



# Health Centers Serving Lesbian, Gay, Bisexual and Transgender Populations

Special Populations Enrichment Call  
Tuesday, June 24  
1:30 – 2:30 pm, ET

Hosted by:  
Bureau of Primary Health Care  
Office of National Assistance and Special  
Populations



# AGENDA



## Welcome & Introductions

- Tonya Bowers, Deputy Associate Administrator, BPHC, HRSA
- CDR Jacqueline Rodrigue, Chief, National Partnerships Branch, ONASP, BPHC, HRSA

## Meeting the Health Care Needs of Lesbian, Gay, Bisexual, and Transgender People

- Dr. Harvey Makadon, Director, National LGBT Health Education Center

## LGBT Health – Primary Care Association Perspective

- Jonathan Chapman, Executive Director, Louisiana Primary Care Association
- Aaron Price, Community Development Coordinator, Louisiana Primary Care Association

## LGBT Health – Health Center Perspective

- Avein Saaty-Tafoya, CEO, Adelante Healthcare

## Questions and Answers



# Meeting the Health Care Needs of Lesbian, Gay, Bisexual, and Transgender People: The End to LGBT Invisibility

Harvey J Makadon, MD  
Director, National LGBT Health Education Center  
The Fenway Institute, Boston, MA

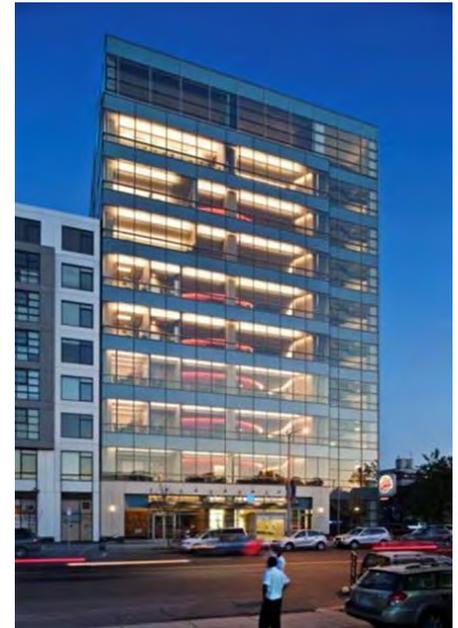


# Who We Are



The National LGBT Health Education Center offers educational programs, resources, and consultation to health care organizations with the goal of providing affirmative, high quality, cost-effective health care for lesbian, gay, bisexual, and transgender (LGBT) people. Based at The Fenway Institute, Fenway Health, a FQHC located in Boston, MA

- HRSA (BPHC) National Cooperative Agreement
  - Training and Technical Assistance for Health Centers
  - Resources and Publications
  - Webinars
- Grand Rounds for Faculty, Staff, and Trainees
- Focused Workshops on Critical Issues
- Consultation on Creating Strategic Change





# Learning Objectives

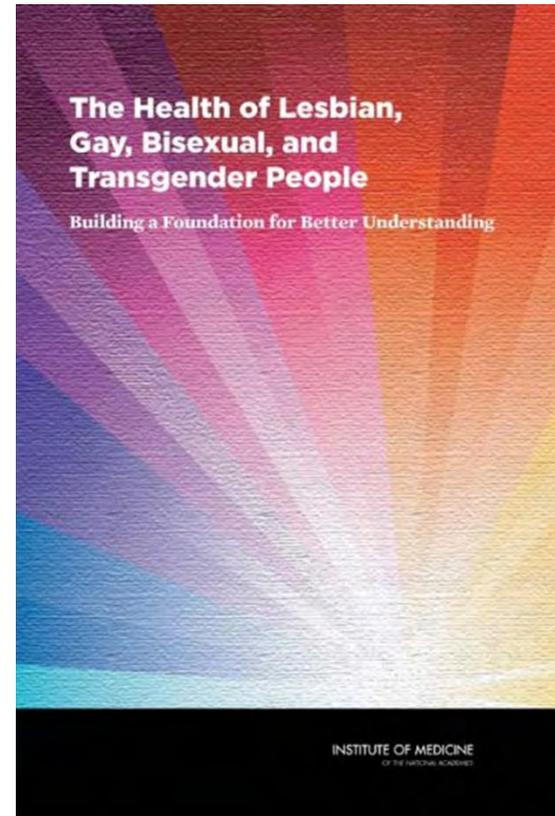
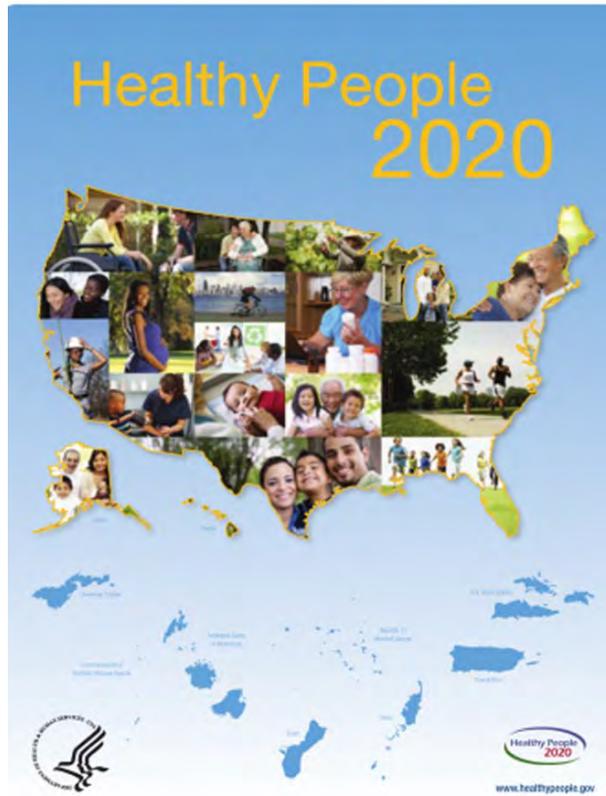


*At the end of this session, learners will be able to:*

1. Describe how health disparities affect LGBT people
2. Discuss LGBT definitions and dimensions/constructs
3. Describe how to overcome barriers to providing better care to LGBT people
  - a) Collecting Data on Sexual Orientation and Gender Identity
  - b) The Environment of Care

