

LGBTQ+ Older and Aging Adult Cultural Competency 101 – Tools to Improve Patient Communication, Care and Outcomes



2020 Forum on Aging in Rural Oregon

October 29, 2020

Liz James - pronouns she/her or they/them

Former CEO, Lesbian Health Initiative of Houston, Inc.

Member, Oregon Statewide LGBTQ+ Aging Coalition

Co-Chair & Presenter, 2019 SO LGBTQ+ Health & Wellness Summit

Volunteer Leader, Southern Oregon AARP Community Action Team

Member, RVCOG SDS Senior Advisory Council

Disclosure



I have no conflicts of interest or relationships to disclose.

Agenda



- Relevant Background
- Who are LGBTQ+ Older Adults
- LGBTQ+ Policy Protections
- LGBTQ+ Terminology and Identities
- LGBTQ+ Older Adult Challenges, Barriers, Disparities and Risks
- Creating a LGBTQ+ Welcoming Environment
- LGBTQ+ Healthcare Provider Resources (*after Q&A slide*)

Objectives for Today's Session



- Describe health disparities faced by LGBT older adults.
- Explain how policy changes can improve health care and elder services for this population.
- Describe how health systems, including providers can advocate and care for their LGBT older patients.

Background



Equality,

A Powerful Prescription for Health.™



We are the Community, We are the Change.™

LHI's Education & Access Programs - adaptable, evidence-based, collaborative, replicable and transformative service delivery and system change vehicle recognized as an HHS AHRQ Innovation March 2015

The screenshot shows the AHRQ Health Care Innovations Exchange website. At the top, there is a header for the U.S. Department of Health & Human Services and the Agency for Healthcare Research and Quality (AHRQ). Below this is a navigation bar with links for Home, What's New, Browse By Subject, Downloadable Database, Videos, Scale Up & Spread, and Articles & Guides. The main content area features a green banner for the "Service Delivery Innovation Profile" titled "Collaborative Health Education and Access Events Offer No-Cost Screenings and Navigation Services To Connect Lesbian, Gay, Bisexual, and Transgender Individuals With Medical Homes Offering Culturally Competent Care". Below the title, there is a "Snapshot" section with a "Summary" that describes the program. A red box highlights a paragraph of text from the summary.

U.S. Department of Health & Human Services

Agency for Healthcare Research and Quality
Advancing Excellence in Health Care

AHRQ HEALTH CARE INNOVATIONS EXCHANGE
Innovations and Tools to Improve Quality and Reduce Disparities

About | Sitemap | FAQ | Help | Contact Us

Share

Home | What's New | Browse By Subject | Downloadable Database | Videos | Scale Up & Spread | Articles & Guides

Events

Service Delivery Innovation Profile

Collaborative Health Education and Access Events Offer No-Cost Screenings and Navigation Services To Connect Lesbian, Gay, Bisexual, and Transgender Individuals With Medical Homes Offering Culturally Competent Care

Innovation

What They Did | Did It Work? | How They Did It

Snapshot

Summary

Lesbian Health Initiative of Houston, Inc. provides health care for lesbian, gay, bisexual, and transgender individuals through a program that combines cultural competency training, screening, and patient navigation. The program...

The impetus for the current, more comprehensive program came in 2011, with the passage of the Affordable Care Act and the incorporation of goals related to LGBT health issues in the Healthy People 2020 objectives. In this environment, LHI leaders saw an opportunity to extend the organization's reach and effectiveness by connecting people to health insurance and a culturally competent source of ongoing care. To that end, LHI hired its first employee and began forming partnerships with national and local organizations, with the goal of reducing health disparities and enhancing access to care for the LGBT community.

LHI's Advocacy Work , Success and Impact



Economic Impact of LGBT

National data suggests that health disparities faced by the LGBT community, coupled with poverty, result in great economic impact.

Some of the risk factors identified in the LGBT population include: increased rate of negative health behaviors such as smoking, an increase in emergency care utilization as a result of a lack of health insurance, and higher rates of expensive chronic health conditions due to low rates of preventative care and delay in seeking care. These factors also contribute to absenteeism or poor work performance.

Examples of LGBT Health Disparities

Increased:

- Tobacco use
- Alcoholism and other substance use
- Mental health concerns, including suicide attempts
- Cancer
- Experience of violence and other abuse
- HIV/AIDS infection
- Care from emergency departments

Decreased:

- Insurance coverage
- Medical care
- Preventive screening^{1,8}

Beginning in 2015, the Texas Behavior Risk Factor Surveillance System (BRFSS)

will include questions of sexual identity and gender identification which will provide local data on personal health behaviors that affect premature morbidity and mortality.¹⁸

Healthy People 2020

In 2012, two objectives were added with the goal of gathering data and improving the health, safety, and well-being of lesbian, gay, bisexual, and transgender (LGBT) individuals.

OBJECTIVE LGBT-1.1 Increase the number of population-based data systems used to monitor Healthy People 2020 objectives that include in their core a standardized set of questions that identify lesbian, gay, and bisexual populations.

OBJECTIVE LGBT-1.2 Increase the number of population-based data systems used to monitor Healthy People 2020 objectives that include in their core a standardized set of questions that identify transgender populations.

Note: As of the time of this publication, baseline and target data were not available.

Public Health Actions

- Gather sexual orientation and gender identity data to monitor LGBT health status.
- Educate the public about LGBT populations.
- Develop policies and plans that support efforts to improve LGBT health, decrease disparities, and increase cultural competency among those working with LGBT persons.

For More Information

CDC, LGBT Health: <http://www.cdc.gov/lgbthealth/index.htm>

The Fenway Institute: <http://thefenwayinstitute.org/>

The Williams Institute: <http://williamsinstitute.law.ucla.edu/>

1. Gates, G.J. LGBT Demographics: Comparisons among population-based surveys. Williams Institute, UCLA School of Law. Williams Institute Web site. <http://williamsinstitute.law.ucla.edu/wp-content/uploads/lgbt-demogs-exp-2014.pdf>. Accessed December 11, 2014.
2. Haseebullah, A, Flores, A, Kates, A, Sears, B, Gates, G.J. The LGBT divide: a data snapshot of LGBT people in midwestern, mountain & southern states. The Williams Institute. <http://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-divide-Dec-2014.pdf>. Published December 2014. Accessed December 11, 2014.
3. Belar, K.E., Dunn, L.C., Gray, A. Moving the needle. Center for American Progress. <http://cdn.americanprogress.org/wp-content/uploads/2014/11/LGBT-and-ACA-report.pdf>. Published November 2014. Accessed December 11, 2014.
4. James, L. Lesbian Health Institute of Houston, Inc. (LHI). Presented at 2014 Harris County Healthcare Alliance email membership meeting, August 13, 2014. http://www.lhiihealth.org/files/LHI_HCHIA_8-2014_Presentation_FNL.pdf. Accessed December 13, 2014.
5. Gates, G.J. In U.S., LGBT more likely than non-LGBT to be uninsured. Gallup Web site. <http://www.gallup.com/poll/175445/lgbt-likely-uninsured.aspx>. Accessed December 11, 2014.
6. Renf, U., Deamester, A., Kates, J., Seigristoff, A. Health and Access to Care and Coverage for Lesbian, Gay, Bisexual, and Transgender Individuals in the U.S. The Henry J. Kaiser Family Foundation Web site. Published October 23, 2014. Accessed December 11, 2014.
7. Institute of Medicine (IOM). Committee on Lesbian, Gay, Bisexual, and Transgender Health Issues and Research Gaps: Board on the Health of Sexed Populations. The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding. http://www.nap.edu/catalog.php?record_id=13126. Published 2011. Accessed December 11, 2014.
8. Kinkley, J. How to close the LGBT health disparities gap. Center for American Progress. http://cdn.americanprogress.org/wp-content/uploads/issues/2009/12/pdf/light_health_disparities.pdf. Published December 31, 2009.
9. Grant, M., Moten, L.A., Taniguchi, J., Heston, J., Herman, J.L., Keeling, M. Injustice at every turn, a report of the National Transgender Discrimination Survey. National Center for Transgender Equality and National Gay and Lesbian Taskforce. http://trans Equality.org/PDF/NTDS_Summary.pdf. Published 2011. Accessed December 11, 2014.
10. Texas Department of State Health Services (TDSHS). Attachment B: 2015 CDC epi BRFSS survey outline of questions. Isolation of Module 16 confirmed by Rebecca Wood, TDSHS. https://www.data.sph.su.utoronto.ca/attachment/16_b.htm. Updated June 13, 2014. Accessed December 22, 2014.

The State of Health HOUSTON & HARRIS COUNTY 2015 - 2016

Public Health Actions

- Gather sexual orientation and gender identity data to monitor LGBT health status.
- Educate the public about LGBT populations.
- Develop policies and plans that support efforts to improve LGBT health, decrease disparities, and increase cultural competency among those working with LGBT persons

How many LGBTQ+ adults are there in the U.S.?



- 10,388,000* adults in U.S. identify as gay, lesbian, or bisexual
- 1,397,500* adults in U.S. identify as transgender

**Over 11 million* U.S. adults
identify as LGBT people**

(4.5% of adult U.S. population)

*Estimated Williams Institute 2018

How many Oregon LGBTQ+ adults are there?



Total State Population:

4,190,713

Total Adult Population:

3,317,146

**185,760* Oregon adults
identify as LGBTQ people**

(*estimate - Gallup, Williams Institute, & 2018 Census Estimates)

19,750* adults in Oregon identify as transgender

LGBT % of State Adult
Population:

5.6%

UPDATED

Percent of LGBTQ
Adults (25+) Raising Children

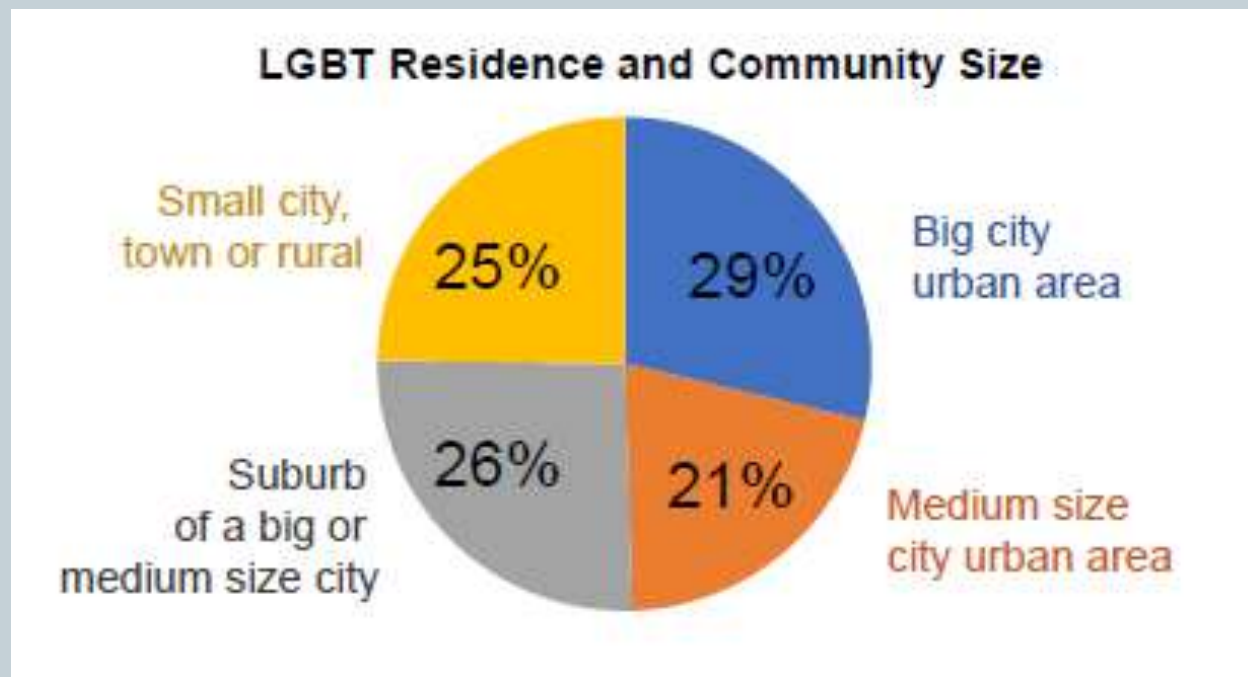
23%

Gallup/Williams 2019

Who are LGBTQ+ Older Adults in the U.S.?



LGBT older Americans live in all sizes of cities, towns, suburbs and rural areas, but they seek out LGBT-friendly local communities, even within more conservative regions of the country.



LGBTQ+ People in Rural America

WHERE WE CALL HOME: LGBTQ+ PEOPLE IN RURAL AMERICA

WHERE WE CALL HOME:
LGBT PEOPLE IN RURAL AMERICA

April 2019

RURAL AMERICA IS HOME TO MANY LGBT PEOPLE

**2.9-3.8
MILLION**

**LGBT PEOPLE IN
RURAL AMERICA**

LGBT people are a fundamental part of the fabric of rural communities, working as teachers, ministers, small business owners, and more. For many of these millions of LGBT people, living in a rural community may be just as or more important to their identity as is being LGBT. Rural America is where many LGBT people choose to call home.

Transgender People in Rural America

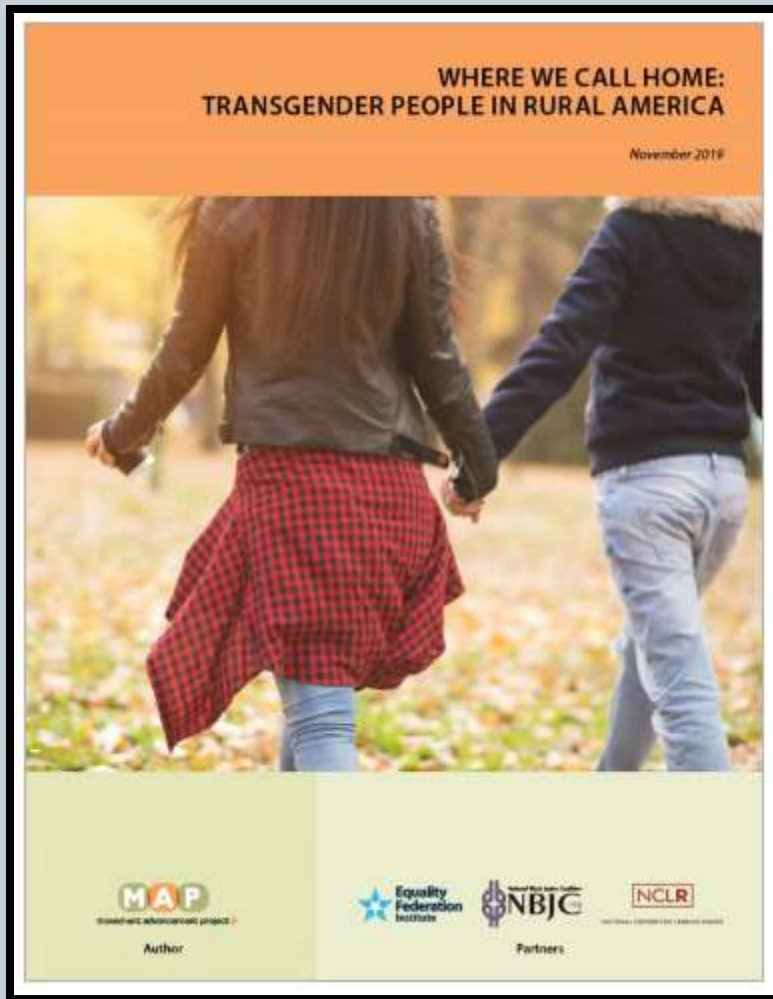


TABLE OF CONTENTS

INTRODUCTION	1
SECTION 1: A SNAPSHOT OF TRANSGENDER PEOPLE IN RURAL AMERICA	5
SECTION 2: STRENGTHS, STRUCTURES, AND CHALLENGES: HOW RURAL LIFE IMPACTS TRANSGENDER PEOPLE	9
Health Care	9
Identity Documents	13
Employment & Economic Security	15
Housing & Homelessness	17
Public Places and Businesses	19
Violence and Harassment	20
SECTION 3: POLITICAL LANDSCAPE FOR TRANSGENDER PEOPLE IN RURAL COMMUNITIES ..	22
RECOMMENDATIONS	25
CONCLUSION	26
ENDNOTES	27

LGBTQ+ People of Color in Rural America



TABLE OF CONTENTS

INTRODUCTION	1
DEMOGRAPHICS OF LGBT PEOPLE OF COLOR IN RURAL AMERICA	5
LGBT People of Color	5
LGBT People of Color in Rural Areas	6
BLACK LGBT PEOPLE IN RURAL AMERICA	9
LATINX LGBT PEOPLE IN RURAL AMERICA	17
NATIVE AMERICAN LGBT AND TWO-SPIRIT PEOPLE IN RURAL AMERICA	23
ASIAN AND PACIFIC ISLANDER LGBT PEOPLE IN RURAL AMERICA	28
RECOMMENDATIONS	32
CONCLUSION	33
ENDNOTES	34

Who are LGBTQ+ Older Adults in the U.S.?

2.7 MILLION LGBTQ ADULTS AGED 50 AND OLDER

1.1 MILLION ARE 65 AND OLDER

APPROXIMATELY **ONE IN FIVE** (20%) LGBTQ
OLDER ADULTS ARE PEOPLE OF COLOR

ONE-THIRD OF LGBTQ OLDER ADULTS LIVE AT OR BELOW 200% OF THE FEDERAL POVERTY LEVEL

2030: 3.8-7.2 million (Harley & Tester, 2016)

Three Generations

- Invisible
- Silenced
- Pride / Proud



Who are LGBTQ+ Older Adults in the U.S.?



Invisible - the oldest old, 85+

- Came of age and experienced the Great Depression (1929–1939)
- Many fought in WWII
- A time LGBT identities were largely absent from public discourse



Who are LGBTQ+ Older Adults in the U.S.?



Silenced – greatest generation, 75-80

- Came of age in the 1940s & 1950s
- 1950s McCarthy trials & “lavender scare,” sexual & gender minority identities cast as a threat to the security of the nation
- Same-sex behaviors were criminalized
- 1952 American Psychiatric Association had classified homosexuality as a psychiatric disorder



Who are LGBTQ+ Older Adults in the U.S.?



Pride/Proud - baby boomers & beyond

- Came of age at a time of great social change - Stonewall riots (1969)
- The 1960s the beginning of decriminalization of same-sex behavior
- 1973 homosexuality removed as a psychiatric disorder from Diagnostic and Statistical Manual of Mental Disorders (DSM-II-R)
- 1980's the AIDS pandemic began



AN ESTIMATED 3-5 MILLION LGBT PEOPLE HAVE DISABILITIES

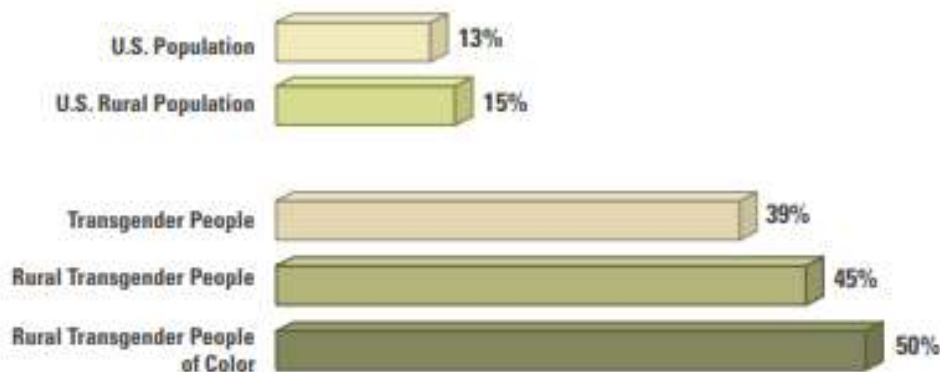


- New research shows that LGBT people are more likely to have a disability than the general population.
- In a survey of more than 26,000 transgender people, 39% reported having a disability.
- One in three lesbians and one in three bisexual women report having a disability in a population-based survey in Washington.

