

# LGBTQ+ 101: Implementing Best Practices into Clinical Care

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AAPA WE ARE FAMILY CONFERENCE 2023

BAYLOR COLLEGE OF MEDICINE



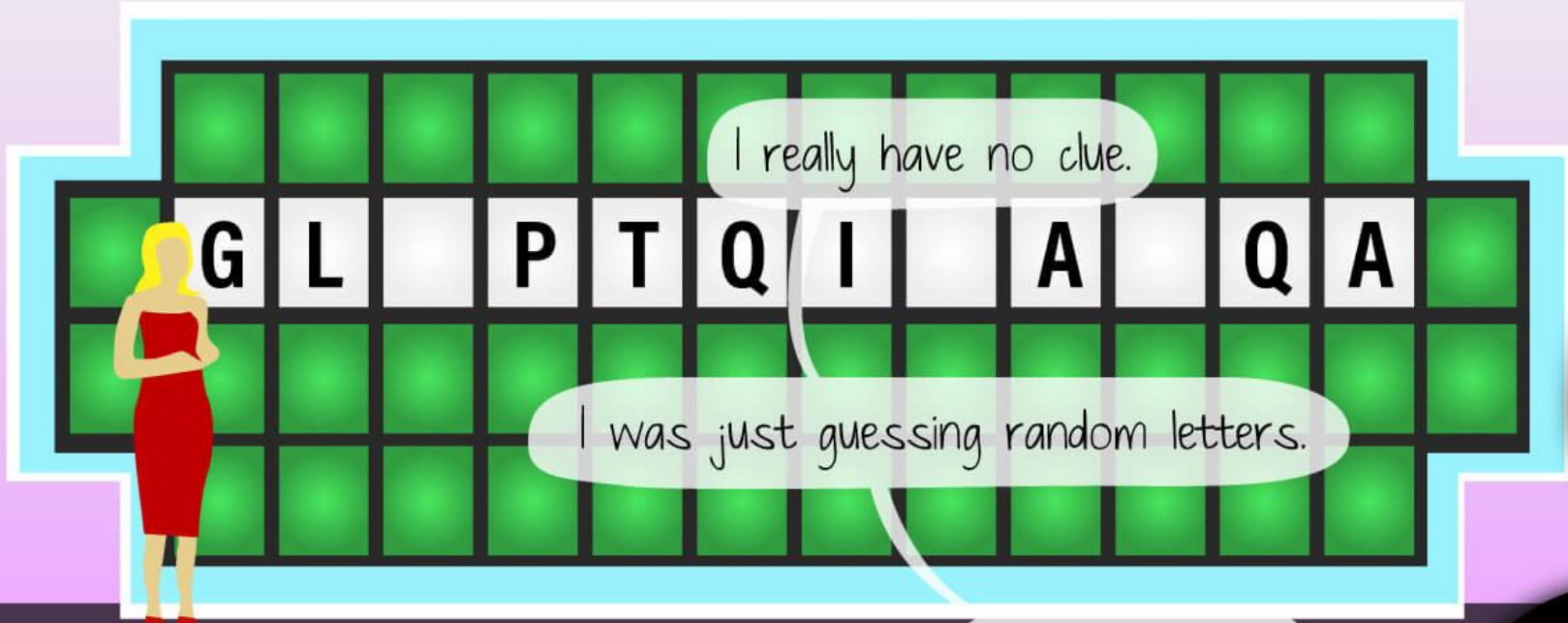
# DISCLOSURES

I have no relevant relationships with ineligible companies to disclose within the past 24 months



# OBJECTIVES

- Provide inclusive quality care to LGBTQ+ individuals
- Address the health disparities of LGBTQ+ individuals
- Identify common acute and chronic conditions affecting the LGBTQ+ community



I really have no clue.

I was just guessing random letters.

Is it Dutch?

