



*Healthcare Issues Facing
Lesbian, Bisexual Transgender,
Queer and Two Spirit Women*

(LBTQ TS)

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3/15/2016

Goals of this Presentation

1. Develop sensitivity, empathy, and awareness of the issues facing LGBTQ/TS persons.
2. Review healthcare issues facing LBT/TS Women across the lifespan,
3. Identify legal, ethical and healthcare issues specific to the aging LGBTQ/TS population.



Incidence and Prevalence

- 1% and 3.5% of women identify as lesbian and bisexual, respectively,
- Diverse population,
- Many persons sexuality may evolve over time (while they may identify as ... they may not “come out” until later years),
- All providers encounter lesbian and bisexual women.



General LGBTQ/ Two Spirit Issues

GOALS

1. Develop sensitivity, empathy, and awareness of the issues facing LGBTQ/TS persons.
2. Review healthcare issues facing LBT/TS Women
3. Identify legal, ethical and healthcare issues specific to the aging LBTVQ/TS population.

Introduction

- Lesbian, Bisexual, Two Spirit, Queer and Transwomen are found in all races, ethnicities, religions, and social classes;
- LGBTQ individuals face health disparities linked to societal stigma, discrimination, and denial of their civil and human rights.
- Discrimination against LGBTQ/TS persons has been associated with high rates of psychiatric disorders, substance abuse, and suicide.

Introduction

- Violence and victimization are frequent for LGBTQ/TS individuals, which has both physiological and psychological effects.
- Personal, family, and social acceptance of sexual orientation and gender identity affects the mental health and safety of nonconforming persons.

Healthy People 2020, 2016

Introduction

- Lesbian, Gay, and Bisexual individuals are more likely to avoid or delay medical care when compared to heterosexuals
 - 29% v 17%, respectively
- Lesbians have lower rates of using family doctors, and receiving pap smear and clinical breast examinations,
- [?] Bisexual persons report higher levels of unmet healthcare needs than heterosexuals.

Why is LGBTQ/TS Health Important?



- Reductions in disease transmission and progression,
- Increased mental and physical well-being,
- Reduced health care costs,
- Increased longevity.



Healthy People 2020, 2016

Definitions



Definitions

- Sexual orientation
 - Enduring emotional, romantic, or sexual attraction one feels toward men or women.
- Lesbian
 - No standard definition;
 - Characteristics include same-sex attraction, same-sex sexual behavior, or self-identification.

Definitions

- Bisexual Women
 - Are attracted to both men and women, identifies as bisexual,
- Transgender
 - One whose gender identity differs from that of his/her assigned gender.
- Cisgender
 - Accepting/identifying with the gender that was given at birth, and meets social expectations of their gender.


Definitions

Queer

- Inclusive word for all those within the sexual and gender minority communities. Older persons might find this term offensive.

Two Spirit

- Native Americans focus on a persons spiritual gifts, instead of sexuality and gender. Seen as doubly blessed; having both the spirit of a man and woman. May be viewed as leaders and teachers.



Improving the Health of LGBTQ/TS Persons

General Efforts to Improve LGBTQ TS Healthcare:

- Reducing Human Immunodeficiency virus (HIV)/sexually transmitted diseases (STDs) with interventions that work,
- Implementing anti-bullying policies in schools,
- Providing supportive social services to reduce suicide and homelessness risk among youth,
- Being supportive of a patient's sexual orientation to enhance the patient-provider interaction and regular use of care.

Efforts to Improve LGBT Healthcare:

- Providing medical/nursing students with access to LGBTQ/TS patients to increase provision of culturally competent care.
- Ensuring that schools training healthcare providers have standardized curriculum addressing healthcare issues, legal and ethical issues facing LGBT persons (all queer people).
- Hospital training for providers.