AN ESTIMATED 3-5 MILLION LGBT PEOPLE HAVE DISABILITIES



Figure 3: Transgender People, Including in Rural Areas, Are More Likely to Have a Disability
% of Each Group That Has One or More Disabilities



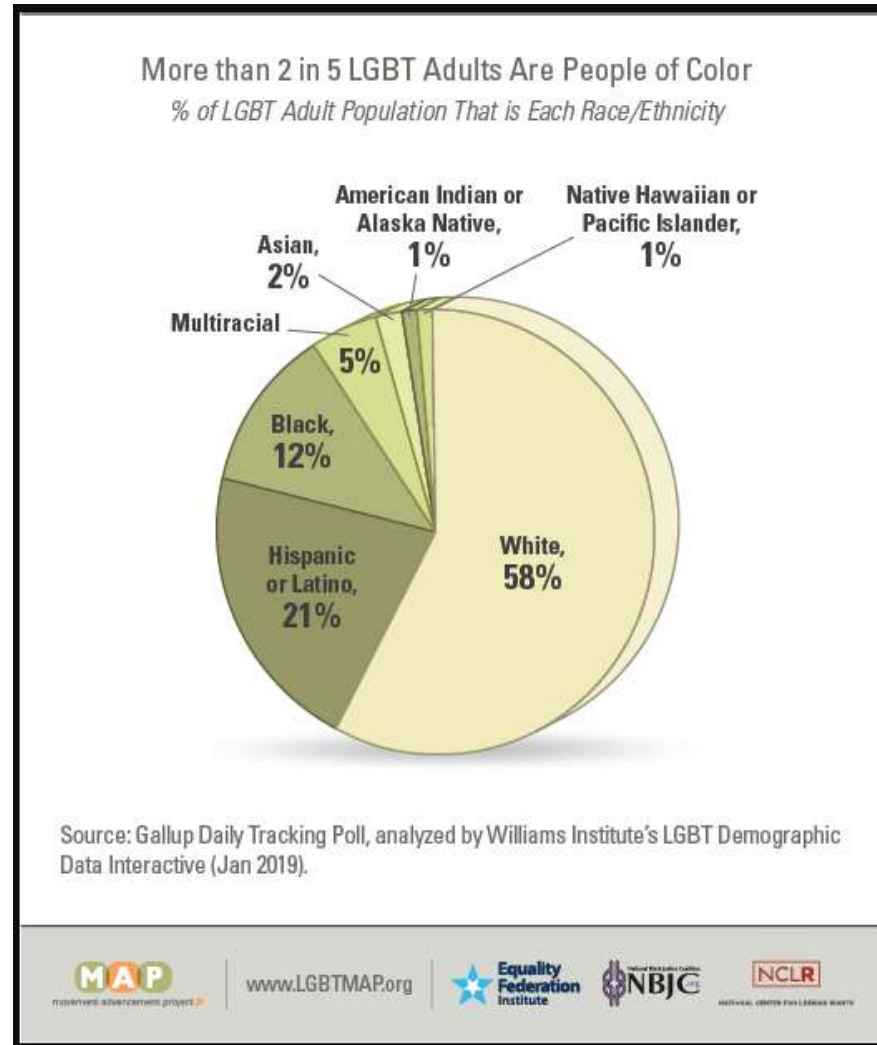
Rural transgender people are
3x as likely to have a disability as their rural neighbors

Half of rural transgender people of color have at least one disability

Note: Disabilities are those as described in the American Community Survey (ACS).

Source: MAP original analysis of USTS 2015, 2015 ACS 1-Year Estimates, U.S. Census Bureau, 2015 American Community Survey 1-Year Estimates, Table GCT1810, "Percent of People With a Disability—United States—Urban/Rural and Inside/Outside Metropolitan and Micropolitan Area." Accessed October 2018.

LGBTQ is NOT One Word & NOT a Community



Who are LGBTQ+ Older Adults in the U.S.?



ONE-THIRD OF LGBTQ OLDER ADULTS LIVE AT OR BELOW 200% OF THE FEDERAL POVERTY LEVEL



INCLUDING...

40% OF LGBTQ ADULTS 80 AND OLDER

40% OF AFRICAN AMERICAN LGBTQ OLDER ADULTS

40% OF HISPANIC LGBTQ OLDER ADULTS

47% OF BISEXUAL OLDER MEN

48% OF BISEXUAL OLDER WOMEN

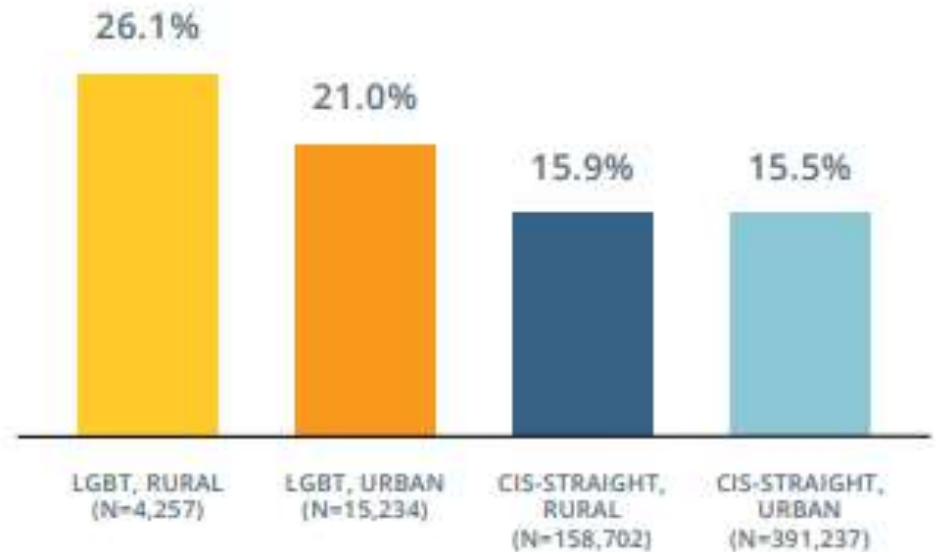
48% OF TRANSGENDER OLDER ADULTS

Where people live and how they identify matters



- **LGBTQ+ people experience poverty at a higher rate in rural areas than in urban areas.**
- 1 in 5 LGBTQ+ people in urban areas are living in poverty compared to 1 in 4 living in poverty in rural areas.

Figure 4. Poverty rates comparing LGBT and cisgender straight people by rural and urban residence



LGBTQ+ is NOT One Word & NOT a Community



- ▶ Reside in 99% of all counties in U.S. (2010 Census)
- ▶ All races/ethnicities, faiths, cultures, and education and income levels
- ▶ Single, divorced, partnered/married, parent/family
- ▶ Uninsured, under-insured and insured

Why do we need to know who our LGBTQ+ patients are?



- Provides you increased knowledge about patients'
 - Health risks
 - Support system
- Those who come out are more likely to access healthcare, adhere to treatment, and develop trust in the facility
 - Women who were open with their primary care doctors and gynecologists about their sexual orientation were nearly 2½ to three times more likely to have routine screening than those who did not disclose it*

*BMC Public Health. 2013; 13: 442. Published online 2013 May 4. doi: 10.1186/1471-2458-13-442 J Kathleen Tracy, Nicholas H Schluterman, and Deborah R Greenberg

Why do we need to know who our LGBTQ+ patients are?



- **There is a long history of anti-LGBT bias in healthcare** which continues to shape health-seeking behavior and access to care for LGBT individuals, despite increasing social acceptance.
- **31% transgender individuals** that had healthcare reported that none of their health care providers knew they were transgender. (2015 US Transgender Survey)
- **40% of gay men** (NYC, 2008) have not told their doctor they are gay
- **70% lesbians** do disclose their sexual orientation to their provider, although only 29% were asked by their provider (Stein, 2001)

Why do we need to know who our LGBTQ+ patients are?



A Lack of Competent, Inclusive Healthcare Can Result in Poorer Health Outcomes

Figure 10a: % of LGBT Older Adults Age 45-75 Who Report

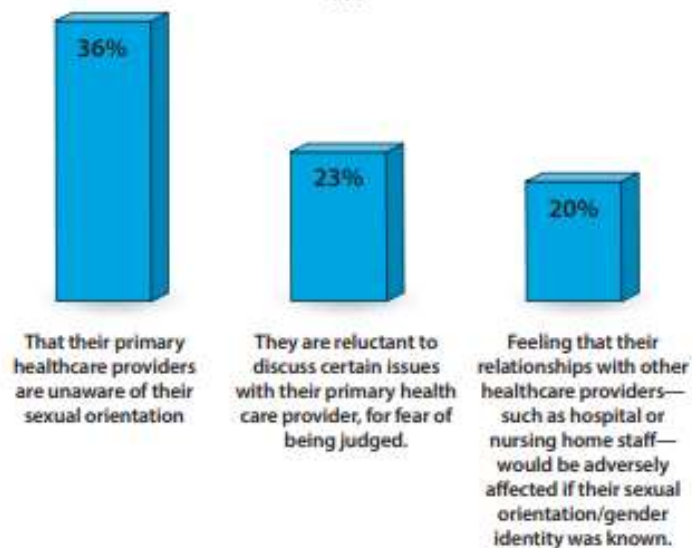
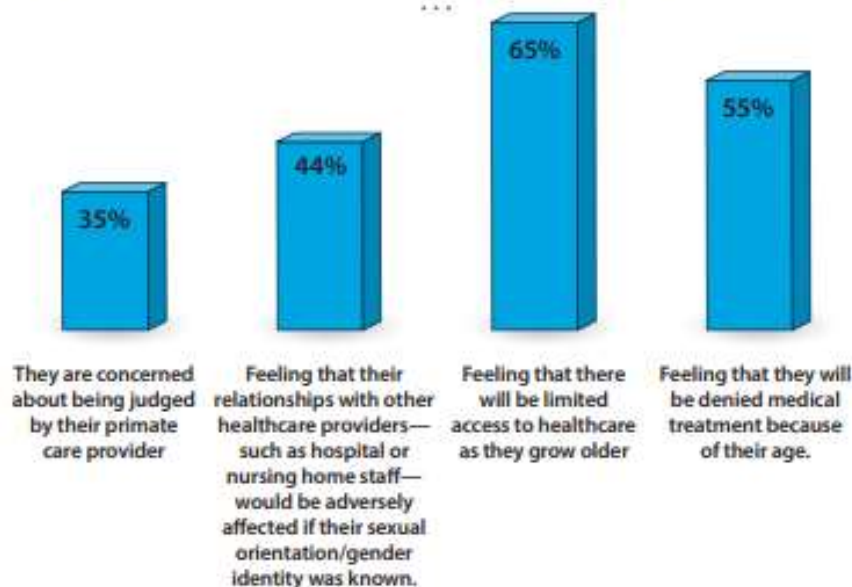


Figure 10: LGBT Older Adults are Fearful of Telling Their Healthcare Provider That They're LGBT

Figure 10b: % of Transgender Older Adults Age 45-75 Who Report



Source: Robert Espinoza, “Out and Visible: The Experiences and Attitudes of Lesbian, Gay, Bisexual and Transgender Older Adults, Ages 45-75” (New York, NY: SAGE, 2014), 45 -75, http://www.sageusa.org/files/LGBT_OAMarketResearch_Rpt.pdf.

LGBTQ+ Patient Policy Protections



Federal & Oregon Policies

- Patient Protection and Affordable Care Act (ACA)
- Marriage Equality, Obergefell v. Hodges
- Older Americans Act
- Oregon OHP (Medicaid Expansion)
- Oregon RHEA
- Oregon DFR2016-1



The ACA, the key to LGBTQ+ Health Equity



“The Affordable Care Act may represent the strongest foundation we have ever created to begin closing LGBT health disparities.”

Ex-HHS Secretary, Kathleen Sebelius,
quote from early 2012 speech

The ACA, the key to LGBTQ+ Health Equity



ACA implementation has proven this true

- Under the ACA, the uninsured rate for LGBTQ individuals making less than \$45,000 per year has been cut in half.
- Overturning the ACA will jeopardize the health care of more than [20 million Americans](https://www.americanprogress.org/issues/lgbtq-rights/news/2020/10/15/491582/repealing-affordable-care-act-devastating-impacts-lgbtq-people/), including millions of LGBTQ people, in the midst of a pandemic.

<https://www.americanprogress.org/issues/lgbtq-rights/news/2020/10/15/491582/repealing-affordable-care-act-devastating-impacts-lgbtq-people/>

Medicare & Obergefell v. Hodges



- **Obergefell v. Hodges** *June 26, 2015* Supreme Court of the United States ruled that the fundamental **right to marry is guaranteed to same-sex couples** by both the Due Process Clause and the Equal Protection Clause of the Fourteenth Amendment to the United States Constitution
- **Medicare** now applies equally to all married couples, regardless of where the couple resides

Family Caregiver Support Program Standards

VI. Priority populations to be served

The Older Americans Act prioritizes services to at-risk older adults including those who are frail and at risk for institutional placement; low-income, socially isolated, or minority individuals; Native American elders; older adults with limited English proficiency; those residing in rural areas; and Lesbian, Gay, Bisexual, or Transgender (LGBT) older adults.

Updated February 28, 2018

Oregon Health Plan (OHP)



On January 1st, 2015, Oregon extended coverage for most transition-related healthcare under the **Oregon Health Plan (OHP)**, the State's Medicaid Program

- These services include coverage for:
 - puberty suppression
 - primary care and specialist doctor visits
 - mental health care visits
 - cross-sex hormones, anti-androgens
 - lab work
 - some surgeries

Oregon Health Insurance Bulletin DFR 2016-1



Oregon

Kate Brown, Governor

Department of Consumer and Business Services

Division of Financial Regulation

350 Winter St. NE, Room 410

P.O. Box 14480

Salem, OR 97309-0405

OREGON DIVISION OF FINANCIAL REGULATION BULLETIN DFR 2016-1

TO: All Entities Transacting Insurance in Oregon

RE: Nondiscrimination Related to Transgender Persons in the Transaction of Insurance in Oregon

The purpose of this bulletin is to clarify prohibitions against unfair discrimination in the transaction of insurance in Oregon and to reiterate expectations of the Department of Consumer and Business Services (DCBS) about how insurers and other licensees, and authorized entities must address issues related to transgender persons.

Oregon Reproductive Health Equity ACT (RHEA)



Reproductive Health Equity Act

The Bill includes prohibition of services on the basis of actual or perceived race, color, national origin, sex, sexual orientation, gender identity, age or disability.

- For example, an individual who was assigned female at birth and identifies as male goes into a provider for cervical cancer screening, but his insurance only covers these screenings for females.
- The RHEA ensures insurance must cover services for this individual, regardless of his name, or what gender is on his driver's license or his birth certificate.

The Good News



You don't have to be an expert on LGBTQ+ culture to offer culturally competent care

- You just need
 - Basic information
 - A willingness to learn
 - An openness to hear what your patient is trying to tell you

LGBTQ – Defining the Alphabet



- ▶ **L** – Lesbian (sexual orientation)
- ▶ **G** – Gay (sexual orientation)
- ▶ **B** – Bisexual (sexual orientation)
- ▶ **T** – Transgender (gender identity)
- ▶ **Q** – Queer

Other letters/terms: Q - questioning, I - intersex, 2S - 2 spirit, A – asexual, same gender loving, pansexual

LGBTQ+ Defining the Alphabet



Sexual Orientation - How a person identifies their physical and emotional attraction to others

- **Lesbian** – an *identity* label for women who have primary sexual, romantic attraction towards women
- **Gay** – an *identity* label for men* who have primary sexual, romantic and relational attraction towards men
- **Bisexual** – an *identity* label for people who have sexual, romantic attraction toward with either men or women.
- **Pansexual** – an *identity* label for people who have romantic or emotional attraction towards people regardless of their sex or gender identity
- **Queer** is a word that describes sexual and gender identities other than straight and [cisgender](#) and is evolving.

* Some women refer to themselves as Gay

LGBTQ+ Defining the Alphabet



Sex, Gender, and Gender Identity

- **Sex:** Biological and anatomic differences assigned at birth, generally male or female. Some people's sex doesn't fit in to male or female, intersex.
- **Gender:** A social construct that refers to the rules and norms that a society assigns to varying degrees of maleness and femaleness
- **Gender Identity:** A person's internal sense of their gender (do I feel male, female, both, neither?) It's a feeling that begins early in life.

LGBTQ+ Defining the Alphabet



Gender Identity

- All people have a gender identity
- A person's internal sense of their gender (do I consider myself male, female, both or neither)
- For many this matches the sex assigned at birth (cisgender), for transgender people it does not
- Our gender identity may or may NOT match one's appearance, body, or other's perception
- Gender identity is increasingly described as being on the spectrum

LGBTQ+ Defining the Alphabet



Gender Expression

- How one presents themselves through their behavior, mannerisms, speech patterns, dress and hairstyle
- May be on the spectrum

LGBTQ+ Defining the Alphabet



Transgender people

- Gender identity not congruent with the assigned sex at birth
- Alternate terminology
 - Transgender man, trans man, female to male (FTM)
 - Transgender women, trans woman, male to female (MTF)
- Non-binary, genderqueer, gender neutral
 - Genderqueer person
- Trans masculine, Trans feminine
- May decide to transition at any age
- May or may not change their names/pronouns
- May or may not use hormones or have surgery

LGBTQ+ Defining the Alphabet



Gender Identity ≠ Sexual Orientation

- All people have a gender identity and a sexual orientation
 - How people identify can change
 - Terminology varies
- Gender identity is not the same as sexual orientation

Remember



It is not always obvious who is LGBTQ+!