## A GROUP OF PEOPLE



# WHAT'S IN THE NAME?

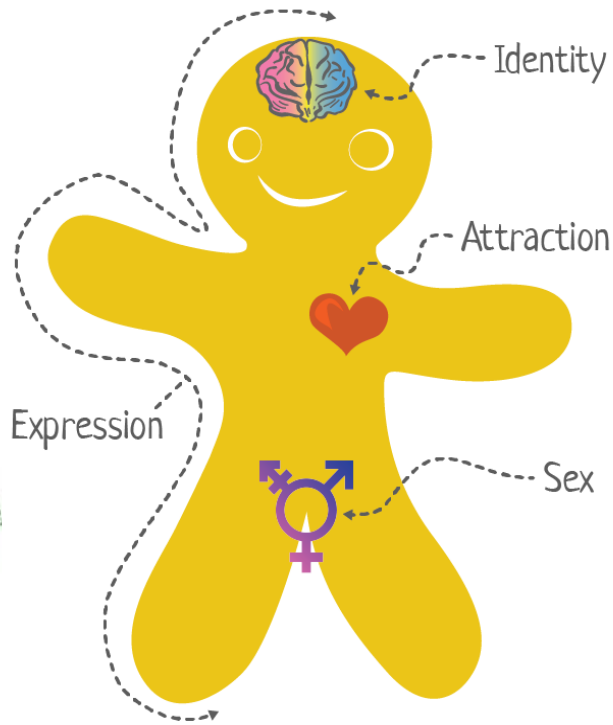
## LGBTQ+



- **L**esbian
- **G**ay
- **B**isexual
- **T**ransgender
- **Q**ueer/**Q**uestioning
- **+** (Intersex, Two-spirit, Ally, Asexual, Pansexual)



# THE GENDERBREAD PERSON



⊘ means a lack of what's on the right side

 Gender Identity

⊘ → Woman-ness  
 ⊘ → Man-ness

 Gender Expression

⊘ → Femininity  
 ⊘ → Masculinity

 Anatomical Sex

⊘ → Female-ness  
 ⊘ → Male-ness

Identity ≠ Expression ≠ Sex  
 Gender ≠ Sexual Orientation

Sex Assigned At Birth  
 Female  Intersex  Male

 Sexually Attracted to... and/or (a/o)

⊘ → Women a/o Feminine a/o Female People  
 ⊘ → Men a/o Masculine a/o Male People

 Romantically Attracted to...

⊘ → Women a/o Feminine a/o Female People  
 ⊘ → Men a/o Masculine a/o Male People

Genderbread Person Version 4 created and uncopyrighted 2017 by Sam Killermann

For a bigger bite, read more at [www.genderbread.org](http://www.genderbread.org)

by its pronounced **METRO**sexual.com



# "COMING OUT" ... "of the closet." is the process by which someone...

1. Accepts and identifies with their gender identity and/or sexual orientation; and
2. Shares their identity willingly with others.

**Sometimes** We talk about coming out as if it were a one time thing. But for most folks coming out is a series of decisions – sometimes daily – that LGBTQ people navigate in every new setting they enter. (Most people aren't like Ellen, where they come out once and then the whole world knows.)

**People** may be **"OUT"** ⇔ in some spaces, and **"IN"** → in others.

→/⇔ to Family →/⇔ to Friends →/⇔ to Classmates/Coworkers →/⇔ to Religious Community

A decision to come out to a person or group is one of safety, comfort, trust, & readiness.

**It's dangerous, unhealthy, and unhelpful to force someone to come out, or to "out" someone else** (i.e., disclosing someone's gender identity or sexual orientation to others without the person's consent), **regardless of your intentions** (sometimes people think they're being helpful, or acting on the person's behalf to conquer their fears), but...