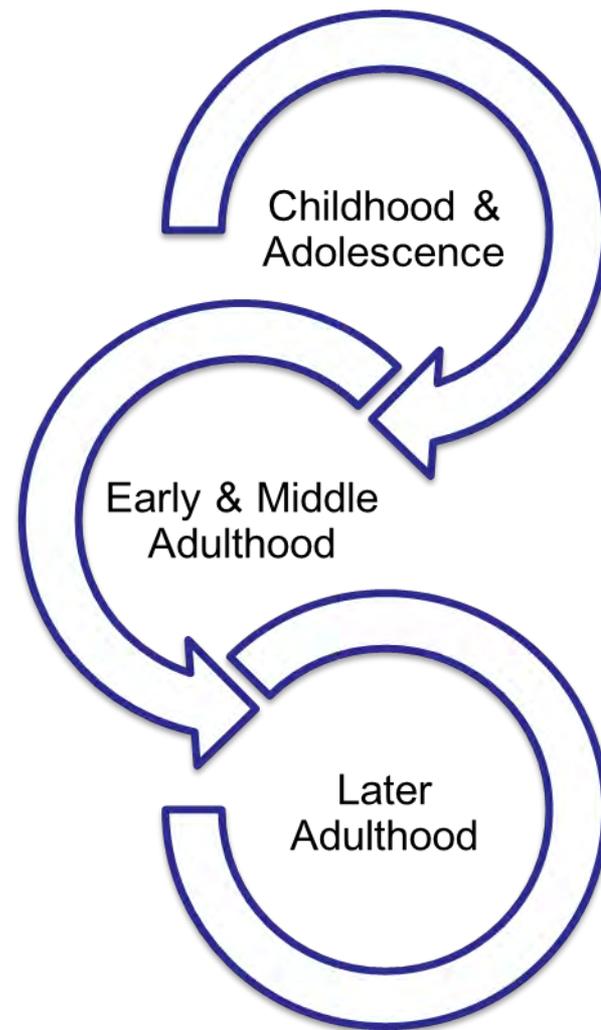
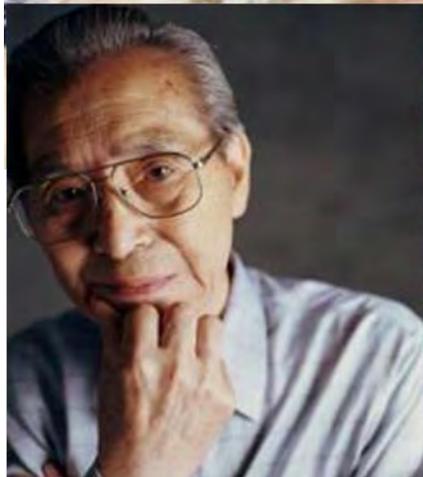


# LGBT Health Disparities





# Health Disparities throughout the Life Course





# LGBT 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 the highest rates of tobacco, alcohol, and other drug use
- Lesbians are less likely to get preventive services for cancer
- Transgender individuals experience a high prevalence of HIV/STI's, victimization, mental health issues, and suicide
- Elderly LGBT individuals face additional barriers to health because of isolation, fewer family supports, and a lack of social and support services

# Basic LGBT Concepts





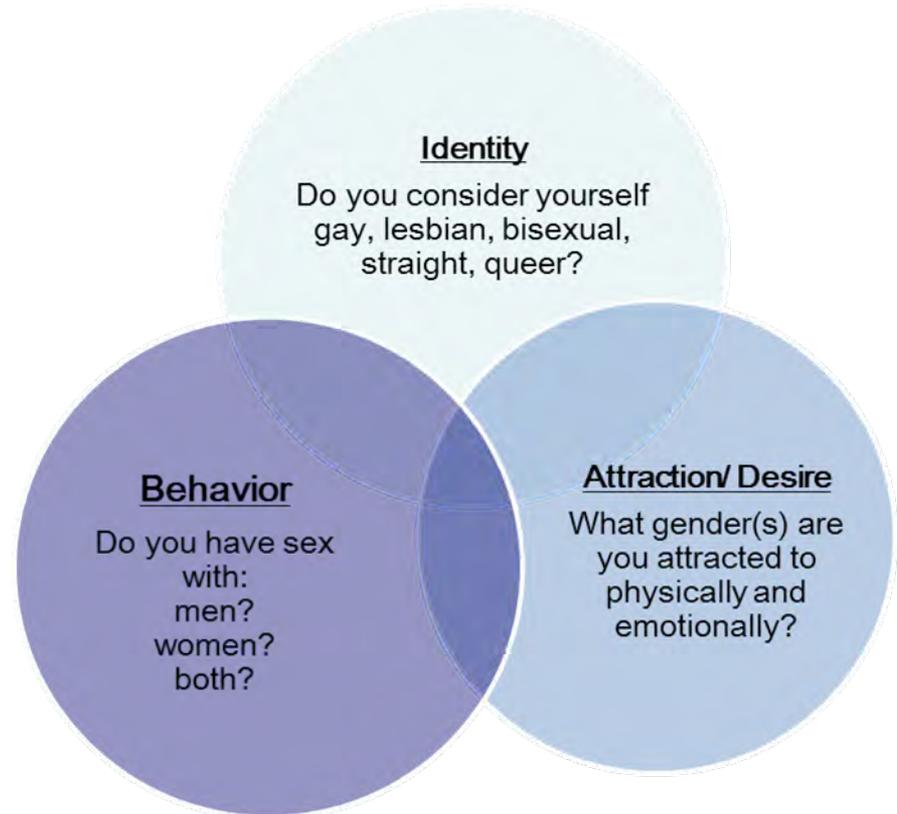
# Uncouple Gender Identity from Sexual Orientation



- All people have a sexual orientation and gender identity
  - How people identify can change
  - Terminology varies
- Gender Identity  $\neq$  Sexual Orientation



- Sexual orientation – how a person identifies their physical and emotional attraction to others
- Straight, gay, lesbian, bisexual, queer