- The form is not going to tell you what you need to know.
- It is OK to ask questions about partners, gender, preferred pronouns, language used for body parts – ***LISTEN 1st***
- **It is ok to feel awkward as you learn to ask**

LGBTQ+ Barriers to Healthcare



- Limited Access - Lack of health insurance, including lack of spousal benefit, lack of safe healthcare options
- Having a healthcare provider who does not know the disease risks or the issues that affect LGBTQ individuals
- Being afraid to tell your doctor about your sexuality or your sexual history
- Multiple stigma: ethnicity/race, gender, ability, citizenship, etc. - intersectionality
- Not understanding one's risk for health issues and disease
- Lack of knowledge about available health and wellness resources - from benefits to providers

LGBTQ+ Rural Barriers to Healthcare



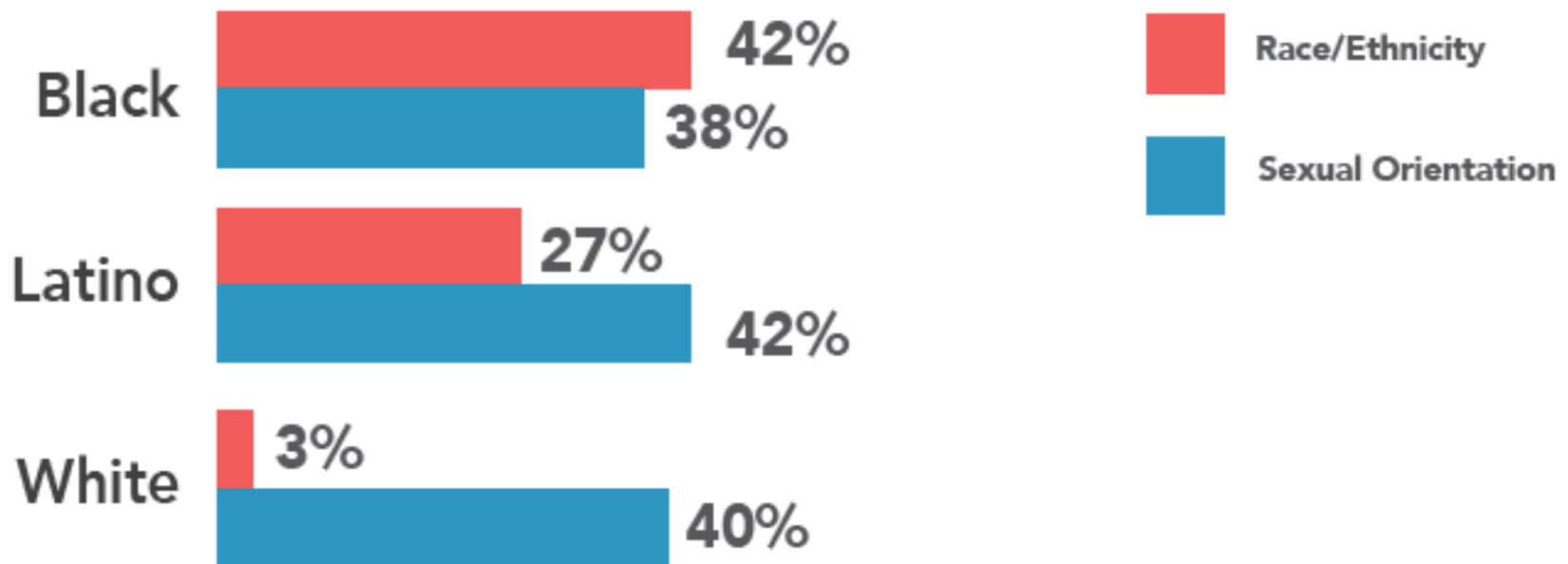
- Not accessing healthcare due to anticipated, internalized and enacted stigma
- Privacy and confidentiality concerns
- Patients not disclosing sexual orientation or gender identity to a provider, which could impact provision of needed urgent and preventative care
- Limited training of healthcare providers related to LGBT health-related issues
- Provider bias or discrimination, which can be more problematic in a rural area with fewer providers to choose from

LGBTQ+ Barriers to Healthcare

AARP 2018 Survey



Black & Latino LGBT adults have compound discrimination concerns about the quality of their healthcare as they age.



LGBTQ+ Disparities & Risks



Health Disparities & Risks

- Tobacco
- Alcohol
- Mental Health
- Cancer
- Obesity
- Cardio Vascular Disease
- HIV
- Drugs

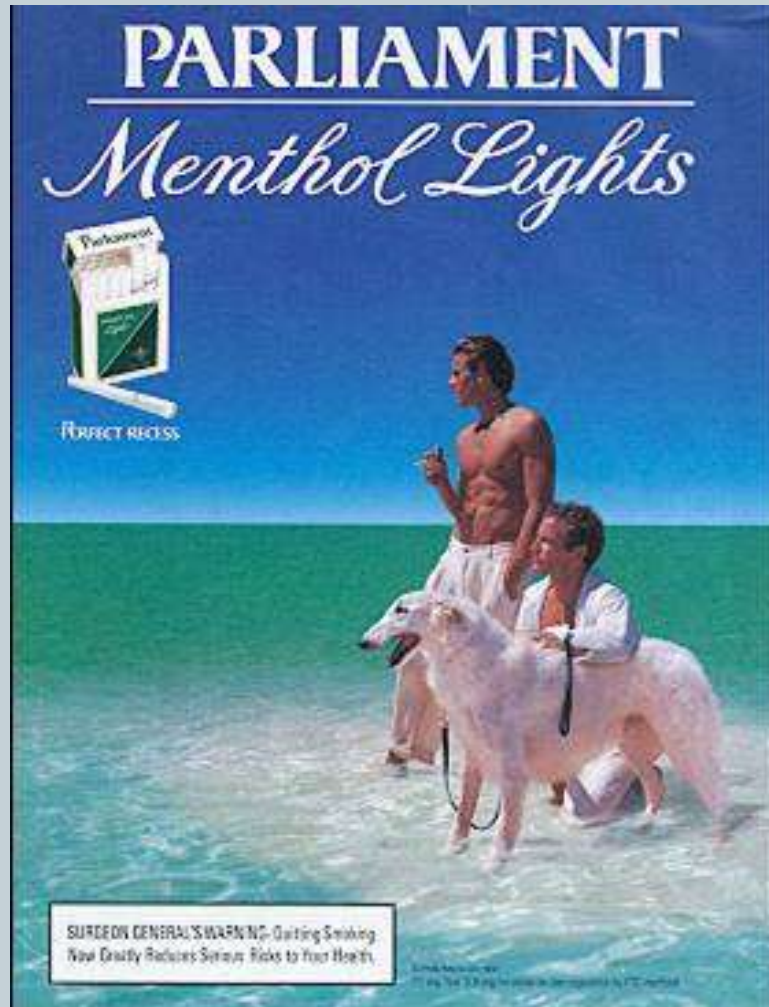
LGBTQ+ Cancer Risks



Dramatically higher cancer risk factors

- Tobacco
- Alcohol
- Obesity
- Nulliparity
- HPV
- HIV
- Lack of access

High Smoking Rates



Adults in U.S

20.6% LGB and
35.5% Transgender

vs.

14.9% non-LGBT
smoke cigarettes

Mental Health – Increased Risk



LGBT individuals have
1.5x HIGHER RISK
of DEPRESSION and
ANXIETY DISORDERS
than heterosexual
individuals.



USC Social Work

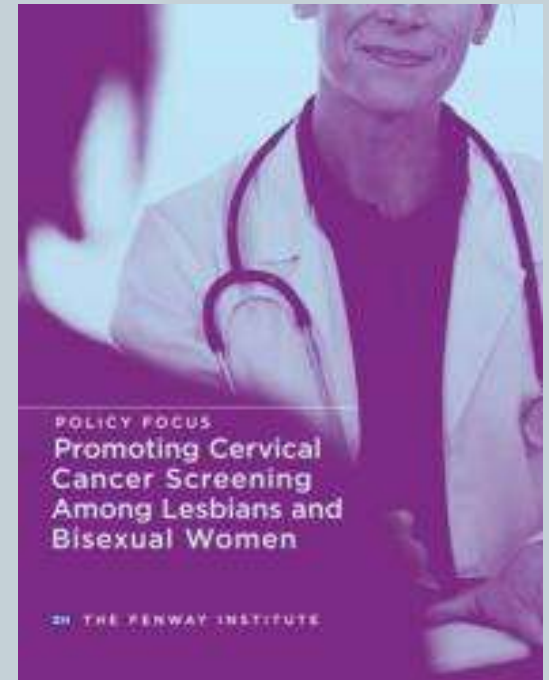
<https://www.mhanational.org/issues/lgbtq-communities-and-mental-health>

Lower Cancer Screening Rates



Dramatically lower screening rates

- Mammograms
- Cervical Pap/Well Person exams
 - LB women 10 x less likely to have Pap tests
- Anal Pap Smears
- Colonoscopies



LGBTQ Older Adults and Dementia

LGBT OLDER ADULTS AND DEMENTIA

Age is the greatest risk factor for Alzheimer's disease.
An estimated **2.7 million** LGBT people are over age 50.

LGBT people many of which including:

- Depression
- Obesity
- Alcohol and tobacco
- Lower rates of preventive screenings
- Cardiovascular disease
- HIV/AIDS

LGBT adults

7.4%



of the lesbian, gay and bisexual older adult population is living with dementia

40%

report that their support networks have become smaller over time

Alzheimer's is the most expensive disease in the nation

51%

report feeling they are not having enough support

Alzheimer's association

www.alz.org for more

LGBT adults living with dementia face unique challenges in accessing support:

40%

report that their support networks have become smaller over time



34%

live alone



Up to **30%** experience lower rates of access to care

LGBT people have greater health disparities, many of which are risk factors for dementia, including:

- Depression
- Obesity
- Alcohol and tobacco
- Lower rates of preventive screenings
- Cardiovascular disease
- HIV/AIDS



UNDERSTANDING ISSUES FACING LGBT OLDER ADULTS



Key Challenges for LGBTQ+ Older Adults

CORNERSTONES OF SUCCESSFUL AGING



ECONOMIC SECURITY



SOCIAL CONNECTIONS



HEALTH AND WELL-BEING

KEY CHALLENGES FOR LGBT OLDER ADULTS



A lifetime of discrimination, especially in housing and employment, and a long-term lack of legal and social recognition combine to create deep economic insecurity for LGBT elders.



A reliance on chosen family, due to family rejection and legalized discrimination, creates social isolation and vulnerability for LGBT elders.



Long-term discrimination, combined with a lack of competent, inclusive health care, leads to specific mental and physical health disparities.

LGBTQ+ Older Adult Health Issues & Risks



- Twice as likely to be single and living alone
- More likely to be estranged from family
- Four times less likely to have children
- More likely to be caregivers for their friends.

<https://www.aarp.org/disrupt-aging/stories/solutions/info-2017/lgbtq-community-and-aging.html>

<https://www.sageusa.org/wp-content/uploads/2018/05/sageusa-the-facts-on-lgbt-aging.pdf>

LGBTQ+ Older Adult Health Issues & Risks



- More likely to have health problems like HIV, depression and substance abuse
- Nearly 1/3 living at or below poverty level
- 9 in 10 expect healthcare providers to discriminate against them
- LGBT people face high levels of discrimination in assisted living and affordable housing facilities.

<https://www.aarp.org/disrupt-aging/stories/solutions/info-2017/lgbtq-community-and-aging.html>

<https://www.sageusa.org/wp-content/uploads/2018/05/sageusa-the-facts-on-lgbt-aging.pdf>

Key Disparities among LGBT Older Adults



- Elevated risk of social isolation compared to heterosexuals
- Income not commensurate with education
- More lifetime discrimination and victimization
- Higher rates of physical limitations, weakened immune system, mental distress
- Lesbian and bisexual women: Higher rates of disability, cardiovascular disease, overweight, poor general health
- Gay and bisexual men: Twice as likely to live alone; higher risk of cancer, HIV
- Transgender older adults: Higher rates of discrimination, victimization, mental distress, poor health, less support
- Bisexual older adults: Higher stigma, less likely to disclose identity, lower income, less support
- Older adults of color, and those with lower income and education: Elevated risk of health disparities
- Limited access to aging, health, support services

Challenges for LGBTQ+ Older Adults



Figure 9: LGBTQ Older Adults Face Discrimination and Harassment in Care Facilities

% of respondents who had experienced ...

Experiences Related to Resident's Real or Perceived Sexual Orientation and/or Gender Identity	Percent of All Instances
Verbal or Physical Harassment From Other Residents	23%
Refused Admission or Re-admission, Attempted or Abrupt Discharge	20%
Verbal or Physical Harassment From Staff	14%
Staff Refused to Accept Medical Power of Attorney from Resident's Spouse or Partner	11%
Restriction of Visitors	11%
Staff Refused to Refer to Transgender Resident by Preferred Name or Pronoun	9%
Staff Refused to Provide Basic Services or Care	6%
Staff Denied Medical Treatment	6%



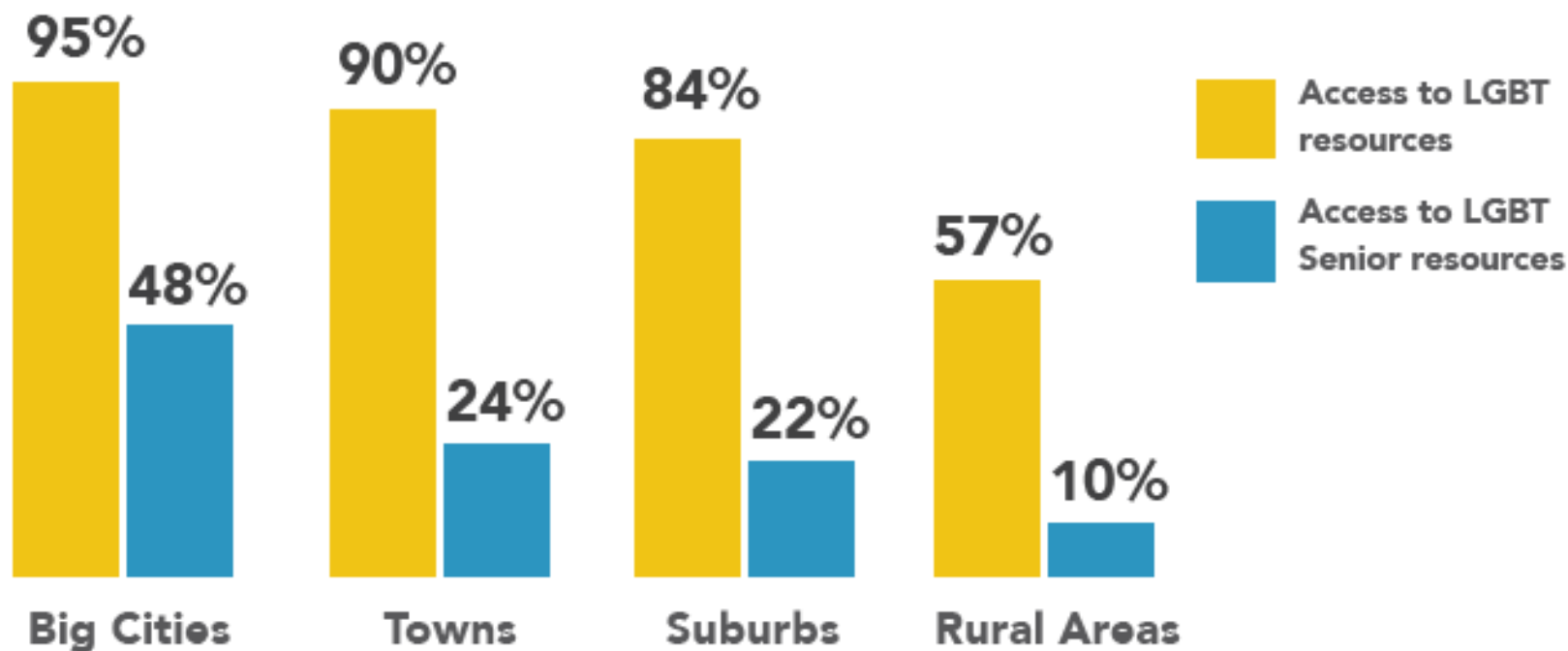
Source: The National Senior Citizens Law Center et al., "LGBT Older Adults in Long-Term Care Facilities: Stories from the Field," accessed May 11, 2017, http://www.lgbtagingcenter.org/resources/pdfs/NSCLC_LGBT_report.pdf

LGBT Older Adult Issues & Challenges

AARP 2018 Survey

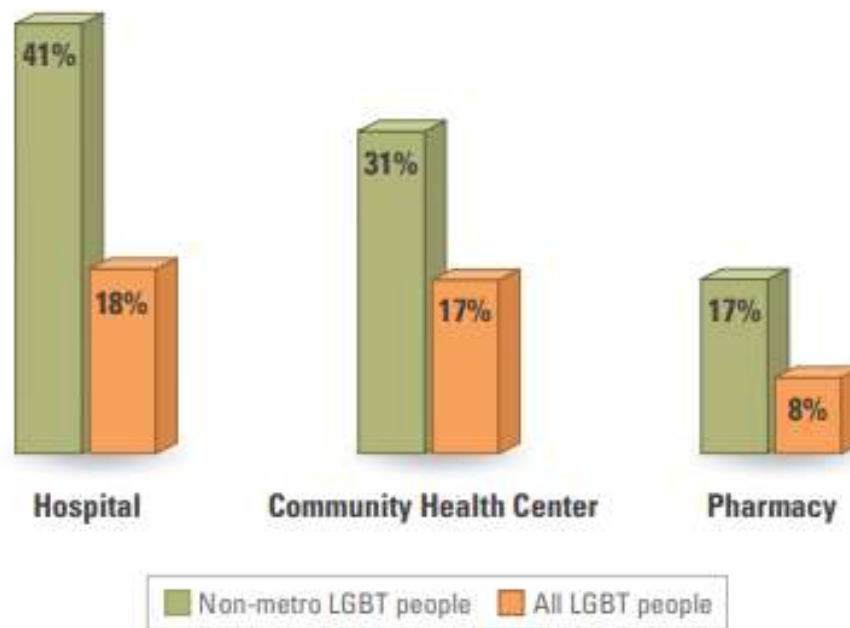


Older LGBT adults live in communities of all sizes, but access to LGBT services varies.



Challenges for Rural LGBTQ+ People

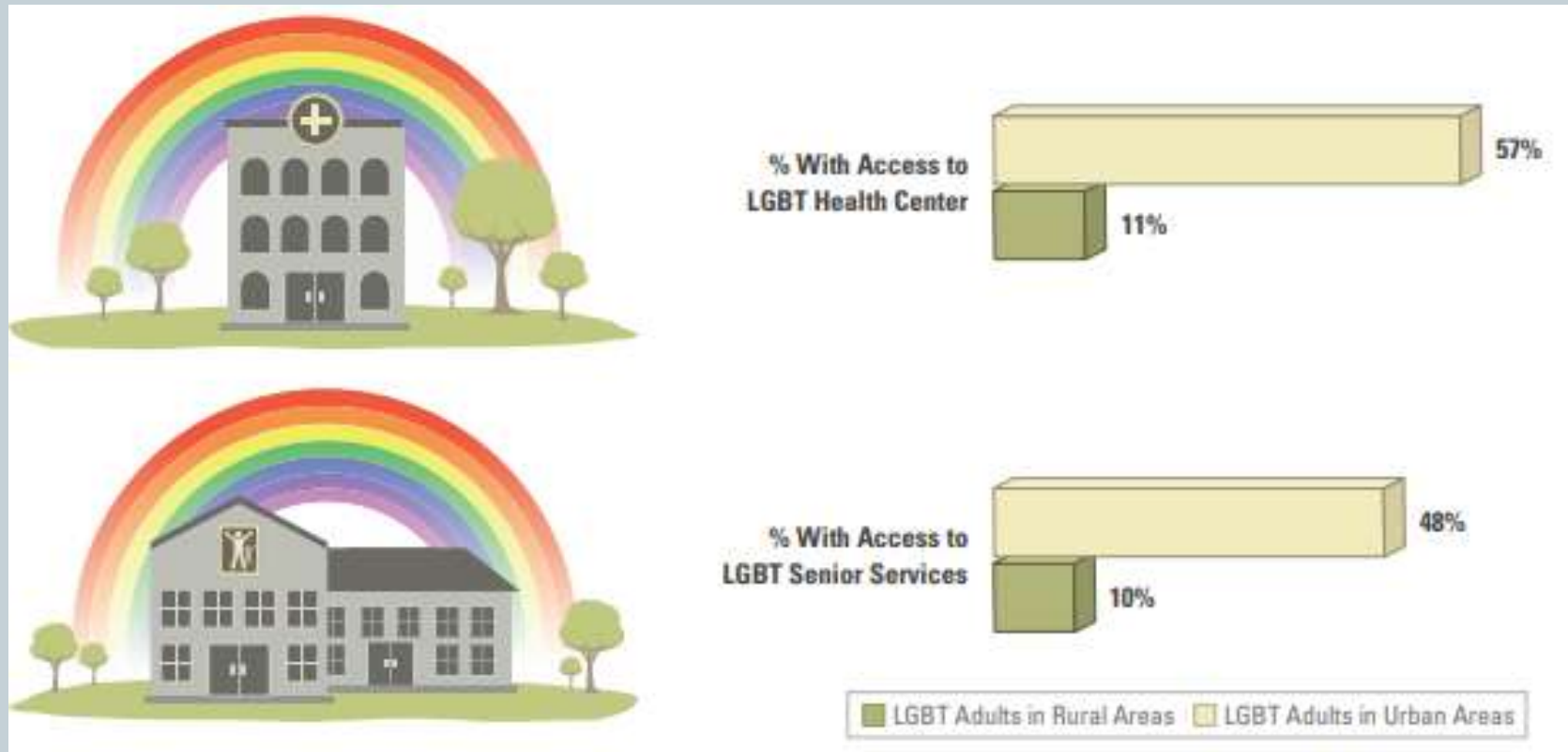
Figure 17: More Difficult for Rural LGBT People to Find Health Care If They Are Discriminated Against
% of LGBT people saying that, if they were turned away by each provider, it would be "very difficult" or "not possible" for them to find those services somewhere else



Source: Center for American Progress, 2018, "Discrimination Prevents LGBTQ People From Accessing Health Care."

