

LGBTQ+: Providing Compassionate Care Within the Law

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Learning Objectives:

1. Identify key health disparities and unique care needs experienced by LGBTQ individuals.
2. Describe current Oklahoma and federal laws impacting the delivery of care to LGBTQ patients.
3. Apply culturally competent communication techniques to build trust and respect with LGBTQ patients.
4. Navigate ethical and legal challenges when providing care in a restrictive or evolving legal environment.
5. Implement inclusive practices that promote equity and safety for LGBTQ patients within their healthcare setting.





Straight or Heterosexual: sexual orientation describing a woman who is emotionally and sexually attracted to men or a man who is emotionally or sexually attracted to women.

Cisgender (Cis): adjective used to describe an individual whose gender identity aligns with the sex they were assigned at birth.

Legal Sex: Sex used for legal/administrative purposes, found on patient's legal ID

Equity and Health Outcomes

Equity

Per the CDC, Health Equity is the state in which everyone has a fair and just opportunity to attain their highest level of health. It means we provide healthcare to whomever needs it without personal bias or prejudice. It means EVERYONE feels safe and respected when visiting their physician's office, and it facilitates positive interactions between providers and patients.

Health Outcomes

When a patient feels respected because they are treated with dignity, the patient is more likely to open up and trust their healthcare providers regarding all aspects of their life.

We want to treat **the whole person**.

LGBTQ+ Health Risks

- Heart disease
- Violence
- Substance abuse, including tobacco/vaping
- Mental health conditions
- Obesity and eating disorders
- Breast and cervical cancer (preventative care)
- Sexually transmitted infections (STI)

LGBTQ+ Health Risks

- Youth are more likely to attempt suicide and be homeless.
- Higher rates of tobacco, alcohol and other drug use.
- Higher prevalence of certain mental health issues.
- Transgender individuals have a high prevalence of attempted suicide and victims of violence.
- Gay, bisexual, and MSM are at higher risk for HIV and other sexually transmitted infections.
- Young MSM and transgender women are at especially high risk for HIV.
- Lesbians and bisexual women are more likely to be overweight or obese.
- Lesbians are less likely to get preventive services for cancer.
- Elderly LGBT individuals face additional barriers to optimal health because of isolation and a lack of culturally appropriate social services and providers.

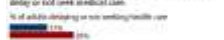
Access to health care and health insurance

■ Heterosexual ■ LGB ■ Transgender

Health Disparity #1: Heterosexual adults are more likely to have health insurance (percentage)



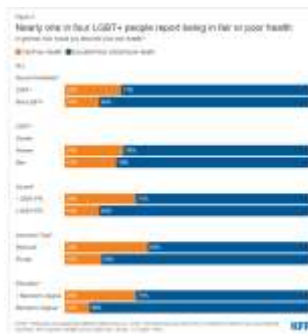
Health Disparity #2: LGB adults are more likely to delay or not seek medical care



Health Disparity #3: LGB adults are more likely to delay or not get needed prescription medicine

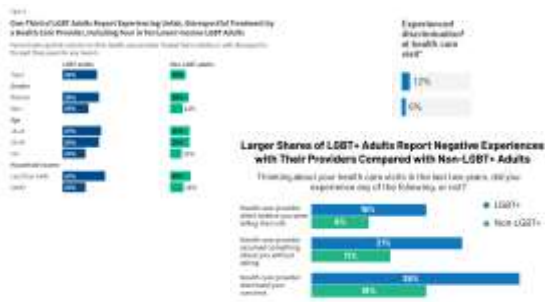


Health Disparity #4: LGB adults are more likely to receive health care services in emergency rooms



Healthcare system issues:

- Medical forms do not reflect the continuum of sexual orientation, sexual identity, and gender identity.
- Neglect to ask about pronoun preferences.
- Assume all patients are heterosexual and paired with opposite sex partners.
- Limited cultural diversity training
- Medical students average five hours or less on LGBTQ+ training
- Absence of LGBTQ+ health literature or signage.
- Failure to accept same sex partners as health proxies.
- Employment practices lack updates on fair, inclusive, and safe work environments for LGBT people.



Gender-Affirming Care



GAC is healthcare that respects and supports a patient's gender identity, which may differ from their assigned gender at birth. Every American Medical Association currently recognize this care as essential and lifesaving.

How can we provide gender-affirming healthcare to our LGBTQIA2S+ community?

- Avoid gender-specific language until names and pronouns have been confirmed.
- Use a person's chosen or affirmed name and pronouns. (Verify these identifiers have been added to the EHR so everyone can properly address the patient.)
- Center the visit around the whole patient, not just their gender identity.
- Be honest about mistakes and demonstrate a willingness to learn from the patients.