## Transgender

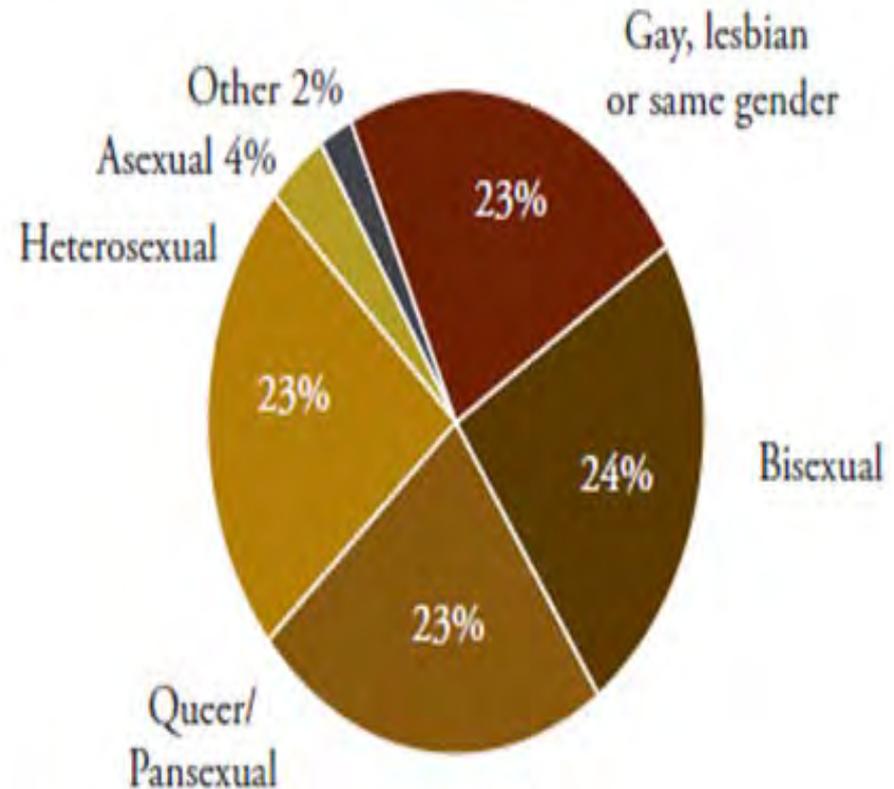


- Umbrella term
- Gender identity (what one's internal sense of their gender is) is not congruent/aligned with assigned sex at birth
- Alternate terminology
  - Transgender woman, trans woman (MTF)
  - Transgender man, trans man (FTM)
  - Genderqueer- blurs the gender binary

## Gender Dysphoria

- A diagnosis in the DSM-5 that describes individuals who have a strong and persistent cross-gender identification and persistent discomfort with his or her sex or sense of inappropriateness in the gender role of that sex

- Gender affirmation – process by which individuals are affirmed in their gender identity.
  - Social, medical, legal
- Transgender people can be of any sexual orientation
- Cisgender –
- Non-transgender





# Vulnerability to Poverty



- While children generally have higher rates of poverty than adults, children of LGB parents are especially vulnerable to poverty.
  - African American children in gay male households have the highest poverty rate (52.3%) of any children in any household type.
  - The rate for children living with lesbian couples is 37.7%
- Transgender respondents to the National Transgender Discrimination Survey (NTDS) were 4 times more likely than the general population to have a household income of less than \$10,000.