# LGBTQ+ SYMBOLS

RAINBOW FLAG



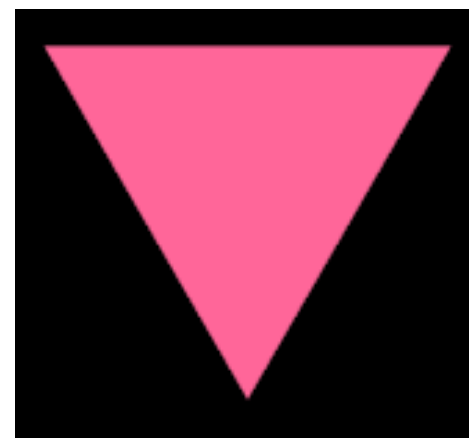
TRANSGENDER FLAG



HUMAN RIGHTS CAMPAIGN



PINK TRIANGLE



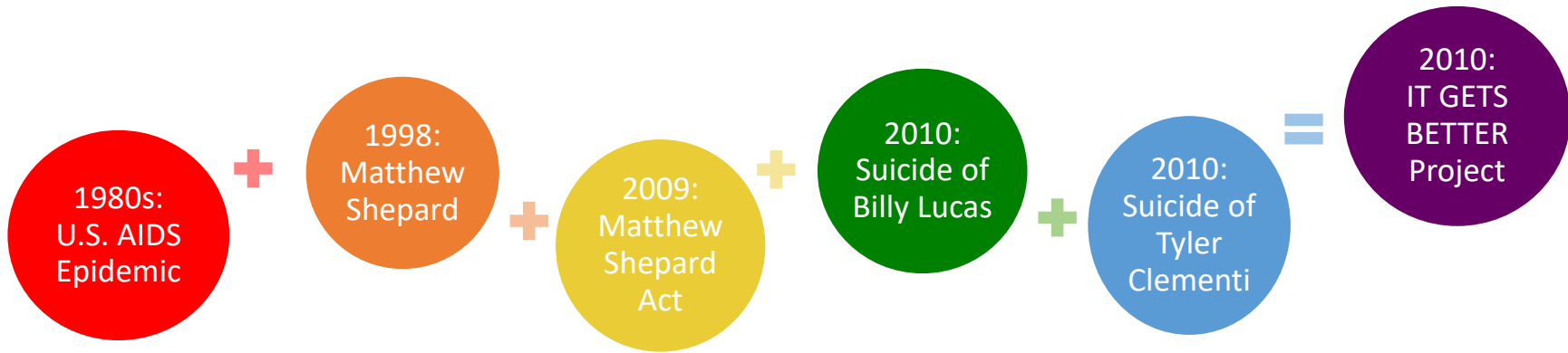


# STONEWALL - 1969

Birth of the gay rights movement in the US



# OTHER IMPORTANT DATES



# LGBTQ+ LEGAL LANDMARKS

1986:  
Bowers  
vs.  
Hardwick

1996:  
Defense  
of  
Marriage  
Act

2003:  
Lawrence  
vs.  
Texas

2008:  
California  
Proposition  
8

2013:  
U.S.  
vs.  
Windsor

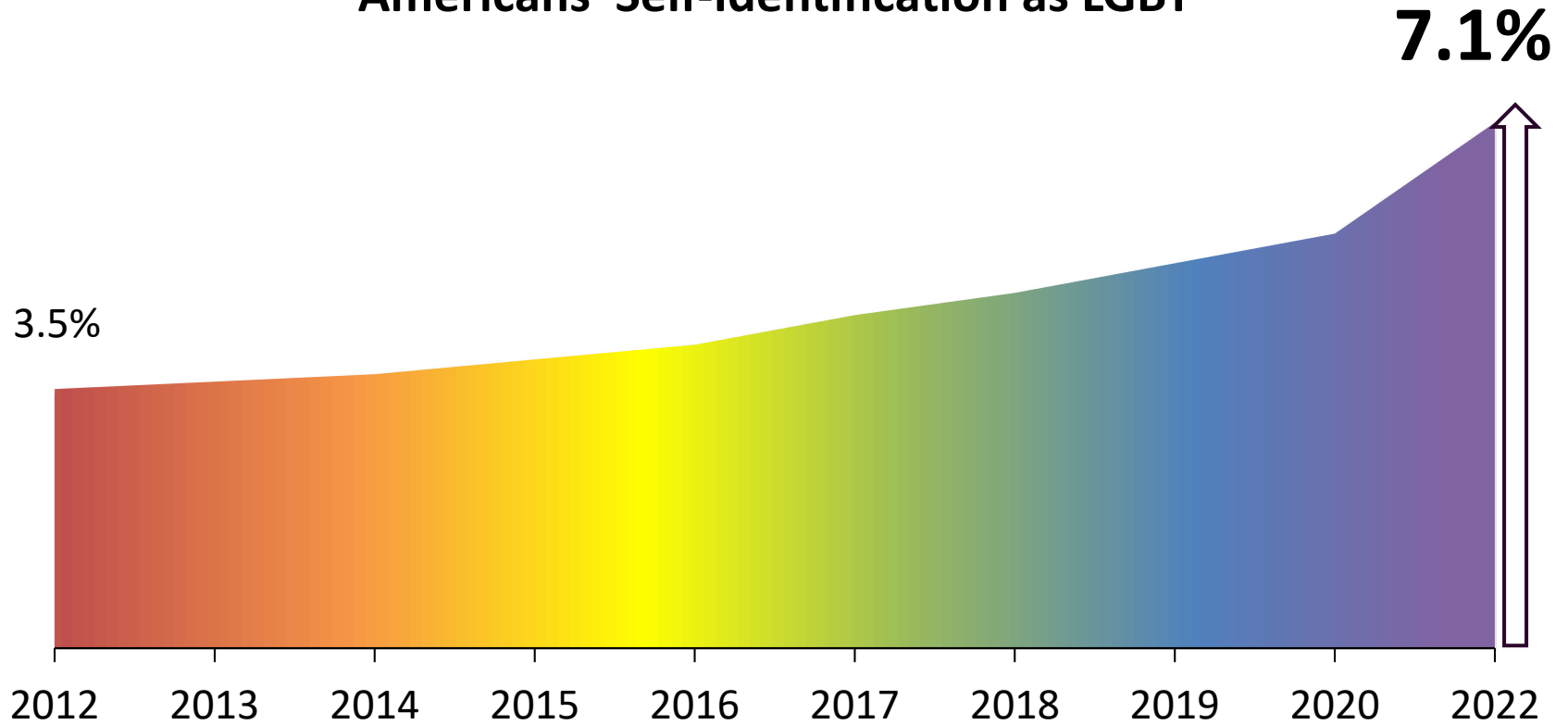
2015:  
Obergefell  
vs.  
Hodges

2020:  
Title VII


2022:  
Respect  
for  
Marriage  
Act

# LGBTQ+ DEMOGRAPHICS IN THE US

Americans' Self-Identification as LGBT



Gallup Poll, 2022



# **ISSUES FACING THE LGBTQ+ POPULATION TODAY**





**WHAT ARE THE  
BARRIERS  
TO HEALTHCARE?**



# UNDERSTANDING DISPARITIES

- LGBTQ+ youth are more likely to attempt suicide and be homeless
- They have a higher rate of tobacco, alcohol and illicit drug use
- Transgender individuals have even a higher rate of suicidal ideation and victimization
- Higher risk for HIV in transgender women
- Lesbians are more likely to be obese
- Lesbians are less likely to get preventive screening

# Women having Sex with Women (WSW) **HEALTH RISKS**

An upward-pointing arrow with a vertical gradient from purple at the bottom to red at the top. The text is centered within the arrow's shaft.

Depression/Anxiety

Obesity

Alcohol Use

Tobacco Use

Drug Use

A downward-pointing arrow with a vertical gradient from red at the top to purple at the bottom. The text is centered within the arrow's shaft.

Exercise

Nutrition

Gyn Care/  
Screening

Less Children  
(Nulliparity)

