PARTICIPANT HANDOUTS
“Lunchtime Learning” Professional Skill Development
Distance Learning Series Event #7:
Achieving Equity in Health Care for LGBT People

Presented by:
Kevin Ard, MD, MPH, Medical Director, National LGBT Health Education Center, The Fenway Institute, Fenway Health; Faculty, Division of Infectious Diseases at Massachusetts General Hospital; Instructor in Medicine, Harvard Medical School

Live Broadcast Date/Time:
Wednesday, Sept. 30, 2015
1:00–2:00pm Mountain Time / 2:00–3:00pm Central Time

Series Overview:
Join Community Health Association of Mountain/Plains States (CHAMPS) and Colorado Community Health Network (CCHN) for the “Lunchtime Learning” Professional Skill Development Distance Learning Series! These six one-hour webcasts will take place between April and September of 2015. Participants may attend any selection of events; all are designed to provide professional development and skills improvement as a component of a continuous process of advanced practice transformation, with the goal of positively impacting retention rates at Region VIII health centers. The events are primarily targeted at health center administrative and clinical support staff, although staff members from all levels of the health center are welcome.

Event Overview:
Healthy People 2020 and the Institute of Medicine have identified key health disparities faced by the Lesbian, Gay, Bisexual, and Transgender (LGBT) population. Engagement of LGBT populations is critical to providing culturally responsive care and population based health to reduce health disparities. This session provides an overview of LGBT health disparities, demographics, communication, and terminology, as well as key strategies for bringing high quality care to LGBT people at health centers.

Learning Objectives:
Upon completion of this session, participants should be able to:
1. Explain LGBT concepts and terminology
2. Identify 3 principles for effective communication with LGBT patients
3. Describe how to create welcoming clinical environments for LGBT people
4. Identify clinical practice guidelines that apply to the care of LGBT people
SERIES TIMELINE
Event #1: Student Loan Management and Repayment Options – Archive Available
Event #2: Customer Service: The Art of Caring – Archive Available
Event #3: Civility in the Workplace: Creating a Friendlier and More Productive Work Environment - Archive Available
Event #4: Foundations for Influencing: Asking for What You Want - Archive Available
Event #5: Foundations for Influencing: Facilitation of Problem Solving – Archive Available
Event #6: Cultural Competency – Archive Available
Event #7: NEW! Achieving Equity in Health Care for LGBT people (9/30/2015)
Visit http://champsonline.org/events-trainings/distance-learning for complete details, including registration for individual events.

CHAMPS ARCHIVES
This event will be archived online and on CD-ROM. The online version will be available within two weeks of the live event, and the CD will be available within two months. CHAMPS will email all identified participants when these resources are ready for distribution. For information about all CHAMPS archives, please visit http://champsonline.org/events-trainings/distance-learning.

DESCRIPTION OF CCHN
Colorado Community Health Network (CCHN) is a non-profit organization representing the 18 Colorado Community Health Centers (CHCs) that together are the backbone of the primary health care safety-net in Colorado. CCHN is committed to educating policy makers and stakeholders about the unique needs of CHCs and their partners, providing resources to ensure that CHCs are strong organizations, and supporting CHCs in maintaining the highest quality care. For more information about CCHN, please visit www.cchn.org.

DESCRIPTION OF CHAMPS
Community Health Association of Mountain/Plains States (CHAMPS) is a non-profit organization dedicated to supporting all Region VIII (CO, MT, ND, SD, UT, and WY) federally-funded Community, Migrant, and Homeless Health Centers so they can better serve their patients and communities. Currently, CHAMPS programs and services focus on education and training, collaboration and networking, workforce development, and the collection and dissemination of regional data. For more information about CHAMPS, please visit www.CHAMPSonline.org.
SPEAKER BIOGRAPHY

Dr. Kevin Ard is a faculty member in the Division of Infectious Diseases at Massachusetts General Hospital, an Instructor in Medicine at Harvard Medical School, and Medical Director of the National LGBT Health Education Center. He completed the Doris and Howard Hiatt Residency in Global Health Equity and Internal Medicine at Brigham and Women’s Hospital as well as the fellowship in infectious diseases at Brigham and Women’s and Massachusetts General Hospitals. Dr. Ard also served as a chief medical resident at Brigham and Women’s Hospital. He is the recipient of the Edward H. Kass award for clinical excellence from the Massachusetts Infectious Disease Society and the Soma Weiss award for excellence in teaching from Brigham and Women’s Hospital. Dr. Ard has written and lectured widely on LGBT health disparities, intimate partner violence in LGBT relationships, and HIV prevention. His current interests include LGBT health education, the intersection of clinical medicine and public health, and the care of patients with HIV and hepatitis C.
Caring for LGBT People: Achieving Equity in Health Care