LGBTQ Rural Health Issues & Risks

LGBT Adults in Rural Areas Have Less Access to LGBT-Specific Services



Source: Houghton, Angela. March 2018. *Maintaining Dignity: Understanding and Responding to the Challenges Facing Older LGBT Americans*. Washington, DC: AARP Research.

LGBTQ Rural Health Issues & Risks

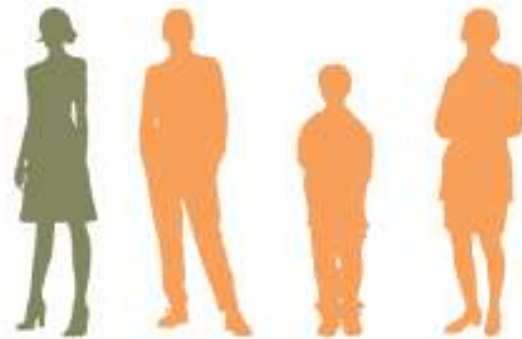


Figure 5: Transgender People In Rural Areas Are Significantly More Likely to be Uninsured

Transgender people are **2x** more likely to be uninsured



Transgender people of color are more than **3x** likely to be uninsured



&

...than their rural neighbors.

Source: MAP original analysis of USTS 2015, 2015 ACS 1-Year Estimates, U.S. Census Bureau, 2015 American Community Survey 1-Year Estimates, Table DCT2701, "Percent Without Health Insurance Coverage—United States—Urban/Rural and Inside/Outside Metropolitan and Micropolitan Area," Accessed October 2019.

Transgender Rural Health Issues & Risks



In the past year...

1 in 3

transgender people in rural areas were mistreated by their healthcare provider in one or more ways, including:

23%

who **had to teach their provider** about transgender people in order to get the care they needed

14%

whose **provider asked unnecessary or invasive** questions about their transgender status that were unrelated to the reason for their visit

11%

whose **provider refused** to give transgender-related treatment

5%

who were **verbally harassed** in a healthcare setting (such as hospital, office, or clinic)

Creating a Welcoming Environment & Overcoming Barriers



<https://innovations.ahrq.gov/profiles/collaborative-health-education-and-access-events-offer-no-cost-screenings-and-navigation>

Individual / Practitioner Level Interventions



- **DON'T ASSUME** anything about a patient
 - Gender and gender identity
 - Sexual orientation
 - Relationship status
 - HIV/AIDS status
- **Change your LANGUAGE**
 - Use gender-neutral language “partner”, “spouse”.
 - Mirror the language people use for themselves, their partners and their body parts

Individual / Practitioner Level Interventions



- **Show your OPENESS**
 - Assure confidentiality to make coming out safe
 - Have LGBTQ+ publications/health literature in waiting room
- **LEARN more**
 - Read more about the LGBTQ+ community
 - Learn about LGBTQ+ families and health risks

Individual / Practitioner Level Interventions



What to do when you meet transgender or non-binary customers?

- Ask for name if different from legal name on file
- If unsure, politely ask for name and pronoun they would like you to use
- Listen and/or ask and use preferred names for their body parts
- Avoid invasive unnecessary questions
- In case of mistake, say I'm sorry, I didn't mean to be disrespectful and move on

Examples of How to Identify your LGBT Patients



- Instead of “Are you married”
 - “Are you in a relationship?”
 - “Are you seeing someone now?”
 - “Do you have a significant other?”
 - “Your partner...?”
- Instead of “ Who is his mother and father?”
 - “Who are your parents?”
- Instead of using the gender/name found on forms
 - “I would like to be respectful, what name and pronoun would you like me to use?”

Individual / Practitioner Level Interventions



It is okay to make mistakes, as long as you are considerate towards the person you are addressing.

- If you do make a mistake, simply apologize, explaining: “I am sorry, I did not mean to disrespect you. How would you like me to refer to you?”
- If a patient responds negatively even after a well-intentioned mistake, a thoughtful apology can go a long way in changing their experience, even beyond your interaction.

Organizational –Level Changes



- Provide visible LGBTQ+ symbols and literature in waiting room
- Customize patient intake forms to include Sexual Orientation and Gender Identity (SOGI)
- Incorporate all LGBTQ+ –defined “family” members into the treatment and recovery process
- Have current list of LGBTQ+ referrals available
- Implement and LGBTQ+ task force or committee

LGBTQ Older Adults and COVID-19 – What Providers Need to Know

The Healthy Aging Project at GMHC

Inclusive Policies:

- LGBTQ older adults should be specifically addressed in education and outreach.
- Make sure that policies are inclusive of chosen family.
- Transgender older adults should be gendered correctly and treated with respect.
- Inclusion is medically necessary.

Addressing Specific Health Needs:

- HIV
- Smoking
- Help transgender older adults maintain access to hormone therapy and other transition related healthcare

Resilience and Mental Health:

- Recognize and support resilience.
- Prevent social isolation.
- Be responsive to LGBTQ older adults' trauma.

Building LGBTQ+ Inclusive Rural Practices



2016 *Journal of the American Board of Family Medicine* article offers guidance to primary care providers to improve LGBTQ care delivery.

Stakeholders' Recommendations to Improve Patient-centered "LGBTQ" Primary Care in Rural and Multicultural Practices

Miria Kano, PhD, Alma Rosa Silva-Bañuelos, BA, Robert Sturm, MA, and Catbleen E. Willging, PhD

***Purpose:* Individuals among gender/sexual minorities share experiences of stigma and discrimination, yet have distinctive health care needs influenced by ethnic/racial minority and rural realities.**

Building LGBTQ+ Inclusive Rural Practices



“ *At 14, I wouldn't tell the doctor my orientation because I'd know he'd tell my parents. I think I'd feel the doctor would have said, 'well I want you to know this is confidential and I ask this of everyone.'* That's a very different conversation.

5 simple tips to improve LGBTQ patient-provider interactions

- Change office environment to include positive LGBTQ artwork, pamphlets, etc.
- Use culturally appropriate and specific terminology and pronouns that stretch across the sexual/gender spectrum on intake forms and in exchanges
- Encourage respectful, direct, and open-ended questions in patient-provider interactions
- Provide training on LGBTQ issues for all staff
- Reflect on assumptions, biases and preconceived notions. Perspectives can be changed and unlearned.

Sources:

Flemmer, N., Dekker, L., Doutrich, D. (2014). Empathetic Partnership: An Interdisciplinary Framework for Primary Care Practice. *The Journal for Nurse Practitioners*, 10(8): 545-551.

Kano, M., Silva-Barfuegos, A., Sturum, R., Willging, C. (2016). Stakeholders' Recommendations to Improve Patient-centered 'LGBTQ' Primary Care in Rural and Multicultural Practices. *Journal of the American Board of Family Medicine*, 29(1): 156-160.

LGBTQ+ Adult Resources

CONTENTS

Introduction	4
Start a Conversation	8
Make a Plan	11
Form a Team	13
Find Support	16
Care for Yourself	19
Glossary	23
Resources	27
Goals & Needs Checklist	31
Charts & Checklists	32
Sample Caregiving Plans	42

PREPARE TO CARE

A PLANNING GUIDE FOR CAREGIVERS
IN THE LGBT COMMUNITY

sage
Advocacy &
Services for
LGBT Elders

AARP
Real Possibilities

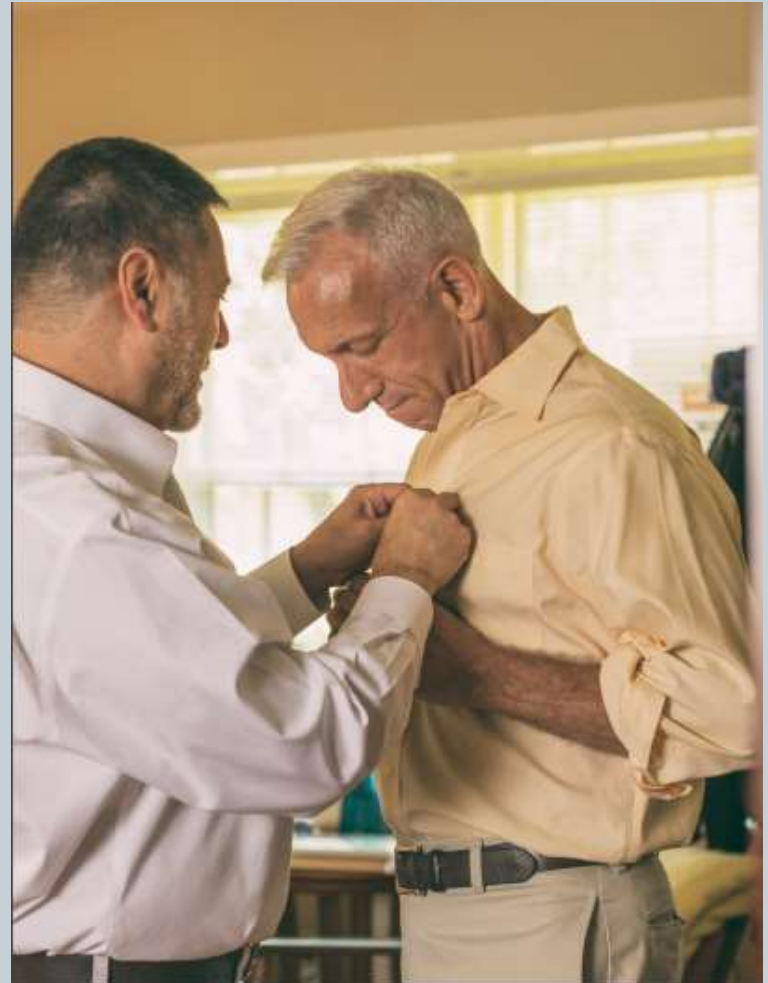
Individual / Practitioner LGBTQ+ Older Adult Health Resources



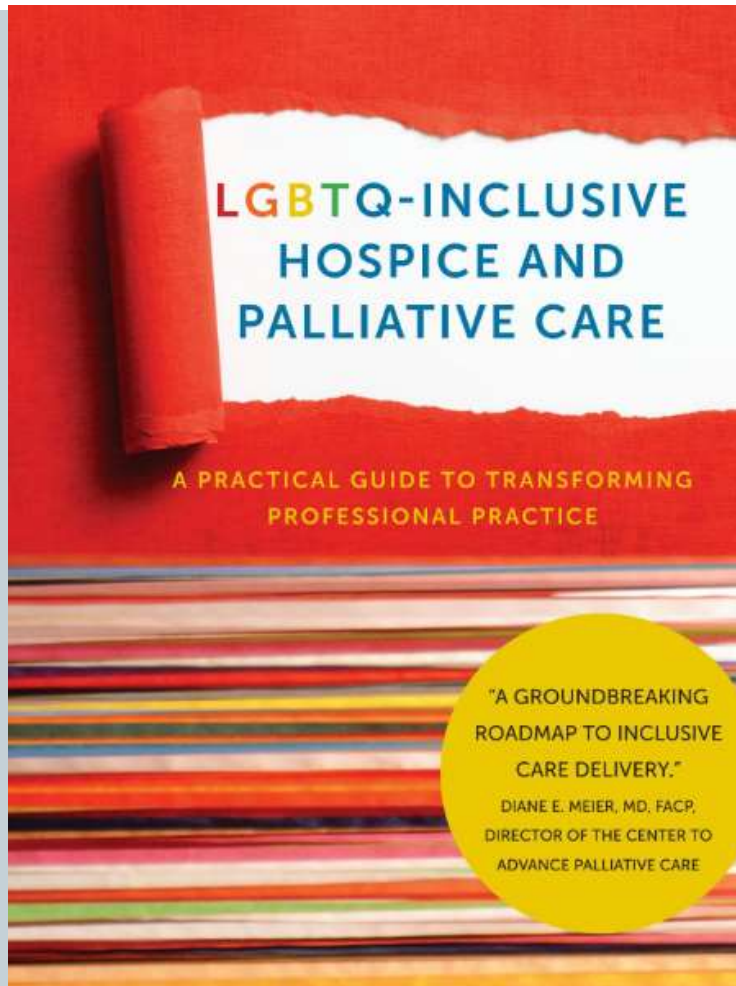
PROMOTING THE BEHAVIORAL HEALTH OF LGBT OLDER ADULTS

MAY 2019

 NATIONAL LGBT HEALTH
EDUCATION CENTER
A PROGRAM OF THE FENWAY INSTITUTE



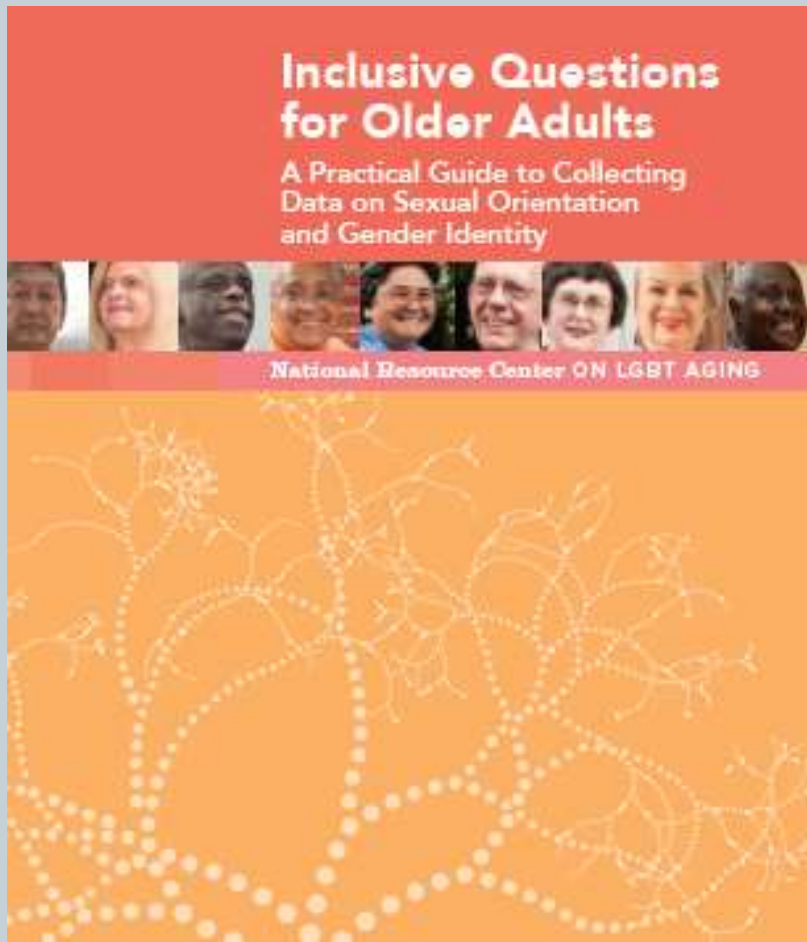
Individual / Practitioner LGBTQ+ Older Adult Health Resources



- Only handbook for hospice & palliative care professionals looking to enhance their care delivery or their programs with LGBTQ-inclusive care.
- Provides clear, actionable strategies for hospice and palliative physicians, nurses, social workers, counselors, and chaplains.

<https://www.amazon.com/LGBTQ-Inclusive-Hospice-Palliative-Care-Transforming/dp/1939594146>

Individual / Practitioner LGBTQ+ Older Adult Health Resources



- This guide helps to answers the question: "How can our mainstream aging organization ask questions about sexual orientation and gender identity in safe and respectful ways to better inform our services and programs?"
- Written with suggestions, tips and practical ideas this guide will assist in your organization's path to asking fully inclusive questions to all of your clients.

Other Suggested Changes



- Post and enforce LGBTQ+ inclusive nondiscrimination policies.
- Offer staff continuing education on LGBTQ+ health
- Hire LGBTQ+ staff
- Collect data on LGBT patients and conduct research on LGBT health
- Pursue Human Right's Campaign (HRC's) Healthcare Equality Index (HEI) rating
 - VA Portland Medical Center, Oregon Health & Science University Hospital, Kaiser Permanente Hospitals, Legacy Health – all 100

• DATA COLLECTION

Two-year actions:

1. Expand the use of baseline data to identify underutilization of services by race, ethnicity, language, disability and geography, and develop data on understudied populations, such as LGBT older adults and people with disabilities.

Long-term actions:

1. Conduct periodic needs assessments and utilize predictive modeling to anticipate future development of materials in other languages and alternative formats and monitor consistency of these materials across programs.
2. Recruit providers of all types who have capacity and training to serve underrepresented groups, including younger adults with disabilities, LGBT consumers and rural and frontier communities.

Aging and People with Disabilities Strategic Plan



Spring 2019

Oregon Resources



- **SAGE Metro Portland** friendlyhouseinc.org/programs/safety-net-services/sage/
- **Oregon Home Care Commission** *[Diversity Awareness: Challenges, Facing Lesbian, Gay, Bisexual and Transgender Adults](#)* - Understanding and awareness of LGBT issues and healthcare challenges; terms and definitions; how to create a welcoming and inclusive working relationship
- **Biennial Meaningful Care Conference** (Portland) LGBTQ+ Health meaningfulcare.org
- **Oregon Aids Education and Training Center (AETC)** oraetc.org
- **OHSU – Transgender Health Program** ohsu.edu/transgender-health
- **Oregon LGBTQ Veterans Coordinator**, [Nathaniel Boehme](#) at (503) 373-2327 (office) or (971) 720-9016 (cell) or LGBTQVets@odva.state.or.us
- **Alzheimer's Assoc. Oregon & Washington LGBTQ+ Virtual Support Group** <https://bit.ly/AlzORLGBTCare>

National Resources



- **Health Profession Training:** National LGBT Health Education Center “Caring for LGBT Older Adults” lgbthealtheducation.org/courses/caring-for-lgbt-older-adults/
- **LGBT Older Adult Resources:** www.lgbtagingcenter.org & www.sageusa.org
- **National Resource Center on LGBT Aging** <https://www.lgbtagingcenter.org/>
- **LGBT Older Adult Hotline number: 1-888-234-SAGE**
- **AARP Research:** “Maintaining Dignity: Understanding and Responding to the Challenges Facing Older LGBT Americans” aarp.org/dignitysurvey
- **Caregiving:** Prepare to Care: A Planning Guide for Caregivers in the LGBT Community aarp.org/preparetocare

Thank You!