Implicit Bias

- Healthcare professionals should establish solid, trusting relationships with patients in order to promote healthier behaviors.
- When working with LGBTQ (or any minority group) patients, it is especially important to build rapport to counteract the exclusion, discrimination, and stigma that many have experienced previously in health care. Despite our best intentions, however, internal --or implicit-- biases may affect the way we talk to and behave with patients.
- For health care professionals, biases can lead to inequitable care, either through biased clinical decisions, or through communicating bias in conversation with patients.
- During these exchanges, a clinician or other staff person may say something or use body language that communicates a stereotype or antagonistic message about LGBTQ people. These "microaggressions" often determine whether a patient follows medical advice or returns for care.
- A constant stream of negative messages can become internalized, adding to an LGBTQ person's stress and contributing to worse behavioral and physical health outcomes.

Implicit Bias

Start by noticing times when prejudicial attitudes and beliefs arise.

At this point, it is helpful to ask ourselves these questions:

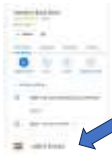
- How do my current beliefs serve me?
- What might I lose if I change my beliefs?
- What are the costs of maintaining my current perspective?
- How might it benefit me to change?

Provide a Welcoming Environment

- Lead by example as a physician or APP
- Visual cues/inclusive signage that your practice is a safe space
- Customize patient intake forms
- Display educational materials
- Post a non-discrimination statement
- Use inclusive language
- Engage in training for providers and staff
- Consult guidelines/resources when needed
- Staff badges
- Gender inclusive restrooms



Your Online Presence

[illegible]

Inclusive Language

- Review phone etiquette
- Revise patient intake form
- Preferred Name vs Legal Name
- Gender-neutral language
- Avoid: sir, ma'am, etc
- Remember that it's okay to make mistakes, it's the intent and effort that matters most.

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Inclusive Language

- We ask everyone the same questions.
- All answers are voluntary. No one **MUST** answer.
- The more we know about our patients, the better we will be at meeting the individual needs of our patients.
- There is **NO** agenda. It is strictly about healthcare.
- Only those directly involved with the patient's healthcare and/or anyone the patient specifically authorizes will have access to the answers.

If you...		
...make a mistake	➡	Apologies I am sorry for using the wrong process. I did not mean to disappoint you."
...accept leader's direct supervision	➡	"Could you check the order a different way?" or "What is the name of your supervisor about this?"



Actionable Suggestions and Guidelines for Gynecological Surgical Practice with Queer Patients

Objective	Define factors and cultural context	Describe research design	Research
Identify what signs and symptoms indicate the presence of a disorder? (if possible)	Define information about the selected client, gender identity, race/ethnicity, sexual orientation, and gender expression.	Can an informant make this be verified against their own or his or her partner's?	Interviews and surveys in person, telephone and online, gender-specific, and/or community-based. Also: focus group. Can you recruit more of your audience?
Find out what interventions, treatments, best practices, theories, and so forth are being used, and how these are being evaluated, tested, practice with patients, and how treatment received have	Allow patients to submit qualitative and/or quantitative information regarding signs that inform practice in meeting their needs, in their own words.	Has professional defined physical signs, but are specific about what you observed and why	If you make your own measurements, it's like a survey. If you use a validated instrument, it's like a survey. If you use a validated instrument, it's like a survey. If you use a validated instrument, it's like a survey. If you use a validated instrument, it's like a survey.
Assess the availability of a gender-neutral approach	Ask about history with the local community to better recognize historical and/or cultural differences in sexual orientation.	Has the tool used previously on a community-based level? Do you have any feedback from your clients?	Try to include the target population in the design of the tool. Try to get feedback from the target population.
Ensure that treatment you wish to provide addresses the effectiveness of your patients	Ask about sexual signs and/or sexual history, and how these relate to the client's own sexual orientation.	Can you make your own? Have you used a validated instrument? Do you have any feedback from your clients?	Remember that a validated instrument has been used on a community-based level. Do you have any feedback from your clients?

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Case Scenarios

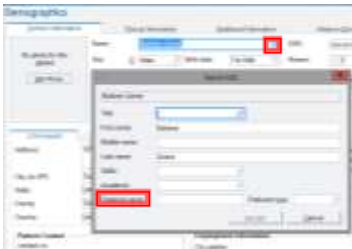
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MAXIMIZING
EHR PLATFORMS



DOCUMENTING
PREFERRED
NAME



DOCUMENTING SEXUAL ORIENTATION GENDER IDENTITY (SOGI)



What's the benefit?