Efforts to Improve LGBT

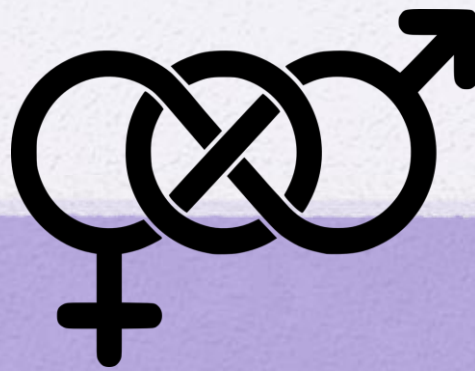
- Efforts to improve LGBTQ TS health include:
- Adolescent Health
- Educational and Community-Based Programs,
- Cultural competency programs,
- Centers devoted to LGBTQ TS persons,



Efforts to Improve LGBT Community Health

- Efforts to address health disparities among LGBTQ TS persons include:
 - Expansion of domestic partner health insurance coverage
 - Establishment of LGBTQ TS health centers





Health Care for Lesbian, and Bisexual Women



Gay Pride Delhi - India, Sunil Deepak, 2009

Barriers to Healthcare Faced by LBTW/TS

- Concern about confidentiality,
- Discriminatory attitudes and treatment,
- Limited access to healthcare and insurance,
 - Limited fertility services for lesbian couples
 - Limited insurance for lesbian partners
- Limited understanding of what their healthcare needs may be (providers).

Physical Environment



Creating a Welcoming and Inclusive Environment

- Place an LGBT friendly symbol, sticker or sign in a visible location,
- Have an LGBT specific magazine or newspaper in the reception area,
- Place pamphlets regarding LGBT health issues in the reception area,

American Congress of Obstetricians and Gynecologists (ACOG) , 2014

Creating a Welcoming and Inclusive Environment

- Educate staff in cultural competence and inclusion issues for all clients. Include significant others/partners as requested by client,
- Have patient rights visible and inclusive of sexual orientation and gender preference.
- Sign such as “this office appreciates diversity...”

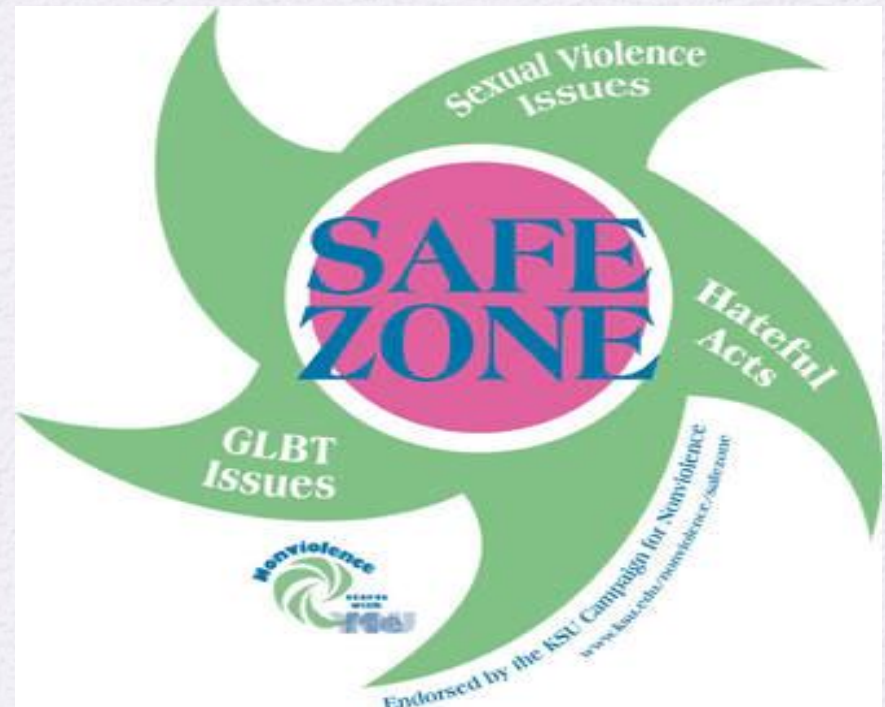
Creating a Welcoming and Inclusive Environment

- Be a resource for health information about issues for LGBTQ TS persons and their families,
- Encourage families to contact: Parents, Family, and Friends of Lesbians and Gays
www.pflag.org
- If you make a mistake, say you are sorry.

American Congress of Obstetricians and Gynecologists (ACOG) , 2014

Creating an Inclusive Welcoming Environment

- If your practice is affiliated with a school, have the organization create a space, “Safe Zone” where LGBTQ TS persons can meet, organization and discuss pertinent issues.



INTAKE QUESTIONS-Inclusive oriented

INSTEAD OF

- Are you married?
- Are you monogomus?