Domestic Violence  
Screening

# Men having Sex with Men (MSM) **HEALTH RISKS**

An upward-pointing arrow with a vertical gradient from purple at the bottom to red at the top. The text is centered within the arrow's shaft and tip.

*Anxiety/  
Depression*

*Disordered Eating/  
Body Image Issues*

**Hepatitis A,B**

**Alcohol Use**

**Tobacco Use**

**Drug Use**

A downward-pointing arrow with a vertical gradient from red at the top to purple at the bottom. The text is centered within the arrow's shaft and tip.

**Safe Sex  
Practices**

**Domestic  
Violence  
Screening**



# APPROACH TO SEXUAL HISTORY

## Set the Stage

- Be sex-positive
- Disarm

## Dialogue

- Open conversation
- 6Ps

## Build Rapport

- Gain trust
- Empowerment



# ALGORITHM FOR TAKING SEXUAL HISTORIES

## Set the Stage

- ✓ Bring up the sexual history as part of the overall history
- ✓ Explain that you ask these questions of all patients
- ✓ Ensure confidentiality



## Begin with These Screening Questions

1. Are you having sex?
2. Who are you having sex with? Anyone else?
3. What types of sex are you having? (oral, vaginal, anal)



### Multiple Partners, New Partner

#### Ask about:

- STD/HIV protection
- Partners
- Substance use
- History of STDs
- Trauma/violence
- Pregnancy plans protection

### Long-term Monogamous Partner

#### Ask about:

- Pregnancy plans/protection
- Trauma/violence
- Sexual function and satisfaction
- Other concerns

### Not Sexually Active

#### Ask about:

- Past partners (if patient is new)
- Any questions or concerns



Follow up as appropriate

# GET CLOSER *with* BARRIERS

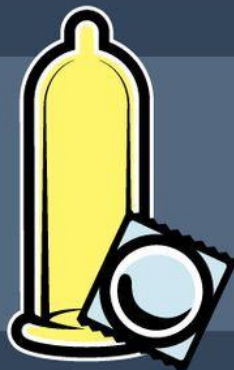
WHICH SAFER SEX TOOL IS RIGHT FOR YOU?