- Consistency across the chart
- Ability to print paperwork with preferred name and pronouns
- Prevention of medical errors/duplicate charts



FEDERAL LAWS AND THEIR IMPACT

Bostock v. Clayton

- 2020 Supreme Court case
- Gerald Bostock, was fired from his county job after he expressed interest in a gay softball league at work
- Bostock believed his employer used a claim of misspent funds as a pretext for firing him for being gay
- Held Title VII of the Civil Rights Act of 1964 protects employees against discrimination on the basis of sexual orientation and gender identity



Affordable Care Act
Section 1557



- On 1/20/21, an Executive Order was issued
- Prohibits discrimination in healthcare, including denial of insurance coverage or care, based on sex, gender identity, and sexual orientation
- Prohibits health facilities, programs, and activities receiving federal funding from discriminating based on these factors
- Requires providers to treat individuals in a manner consistent with their gender identity, including access to healthcare facilities

Ongoing Challenges

- While insurers are generally prohibited from denying or limiting coverage for gender-affirming care, there are still situations where insurance plans may have exclusions or limitations
- Despite federal protections, LGBTQ individuals still face barriers to accessing healthcare, including stigma, discrimination, and difficulty in finding competent and welcoming providers





OKLAHOMA LAWS AND THEIR IMPACT

Oklahoma Senate Bill 613

- A law banning gender-affirming care for transgender youth under 18
- Threatens medical providers with felony charges, civil action, and license penalties for violating the law
- Has led to lawsuits challenging the law and concerns about the potential harm to transgender youth





Health Insurance

- No state law protecting LGBTQ individuals from discrimination in private insurance
- Oklahoma's state Medicaid plan has exclusions for transgender-related care, potentially limiting access to necessary medical services
- Has state employee health plans that explicitly exclude gender-affirming care

Oklahoma House Bill 1224

- Could allow medical practitioners to refuse health care to a patient if the service violates their conscience
- Recently passed on the House floor in a 70-28 vote
- The bill now moves to the Oklahoma Senate for consideration, where a similar bill, SB 959, failed in committee earlier this year
- Critics say the proposed law would adversely affect LGBTQ Oklahomans seeking gender-affirming care





Uphold Patient Rights and Confidentiality

Respect for Autonomy

Recognize and respect the patient's right to make their own decisions about their healthcare, including their gender identity and sexual orientation.

Confidentiality

Maintain the privacy of patient information, especially in situations where individuals may feel vulnerable or face discrimination.

Non-discrimination

Ensure that all patients receive equitable and respectful care, regardless of their LGBTQ status.

Know the Law

Stay Informed

Be aware of current legal protections and evolving laws related to LGBTQ rights, including nondiscrimination laws, privacy protections, and access to healthcare.

Understand Legal Obligations

Ensure you understand your legal and ethical obligations in providing care, particularly in areas like informed consent, confidentiality, and mandatory reporting.

Consult with Experts

If you encounter complex legal situations, seek advice from legal professionals or organizations specializing in LGBTQ rights.

Provide Culturally Competent Care

Inclusive Language: Use affirming and respectful language when referring to LGBTQ individuals and their relationships.

Respect for Identity: Respect patients' self-identified names, pronouns, and gender identity.

Awareness of Specific Issues: Be aware of the unique health challenges and barriers faced by LGBTQ individuals, such as discrimination, mental health concerns, and access to care.

Create a Welcoming Environment: Make your practice or facility a welcoming and inclusive space for LGBTQ+ individuals, potentially through signage, policies, and staff training.

Partner with Community Resources: Connect patients with community organizations and support networks that can provide additional resources and advocacy.

Address Ethical Considerations

Objectivity

Maintain objectivity and avoid allowing personal beliefs or biases to influence your clinical judgment.

Advocate for Patients

Advocate for your patients' rights and ensure they receive the care they need, even in the face of legal or social challenges.

Consider Potential Conflicts

Be aware of potential conflicts between personal beliefs, professional ethics, and legal requirements.

Seek Guidance

If you encounter ethical dilemmas, consult with colleagues, ethics committees, or other professionals for guidance.

Addressing Specific Challenges

Restrictions on Care

If you encounter restrictions on providing certain types of care (e.g., gender-affirming care), explore all available options to ensure your patient receives the care they need, potentially involving referrals to other providers or advocacy.

Discrimination

If you encounter discrimination or denial of care, document the situation and consider reporting it to appropriate authorities or organizations.

Evolving Legal Landscape

Stay up-to-date on legal developments and adapt your practices accordingly, while continuing to advocate for equitable access to care.

We all just need a safe place to take care of ourselves and our health needs.



Be a good human and a good physician providing good primary care.

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6. [Caring for the LGBTQIA+ Patient: A Best Practices Primer on Language, Sexual Function Considerations, and Health Disparities in Gynecologic Care - ScienceDirect](https://www.guttmacher.org/issue/2019/04/15/2019-04-15-guttmacher-people-health-experiences-access-care-report-37763137)
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Resources

- The National LGBTQIA+ Health Education Center
<https://www.lgbtqiahealtheducation.org>
- Health Equality Index from the Human Rights Campaign
www.hrc.org/hei
- Center of Excellence for Transgender Health
www.transhealth.ucsf.edu
- World Professional Association for Transgender Health
www.wpath.org
- The Fenway Guide to LGBT Health, 2nd Edition
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- All-Inclusive Information
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QUESTIONS?