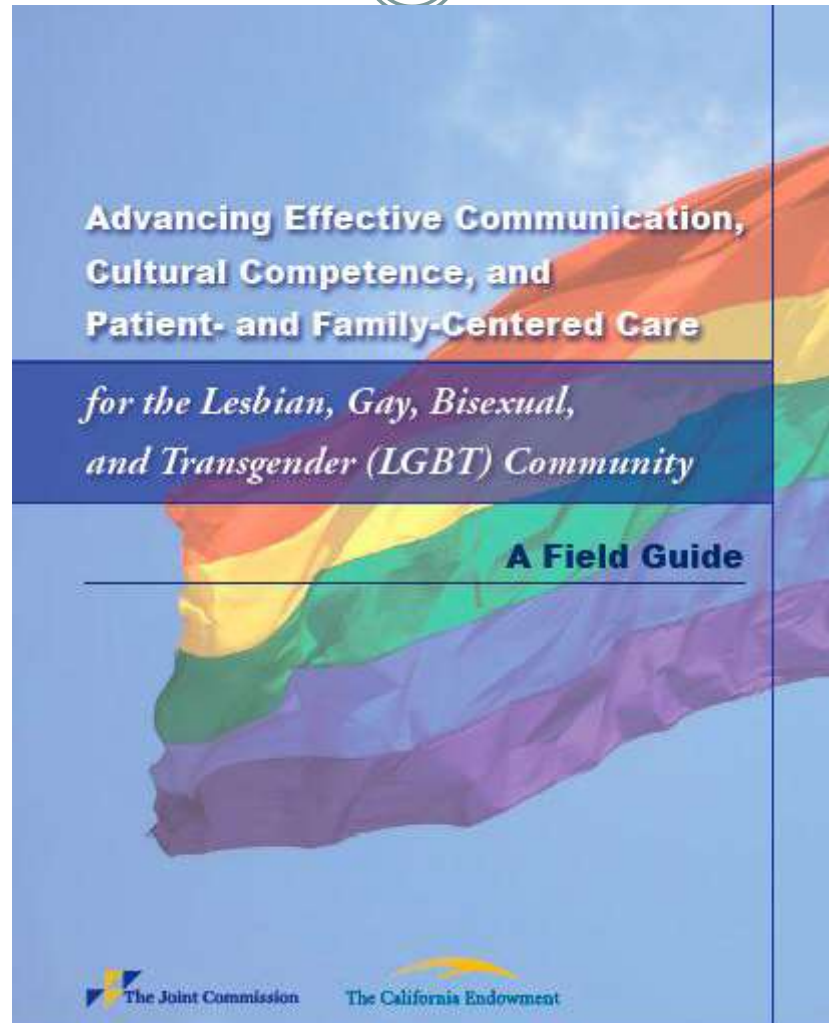
Q & A

Contact information:

Liz James

LizJamesAdvocacy@gmail.com

LGBTQ+ Health/Healthcare Education Information and Resources



<https://www.lgbtagingcenter.org/resources/resource.cfm?r=420>

LGBTQ+ Health/Healthcare Education Resources



OHCC LGBT Training Course

Course	Description	Length	Stipend Available
Diversity Awareness – Challenges Facing Lesbian, Gay, Bisexual, Transgender Adults (LGBT) *AFC CEUs	Learn terminology & definitions, gain an understanding of the lives of LGBT adults, and learn ways to be welcoming and inclusive.	3 hrs	HCW PSW ICP

<https://www.oregon.gov/DHS/SENIORS-DISABILITIES/HCC/PSW-HCW/Pages/Course-Descriptions.aspx>

LGBTQ+ Health/Healthcare Education Resources



Next
Southern Oregon LGBTQ+ Health & Wellness
Summit Conference
Spring 2021 (*COVID may delay*)



2020 Southern Oregon

LGBTQ+

Health and Wellness
Lecture Series

Using Gender Inclusive
Language

<https://solgbtqhealthsummit.org/>

LGBTQ+ Health/Healthcare Education Resources



Next
Meaningful Care Conference
March 2022 *(COVID may delay)*

A day-long training event for healthcare and social service professionals, the Meaningful Care Conference aims to promote LGBTQ+ cultural competency in health care and social services, share current LGBTQ+ best practices, and to develop and diversify networks of LGBTQ+ culturally competent health care and social service providers.

PORTLAND AIRPORT SHERATON

8235 NE Airport Way, Portland OR 97220

<https://meaningfulcare.org/>

LGBTQ+ Health/Healthcare Education Resources

GLMA: Health Professionals Advancing LGBTQ Equality (previously known as the Gay & Lesbian Medical Association) is the world's largest and oldest association of lesbian, gay, bisexual, transgender and queer (LGBTQ) healthcare professionals.

8th Annual GLMA Nursing Summit

THE POWER OF LGBTQ+ NURSES AND MIDWIVES

Virtually: September 23, 2020 12pm-4pm EST

Register at www.GLMA.org/Conference



LGBTQ+ Health/Healthcare Education Resources

- Certified to offer prescribed credits from the American Academy of Family Physicians.
- Prescribed credit is accepted by the AMA & the American Nurses Credentialing Center


THE FENWAY INSTITUTE

SIGN UP FOR EMAIL UPDATES


THE NATIONAL LGBT HEALTH EDUCATION CENTER



[Home](#)
[About Us](#)
[Education](#)
[Technical Assistance](#)
[News](#)
[Calendar](#)
[Publications & Resources](#)
[Contact Us](#)

The National LGBT Health Education Center provides consultation to health care organizations on how to best provide care for lesbian, gay, bisexual, and transgender patients.

The Education Center is a part of The Fenway Health, a Federally Qualified Health Center (FQHC) division of Fenway Health, a Federally Qualified Health Center (FQHC) focused on the health of the LGBT community.

- Educational Programming
- Upcoming Webinars
- On-Demand Webinars
- Learning Modules
- Special Programs
- Grand Rounds
- About HRC HEI Credit
- About CME/CEU Credit



Check out our updated Learning Modules on LGBT Health, Transgender Health, LGBT Youth, and LGBT Older Adults

[More information](#)



The Fenway Guide to Lesbian, Gay, Bisexual, and Transgender Health 2nd Edition is now available!

[More information](#)

<http://www.lgbthealtheducation.org/>

LGBTQ+ Health/Healthcare Education Resources



Transgender Health Program

[OHSU Home](#)[Find a Doctor](#)[MyChart](#)[Donate](#)[Jobs](#)[Directions](#)[About Transgender Health Program](#)[Services](#)[Our Team](#)[For Providers](#)[Volunteer Opportunities](#)[Frequently Asked Questions](#)[Resources](#)[Contact Us](#)

Affirming health care for trans communities

The OHSU Transgender Health Program provides safe, comprehensive, affirming health care for the transgender and gender nonconforming communities. [Learn more](#)



<https://www.ohsu.edu/transgender-health>

LGBTQ+ Health/Healthcare Education Resources

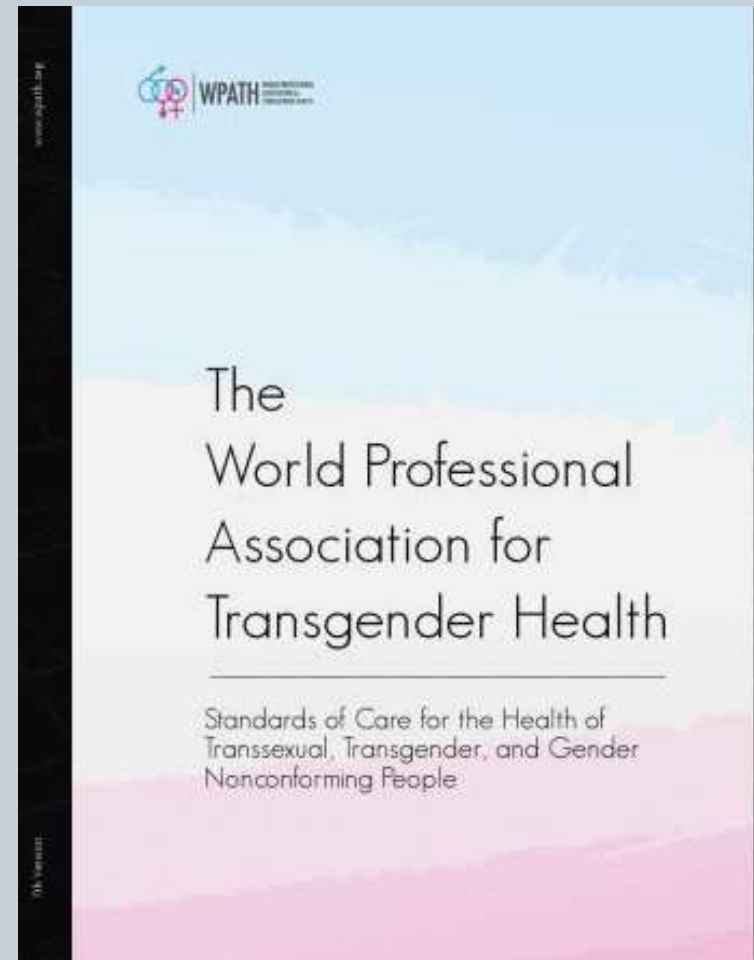
WPATH

STANDARDS OF CARE VERSION 7

FREE PDF version

Available in 18 Languages

Arabic	Chinese	Croatian
English	Finnish	French
German	Hindi	Italian
Japanese	Korean	Norwegian
Persian	Portuguese	Russian
Serbian	Spanish	Vietnamese



<https://www.wpath.org/publications/soc>

LGBTQ+ Health/Healthcare Education Resources



Welcome to the Oregon AETC!



The Oregon AIDS Education and Training Center (AETC) is a program of the **Mountain West AETC** funded in part by the Oregon Health Authority (OHA) and the Health Resources and Services Administration (HRSA) to offer provider education to improve patient health outcomes for people at risk or living with HIV while preventing new infections in our community.

Currently serving 12 counties in Oregon and SW Washington, the OREGON AETC continues to expand our efforts statewide.

See **Upcoming Events!**

What We Do...

COMING SOON

2019 HIV CONTINUUM OF CARE CONFERENCE

September 24 - 25, 2019

Upcoming Events

Contact

► LOCATION

Portland VA Research Foundation
3710 SW Veterans Hospital Road
Portland, OR 97239

📞 CONTACT

Dayna K. Morrison, MPH, Program Manager
dayna@oraetc.org
971.200.5266

LGBTQ+ Adult Resources



U.S. Department
of Veterans Affairs

Patient Care Services

Veterans with Lesbian, Gay, Bisexual and Transgender
(LGBT) and Related Identities



Available Health Care Services

- There is an LGBT VCC at every facility to help you get the care you need. [Contact the LGBT VCC](#) at your nearest facility.
- VA health care includes, among other services:
 - Hormone treatment
 - Substance use/alcohol treatment
 - Tobacco use treatment
 - Treatment and prevention of sexually transmitted infections/PrEP
 - Intimate partner violence reduction and treatment of after effects
 - Heart health
 - Cancer screening, prevention and treatment

<https://www.patientcare.va.gov/LGBT/>

LGBTQ+ Adult Resources



U.S. Department
of Veterans Affairs

Patient Care Services

Veterans with Lesbian, Gay, Bisexual and Transgender
(LGBT) and Related Identities



Oregon Health Centers

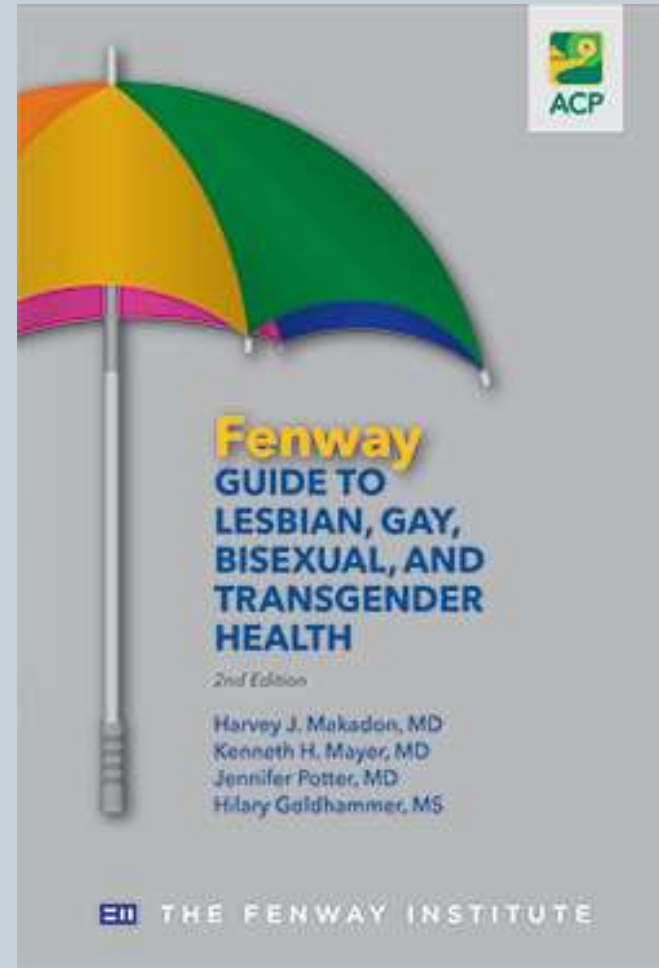
- [Portland VAMC](#)
- [Roseburg VA Health Care System](#)
- [Southern Oregon Rehabilitation Center & Clinics](#)

<https://www.patientcare.va.gov/LGBT/VAFacilities.asp>

LGBTQ+ Health/Healthcare Education Resources

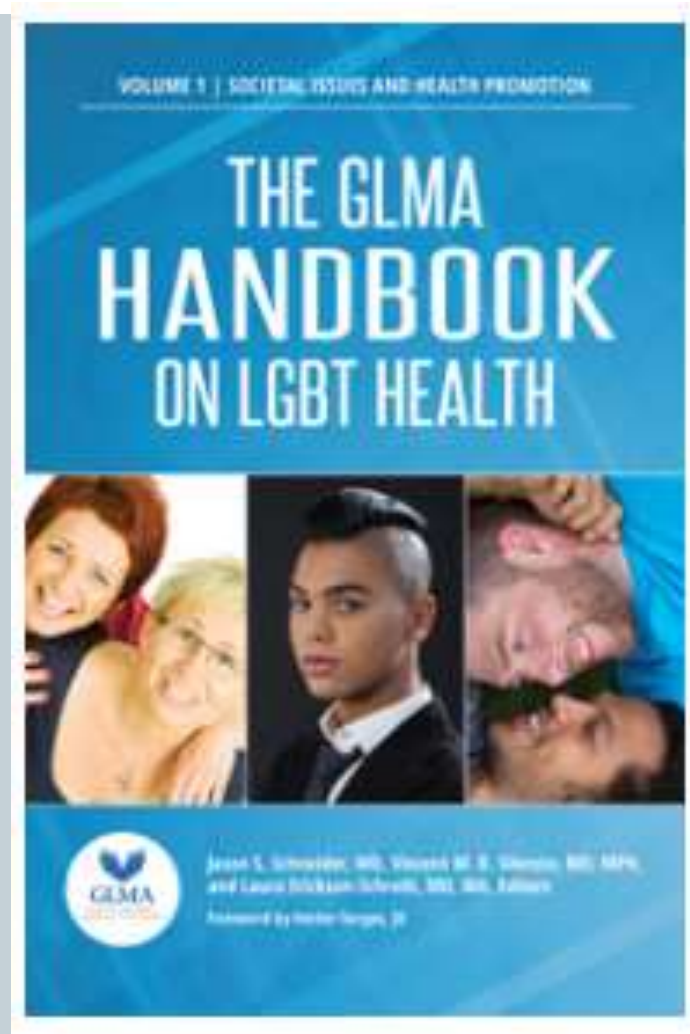
Publisher: American College of Physicians; 2 edition (May 8, 2015)

- Principles for taking an LGBT-inclusive health history
- Caring for LGBTQ youth, families, and older adults
- Behavioral Health Care: coming out, intimate partner violence, drug, alcohol, and tobacco use
- Understanding health care needs of transgender people
- Development of gender identity in children and adolescents
- Sexual health and HIV prevention
- Policy and legal issues



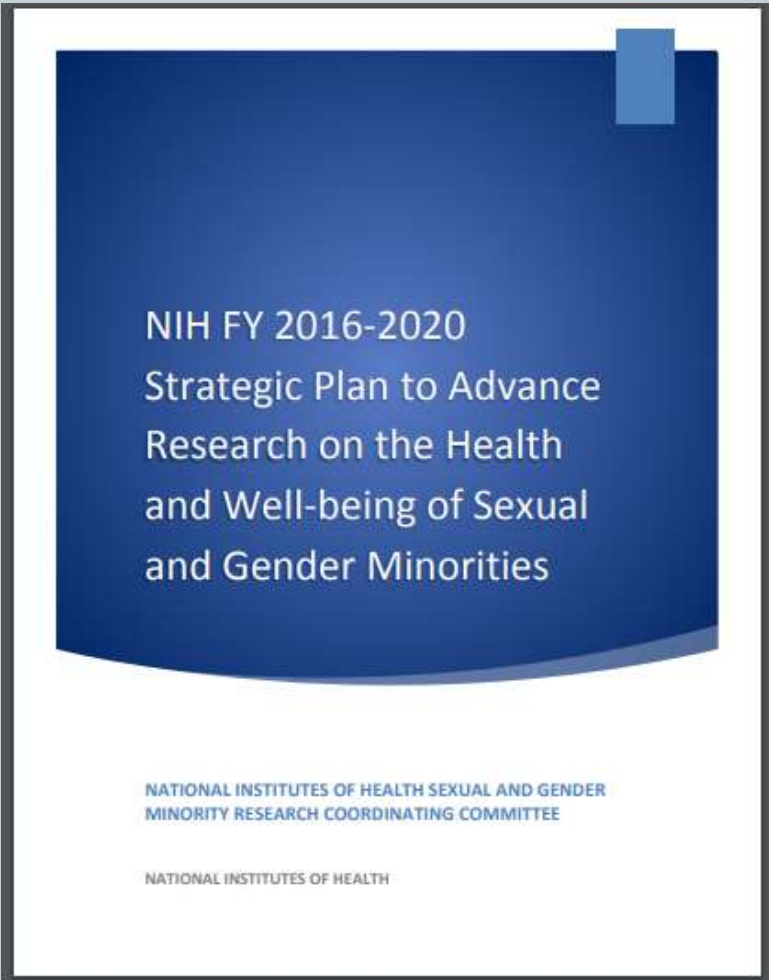
LGBTQ+ Health/Healthcare Education Resources

Handbook on LGBT physical and mental health created by the world's oldest and largest association of lesbian, gay, bisexual, and transgender health care professionals.