## CONDOM

EXTERNAL CONDOM  
OR MALE CONDOM

About \$6.50/3 pack

USES



## INTERNAL CONDOM

REALITY® CONDOM  
OR FEMALE CONDOM

About \$7/3 pack  
Remove plastic ring before  
using for anal sex.

USES



## DENTAL DAM

About \$1.50/piece  
If unavailable, make one using  
non-microwavable plastic wrap.

USES



## GLOVE

LATEX OR NITRILE

About \$0.10/glove

USES



butt



fingers



mouth



penis



sex toy



vagina/vulva

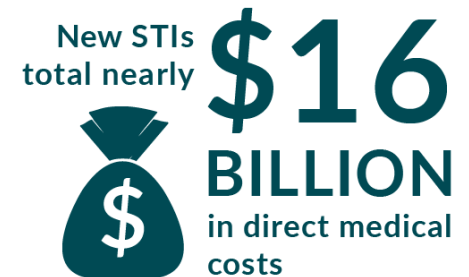
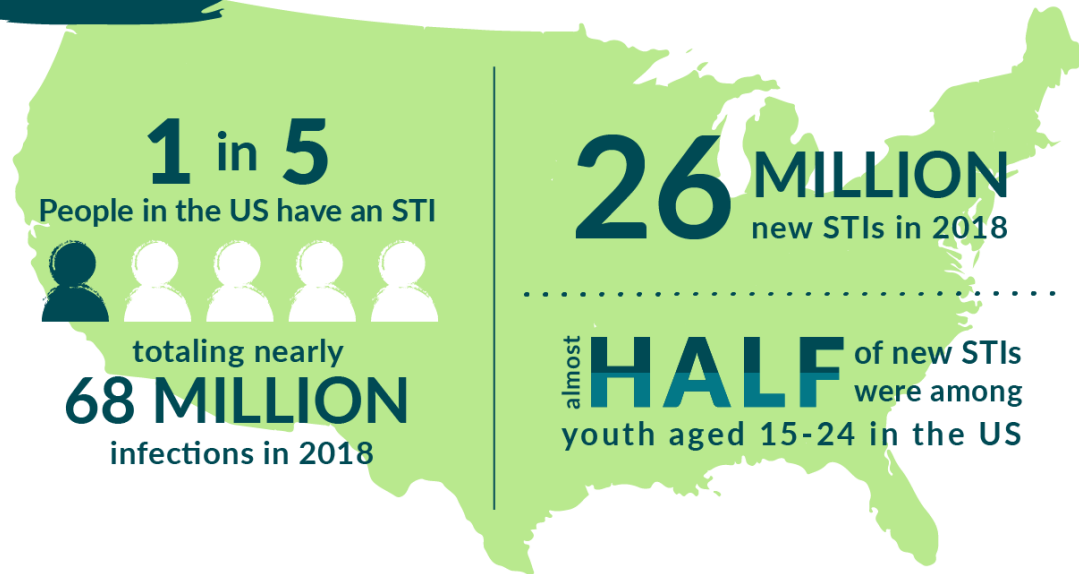
## REMEMBER

Use a fresh barrier every time you switch between holes or partners.

Don't let STIs, HIV, or Hepatitis come between you and your partners. Purchase these barriers online or in a pharmacy, or ask for them at your nearest health center.

# STIs ARE VERY COMMON AND COSTLY TO THE NATION'S HEALTH AND ECONOMY

## Overview



# **SEXUALLY TRANSMITTED INFECTIONS**

## **Women having Sex with Women (WSW)**

Herpes Simplex 1 & 2	Human Papillomavirus (HPV)	Gonorrhea
HIV/AIDS	Trichomoniasis	Chlamydia

What about candida? bacterial vaginosis? pelvic inflammatory disease?

# SEXUALLY TRANSMITTED INFECTIONS

## Men having Sex with Men (MSM)

HIV/AIDS	Human Papillomavirus (HPV)	Chlamydia
Herpes Simplex 1 & 2	Hepatitis A, B	Gonorrhea
Mpox	Syphilis	

What about urethritis? pharyngitis? prostatitis?