Presented by: Kevin L. Ard, MD, MPH
National LGBT Health Education Center
Massachusetts General Hospital

Wednesday, September 30, 2015
1PM-2PM Mountain Time / 2PM-3PM Central Time
Lunchtime Learning: Professional Skill Development
Distance Learning Series, Part 7 of 7

Hosted by: www.cchn.org
www.champsonline.org

Interactive Poll
How knowledgeable do you feel about the unique health needs of LGBT people?
- Not at all knowledgeable
- Somewhat knowledgeable
- Knowledgeable
- Pretty knowledgeable
- Completely knowledgeable

www.lgbthealtheducation.org
Interactive Question

How many total people are watching this event at your computer (yourself included)?

Learning Objectives

At the end of the session, participants will be able to:

- Explain LGBT concepts and terminology
- Identify 3 principles for effective communication with LGBT patients
- Describe how to create welcoming clinical environments for LGBT people
- Identify clinical practice guidelines that apply to the care of LGBT patients
Who we are

The goal of the National LGBT Health Education Center is to foster high-quality, affirmative, cost-effective care for LGBT people by providing educational programs, resources, and consultation.

- Training and technical assistance
- Grand rounds
- On-line learning
- Resources and publications
**LGBT**

**Sexual orientation**

- Everybody has one.
- It may change over time.
- It’s not the same thing as gender identity.
- It consists of 3 dimensions:
Behavior ≠ identity

- **NHANES:** < 50% of people who report same-sex sexual behavior identify as L, G, or B (1, 2)
- **NYC Survey:** 73% of MSM identified as heterosexual (3)

**Bottom Line:**

1. You don’t know someone’s sexual identity until they tell you.
2. It is whatever they say it is.


Gender identity

- Everybody has one.
- It’s not the same thing as sexual orientation.
- = One’s internal sense of maleness and/or femaleness
Transgender

Definition
Having a gender identity that is not congruent with one’s sex assigned at birth

More terms:
- Transgender woman, trans woman, male-to-female transgender person
- Transgender man, trans man, female-to-male transgender person
- Genderqueer/fluid
- Cisgender
- Gender dysphoria

Transgender people may be of any sexual orientation.

Sexual orientations reported by 6,450 respondents to a national survey of transgender individuals

Gender affirmation

Also known as transition

The number of Americans who identify as LGB is closest to the population of which state?

A. Wyoming
B. Iowa
C. Ohio
D. California
The number of Americans who identify as LGB is closest to the population of which state?

A. Wyoming (600,000 people)
B. Iowa (3 million people)
C. Ohio (11 million people)
D. California (38 million people)

The number of transgender adults in the US is closest to the population of which state?

A. Wyoming  
B. Alaska  
C. Missouri  
D. Kansas

LGBT individuals are more likely to be non-white, poor, and single.

Discriminatory experiences are common for LGBT adults.

- 39% rejected by a family member or friend
- 30% threatened or attacked
- 29% made to feel unwelcome at a place of worship
- 23% treated poorly in a restaurant or other public accommodation
- 21% treated unfairly by an employer

Transgender persons often encounter discrimination.

- 19% refused housing
- 26% fired for being transgender
- 78% harassed at school, including by teachers
- 53% harassed in public
- 25% harassed in a doctor’s office
- 19% refused medical care


How do stigma and discrimination affect health?

- Minority Stress Model:
  - Stressful prejudice events
  - Everyday micro-aggressions
  - Expectations of rejection
  - Cognitive burden of negotiating “outness”
  - Internalized homo-/transphobia
  - Avoidance of health care due to the expectation of discrimination

Examples of stigma-health associations

- Prejudice-related stressful life events are associated with an increased risk of physical health problems (1)
- Internalized homophobia, experiences of discrimination, and expectations of rejection (but not general bereavement) are associated with HIV risk behavior (2)
- In states without legal protections for LGB individuals, disparities in psychiatric illness between LGB persons and others are greater (3)
- Heterosexuals with higher levels of anti-gay prejudice have lower life expectancies (4)

Which conditions are more prevalent among MSM than other men?