<https://www.abc-clio.com/ABC-CLIOCorporate/product.aspx?pc=A3432C>

LGBTQ+ Health/Healthcare Education Resources



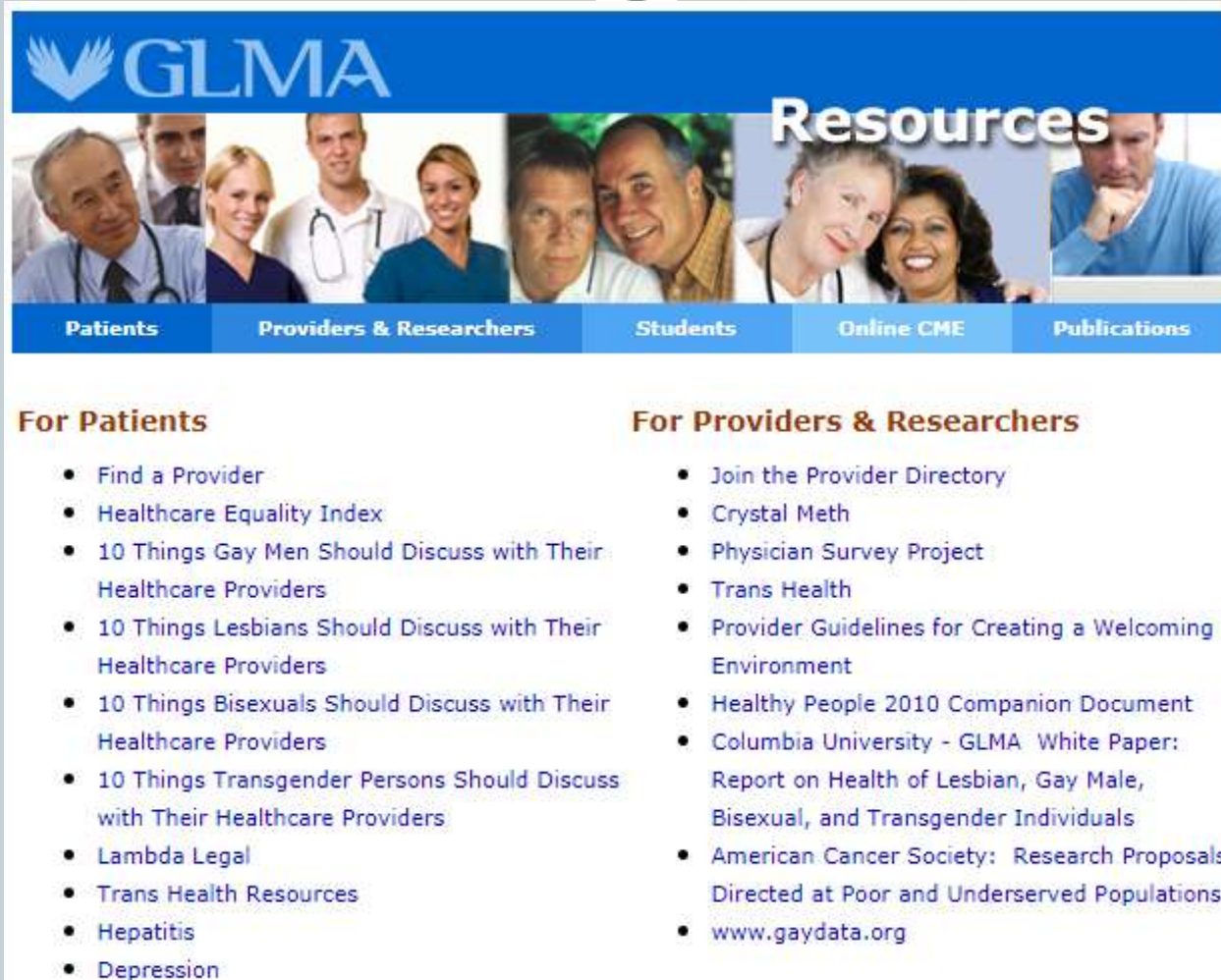
NIH FY 2016-2020
Strategic Plan to Advance
Research on the Health
and Well-being of Sexual
and Gender Minorities

NATIONAL INSTITUTES OF HEALTH SEXUAL AND GENDER
MINORITY RESEARCH COORDINATING COMMITTEE

NATIONAL INSTITUTES OF HEALTH

- 14% of lesbians and 17.6% of bisexual women have reported ever having had any cancer, compared with 11.9% for heterosexual women.
- Bisexual women have the highest rate of breast cancer at 8.4%.
- Men who have sex with men have a higher prevalence of anal cancer than men in the general population.
- HIV/AIDS continues to exact a severe toll on men who have sex with men (MSM), with black and Latino men being disproportionately affected.

LGBTQ+ Health/Healthcare Education Resources



GLMA Resources

Patients **Providers & Researchers** **Students** **Online CME** **Publications**

For Patients

- Find a Provider
- Healthcare Equality Index
- 10 Things Gay Men Should Discuss with Their Healthcare Providers
- 10 Things Lesbians Should Discuss with Their Healthcare Providers
- 10 Things Bisexuals Should Discuss with Their Healthcare Providers
- 10 Things Transgender Persons Should Discuss with Their Healthcare Providers
- Lambda Legal
- Trans Health Resources
- Hepatitis
- Depression

For Providers & Researchers

- Join the Provider Directory
- Crystal Meth
- Physician Survey Project
- Trans Health
- Provider Guidelines for Creating a Welcoming Environment
- Healthy People 2010 Companion Document
- Columbia University - GLMA White Paper: Report on Health of Lesbian, Gay Male, Bisexual, and Transgender Individuals
- American Cancer Society: Research Proposals Directed at Poor and Underserved Populations
- www.gaydata.org

<http://glma.org/index.cfm?fuseaction=Page.viewPage&pageId=534>

LGBTQ+ Older Adult Health Resources



- This report outlines these disparities in health, wealth, isolation and trust that make reaching LGBT older adults with Alzheimer's disease particularly challenging, while also highlighting their tremendous resilience and ability to thrive when provided with appropriate resources and supports.



LGBTQ+ Virtual Caregiver Support Group

alzheimer's association®

Presented by:
Alzheimer's Association
Oregon & Southwest Washington

First Wednesday of the month
6 p.m. - 7 p.m.

Register to receive Zoom call details at
800-272-3900

<https://bit.ly/AlzORLGBTCare>



LGBTQ+ Virtual Caregiver Support Group

Presented by:
Alzheimer's Association
Oregon & Southwest Washington

First Wednesday of the month
6 p.m. - 7 p.m.

Register to receive Zoom call details at
800-272-3900
<https://bit.ly/AlzORLGBTCare>

Visit alz.org/orswwa to learn more about caregiver programs and resources.

Build a support system with people who understand.

Alzheimer's Association® support groups, conducted by trained facilitators, are a safe place for people living with dementia and their care partners to:

- Develop a support system.
- Exchange practical information on challenges and possible solutions.
- Talk through issues and ways of coping.
- Share feelings, needs and concerns.
- Learn about community resources.

800.272.3900 | alz.org

<https://bit.ly/AlzORLGBTCare>

Oregon & Washington LGBTQ Memory Loss Support & Research



Experiencing Memory Loss?

Our program may help

RECEIVE UP TO

\$125*

Aging with Pride: IDEA

IDEA = Innovations in Dementia Empowerment and Action

Sign up today!



Safe Communication

Safe, easy, video chatting



Completely Free

Available in Washington, Oregon and California



Receive up to \$125

* for completing five phone interviews

Aging with Pride: IDEA

IDEA = Innovations in Dementia Empowerment and Action

CALL US NOW

1-888-655-6646

- Coaches provide nine virtual sessions designed to improve health and well-being.
- Either the person with memory loss or care partner must be LGBTQ.
- You do not need a care partner to participate.
- Call us at 1-888-655-6646 or email ageIDEA@uw.edu. Visit ageidea.org for more information



@agingwithpride



@age_pride

Community partners include GenPRIDE, Openhouse, Family Caregiver Alliance, and LA LGBT Center.

Are you or someone you know experiencing memory loss or difficulty remembering?

- » Check out a free six-week program to reduce stress and increase physical activity.
- » Coaches provide nine virtual sessions using safe and easy video chatting.
- » Participants will be compensated up to \$125 for their time.
- » Either the person with memory loss or care partner must be LGBTQ.

<https://ageidea.org>

LGBT Older Adult Resources

CONTENTS

Introduction	4
Start a Conversation	8
Make a Plan	11
Form a Team	13
Find Support	16
Care for Yourself	19
Glossary	23
Resources	27
Goals & Needs Checklist	31
Charts & Checklists	32
Sample Caregiving Plans	42

PREPARE TO CARE

A PLANNING GUIDE FOR CAREGIVERS
IN THE LGBT COMMUNITY

sage

Advocacy &
Services for
LGBT Elders

AARP
Real Possibilities

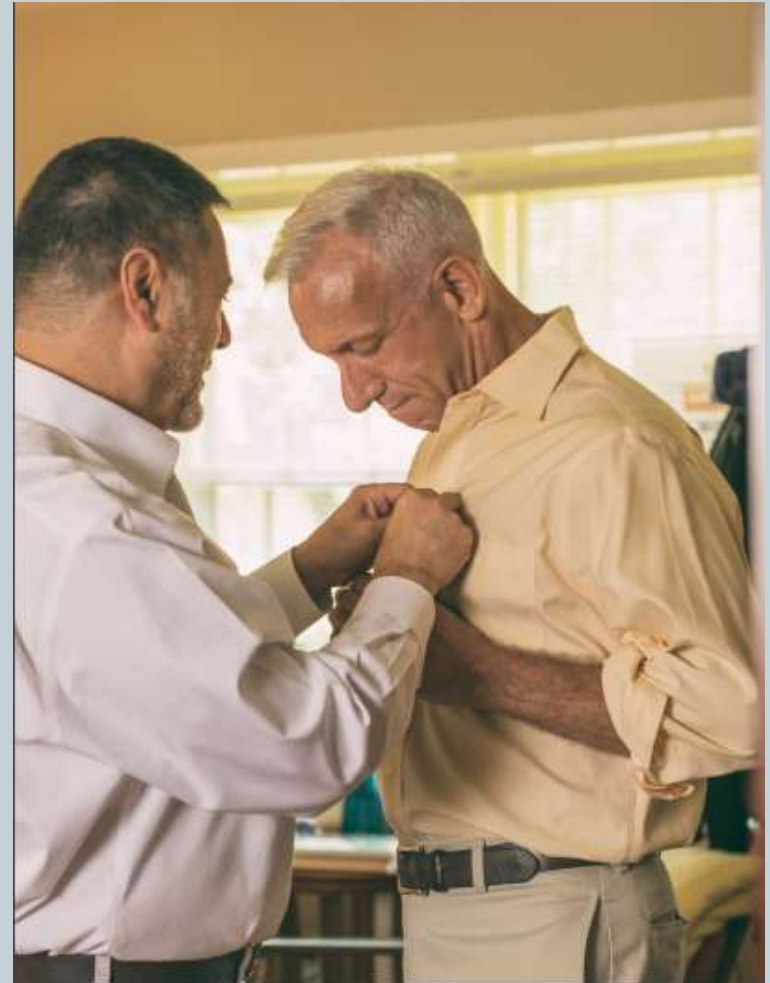
Individual / Practitioner LGBTQ+ Older Adult Health Resources



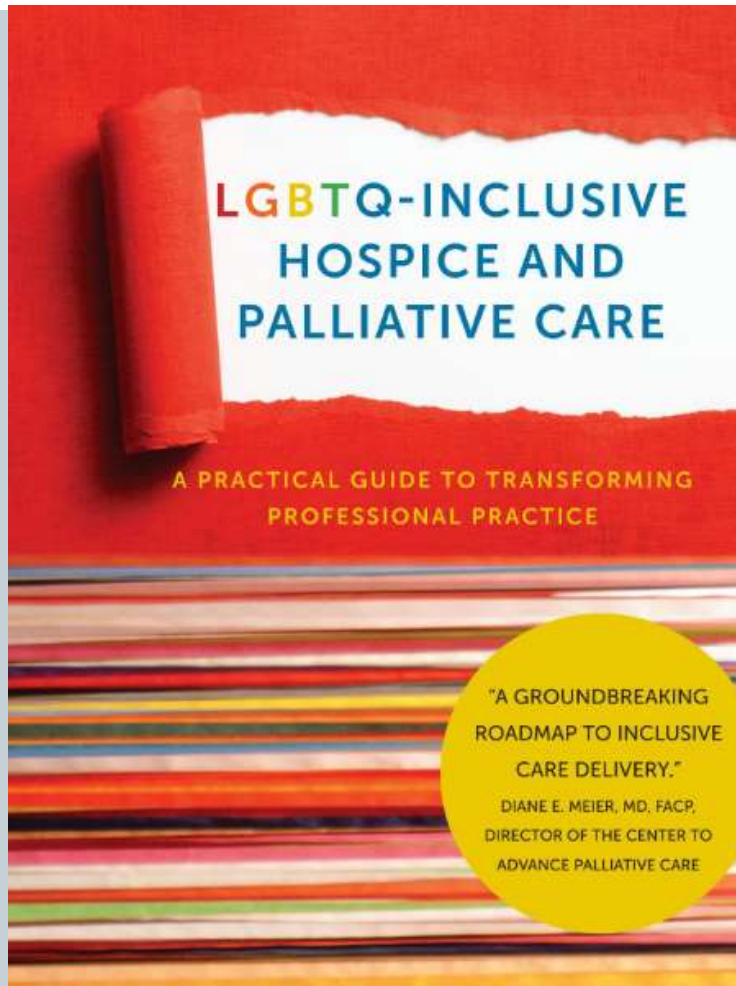
PROMOTING THE BEHAVIORAL HEALTH OF LGBT OLDER ADULTS

MAY 2019

 NATIONAL LGBT HEALTH
EDUCATION CENTER
A PROGRAM OF THE FENWAY INSTITUTE



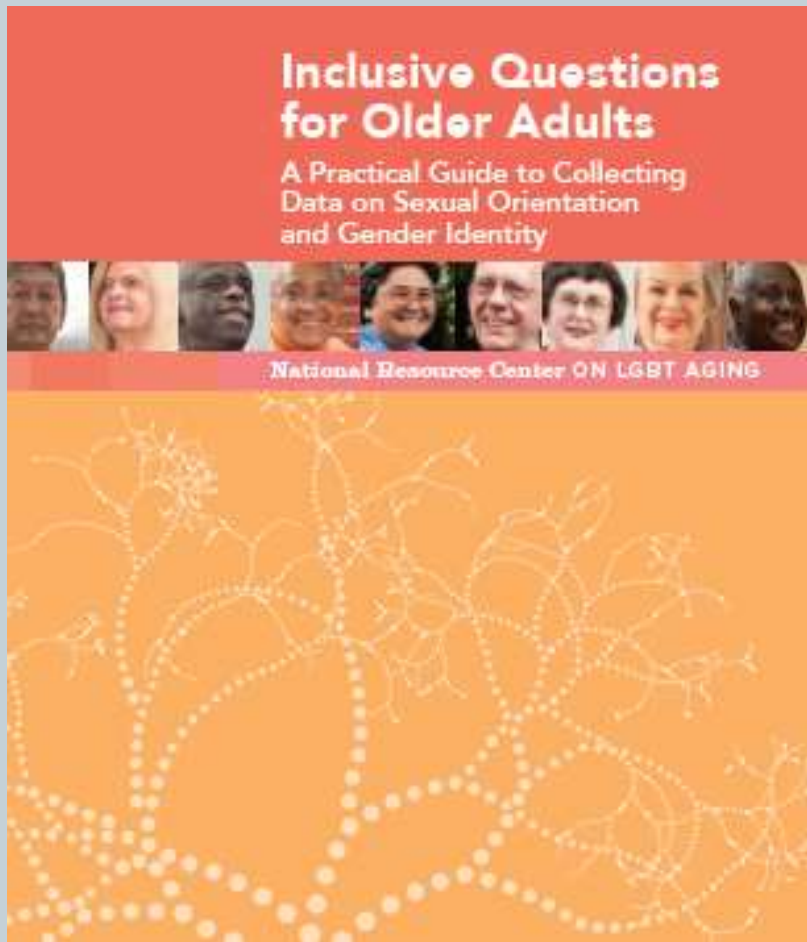
Individual / Practitioner LGBTQ+ Older Adult Health Resources



- Only handbook for hospice & palliative care professionals looking to enhance their care delivery or their programs with LGBTQ-inclusive care.
- Provides clear, actionable strategies for hospice and palliative physicians, nurses, social workers, counselors, and chaplains.

<https://www.amazon.com/LGBTQ-Inclusive-Hospice-Palliative-Care-Transforming/dp/1939594146>

Individual / Practitioner LGBTQ+ Older Adult Health Resources



- This guide helps to answers the question: “How can our mainstream aging organization ask questions about sexual orientation and gender identity in safe and respectful ways to better inform our services and programs?”
- Written with suggestions, tips and practical ideas this guide will assist in your organization's path to asking fully inclusive questions to all of your clients.

LGBTQ+ Older Adult Resources

sage
Advocacy &
Services for
LGBT Elders
We refuse to be invisible

National
Resource
Center
ON LGBT AGING

Common Terms & Definitions

Acquired Immune Deficiency Syndrome (AIDS): The last stage of the infection from Human Immunodeficiency Virus (HIV) that attacks a person's white blood cells. This means they can no longer fight off sickness and disease.

Ally: A person who works for social change for a group that faces injustice or disadvantage. The ally is not a member of that oppressed group but supports and fights for equality on behalf of the group, e.g. heterosexuals who support LGBT rights.

Bisexual, Bi*: An individual who is physically, romantically, and/or emotionally attracted to both men and women. "Bisexual" does not suggest having equal sexual experience with both men and women. In fact, some people who identify as "bisexual" have not had any sexual experience at all.

Cisgender: Individuals whose gender identity and/or gender expression do align with their biological or assigned sex. If someone was assigned the sex female at birth and lives comfortably as a woman, she is likely cisgender.

Closeted, In the Closet or Stealth*: Describes a person who does not share with others, or only shares with a few "safe" people, that they are lesbian, gay, bisexual and/or transgender.

Coming Out*: A lifelong process of self-acceptance of one's sexual or gender identity that may include a sharing of that identity with others. How much people are "out" may differ by setting, people they are with, and life stage. The coming out process is unique for each individual, and is the choice of each individual. LGBT older adults often hide their sexual orientation or gender identity from their health care and social service providers (do not "come out") for fear of being treated badly.

Discrimination*: Unfair and unequal treatment in favor of or against an individual or group based on group identity; e.g. African American, female, Arabic, youth, or LGBT. Discrimination is the actual behavior towards the individual(s).

Dyke: Slang for a lesbian. It originated as a negative label for a masculine or butch woman, and this usage still exists. It has been reclaimed by some as a positive word.

Faggot/Fag: An offensive, negative slang sometimes used to describe gay men.

- This document provides a list of common terms and definitions used in relation to sexual orientation, gender identity, health, and relationships.

LGBTQ+ Older Adult Resources

- It is important to find service providers who understand LGBT issues and can be trusted to provide you with competent, respectful care.

**National
Resource
Center**
ON LGBT AGING

10 TIPS FOR FINDING LGBT-AFFIRMING SERVICES



National Resource Center
on LGBT Aging
National Headquarters
c/o Services & Advocacy
for LGBT Elders (SAGE)
305 Seventh Avenue
6th Floor
New York, NY 10001

212-725-2247 phone
212-366-1947 fax

info@lgbtagingcenter.org
lgbtagingcenter.org

The National Resource Center on
LGBT Aging is supported, in part,
under a cooperative agreement
from the U.S. Department of
Health and Human Services,
Administration on Aging. Grants
understanding projects and/or
government sponsorship and
encourage to freely express their
findings and conclusions.
However, these contents do not
necessarily represent the policies
the U.S. Department of Health and
Human Services, and
endorsement by the Federal
Government should not be
assumed. All Rights Reserved.

As an LGBT older adult or a caregiver, you and your loved one might be considering home care or long-term care services. However, you might be concerned about finding services and programs that are LGBT affirming. Inviting someone into your home or revealing personal information can be intimidating at any time, and you may be feeling particularly vulnerable at this point in time. It is important to find service providers who understand LGBT issues and can be trusted to provide you with competent, respectful care. Here are ten helpful tips on finding an LGBT-affirming service provider:

1. The best references come from the people you already know and trust. Ask friends with similar circumstances who they have worked with, and whether they felt respected and comfortable.
2. Contact your local SAGE Affiliate or LGBT aging provider, LGBT Community Center, PFLAG chapter or other LGBT organizations and ask for referrals to providers they have worked with in their networks.
3. Look to see if there are service providers that advertise in your local LGBT newspapers and magazines (either print or online) or have signed up as sponsors, members, etc. with local LGBT groups.
4. Reach out to your local HIV/AIDS service providers, who often have close connections to LGBT-affirming home care agencies and other services.