# A WORD ON THE ANAL PAP SMEAR

- No current national guidelines for anal pap smears
- Some experts suggest anal cytology for patients who have receptive anal sex or an abnormal cervical Pap smear but only if follow-up is available

# PARTY AND PLAY





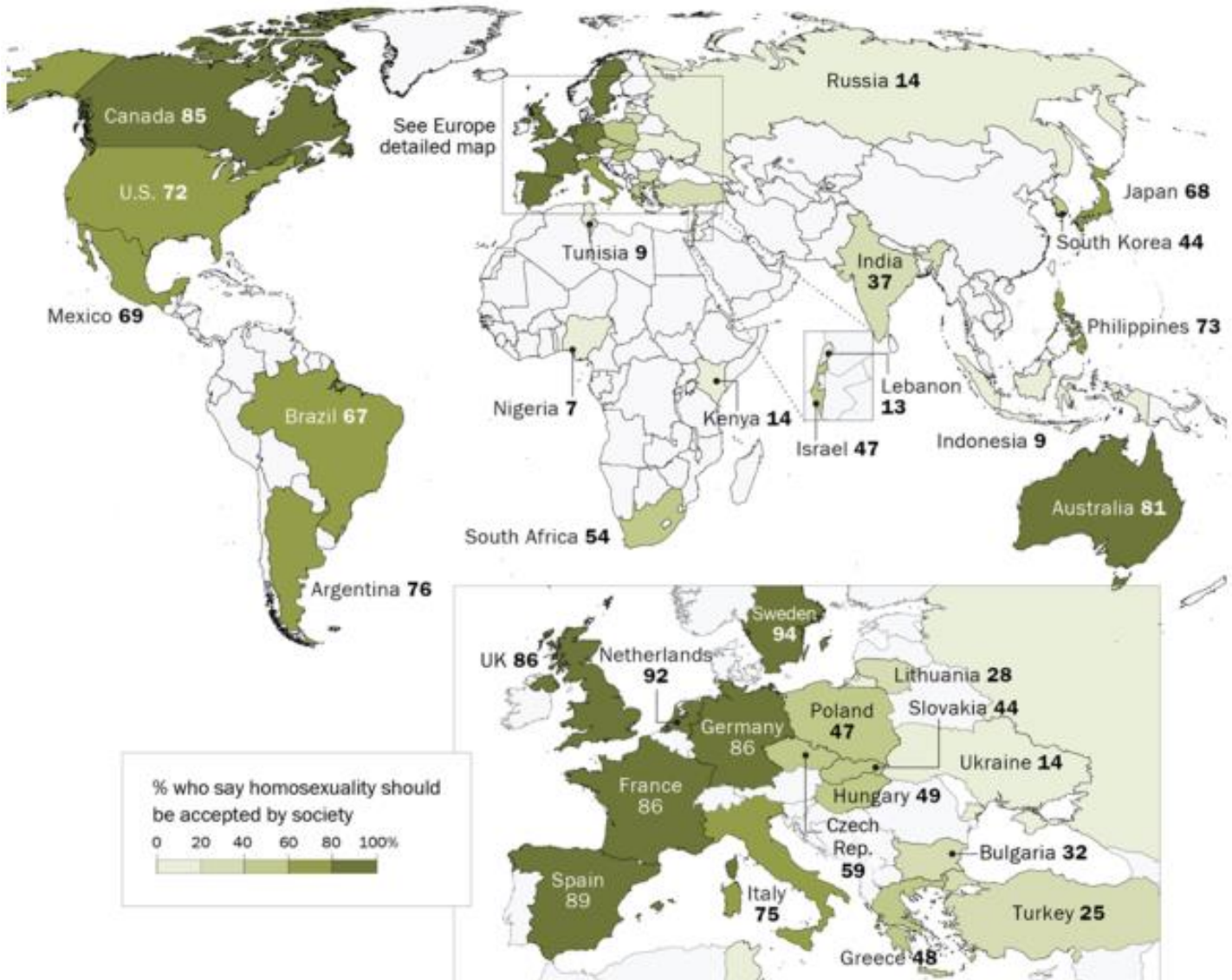
# ACCEPTANCE

Yes, there is a growing acceptance...BUT:

- 28% of Americans still believe "homosexuality" should not be socially accepted
- 58% LGBTQI have reported being the subject of jokes
- 26% have reported being threatened or physically attacked

# The global divide on acceptance of homosexuality

% who say homosexuality *should* be accepted by society



Source: Spring 2019 Global Attitudes Survey, Q31.