INCLUSIVE LANGUAGE

- Do you have insurance?
- Do you have a support person, significant other?
- Who is family to you?
- Do you have any risks for HIV or any other Sexually Transmitted Diseases(STDs)?
- When was your last HIV test? Do you want to be tested for HIV?

INTAKE QUESTIONS-Inclusive oriented

Instead of Sex

- ☐ MALE
- ☐ FEMALE

Assuming name

Ask About Sexuality

- ☐ GENDER IDENTITY
- ☐ BIRTH GENDER
- ☐ SEXUAL ORIENTATION
- ☐ TRANSGENDER

Ask client for preferred name

Intake Questions

- Interviewing and discussing sexual history and sexuality in a nondiscriminatory fashion,
- Taking a medical history that is inclusive of the transgender experience.
- Clinicians need to be familiar with the effect of transgender hormone use or surgery on the correct diagnosis and screening of medical conditions.

Hurd, 2015

Participation Question??

A 26 year-old menstruating person comes to your office requesting an elective hysterectomy and bilateral salpingoophorectomy (BSO). How do you respond??

Healthcare Issues
Facing Lesbian,
Bisexual, and
Transwomen, Queer
and Two Spirit (LBTWQ
TS) across the Lifespan

Routine Health Visits

- No known physiological differences between lesbian, bisexual and heterosexual women.
- May be differences in health behaviors that contribute to health problems.
- (And of course, the issues of discrimination and how it effects health).

ACOG, 2014

Unhealthy Physical Behaviors

- Unhealthy behaviors that are higher in LBTWQ/:
 - Cigarette smoking,
 - Misuse of prescription opioids and tranquilizers,
 - Mixed race/ethnicities bisexual women have higher rates of unprotected vaginal sex with males, and multiple male partners,
 - Engaging in weight loss behaviors—vomiting/laxative use, fasting for more than 24 hours,
 - Use of injectable silicone (Risk of HIV, Hepatitis due to shared needles).

ACOG, 2014; American Association of Medical Colleges, 2014

Mental Health Issues

- LBTW have higher rates of:
 - LBT youth have higher rates of suicidality, suicide attempts, depression, anxiety, and substance use disorders,
 - LBTW have twice the risk of exposure to traumatic events compared to straight individuals,
- Intimate Partner Violence
- Health care providers need to advocate for increased mental health services in NM, and increased training for working with LGBTQ TS persons.

Mental Health Issues

- Bisexual women are more likely to suffer poor mental health and psychological distress than lesbians, according to a large survey from the United Kingdom (2015).
- Bisexual women were 64% more likely to report eating problems and 37% more likely to have deliberately harmed themselves than lesbians,
- Bisexual women are less likely to be “out” to their friends

Brooks, 2015

Phillip's Experience

- “I was living on the streets for about 2 years as a young queer runaway... The social workers actually met me and helped me obtain services.”
- “That connection helped shape who I am; it is why I became a social worker....”

Rutherford, McIntyre, Daley, & Ross, 2012

Routine Health Visits-General

Health Issues

- Comprehensive Care:
 - Prevention/treatment of cardiovascular disease, obesity, cancer, diabetes, and sexually transmitted diseases.(LBTWQ TS Higher prevalence of obesity, tobacco, and alcohol use).
 - All women should be assessed for mood disorders, domestic violence, and eating issues,

Routine Health Visits-General Health Issues

- Usual vaccinations, breast exams, mammography, colorectal screening, osteoporosis screening for all women,
- For persons who are on HAART, check for side effects of their medications, viral load, and CD-4 counts.

Routine Health Visits

- Lesbian and bisexual women should be assessed and educated regarding silicone injections.
- All persons with a cervix should have cervical PAP smears annually,
- All identifying women should be asked about HIV and Hepatitis testing,
- All women should be assessed for sexually transmitted infections, and educated regarding safe sex techniques (including sex toys).

Reproductive Health



- Family planning/Reproductive health should be provided for all women interested in having a family.
- All women interested in having children should be counseled and educated regarding measures for healthy pregnancies (healthy lifestyle, vaccinations, STD testing, HIV testing, genetic screening).
- For women who do not wish to have children and want elective hysterectomy, appropriate referrals should be made.