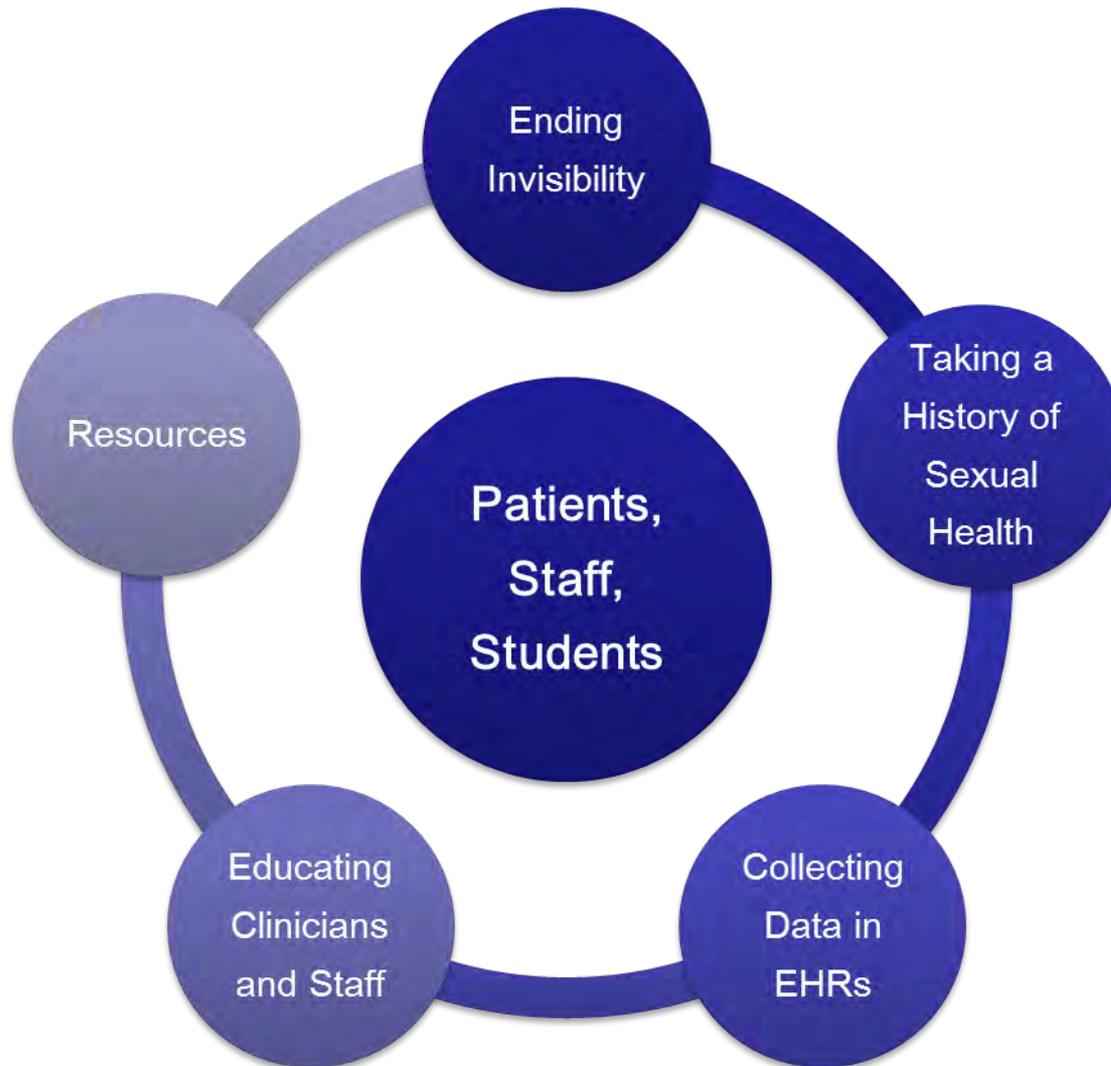


# Overcoming Barriers





# Overcoming Barriers Continue



# How well do you know those coming for care? How do you find out?



**New Patients**



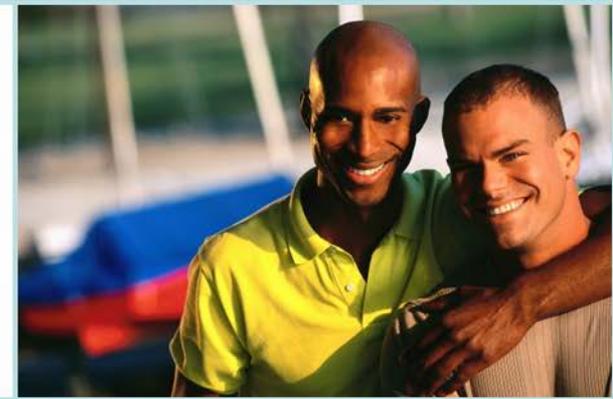
**New Lesbian/Gay/  
Bisexual/Transgender  
Patients**



# Getting to Know Patients in Clinical Settings

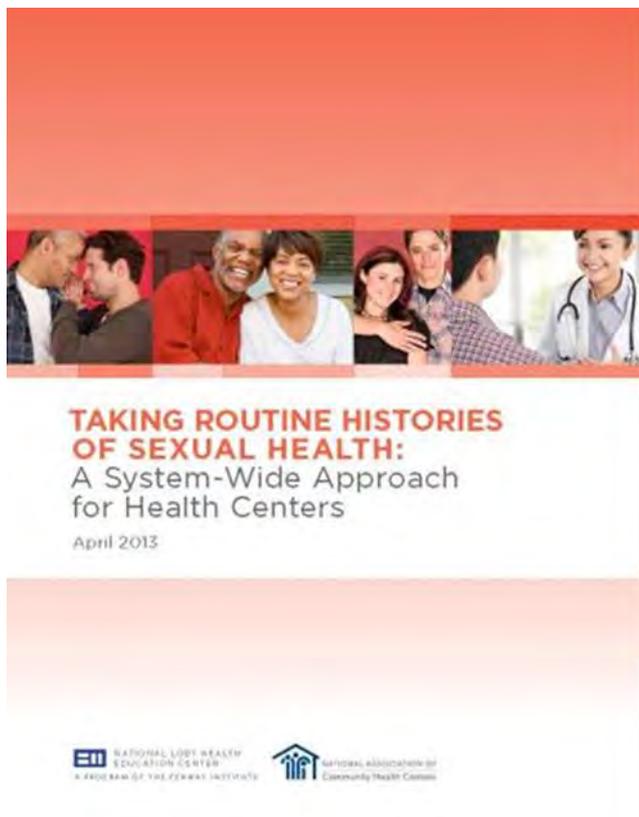


Adherence to ART	84%
Condom use	16%
HIV transmission and/or risk reduction	14%



Ask Screen Intervene

<http://www.lgbthealtheducation.org/publications/top/briefs/sexual-history-toolkit>



### Sexual Risk Assessment<sup>2,3</sup>

The Centers for Disease Control and Prevention (CDC) has developed a simple categorization of sexual history questions that may help providers, or other members of the clinical care team, remember which topics to cover. These are called the Five P's:

**Partners**

**Practices**

**Past History of STDs**

**Protection from STDs**

**Pregnancy Plans**

The following risk assessment questions are organized according to these categories.

#### PARTNERS

These questions should already have been covered during the First Three Questions of the sexual history. They are listed again here but do not need to be repeated.

- Are you having sex with women only, men only, or both? (If both, ask the next question twice—once for male partners, and once for female partners)
- How many sexual partners have you had in the past six months?

Additional risk questions about partners:

- Have you ever had sex with someone you didn't know or just met?
- Have you ever traveled internationally, to places such as Thailand or Africa, to have casual sex?

#### PRACTICES AND PROTECTION FROM STDs

Some patients respond better to open-ended questions about their sexual practices, and some prefer yes or no questions. For transgender patients, younger patients, and women who have sex with women, for example, you may find that open-ended questions are preferred and may bring you more

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<sup>2</sup> This risk assessment has been adapted from: Centers for Disease Control and Prevention. A guide to taking a sexual history. Available at: <http://www.cdc.gov/lgbthealth/>

<sup>3</sup> STDs: Risk Assessment & Risk Reduction: A Quick Reference Guide, March 2008. Mountain Plains AIDS and Education Training Center, Seattle STD/HIV Prevention Training Center.

**8 | TAKING ROUTINE HISTORIES OF SEXUAL HEALTH**



# Taking a History of Sexual Health Continued



- The core comprehensive history for LGBT patients is the same as for all patients (keeping in mind unique health risks and issues of LGBT populations)
- Get to know your patient as a person (e.g., partners, children, jobs, living circumstances)
- Use inclusive and neutral language
  - **Instead of:** *"Do you have a wife/husband or boy/girlfriend?"*
  - **Ask:** *"Do you have a partner?"* or *"Are you in a relationship?"* *"What do you call your partner?"*
- For all patients
  - Make it routine
  - Make no assumptions
  - Put in context and assure confidentiality



# Taking a History of Sexual Health Continued



## Making Patients Comfortable, Setting the Context

- *"I am going to ask you a few questions about your sexual health and sexual practices. I understand these are very personal, but also important for your overall health."*
- *"I ask these questions of all my adult patients. Like the rest of our visit, everything we discuss is confidential."*
- *"Do you have any questions?"*