National Resource Center on LGBT Aging Page 12

LGBTQ+ Older Adult Resources



LGBTQ+ Older Adult Resources



sage

Six Things Every LGBT Older Adult Should Know About Cardiovascular Disease and Hypertension

Cardiovascular conditions can have serious consequences, but the good news is that there are many ways to diminish the risks associated with these diseases. Read these six important points, and see the reverse for some simple tips to reduce your risk and keep your heart healthy.

1. One Name for Many Diseases

The term cardiovascular disease actually refers to any of the diseases that affect the cardiovascular system. The most common of these is hypertension, a chronic condition in which blood pressure within the arteries is elevated. However, this term also encompasses: heart failure, which means the heart isn't pumping blood as well as it should,

LGBTQ+ Older Adult Resources



- This article describes the need for LGBT equity in and access to care in aging services.



<https://www.lgbtagingcenter.org/resources/resource.cfm?r=959>

Building Inclusive Rural Practices

“ At 14, I wouldn't tell the doctor my sexual orientation because I'd know he also sees my parents. I think I'd feel the opposite if he would have said, 'well I want you to know this is confidential and I ask this of everyone.' That's a very different conversation.

5 simple tips to improve LGBTQ patient-provider interactions

- Change office environment to include positive LGBTQ artwork, pamphlets, etc.
- Use culturally appropriate and specific terminology and pronouns that stretch across the sexual/gender spectrum on intake forms and in exchanges
- Encourage respectful, direct, and open-ended questions in patient-provider interactions
- Provide training on LGBTQ issues for all staff
- Reflect on assumptions, biases and preconceived notions. Perspectives can be changed and unlearned.


Sources:

Flemmer, N., Dekker, L., Doutrich, D. (2014). Empathetic Partnership: An Interdisciplinary Framework for Primary Care Practice. *The Journal for Nurse Practitioners*, 10(8): 545-551.

Kano, M., Silva-Bañuelos, A., Sturum, R., Willging, C. (2016). Stakeholders' Recommendations to Improve Patient-centered "LGBTQ" Primary Care in Rural and Multicultural Practices. *Journal of the American Board of Family Medicine*, 29(1): 156-160.

Creating a Welcoming Environment & Overcoming Barriers





[Join](#)[Renew](#)

POPULATION CARE

Creating an LGBTQ-friendly practice

Physicians who create an environment where all patients feel welcome can better meet their patients' often complex health care needs. Find recommended standards of practice with lesbian, gay, bisexual or transgender patients and additional resources to assist making your practice LGBTQ-friendly.

Provide a welcoming environment

1. **Provide visual clues for LGBTQ patients that your practice is a safe place.**

Simple ways to create an inclusive office environment include:

- Display brochures and educational materials about LGBTQ health concerns.
- Visibly post a [nondiscrimination statement](#) (PDF).
- Display posters from nonprofit LGBTQ or HIV/AIDS organizations.

Consult the [Guidelines of Care for Lesbian, Gay, Bisexual and Transgender \(LGBT\) Patients](#) (PDF), created by the Gay and Lesbian Medical Association, for advice on communicating with LGBTQ patients, guidelines for forms and patient-provider discussions and more.

Creating a Welcoming Environment & Overcoming Barriers



National Resource Center
on LGBT Aging
National Headquarters
c/o Services & Advocacy
for GLBT Elders (SAGE)
305 Seventh Avenue
6th Floor
New York, NY 10001

212-741-2247 phone
212-366-1947 fax

As an LGBT older adult or a caregiver, you and your loved one might be considering home care or long-term care services. However, you might be concerned about finding services and programs that are LGBT affirming. Inviting someone into your home or revealing personal information can be intimidating at any time, and you may be feeling particularly vulnerable at this point in time. It is important to find service providers who understand LGBT issues and can be trusted to provide you with competent, respectful care. Here are ten helpful tips on finding an LGBT-affirming service provider:

1. The best references come from the people you already know and trust. Ask friends with similar circumstances who they have worked with. and whether they felt

• DATA COLLECTION

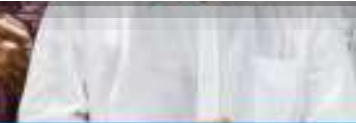
Two-year actions:

1. Expand the use of baseline data to identify underutilization of services by race, ethnicity, language, disability and geography, and develop data on understudied populations, such as LGBT older adults and people with disabilities.



Long-term actions:

1. Conduct periodic needs assessments and utilize predictive modeling to anticipate future development of materials in other languages and alternative formats and monitor consistency of these materials across programs.
2. Recruit providers of all types who have capacity and training to serve underrepresented groups, including younger adults with disabilities, LGBT consumers and rural and frontier communities.



Spring 2019

LGBTQ+ Health/Healthcare Education Resources



Learning to Address Implicit Bias Towards LGBTQ Patients: Case Scenarios

September 2018

ED NATIONAL LGBT HEALTH
EDUCATION CENTER
A PROGRAM OF THE PENNAR INSTITUTE

LEARNING TO ADDRESS IMPLICIT BIAS TOWARDS LGBTQ PATIENTS: CASE SCENARIOS

<https://www.lgbthealtheducation.org/publication/learning-to-address-implicit-bias-towards-lgbtq-patients-case-scenarios/>

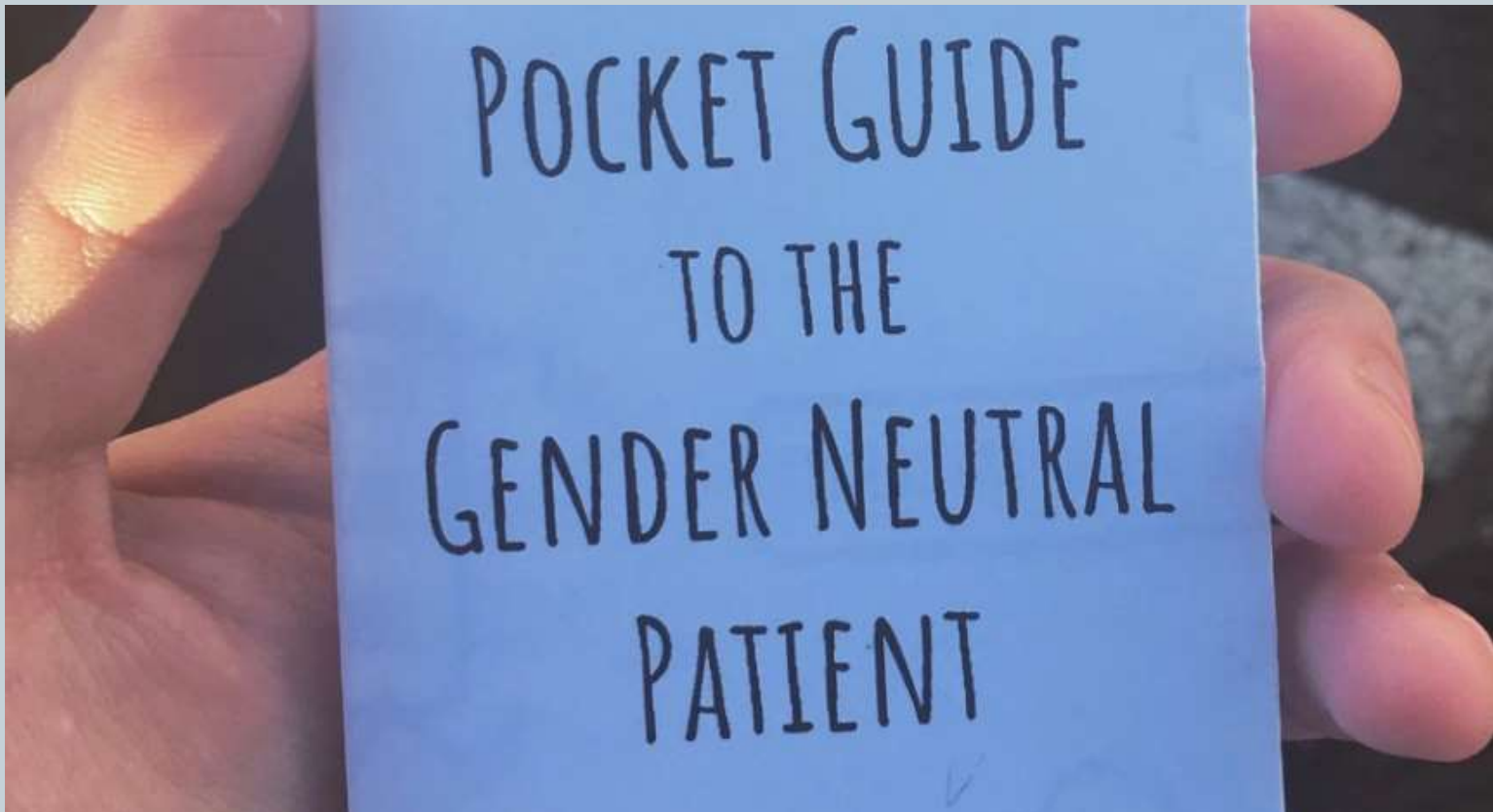
LGBTQ+ Health/Healthcare Education Resources



GUIDELINES AND TIPS FOR COLLECTING PATIENT DATA ON SEXUAL ORIENTATION AND GENDER IDENTITY



Tools to Help you Engage Your LGBTQ Patient



Transgender Cancer Patient Project

INCLUSIVE HEALTHCARE, COMMUNITY BUILDING, PATIENT ADVOCACY

<https://transcancerzine.com/zines/>

LGBTQ+ Health/Healthcare Education Resources



PROVIDING INCLUSIVE SERVICES AND CARE FOR LGBT PEOPLE

A Guide for Health Care Staff

 NATIONAL LGBT HEALTH
EDUCATION CENTER
A PROGRAM OF THE FENWAY INSTITUTE

PROVIDING INCLUSIVE SERVICES AND CARE FOR LGBT PEOPLE - A Guide for Health Care Staff

<https://www.lgbthealtheducation.org/publication/learning-guide/>

Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs



- Why am I being asked for my sexual orientation, gender and gender identity?
- Why is it essential to ask demographic questions?
- How has access to this information?
- Common Terms

National Resource Center
ON LGBT AGING



QUESTIONS ABOUT SEXUAL ORIENTATION AND GENDER IDENTITY IN AGING SERVICES



Advocacy & Services for LGBT Elders
We refuse to be invisible

National Resource Center on LGBT Aging
National Headquarters
c/o Services & Advocacy for LGBT Elders (SAGE)
305 Seventh Avenue
6th Floor
New York, NY 10001

212-743-2347 phone
212-366-1947 fax
info@lgbtagingcenter.org
lgbtagingcenter.org

The National Resource Center on LGBT Aging is supported, in part, under a cooperative agreement from the U.S. Department of Health and Human Services, Administration on Aging. Grantees undertaking projects under government sponsorship are encouraged to freely express their findings and conclusions. However, those contents do not necessarily represent the policy of the U.S. Department of Health and Human Services, and endorsement by the Federal Government should not be assumed. All Rights Reserved.

Why am I being asked about my sexual orientation, gender, and gender identity?

There are some states mandated by law to ask for this information. In other states some agencies are being proactive in capturing as much information as possible about the communities they serve. It's important for service providers to not assume everyone identifies as heterosexual or straight (sexual orientation) and as their sex assigned at birth, male or female, (gender). When these assumptions are wrong, they can affect access to services.

Why is it essential to ask demographic questions?

Every day decisions are made based on data. As older adults, you may be completing an intake form at a community center, health provider, or other service organization and encounter demographic or data questions, such as race, ethnicity, educational background, income, relationship status, emergency contact, sexual orientation, gender, and gender identity. These are all data questions that help service providers get to know you better and understand any unique challenges you may experience. For example, research has shown that older African American and Latino persons are at higher risk of developing Alzheimer's. Older people who are single and do not have children may be at higher risk for social isolation. When programs know the people they are working with may be at a higher risk for chronic illness, social isolation, and poverty, for instance, they can work to ensure their programs are meeting the needs of the community they serve.

For older people who identify as a lesbian, gay, bisexual, and transgender (LGBT), research has shown that they may also be at higher risk for chronic illness and social isolation. Historically, LGBT older people have been mostly invisible in programs for older people. This invisibility often leaves LGBT family, friends, and neighbors, fearful of accessing services and at increased risk for chronic illness and social isolation.

Healthcare Equality Index 2020

Promoting Equitable and Inclusive Care for Lesbian, Gay, Bisexual, Transgender & Queer Patients and Their Families



HEI 2019

Why the HEI? To help LGBTQ patients find LGBTQ-friendly healthcare facilities

In addition to being a valuable tool and resource for healthcare facilities, the HEI is used by LGBTQ patients and their loved ones to find facilities that provide equitable and inclusive care. The ratings for each participating facility are published in the annual HEI report, available on our website and promoted to HRC's more than 3 million supporters.

Consumers can easily search our online database or our interactive map to see how facilities near them rate – giving patients the ability to choose where they would like to receive care in their time of need.

To search the HEI, go to: [hrc.org/hei/search](https://www.hrc.org/hei/search)

The Healthcare Equality Index has four core objectives:

- **Ensure foundational non-discrimination protection** for patients, visitors and staff in patient and staff policies and provide cultural competency training on LGBTQ-inclusion
- Demonstrate progress toward **inclusion on LGBTQ patient care services and support**
- Cultivate an inclusive workplace by providing **LGBTQ-inclusive employee policies and benefits**
- Demonstrate **engagement with and public commitment** to the LGBTQ community

<https://www.hrc.org/resources/healthcare-equality-index>

LGBT Older Adult Resources

CONTENTS

Introduction	4
Start a Conversation	8
Make a Plan	11
Form a Team	13
Find Support	16
Care for Yourself	19
Glossary	23
Resources	27
Goals & Needs Checklist	31
Charts & Checklists	32
Sample Caregiving Plans	42

PREPARE TO CARE

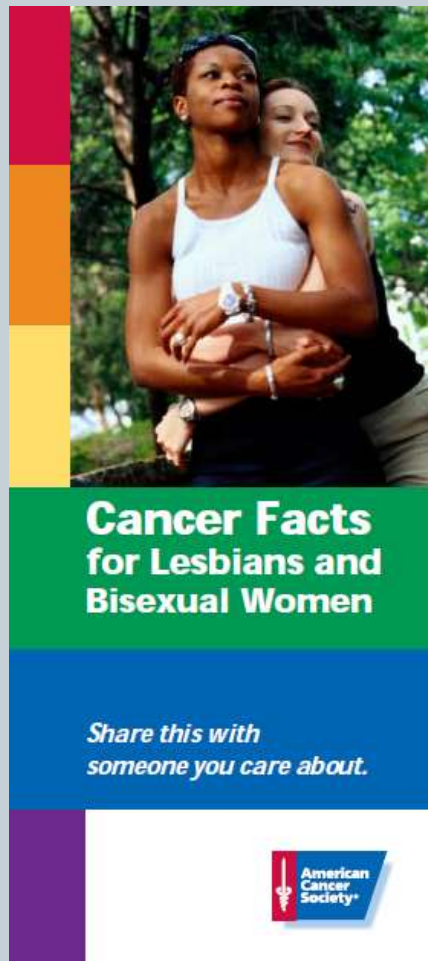
A PLANNING GUIDE FOR CAREGIVERS
IN THE LGBT COMMUNITY

sage

Advocacy &
Services for
LGBT Elders

AARP
Real Possibilities

LGBTQ+ Health/Healthcare Education Resources



<http://www.cancer.org/content/cancer/en/search.html?q=lgbt>

LGBTQ+ Resources



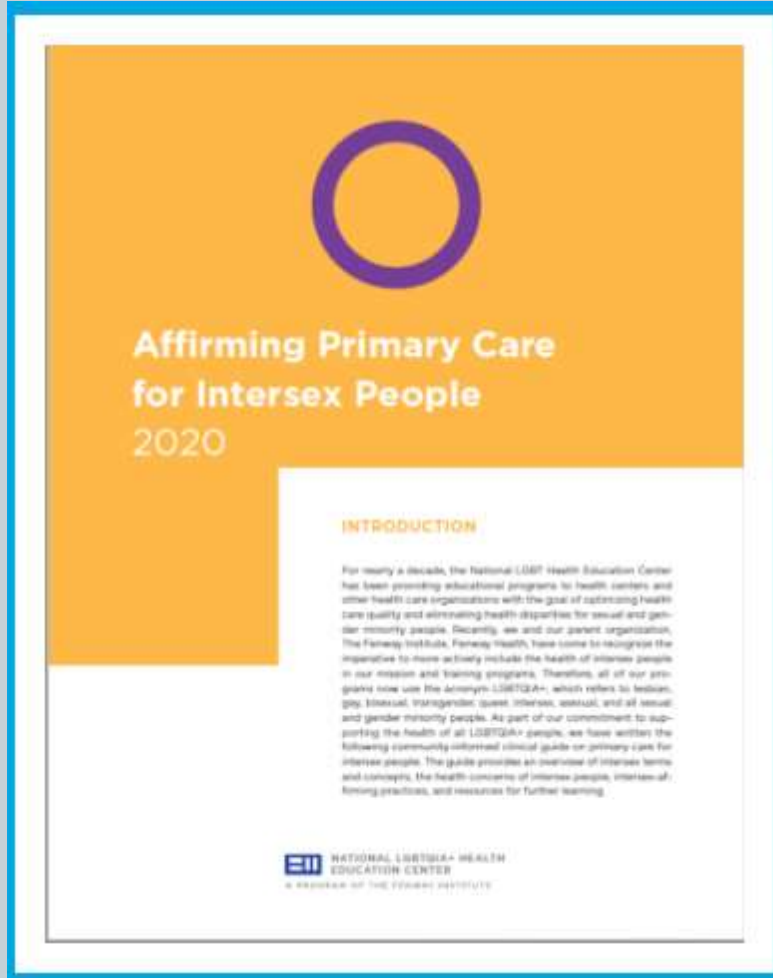
- Free and downloadable education reports, infographics, and videos. Some available in Spanish.
- lgbtmap.org



movement advancement project ▶

<https://www.lgbtmap.org/lgbt-people>

LGBTQ+ Health/Healthcare Education Resources



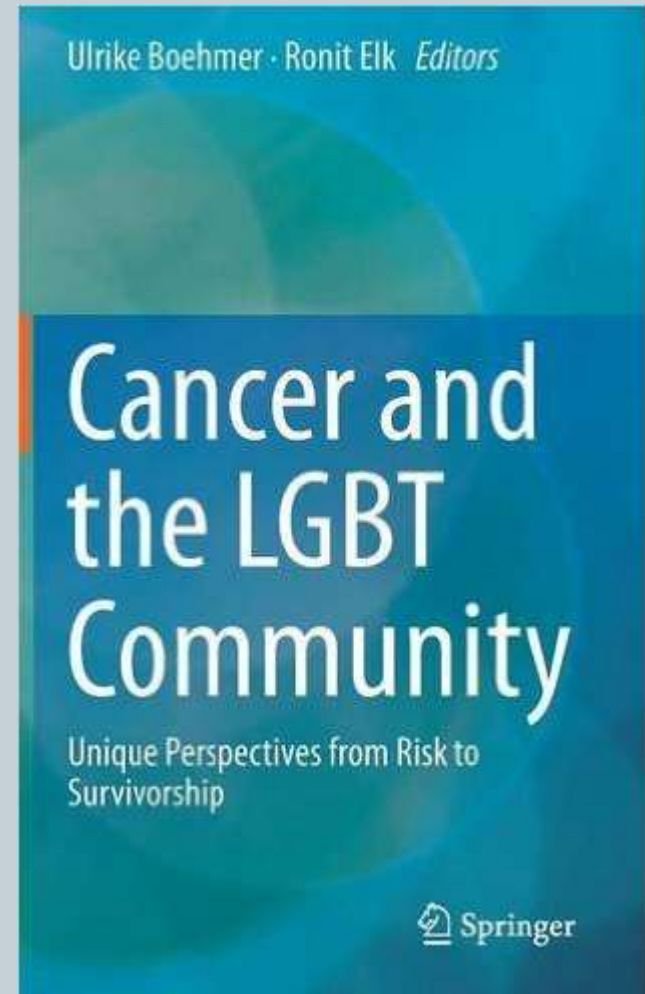
Affirming Primary Care for Intersex People 2020