PEW RESEARCH CENTER



# HEALTH PROFESSIONALS

**1973:** Homosexuality was removed from DSM

**2000:** American Psychiatric Association officially opposed reparative therapy

**2015:** National Transgender Survey, 19 % denied medical treatment due to transgender status





# COMMENTS FROM LESBIAN PATIENTS

## What patients have to say...

"Please, please, don't assume that I'm straight. If you ask me a question- like "Do you have a boyfriend?", it makes me feel invisible and I don't want to talk to you anymore."

"I can't tell you how many times the only question I've been asked about sex is: 'what are you using for contraception?' I'm a lesbian, and I don't need birth control."



# WHAT DO PATIENTS WANT?

Patients often wonder if they should come out to their healthcare provider

They want an environment inclusive of LGBTQ+ people

LGBTQ+ patients want to discuss their concerns with their provider





# **LAYING THE FOUNDATION FOR TRUST**



# **CREATING INCLUSIVE CLINICAL ENVIRONMENTS**

A woman sits down to fill out  
a registration form.

She is in a long-term relationship,  
but is not legally married.

# TYPICAL HISTORY INTAKE FORM

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Race: \_\_\_\_\_ Gender: M F

Marital Status:  Married  Single  Widowed  Divorced  Legally separated

Purpose of your visit today:

---

---

## Medication List:

Please list all medications you are taking, including nonprescription drugs, vitamins and herbals.

Medication name: \_\_\_\_\_ Dose: \_\_\_\_\_ How often: \_\_\_\_\_

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# SUGGESTED HISTORY INTAKE FORM

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Race: \_\_\_\_\_ Gender: M F Other \_\_\_\_\_

Current Relationship Status: \_\_\_\_\_

- Or:
- Single
  - Married
  - Domestic Partnership/Civil Union
  - Partnered
  - Involved with multiple partners
  - Separated from spouse/partner
  - Divorced/permanently separated from spouse/partner
  - Other: \_\_\_\_\_

Purpose of your visit today:

---

---

## Medication List:


Please list all medications you are taking, including nonprescription drugs, vitamins and herbals.

Medication name:	Dose:	How often:
_____	_____	_____
_____	_____	_____
_____	_____	_____



# **CREATING INCLUSIVE CLINICAL ENVIRONMENTS**

A woman is hospitalized with pneumonia and develops fever.



# 2-STEP GENDER IDENTITY & BIRTH SEX QUESTIONS

What is your current gender identity? (Check all that apply)

- Male
- Female
- Transgender male/Trans man/ FTM
- Transgender female/Trans woman/MTF
- Genderqueer
- Other (please specify): \_\_\_\_\_
- Decline to answer

What sex were you assigned at birth?

- Male
- Female
- Decline to answer

Do you have a name you prefer to be called that is different from the name listed on your patient registration form? \_\_\_\_\_

What is/are your gender pronoun(s)? \_\_\_\_\_



# SEXUAL ORIENTATION

Do you think of yourself as:

- Lesbian or gay
- Straight or heterosexual
- Bisexual
- Queer/Questioning
- Something else



# CREATING INCLUSIVE CLINICAL ENVIRONMENTS



Our physicians and staff support the American Medical Association nondiscrimination policy, in that:

This office appreciates the diversity of human beings and does not discriminate based on race, age, religion, ability, marital status, sexual orientation, sex or gender identity.





# COMMON ASSUMPTIONS TO AVOID

- Don't assume a person exploring their sexual orientation has an immediate need to establish as gay, straight or bisexual
- Don't assume that all LGBTQ+ people are sexually active
- Don't assume that sexual behavior will remain the same
- Don't assume a person's sexual orientation tells you everything about their sexual behavior





# TALKING ABOUT GENDER IDENTITY

## Communicate that this is a safe space:

- My name is Lis. I am a PA and my pronouns are she/her/hers.
- What are your pronouns?
- Have you had any gender-affirming surgeries?  
(Don't say, "What gender affirming surgeries have you had?")
- What is your gender identity?
- I have not heard of that gender identity before. Can you tell me about it?
- How would you like for me to refer to you in my documentation for today's visit?