Healthcare Needs of Older Lesbian and Bisexual Women

Discussion Question

Healthcare Issues Facing Older LBTW

- You are caring for a 68 year old female post- R knee replacement. She is listed as “single”. When you make rounds she has an older female companion with her. She is introduced as her “friend”. You later find that they have been living together for 30 years.
- Why is it difficult for her to disclose her relationship status??
- Why does gender identity and sexual orientation matter??



Healthcare Issues Facing Older LBTW

- Everyone's sexuality and gender identity is an important part of their history identity and relationships, even if they are not sexually active.
- Being LGBTQ/TS is much more than about sex.

Demographics of Older LGBT Adults

- 1 million to 2.8 million currently (2010)
- 2 million to 7 million by 2030
- Lesbian and Bisexual Women have higher rates of poverty than gay/bisexual men and heterosexuals,
- More likely to live in urban areas, found in over 90% of US counties.

Legal/Ethical Issues Facing Older LBTTW

- A lifetime of discrimination:
 - Homosexuality a mental disorder until 1973.
 - 1980's AIDS epidemic led to employment, housing, and other forms of discrimination; while advocacy groups organize.
 - 1996 gays and lesbians denied protection against discrimination.
 - 2003 until present—laws allowing gay and lesbian marriage are passed, some repealed.

Legal/Ethical Issues Facing Older LBTW

- Anti-gay Violence throughout their lifetime.
- Stonewall gay bar in Greenwich Village, often raided by police. On June 28, 1969 the raid turned into a six-day uprising. Credited as a major turning point in the gay rights movement.
 - Pre-Stonewall
 - Life time discrimination/victimization
 - May be offended by the term “queer”
 - Post-Stonewall
 - More openness



Legal/Ethical Issues Facing Older LGBTQ/TS

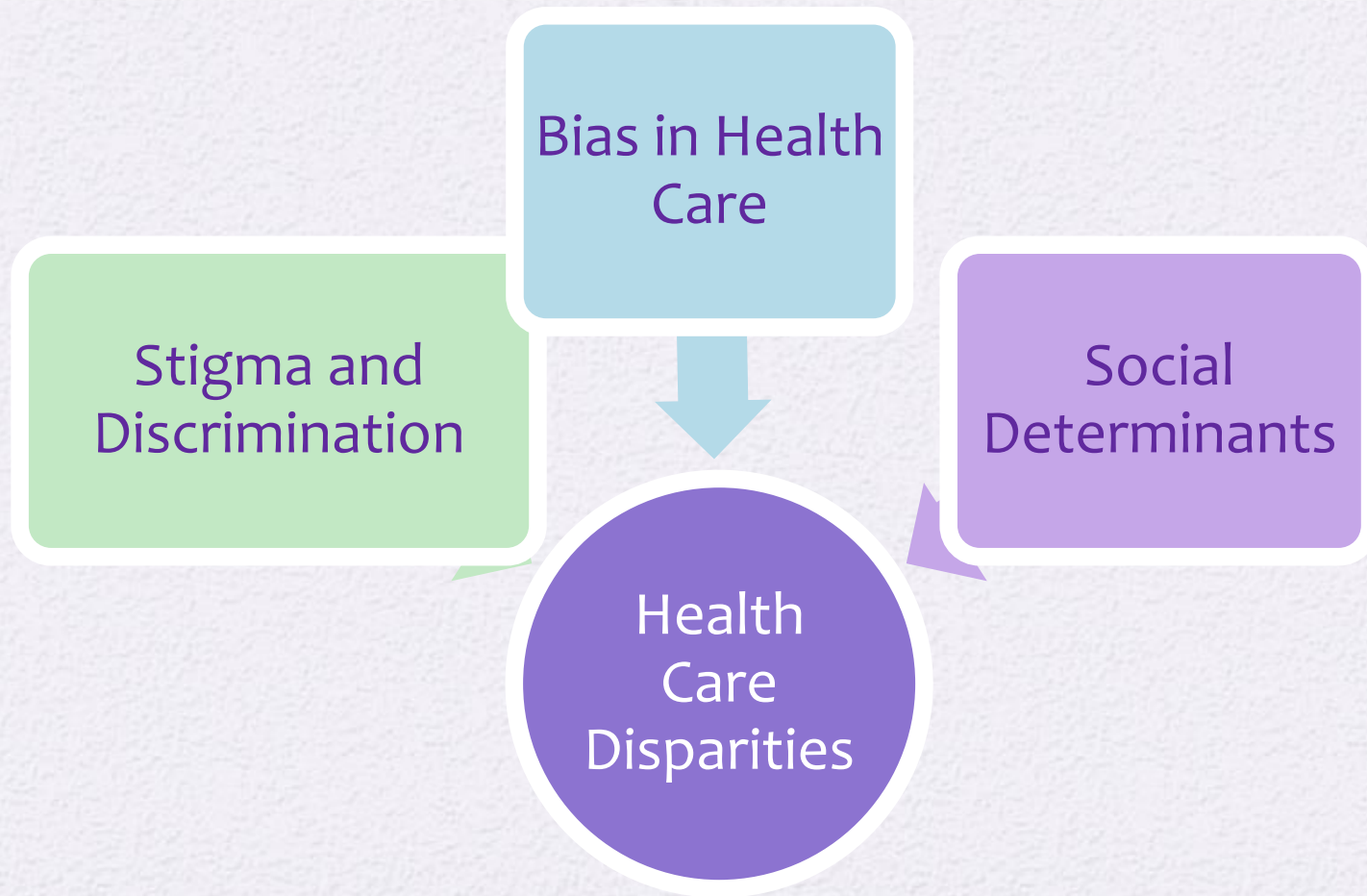
- 1987-1998
 - 324,029 Americans died of AIDS/HIV
 - While communities were decimated, gay rights movement strengthened.
- Older generation may not be likely to “come out” of the closet.
 - Concerned about discrimination due to sexual orientation,
 - 12% of Lesbians are not confident that they will be treated with dignity and respect.

