help us serve you better by selecting the best answers to these questions. Thank You.”

CALLEN+LORDE COMMUNITY HEALTH CENTER REGISTRATION FORM

PATIENT INFORMATION

Legal last name: _____ Legal first: _____ Middle: _____ Today's date: ____/____/____

Chosen first name (if different): _____ Date of Birth: ____/____/____

Billing address: _____ Apartment #: _____ Cell phone number: (____) _____

City: _____ State: _____ Zip Code: _____ Home phone number: (____) _____

Language interpretation services needed? No Yes, language: _____ Work phone number: (____) _____

Which is your primary contact number? Cell Home Work

Sex Assigned at Birth: Male Female

Sexual Orientation: Lesbian Gay Bisexual Queer Straight Something Else Decline to Answer

Gender Identity: Male/Man Female/Woman TransMale/Transman TransFemale/Transwoman Genderqueer/Gender nonconforming Something Else Decline to Answer

Race: American Indian/Alaska Native Asian Black/African American Native Hawaiian Other Pacific Islander White/Caucasian More than one race Decline to answer

Insurance Information

Insurance carrier: _____ Policy #: _____ Group #: _____

Who did you select as your Primary Care Provider with your insurance carrier? _____ Employer: _____

Relationship to insured: Self Child Spouse Partner Other Decline to Answer

Sex listed in insured's health insurance plan: Male Female

Insured's birth date: ____/____/____

Name of insured (if different): _____ Address of insured: Same as Patient

I verify that the above information is correct to the best of my knowledge.

Patient signature _____ Date: ____/____/____

Sex Assigned at Birth: <input type="checkbox"/> Male <input type="checkbox"/> Female	Sexual Orientation: <input type="checkbox"/> Lesbian <input type="checkbox"/> Gay <input type="checkbox"/> Bisexual <input type="checkbox"/> Queer <input type="checkbox"/> Straight <input type="checkbox"/> Something Else <input type="checkbox"/> Decline to Answer
Gender Identity: <input type="checkbox"/> Male/Man <input type="checkbox"/> Female/Woman <input type="checkbox"/> TransMale/Transman <input type="checkbox"/> TransFemale/Transwoman <input type="checkbox"/> Genderqueer/Gender nonconforming <input type="checkbox"/> Something Else <input type="checkbox"/> Decline to Answer	Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
Hispanic? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Anticipated annual household income for this year: _____	

No marital status question, but “partnered” would be an option if we had one.

Sex listed in insured's health insurance plan:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Address of insured:		



INDIVIDUAL STAFF-LEVEL INTERVENTIONS

Change your LANGUAGE

- say, "... your partner, he or she..."
- mirror the language people use for themselves, their partners and their body parts

SHOW your openness

- wear a rainbow pin or an LGBT sticker
- assure confidentiality to make coming out safe
- have LGBT publications in your waiting room

LEARN more

- read more about the LGBT community
- learn about LGBT families and health risks
- Form an LGBT study group in your department

CLINICAL CARE



- ❑ LGBT-sensitive health assessments
 - If it's not relevant, it is not relevant
 - Use “how” questions
 - Use patients own language around body parts, sexual history
- ❑ Taking a LGBT sensitive sexual history
 - Use open ended questions
 - Avoid assumptions
 - Know risk factors
 - Have appropriate safer sex resources
- ❑ Routine screening on all organs as long as they are present
 - “if you have it, check it”
- ❑ Develop trust and a safe space
 - Patients may need to know that you are an affirming provider before disclosing information
 - Be sensitive and patient



BE AWARE OF MICROAGGRESSIONS

Microaggressions – “Brief and commonplace daily, verbal, behavioral, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative slights and insults towards members of oppressed groups.” (Nadal 2008)

NEXT STEPS

- What can you do on an individual basis to create a more welcoming environment for LGBTQ people?
- What can you advocate for within your organization?

QUESTIONS?