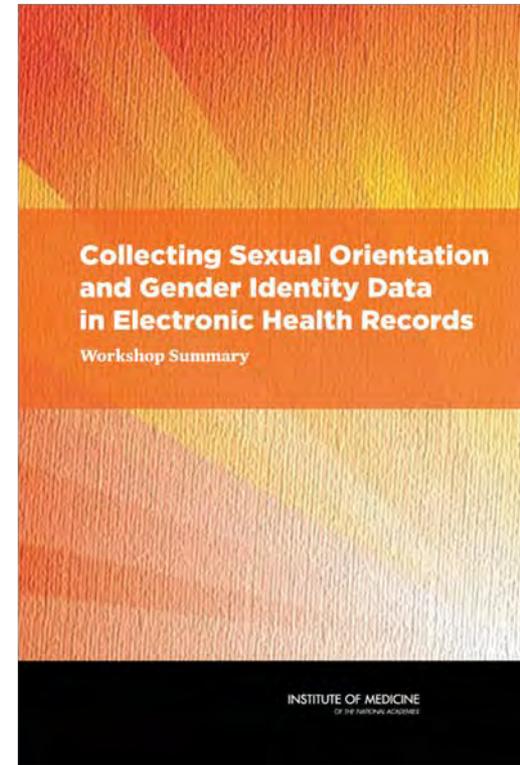
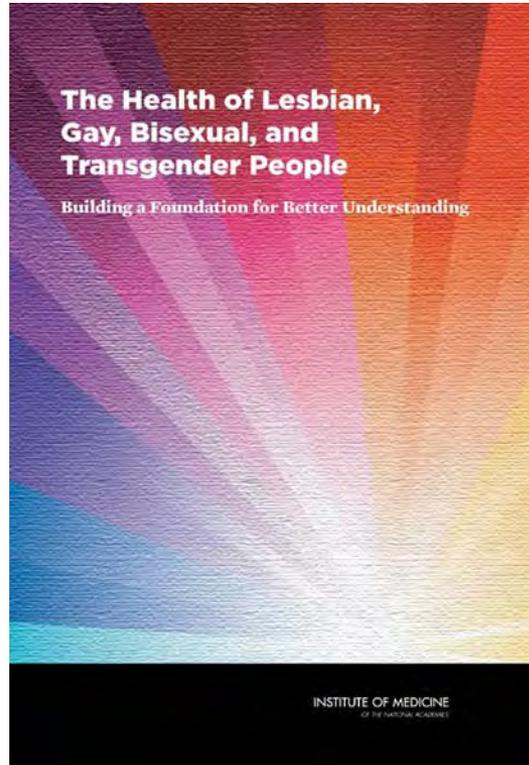
# Taking a History of Sexual Health Continued



- Ask about behavior and risk
  - *Have you had sex with anyone in the last year?*
  - *Did you have sex with men, women, or both?*
  - *How many partners did you have?*
- Ask about sexual health, sexual and gender identity
  - *Do you have any concerns about your sexual function?*
  - *How satisfied are you sexually?*
  - *Do you want to talk about your sexuality, sexual identity, gender identity, or sexual desires?*
  - *Have you had any changes in sexual desire?*
- Ask about reproductive health and desires
  - *Traditionally, discuss contraception*
  - *Discuss desires to have children and methods- surrogacy, adoption*



# The Institute of Medicine on LGBT Health



- Data on Sexual Orientation and Gender Identity Should be Collected in Electronic Health Records
- Direct benefit to individual patients, insuring quality, and evaluation of disparities at practice level to learn about educational needs for clinicians and staff.



# Collecting Demographic Data on Sexual Orientation



<p><b>1. Which of the categories best describes your current annual income? Please check the correct category:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> &lt;\$10,000</li><li><input type="checkbox"/> \$10,000-14,999</li><li><input type="checkbox"/> \$15,000-19,999</li><li><input type="checkbox"/> \$20,000-29,999</li><li><input type="checkbox"/> \$30,000-49,999</li><li><input type="checkbox"/> \$50,000-79,999</li><li><input type="checkbox"/> Over \$80,000</li></ul>	<p><b>2. Employment Status:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Employed full time</li><li><input type="checkbox"/> Employed part time</li><li><input type="checkbox"/> Student full time</li><li><input type="checkbox"/> Student part time</li><li><input type="checkbox"/> Retired</li><li><input type="checkbox"/> Other _____</li></ul>	<p><b>3. Racial Group(s):</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> African American/Black</li><li><input type="checkbox"/> Asian</li><li><input type="checkbox"/> Caucasian</li><li><input type="checkbox"/> Multi racial</li><li><input type="checkbox"/> Native American/Alaskan Native/Inuit</li><li><input type="checkbox"/> Pacific Islander</li><li><input type="checkbox"/> Other _____</li></ul>	<p><b>4. Ethnicity:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Hispanic/Latino/Latina</li><li><input type="checkbox"/> Not Hispanic/Latino/Latina</li></ul> <p><b>5. Country of Birth:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> USA</li><li><input type="checkbox"/> Other _____</li></ul>
<p><b>6. Language(s):</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> English</li><li><input type="checkbox"/> Español</li><li><input type="checkbox"/> Français</li><li><input type="checkbox"/> Português</li><li><input type="checkbox"/> Русский</li></ul>	<p><b>7. Do you think of yourself as:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Lesbian, gay, or homosexual</li><li><input type="checkbox"/> Straight or heterosexual</li><li><input type="checkbox"/> Bisexual</li><li><input type="checkbox"/> Something Else</li><li><input type="checkbox"/> Don't know</li></ul>	<p><b>8. Marital Status:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Married</li><li><input type="checkbox"/> Partnered</li><li><input type="checkbox"/> Single</li><li><input type="checkbox"/> Divorced</li><li><input type="checkbox"/> Other _____</li></ul> <p><b>8. Veteran Status:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Veteran</li><li><input type="checkbox"/> Not a veteran</li></ul>	<p><b>1. Referral Source:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Self</li><li><input type="checkbox"/> Friend or Family Member</li><li><input type="checkbox"/> Health Provider</li><li><input type="checkbox"/> Emergency Room</li><li><input type="checkbox"/> Ad/Internet/Media/Outreach Worker/School</li><li><input type="checkbox"/> Other _____</li></ul>