Legal/Ethical Issues Facing Older LGBTQ/TS

- Social networks are composed primarily of other LGBTQ/TS persons,
- “When I lost all my gay friends to AIDS, I realized that my social sphere was pretty small. I can’t have just gay friends.
- Concerned about loneliness, isolation, failing health, and economic distress.”

Orel, 2014

Health Disparities & LGBT Elders



Adapted from IOM 2011: The Health of Lesbian, Gay, Bisexual and Transgender People

Healthcare Issues Facing Older LBTW

- Survey 416 older LGB
 - 39% considered suicide
 - 12% had suicidal thoughts in the past year
- Mental Health in Older LBTW Adults
 - Major Depression
 - Generalized Anxiety Disorder
 - Bipolar Disorder





Issues Facing Older LBTH

Older LBTH face:

- Suicide, Substance Abuse, Risky Behaviors as a result of a lifetime of discrimination,
- Loneliness resulting from rejection/isolation from their families, not having offspring, and
- Inability to have lifelong partners speak for them (depending on local, state laws).
- Discrimination in assisted living environments and other long-term care settings.

HIV Disease

- Incidence among older people is low, but still happens. According to the CDC:
 - People over 50 account for 17% of new HIV cases; 24% of new AIDS cases
- Increasing prevalence of HIV in older adults who are living longer on ART.
- Comorbidities more common in older patients,
- 48% of LGBT Elders who are HIV+ have experienced the death of a loved one.



Sexual Health in Older LGBTQ/TS

- Elderly are sexually active:
 - 53% seniors 65-74 years
 - 26% of seniors 75-85
- Elderly are at risk for HIV and other STD's
 - 92% of older adults do NOT use condoms
 - 48% of older LGB adults do not use condoms regularly, and 9% never do

SAGE, National LGBT Health Education Center, 2016

End-of-Life Issues

- Sex and sexuality are core components of the human experience; sexuality remains important for LGBTQ TS individuals.
- Sexuality is often overlooked in Palliative Care.
- Older LGBTQ TS persons may be less open to discuss sexuality.
- Younger people who are not “out” may have more difficulty discussing EOL issues.

End-of-Life Issues

- LGBTQ TS persons less likely to complete Advanced Directives (Health Care Proxy, Living Will).
- Older LGBT/TS persons may have survivor guilt.
- Older individuals remain sexually active: physical closeness, emotional connectedness may be more important to those near EOL.
- Lesbians more positive to hospice care and complementary medicine, although concern regarding religious-based organizations.