- Smoking
- Illicit drug use
- Depression
- Sexual assault
- Limited health care access
- Syphilis
- HIV
- Anal cancer


Which statement is true about HIV and MSM?

A. Black MSM are the only demographic group in which the incidence of HIV is rising.
B. MSM taking PrEP (pre-exposure prophylaxis for HIV) tend to increase their sexual risk behavior, negating the benefits of PrEP.
C. Antiretroviral treatment of HIV reduces the risk of sexual transmission among heterosexual but not MSM couples.
D. MSM account for a minority of new HIV diagnoses each year in the United States.
The majority of new HIV infections occur in MSM.

Estimated new HIV infections in 2010, by transmission category (1):
- 63% MSM
- 25% Heterosexual
- 8% IDU
- 3% MSM-IDU

HIV incidence increased 48% among young, black MSM from 2006-2009 (2).


Why are black MSM disproportionately burdened by HIV?

- Sexual behavior
- Substance abuse
- Limited health care access
- Less frequent HIV testing
- Delayed treatment of STIs
- High HIV prevalence in black MSM networks

HIV among African American gay and bisexual men. CDC. 2015. Available at: https://www.cdc.gov/hiv/group/msm/bmsm.html
By age 40, one quarter of urban MSM are infected with HIV.

<table>
<thead>
<tr>
<th>AGE (years)</th>
<th>Proportion HIV-infected (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24</td>
<td>12</td>
</tr>
<tr>
<td>25-29</td>
<td>15</td>
</tr>
<tr>
<td>30-39</td>
<td>19</td>
</tr>
<tr>
<td>≥ 40</td>
<td>26</td>
</tr>
</tbody>
</table>

= adult HIV prevalence in Swaziland, the nation most affected by HIV


Syphilis predicts HIV acquisition in MSM and transgender women.

PrEP: A game-changer for prevention?

- PrEP is indicated for individuals at high risk of HIV infection.
- Once daily, oral tenofovir-emtricitabine is the only medication FDA-approved for PrEP.
- Common side effect = nausea; serious side effects rare
- Efficacy is highly dependent on adherence.

MSM face an increased risk of anal cancer.

![Graph showing cancer incidence](image)

Which conditions are more prevalent among WSW than other women?

- Smoking
- Illicit drug use
- Depression
- Sexual assault
- Limited health care access
- Overweight/obesity


WSW are less likely to be screened for cervical cancer than other women.

- Common reasons for lack of screening are (1):
  - No insurance
  - Prior negative experiences with screening
  - Belief that they are unnecessary for WSW
  - HPV and HSIL are detected in some exclusive WSW (1).
  - Most self-identified lesbian women report prior sexual experiences with men (2).

Which conditions are more prevalent among transgender persons than the general population?

- Smoking
- Illicit drug use
- Depression
- Limited health care access
- Alcohol abuse
- Partner violence
- HIV


LGBT youth face unique challenges.

- The struggles of adolescence, plus:
  - Establishing a sense of their sexual/gender identity
  - Social isolation, bullying
  - Lack of support
- Anxiety, depression, substance abuse
- Family rejection, which is associated with adverse health outcomes.
- For many, homelessness
LGBT youth say they most want what from their providers?

A. A provider of the same gender and sexual orientation.
B. A provider with experience caring for LGBT youth
C. A provider who treats them the same way he or she would treat non-LGBT youth
D. A provider who is educated about LGBT health issues

What do LGBT youth want from providers?

- **Most important:**
  - Competence, respect, honesty, not judgmental
  - Treats LGBT youth the same as other youth

- **Less important:**
  - Experience working with LGBT youth

- **Least important:**
  - Being of the same gender and/or sexual orientation

Some have had prior negative experiences and expect the same.

Slight may be perceived, even when not intended.
Avoid assumptions

- You cannot know people’s sexual orientation or gender identity until they tell you.
- Avoid assumptions about clients’ relationships to people they bring along to appointments; politely ask, instead.
- Listen to how people describe their identities, partners, and families; use the same terms, if you are comfortable.
- You cannot always determine someone’s gender based on their name, or how they look or sound.