# Collecting Demographic Data on Gender Identity

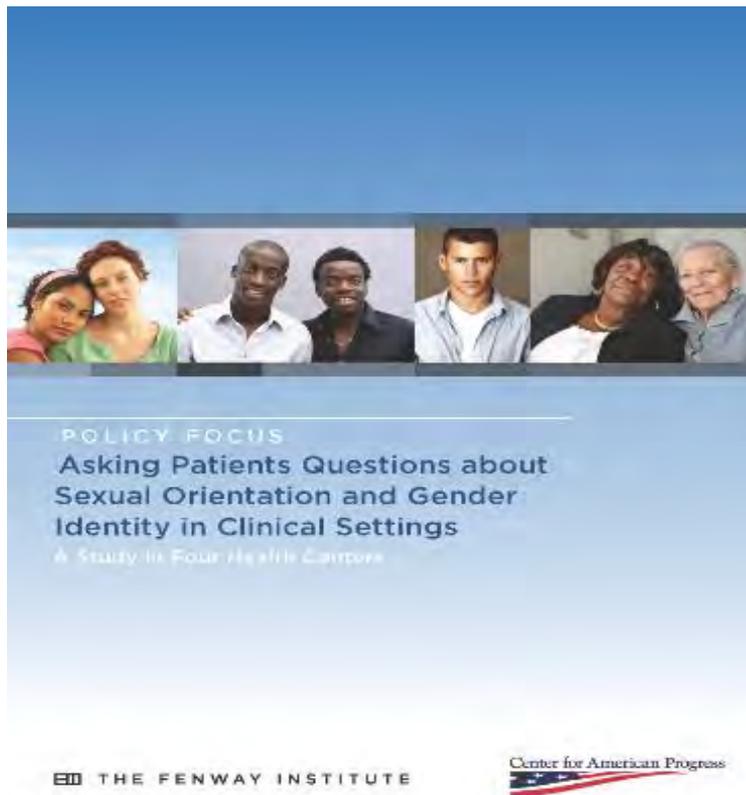
- What is your current gender identity? (check ALL that apply)
  - Male
  - Female
  - Transgender Male/Trans Man/FTM
  - Transgender Female/Trans Woman/MTF
  - Gender Queer
  - Additional Category (please specify)  
\_\_\_\_\_
  
- What sex were you assigned at birth? (Check One)
  - Male
  - Female
  - Decline to Answer

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





# Collecting Data on Sexual Orientation and Gender Identity



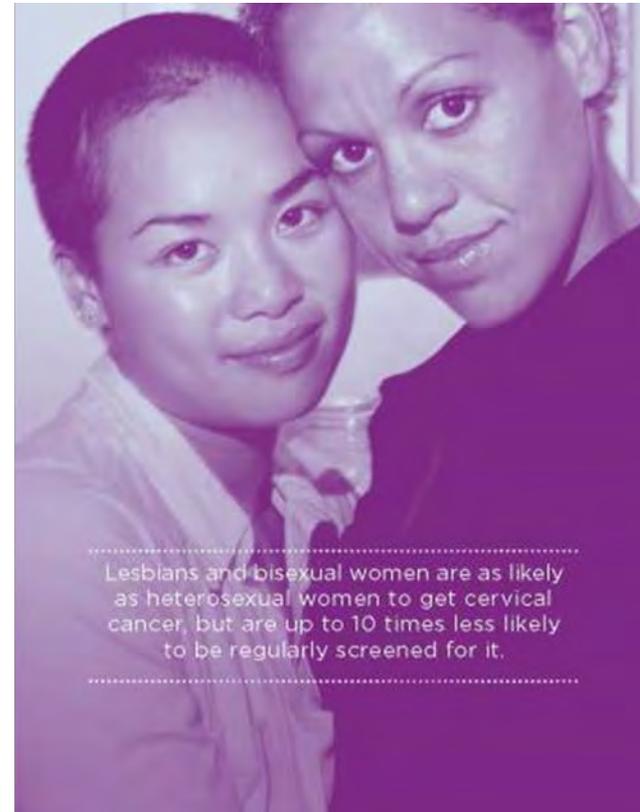
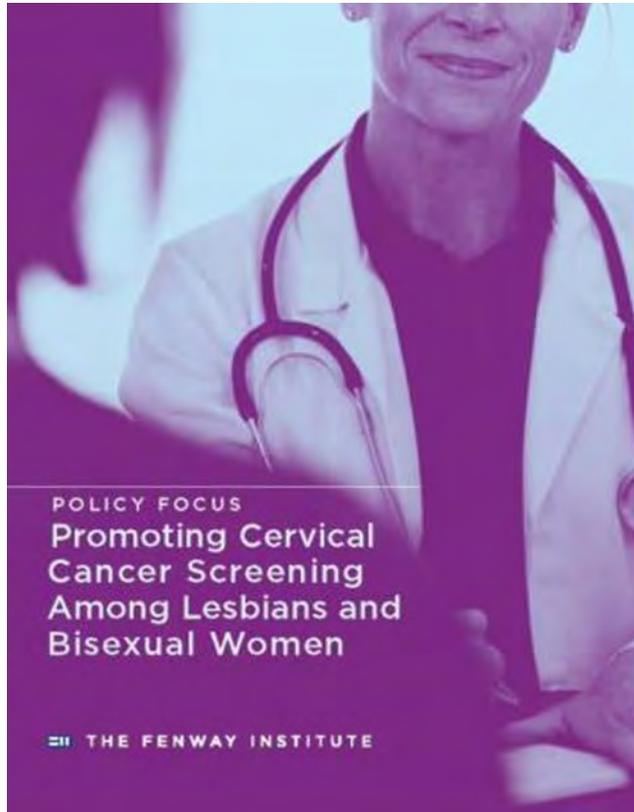


# Culturally Appropriate Care





# Quality Cancer Prevention





# Cancer Prevention for Lesbians and Bisexual Women



## Cervical Cancer and Breast Cancer

- Rates of cervical cancer are as high for lesbians and bisexual women as for heterosexual women
- Studies have found that lesbians have significantly lower cervical cancer screening rates (Charlton, J Adolesc Health, 2011)
- A recent study from NYC indicates that lesbian/bisexual women over 40 are significantly less likely to have had a mammogram than heterosexual women (2013, Empire State Pride Agenda Foundation)
- Educational programs should emphasize the need for women who exclusively have sex with women, and bisexual women, should be screened according to usual guidelines



# Transgender Men and Cervical Cancer Screening



- The majority of transgender men do not undergo complete sex reassignment surgery and still retain a cervix if a total hysterectomy is not performed
  - Cancers of female natal reproductive organs are still possible in these individuals, and cervical cancer has been documented in a male transgender patient
- Transgender men with a cervix should follow the same screening guidelines as natal females
  - Pap tests can be difficult for transgender men for a number of reasons
- Sensitivity to these unique barriers is important while still emphasizing the importance of regular screening