Griebeling, 2016; Hughs & Cartwright, 2015

Resilience among LGBT Older Adults

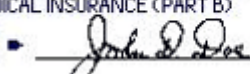
- 91% Engage in wellness activities
- 89% Feel good about belonging to the LGBT community,
- 71% Percent reported having a person in their life to love and make them feel wanted,
- 83% Have people with whom to do something enjoyable.



Medicare Offers Benefits, Joint Placement to LGBT Seniors

- 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.



MEDICARE		HEALTH INSURANCE	
SOCIAL SECURITY ACT			
NAME OF BENEFICIARY JOHN D. DOE			
MEDICARE CLAIM NUMBER 123-45-6789A	SEX MALE		
IS ENTITLED TO	EFFECTIVE DATE		
HOSPITAL INSURANCE (PART A)	1/1/95		
MEDICAL INSURANCE (PART B)	1/1/95		
SIGN HERE 			

Issues Facing Transwomen



Terms for Transgender Persons

- Transgender– Adjective to describe persons who cross or transcend culturally defined categories of gender
- Transmale or Trans man –Female at birth; identifies as male
- MTF –Male to Female
- Transfemale or Trans woman –Male at birth; identifies as female
- FTM—Female to Male
- Cisgender –Gender identity matches assigned birth gender

Health Issues for Trans Women MTF

- Many have faced **extreme** prejudice and discrimination during their lifetime:
 - May have been rejected by family of origin,
 - Higher rates of trauma during childhood,
 - Have higher rates of substance usage, mental health issues,
 - 19% of transgender persons report refusals of care, 28% report harassment,
 - 41% of transgender persons have attempted suicide (only 1.6% in the general population),

Health Issues for Trans Women MTF

- Transgender women have the highest percentage of new HIV infections:
- 2007-2011 in NYC 191 new diagnoses of HIV infection of transgender people,
 - 99% transgender women, mostly minorities
 - Over half (52%) transwomen were in their twenties.
 - 51% of transgender women had documentation regarding substance use, commercial sex work, homelessness, and incarceration

Health Issues for Trans Women

MTF

- Sensitivity required when performing physical assessment—talk to patient first, then ask to examine....
- Remember to specifically ask about anatomy....
- Ask about resiliency, coping skills, and support systems

Health Issues for Trans Women MTF

History

- Use of Hormones; history of Side Effects
- Breast Cancer Risk/Mammogram
- PSA
- Surgeries
- Family Planning (banking of Sperm)

Physical Exam

- Breast Exam
- Prostate Exam
- Side Effects from Hormones

Chaz Bono



Increasing Health Care Providers Competency

- Cultural Competency training for all staff,
- Policies and procedures for identifying providers competent in caring for persons identifying as LGBTQ TS,
- Encouraging hospitals to have trainings for providers,
- LGBTQ TS health care centers,
- Increasing research funding for quality studies on LGBTQ TS health.

Continuing Care for LGBT Community

- A number of issues will need to continue to be evaluated and addressed over the coming decade, including:
 - Prevention of violence and homicide toward the LGB community, and especially the transgender population,
 - Nationally representative data on LGBT Americans,
 - Resiliency in LGBT communities
 - LGBT parenting issues throughout the life course.

Healthy People 2020, 2016

"Returning violence for violence multiplies violence, adding deeper darkness to a night already devoid of stars... Hate cannot drive out hate: only love can do that."

Martin Luther King Jr.



Continuing Care for the LGBT Community

- Elder health and well-being,
- Need for a LGBT wellness model,
- Recognition of transgender health needs as medically necessary.