<https://www.lgbtqihealtheducation.org/publication/affirming-primary-care-for-intersex-people-2020//>

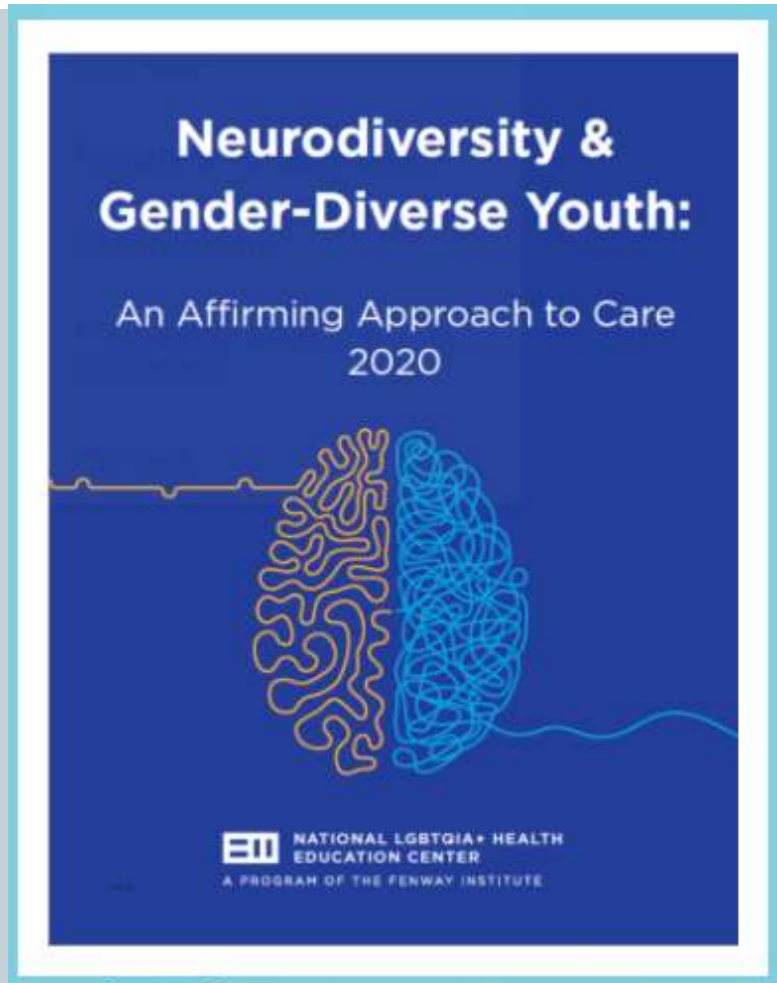
LGBT Health/Healthcare Education Resources

Publisher: Springer; 2015 edition (June 9, 2015)

- First book ever written on cancer in LGBT communities
- Offers an in-depth look at the most up to date research in this field
- Provides a roadmap for future researchers, policy makers, advocates and health care providers



LGBTQ+ Health/Healthcare Education Resources



Neurodiversity & Gender- Diverse Youth: An Affirming Approach to Care 2020

LGBTQ+ Reproductive Health Guides



NATIONAL LGBTQIA+ HEALTH
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE

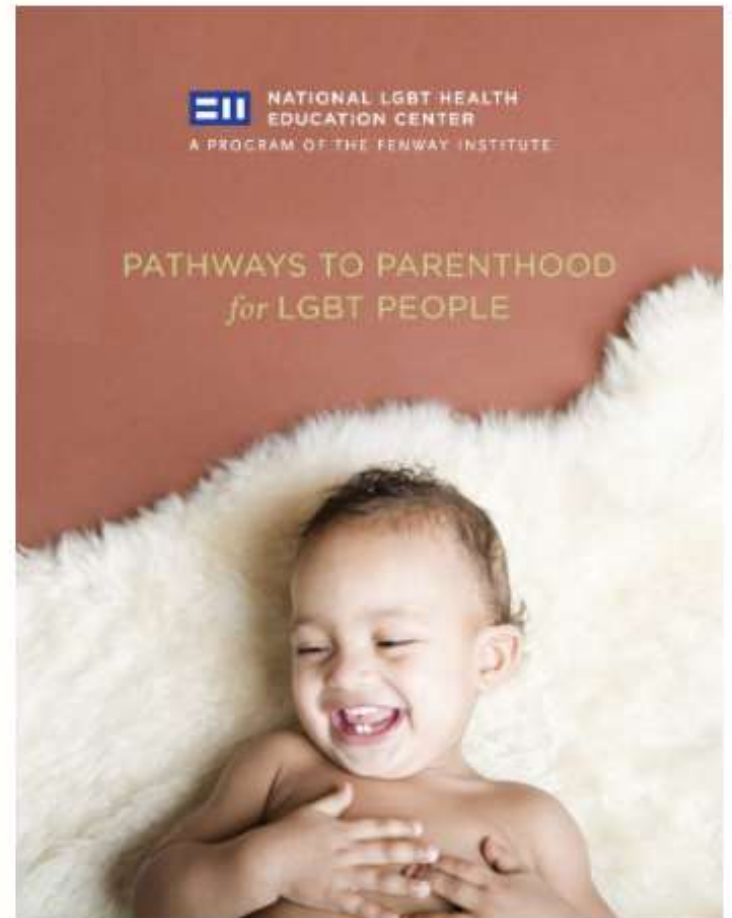
Adoption & Foster Parenting

Assisted Reproduction: Donor Insemination & IVF

Assisted Reproduction: Surrogacy

Organizational Support for LGBT Parents

Resources



The State of the LGBTQ Community in 2020

A National Public Opinion Study

By Sharita Gruberg, Lindsay Mahowald, and John Halpin October 6, 2020, 9:00 am



Getty/Erik McGregor

A participant holds a rainbow flag as the Reclaim Pride Coalition takes to the streets of Manhattan for the second annual Queer Liberation March, June 2020.

OVERVIEW

A comprehensive new study from the Center for American Progress finds that many LGBTQ people continue to face discrimination in their personal lives, in the workplace and the public sphere, and in their access to critical health care.

PRESS CONTACT

Maintaining Dignity

Understanding and Responding to the Challenges Facing Older LGBT Americans

An AARP survey of LGBT adults age 45-plus

Report dated March 2018

AARP RESEARCH | [AARP.ORG/RESEARCH](https://aarp.org/research)

<https://doi.org/10.26419/res.00217.001>



LGBTQ+ Health/Healthcare Education Resources

LGBT Health

Quarterly peer-reviewed journal dedicated to promoting optimal healthcare for millions of sexual and gender minority persons worldwide.

Editor-in-chief: William Byne, MD, PhD

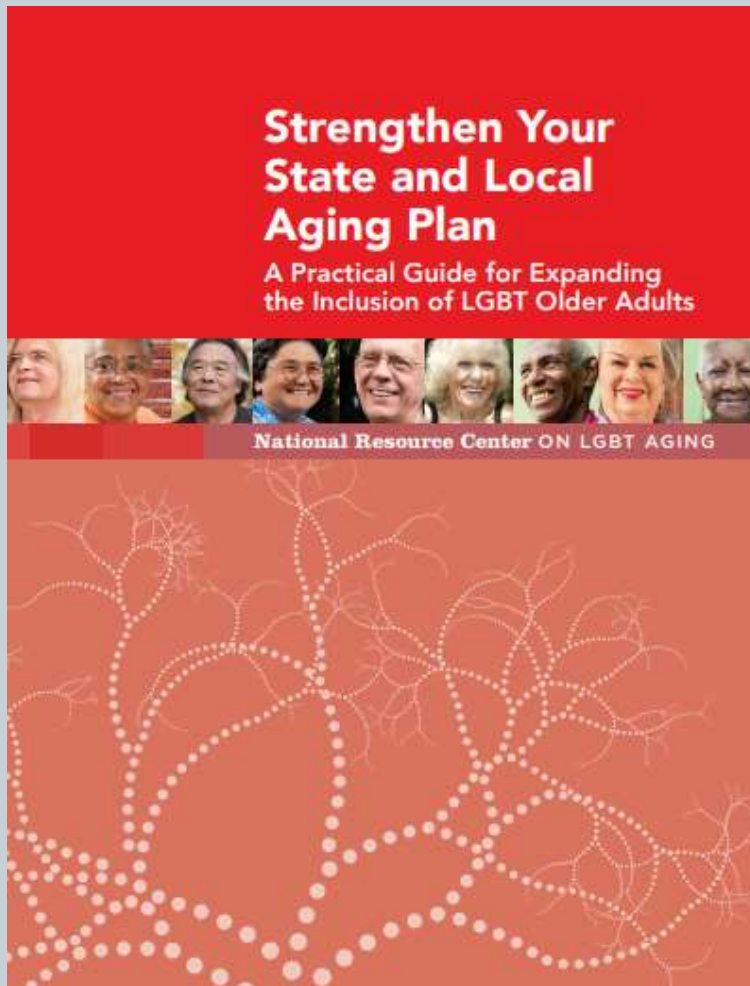
ISSN: 2325-8292 • Published Quarterly • Online

ISSN: 2325-8306



<http://www.liebertpub.com/overview/lgbt-health/618/>

Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs



- Highlighted throughout this guide is the work of State Units on Aging and Area Agencies on Aging who engage and include the LGBT community in their planning and services.
- The guide includes an extensive list of tools and resources to assist with outreach to LGBT communities, data collection, needs assessments, writing LGBT-inclusive planning goals and objectives, and suggested organizational best practices for LGBT-inclusive planning.

Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs



National
Resource Center
ON LGBT AGING

LGBTQ INCLUSIVE SERVICES READINESS CHECKLIST: A SELF-ASSESSMENT FOR AREA AGENCIES ON AGING

July 2019 | Aging Ahead, St. Louis Area Agency on
Aging, National Resource Center on LGBT Aging

LGBTQ INCLUSIVE SERVICES READINESS CHECKLIST

A Self-Assessment for Area Agencies on Aging

This self-assessment aims to help agencies determine how effectively they are supporting LGBTQ individuals and aid in identifying areas of growth. To get started, mark the boxes next to the actions your agency is taking to be more inclusive to the LGBTQ community. When finished, add up the number of boxes checked to determine your agency's score. Results for each score, plus related resources, are listed on the last page.

<https://www.lgbtagingcenter.org/resources/resource.cfm?r=902>

Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs

The LGBT Inclusivity Guide for Area Agencies on Aging

A step-by-step guide for Area Agencies on Aging to provide compassionate and culturally relevant service and support to lesbian, gay, bisexual and transgender older adults



- A step-by-step guide for Area Agencies on Aging to provide compassionate and culturally relevant service and support to lesbian, gay, bisexual and transgender older adults

Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs

Serving Diverse Elders

Strategies for Meaningful Inclusion
in Service Planning and Delivery

PRODUCED BY THE NATIONAL
CONSORTIUM ON AGING
RESOURCES FOR SENIORS'
EQUITY MEMBERS

Asociación Nacional
Pro Personas Mayores
(ANPPM)

THE
Center
(SAGE)



This guide aims to provide the Aging Network with tools and resources needed to be more inclusive of culturally diverse populations of older adults during the planning process.

- 24 Assessing Community Needs for Diverse Populations
- 26 Inclusive Planning Goals and Objectives
- 29 Measuring Success and Planning for the Future
- 30 Best Practices for Working with Diverse Elders
- 31 Conclusion



Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs



RVCOG SDS 2021-2024 Area Plan Survey Instrument

2019 Senior and Disability Services Needs Survey

47. Do you think of yourself as: (check one)

- ☐ Straight or Heterosexual
- ☐ Lesbian, Gay or Homosexula
- ☐ Bisexual
- ☐ Something Else
- ☐ Don't Know
- ☐ Choose not to disclose

48. What sex were you assigned at birth, as shown on your original birth certificate?

- ☐ Female
- ☐ Male

49. How do you currently describe yourself? (check one)

- ☐ Female
- ☐ Male
- ☐ Do not identify as female, male, or transgender
- ☐ Choose not to disclose
- ☐ Additional gender category/or Other), please specify

Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs



JB Pritzker, Governor
Paula A. Basta, M.Div., Director

One Natural Resources Way, Suite 100, Springfield, Illinois 62702-1271
Phone: 800-252-8966 • 888-206-1327 (TTY) • Fax: 217-785-4477

PRESS RELEASE

FOR IMMEDIATE RELEASE

Friday, June 28, 2019

CONTACT:

Mike Dropka 312-814-8449

Michael.Dropka@illinois.gov

IL Department on Aging Celebrates Pride, Announces New Inclusive Intake Forms

Chicago, IL - During LGBT Pride Month, The Illinois Department on Aging (IDoA) announced that it will include sexual orientation and gender identity questions in its referral and intake processes, expanding the Department's commitment to LGBT older Illinoisans.

Specifically, when an individual calls the IDoA Senior HelpLine, and completes the referral and intake process for services under the Community Care Program (CCP), among the questions as part of the demographics section, will now include how the individual identifies their sexual orientation and gender identity.

Oregon Agency and AAA LGBTQ+ Inclusion Best Practices/Programs



AAA SERVICES



► LGBT Outreach & Project Visibility

Outreach and support for LGBT elders; trainings for professional groups on becoming more inclusive and responsive to the LGBT community.

LGBT Program Awards

- The 2006 n4a (National Association of Area Agencies on Aging) Aging Innovation Awards for Ethnic and Cultural Diversity
- The 2006 NACo (National Association of Counties) Innovation Achievement Award
- Staff commendations: Emily Lewis, 2012 Elder Abuse Awareness & Prevention Awards; Nancy Grimes, 2013 Big Hearts Award

LGBT Health/Healthcare Education Resources



My ANA | Staff Nurses | Advanced Practice Nurses | Nurse Managers | Nursing Research | Student Nurses | Educators | What is Nursing?

NursingWorld

About ANA | Find Your State | FAQ | Newsroom | ANA E-Store | Contact Us

Login | Career & Credentialing | Practice | Ethics | Health & Safety | Policy & Advocacy | Member Benefits | Conferences

Practice

► LGBT Individuals & Communities

Bariatrics/Obesity

Geriatrics

Health Insurance & Healthcare Access

Mentorship

Racial & Ethnic

Home » Practice » Improving Your Practice » Diversity Awareness » LGBT

LGBT Individuals & Communities


Building on recent social and political advances in the U.S. to protect the human rights of same-sex partnership and expand traditional perspectives on gender identity, *Diversity Awareness in Professional Nursing* is privileged to provide what we hope will be a wealth of resources to support nursing practice for

The Online Journal of Issues in Nursing

A Scholarly Journal of the American Nurses Association

WHAT'S NEW | JOURNAL TOPICS | COLUMNS | TABLE OF CONTENTS | LETTERS TO THE EDITOR | CONTINUING ED | ANA HOME

LOGIN »


AMERICAN NURSES ASSOCIATION
OJIN is a peer-reviewed,
online publication that
addresses current topics
affecting nursing practice,
research, education, and
the wider health care

ANA Home
About OJIN
FAQs
Author Guidelines
Featured Authors
Editorial Staff Board
Contact Us
Site Map

sharing with us high-

Home | ANA Periodicals | OJIN | Table of Contents | Vol 20 2015 | No2 May 2015 | Articles
Previous Topics | **Changing the Culture of Long-Term Care: Combating Heterosexism**

Changing the Culture of Long-Term Care: Combating Heterosexism

[Susan V. Schwinn, BSN, RN](#)
[Shirley A. Dinkel, PhD, APRN, FNP-C, ANP-C](#)

LGBT Health/Healthcare Education Resources



...”Many physicians incorrectly believe that lesbian patients do not need cervical cancer screening,”...



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

COMMITTEE OPINION

Number 525 • May 2012

Committee on Health Care for Underserved Women

This information should not be construed as dictating an exclusive course of treatment or procedure to be followed.

Health Care for Lesbians and Bisexual Women

ABSTRACT: Lesbians and bisexual women encounter barriers to health care that include concerns about confidentiality and disclosure, discriminatory attitudes and treatment, limited access to health care and health insurance, and often a limited understanding as to what their health risks may be. Health care providers should offer quality care to all women regardless of sexual orientation. The American College of Obstetricians and Gynecologists endorses equitable treatment for lesbians and bisexual women and their families, not only for direct health care needs, but also for indirect health care issues.

LGBT Health/Healthcare Education Resources



AMERICAN PSYCHOLOGICAL ASSOCIATION

About APA

Topics

Publications & Databases

Psychology Help Center

News & Events

[Home](#) // [News & Events](#) // [Press Room](#) // [Press Releases](#)

August 6, 2015

APA Adopts Guidelines for Working With Transgender, Gender Nonconforming People

Aim is to ensure well-informed care, treatment and research

The document lays out 16 guidelines aimed at helping professionals better understand the lifespan development, stigma, discrimination and barriers to care faced by this population, as well as the state of research surrounding transgender and gender nonconforming people.

<https://www.apa.org/practice/guidelines/transgender.pdf>

American College of Clinical Pharmacy Resources



ACCP WHITE PAPER

Cultural Competency in Health Care and Its Implications for Pharmacy Part 3A: Emphasis on Pharmacy Education, Curriculums, and Future Directions

American College of Clinical Pharmacy

Mary Beth O'Connell,* Magaly Rodriguez de Bittner, Therese Poirier, Lamis R. Karaoui,
Margarita Echeverri, Aleda M.H. Chen, Shin-Yu Lee, Deepti Vyas, Christine K. O'Neil, and
Anita N. Jackson

Sexual orientation and gender identification should also be incorporated into the cultural sensitivity pharmacy curriculum. Proposed methods for including lesbian, gay, bisexual, transgender, and/or questioning sexual identity (LGBTQ) cultures and health issues in curriculums include exposure to LGBTQ individuals and the use of

standardized patient scenarios, didactic lectures and seminars, guest panel discussions, poster presentations, and student reflections.⁷⁷ The LGBTQ curricular content and primary literature analysis that focus on human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) and other sexually transmitted infections as the predominant or exclusive topic of study are not reflective of the overall health care needs of the LGBTQ community and can reinforce stereotypes of sexual risk behavior.^{77, 78}

Pharmacy faculty should consider adding LGBTQ case scenarios and curricular content to examine and increase student awareness of other health concerns in addition to HIV/AIDS and the sexually transmitted illnesses that affect the LGBTQ community (e.g., smoking, alcohol and substance abuse, obesity, physical abuse, depression, suicide) and issues related to their health care (e.g., appropriate terminology and communications, reasons for avoiding health care providers, consequences of culturally incompetent care).⁷⁹