# HIV Prevention for MSM and Transgender Women

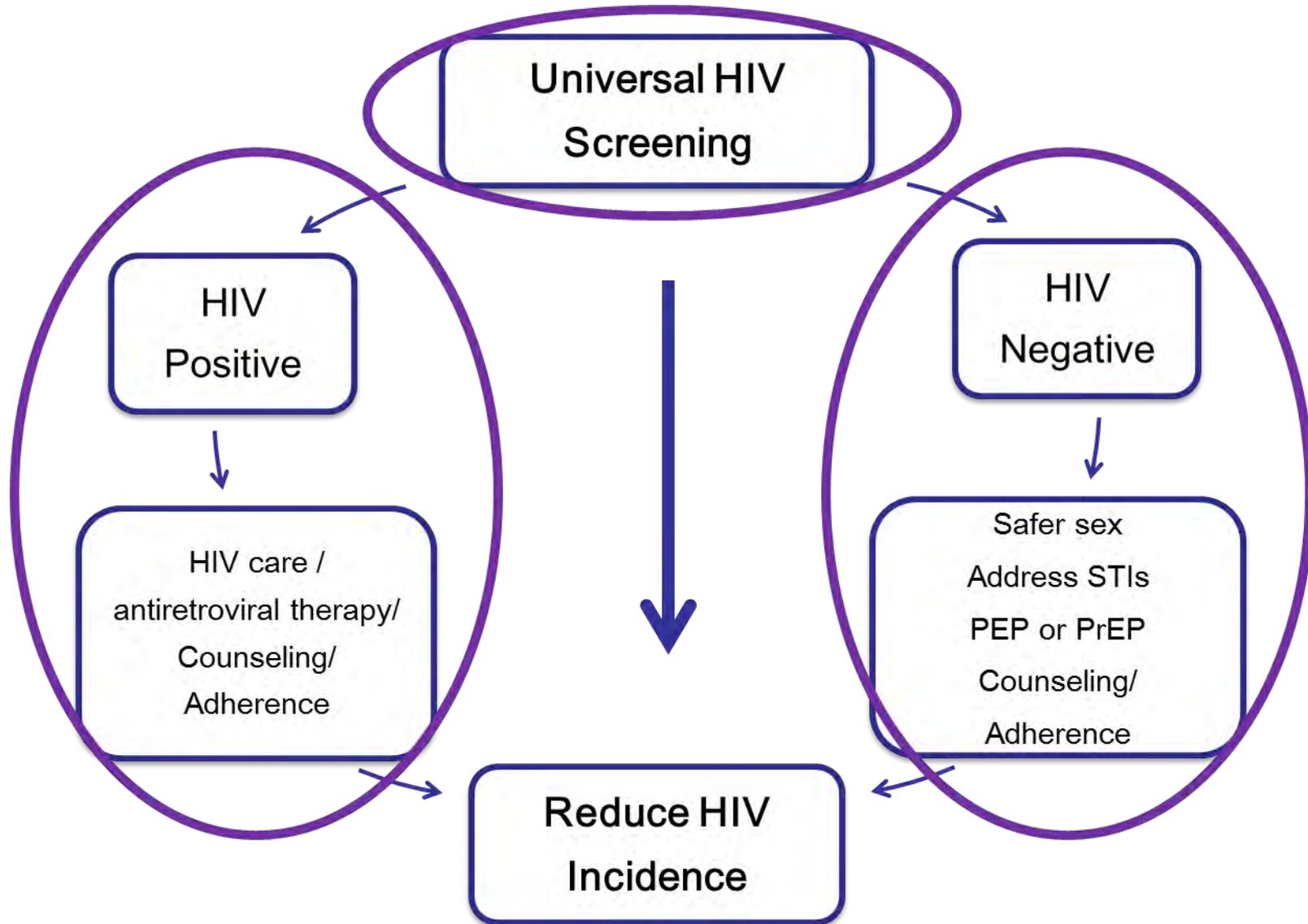


## Creating Effective Programs in Health Centers





# Opportunities to Improve HIV Prevention in Health Centers





# Hepatitis C and MSM



- 3.2 million Americans are infected with chronic HCV
- Growing evidence of sexual spread among HIV infected MSM
- Screening is important especially in light of effective new treatments
- Recommended for all HIV infected MSM at least once, and for elevation in hepatic transaminases
- Emphasize use of condoms to prevent spread

## Clinical Care of Transgender People Requires Knowledge of Gender Identity and Sex Assigned at Birth





# Appropriate Screening



## Jake R's Story

- Jake R is a 45-year-old man who came in with pain and on x-ray what appeared to be metastases from a unknown primary cancer
- Evaluation ultimately showed that he had developed cancer in his residual breast tissue after surgery to remove his breasts
- No one told Jake that he needed routine breast cancer screening, even though his mother and sister also had breast cancer





# Quality Care for Transgender People



## Louise M's Story

- Louise M is a 59-year-old woman who developed a high fever and chills after head and neck surgery
- The source of infection was her prostate gland (acute prostatitis), but no one knew that she had this anatomy
- No one asked her about her gender identity or knew she was transgender





# Creating a Welcoming and Inclusive Environment





# Creating a Caring and Inclusive Environment



- Are clinicians and staff taught about the health needs of LGBT people?
- Do LGBT employees feel respected and safe at work?
- Do forms reflect the full range of sexual and gender identity and expression?





# Transgender Standards of Care



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## center of excellence FOR TRANSGENDER health

About Us Meet Center leadership and staff

Programs & Services Learn how we work to improve trans health

Learning Center

- Primary Care Protocols
- Professional Literature
- Guidelines & Reports
- Conferences, Lectures, Online Training
- Community Education
- Audiences
  - Health Care Providers
  - Researchers
  - Community Organizers
  - Individuals

### Learning Center Topics:

- Primary Care Protocol for Transgender Patients: Practical reference for clinicians caring for trans patients
- The Health of Lesbian, Gay, Bisexual, and Transgender People: Better Understanding: Institute of Medicine Consensus Report. March 2011
- Healthy People 2020: Lesbian, Gay, Bisexual, and Transgender Health: Overview, objectives and data, and evidence-based health initiative. This is the first time that LGBT health is included in the People campaign.
- Feldman, JL and Goldberg, J. (2006). *Transgender patient guidelines for clinicians in British Columbia*. Vancouver: Transgender Health Program. Accessed online September 2011
- Williams, AR. (2009). *Transgender Considerations: A Clinician's Guide to Working with Trans and LGB patients*. Accessed online September 2011

The Endocrine Society's  
CLINICAL GUIDELINES

## Endocrine Treatment of Transsexual Persons:

An Endocrine Society Clinical Practice Guideline

THE ENDOCRINE SOCIETY

The Journal of CLINICAL ENDOCRINOLOGY & METABOLISM

WPATH

## Standards of Care

for the Health of Transsexual, Transgender, and Gender Nonconforming People

The World Professional Association for Transgender Health

# Best Practices for a Transgender-Affirming Environment

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

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Post this sheet on your wall or desk as a helpful reminder.