Use preferred names/pronouns for transgender patients.

- The correct pronoun is the one that corresponds to their gender identity and expression.
- Preferred names and pronouns may not match the insurance or medical record information.
  - “Could your chart or insurance be listed under a different name?”
- If you are unsure about the preferred name or pronoun, simply ask politely.
- Ask the only questions that are necessary to do your job.
### Keeping up with terminology

<table>
<thead>
<tr>
<th>Outdated Terms</th>
<th>Preferred Terms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homosexual</td>
<td>Gay, lesbian, bisexual, LGB, (MSM, WSW)</td>
</tr>
<tr>
<td>Transgendered</td>
<td>Transgender</td>
</tr>
<tr>
<td>Sexual preference, lifestyle</td>
<td>Sexual orientation</td>
</tr>
<tr>
<td>Queer</td>
<td>Queer (genderqueer, genderfluid)</td>
</tr>
</tbody>
</table>

### Creating a welcoming environment
First, self-reflection

- What are your biases or stereotypes about LGBT people? Where do these come from?
- Are you comfortable discussing same-sex sexual activity with patients?
- Do LGBT staff in your workplace feel comfortable living openly?

LGBT-friendly care

- LGBT persons tend to scan the environment for clues to acceptance; posters and brochures matter.
- Language matters: Forms should reflect the full range of sexual and gender identity and expression.
- Develop a policy of non-discrimination on the basis of sexual orientation, gender identity, and gender expression and display it prominently.
- Train all staff members, including frontline desk workers, about LGBT-friendly care.
Collect information on sexual orientation and gender identity from all patients.

- Recommended by the Institute of Medicine and the Joint Commission
- Essential to measuring the quality of care and patient satisfaction and making progress on eliminating health disparities
- These questions are acceptable and understood by patients (even those who are not LGBT).

Ask a multiple-choice question about sexual-orientation

1. Which of the categories best describes your current annual income? Please check the correct category:
   - $0
   - $10,000-$14,999
   - $15,000-$19,999
   - $20,000-$29,999
   - $30,000-$49,999
   - $50,000-$79,999
   - Over $80,000

2. Employment Status:
   - Employed full time
   - Employed part time
   - Student full time
   - Student part time
   - Retired
   - Other

3. Racial Group(s):
   - African American/Black
   - Asian
   - Hispanic/Latino
   - Native American/Alaskan Native/Indigenous
   - Pacific Islander
   - Other

4. Ethnicity:
   - Hispanic/Latino/Latina
   - Not Hispanic/Latino/Latina

5. Country of Birth:
   - USA
   - Other

6. Language(s):
   - English
   - Español
   - Français
   - Português
   - Русский

7. Do you think of yourself as:
   - Lesbian, gay, or bisexual
   - Straight or heterosexual
   - Transgender
   - Something Else
   - Don’t know

8. Marital Status:
   - Married
   - Partnered
   - Single
   - Divorced
   - Other

9. Veteran Status:
   - Veteran
   - Not a veteran

10. Referral Source:
    - Self
    - Friend or Family Member
    - Health Provider
    - Emergency Room
    - Ad/Internet/Media/Outreach Worker/School
    - Other
Collecting 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)?

Do ask, do tell.
Take-home points

- Sexual identity and behavior often do not correlate.
- Sexual orientation and gender identity are distinct concepts.
- LGBT individuals face several health disparities, many of which originate with stigma and discrimination.
- Keys to effective communication with LGBT individuals including demonstrating openness to discussing LGBT issues and avoiding assumptions.

Thank you!

Kevin L. Ard, MD, MPH
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Please join us next year for a new Lunchtime Learning Professional Skill Development webinar series!
Thank You for Joining Us!

Your opinions are very important to us.

Please complete the Evaluation for this event. Those attending the entire event and completing the Evaluation questions will receive a Certificate of Participation.

Each person should fill out their own Evaluation Survey.

Please refer to the SurveyMonkey link provided under the “Handouts” tab of the online event. The same link was provided in the reminder email sent out in advance of the event, and will be included in a follow-up email to those logging onto the live event. Please pass the link along to others viewing the event around a shared computer.

To learn more about trainings offered by CHAMPS and CCHN, please visit:
- www.CHAMPSonline.org/Events/
- www.CCHN.org/training-and-events

www.lgbthealtheducation.org