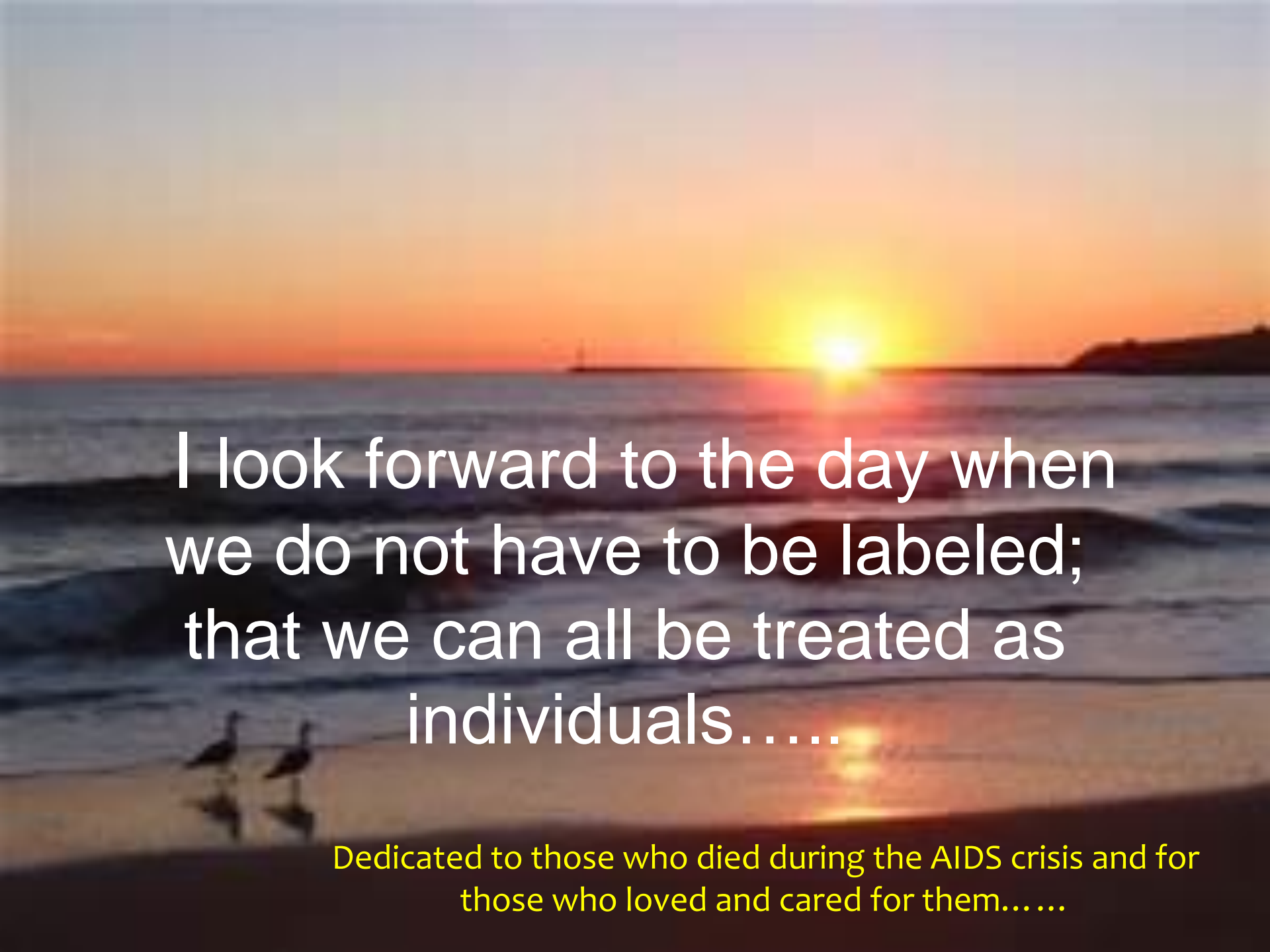


Research on Healthcare for LGBTQ/TS

- June 25, 2015 University of California—San Francisco commenced the **PRIDE** Study—Population Research in Identity and Disparities for Equality,
- A longitudinal study of LGBTQ persons,
- Collecting data from thousands of LGBT persons via an app (Being compared to the Framingham study as far as numbers and timetable).
- Help providers to understand, treat, and teach about LGBT health.

Continuing Care for the LGBT Community

- The United States Department of State (2015) named Randy Berry as special envoy:
 - Advocate globally for the human rights of LGBT persons.
 - Specifically to reduce violence around the world, and decriminalize same-sex relationships,
 - He will be able to utilize the State Departments Global Equity Fund for human rights communities in over 50 countries.

A serene sunset scene over the ocean. The sun is a bright, glowing orb on the horizon, casting a long, shimmering reflection across the water. The sky transitions from a deep orange near the horizon to a pale, hazy blue at the top. In the foreground, two seagulls stand on the sandy beach, their silhouettes clearly visible against the warm light. The overall mood is peaceful and contemplative.

I look forward to the day when
we do not have to be labeled;
that we can all be treated as
individuals.....

Dedicated to those who died during the AIDS crisis and for
those who loved and cared for them.....