## Best Practices for a Transgender-Affirming Environment

BEST PRACTICES	EXAMPLES
When addressing patients, avoid using gender terms like "sir" or "ma'am."	"How may I help you today?"
When talking about patients, avoid pronouns and other gender terms. Or, use gender neutral words such as "they." Never refer to someone as "it".	"Your patient is here in the waiting room." "They are here for their 3 o'clock appointment."
Politely ask if you are unsure about a patient's preferred name.	"What name would you like us to use?" "I would like to be respectful—how would you like to be addressed?"
Ask respectfully about names if they do not match in your records.	"Could your chart be under another name?" "What is the name on your insurance?"
Did you goof? Politely apologize.	"I apologize for using the wrong pronoun. I did not mean to disrespect you."
Only ask information that is required.	Ask yourself: What do I know? What do I need to know? How can I ask in a sensitive way?

NATIONAL LGBT HEALTH EDUCATION CENTER  
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# Adding Affirmative Imagery and Content



## Do Ask, Do Tell

Let your provider know if you are LGBT. Your provider will welcome the conversation. **Start today!**

**EDU** NATIONAL LGBT HEALTH EDUCATION CENTERS  
 A PROGRAM OF THE U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

## Do Ask, Do Tell:

Talking to your health care provider about being LGBT



# We are here to help you!



NATIONAL LGBT HEALTH  
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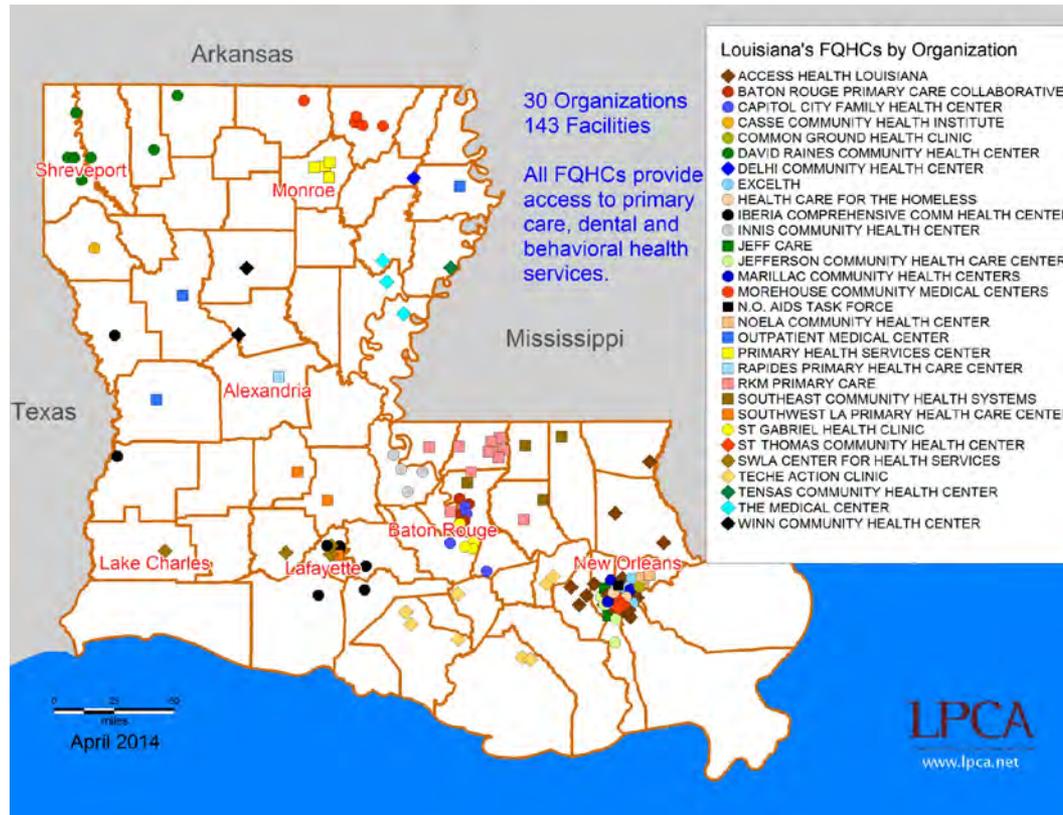
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 [www.lgbthealtheducation.org](http://www.lgbthealtheducation.org)

# Louisiana PCA



Jonathan Chapman, Executive Director  
 Aaron Price, Community Development Coordinator  
 Louisiana Primary Care Association



# Louisiana PCA - LGBT Focus



- Recognition of the Need
  - Participation in HIV/AIDS services organizations planning activities
- Our Efforts
  - Distribute educational information and opportunities to health centers
  - Host training at health centers and conferences
- Successes, Challenges, Lessons Learned, Best Practices
  - Having the discussion, providing information
  - Lack of awareness, cultural barriers
  - Recent State Legislation
  - Accessibility, prioritization
- Future Plans
  - Seek feedback, enhance distribution of information, continue efforts



**Avein Saaty-Tafoya CEO  
Adelante Healthcare  
Phoenix, AZ**



**ADELANTE HEALTHCARE**



- LGBT Special Population Survey
- HRC Healthcare Equality Index





## Health Disparities

- Higher than average rates of HIV/AIDS/STDs
- Family/communal/workplace isolation
- Domestic/communal/workplace violence
- Depression and Suicide
- Lack of support services in rural areas
- Lack of transportation
- Lack of health insurance
- Fear of identifying as LGBT

## Established Support Groups

- Conexiones, Santa Cruz County, CA
- Safe place for Latino LGBT migrant farmworkers
- Promotes advocacy, recognition, education, health resources, peer support groups, and social services







**Thank you for joining us today!**

**Please fill out the session  
evaluation!**