## Broaching the subject:

- Is there anything about you that I should know for our conversation today?
- Have you ever gone by any other names?  
(especially important for thorough chart review)
- I noticed in my chart review that you have started transitioning.
  - What can you tell me about your transition so far?
  - How has your transition been going?
  - What has your transition included up to now?

## Remember:

- Social transitions are outward displays of one's gender identity.
- If someone has started a social transition then they are most likely willing to talk openly about it if they feel that they are in a safe environment.



# Gender Pronouns

Please note that these are not the only pronouns. There are an infinite number of pronouns as new ones emerge in our language. Always ask someone for their pronouns.

Subjective	Objective	Possessive	Reflexive	Example
She	Her	Hers	Herself	She is speaking. I listened to her. The backpack is hers.
He	Him	His	Himself	He is speaking. I listened to him. The backpack is his.
They	Them	Theirs	Themselves	They are speaking. I listened to them. The backpack is theirs.
Ze	Hir/Zir	Hirs/Zirs	Hirself/ Zirself	Ze is speaking. I listened to hir. The backpack is zirs.

t [transstudent.tumblr.com](https://www.tumblr.com/transstudent)

f [facebook.com/transstudent](https://www.facebook.com/transstudent)

For more information,  
go to [transstudent.org/graphics](https://transstudent.org/graphics)

**TSER**

# GENDER INCLUSIVE TERMS

GENDERED TERMS	AGENDER/GENDER-INCLUSIVE TERMS
<p><b>Mom/Dad/Mother/Father/ Mama/ Papa</b></p> <p>Sounds Like: <i>How's mom feeling today?</i>            Sounds Like: <i>I need Dad to step out of the room for the epidural.</i>            Sounds like: <i>After birth, you will be moved to the "Mother and Baby" Unit</i>            Sounds like: <i>Who is the Father of the child?</i></p>	<p><b>Chosen name of the person, Patient, Birth/Non-Birth Parent, Gestational/Surrogate/Bio/Genetic Parent, Guardian, Caregiver, *let the child create a unique parent name</b></p> <p>Sounds like: <i>Hello, (Name), how are you feeling today?</i>            Sounds like: <i>Who is the parent that will be giving birth?</i>            Sounds like: <i>Please specify on the birth certificate/ pre-birth order who is the gestational parent/ surrogate.</i></p>
<p><b>Husband/Wife</b></p> <p>Sounds like: <i>Will your husband be here for the ultrasound?</i>            Sounds like: <i>Is your wife the caregiver?</i></p>	<p><b>Coach or Birth Partner, Parent, Partner, Spouse, Significant Other, Co-parent(s), Endearment Terms (when appropriate, i.e. honey, sweetie, love, etc.),</b></p> <p>Sounds like: <i>Will any co-parents be present for prenatal office visits?</i>            Sounds like: <i>Sometimes it helps if a birth partner can offer the person in labor a massage</i></p>

<b>Aunt/Uncle</b>	<b>Parent's sibling, Cousin (Often used if close in age.) Untie/Untey, Auntie, Auntle, etc.</b>
<b>Grandma/Grandpa</b>	<b>Grandparent/s</b>
<b>Niece/Nephew</b>	<b>Nibling, Neifling, Sibkid, Cousin</b> (Often used if close in age.) Sounds like: <i>Do you want your niblings</i>
<p><b>Maternity/Paternity</b></p> <p>Sounds like: <i>Are you still on maternity leave? Cute Maternity clothes!</i>            Sounds like: <i>Where is the Maternity Unit?</i></p>	<p><b>Parenthood, Natality, Parental, Pregnancy, Gestation, Gestating, Creating</b></p> <p>Sounds like: <i>Are you still on parental leave? I like your outfit! How is your pregnancy going, Alex?</i>            Sounds like: <i>After birth we will move the baby and parents to the Postpartum Unit.</i></p>
<p><b>Vagina/Penis, Uterus, Cervix Prostate (etc.)</b></p> <p>(spoken in manner that includes gender identity labels.)</p> <p>Sounds like: <i>We may need to do a pelvic exam to collect cells from your cervix, are you ok with that?</i>            (does not) Sound like: (Mis/Degendering) <i>Her vagina is stretching during the birth,</i>            (when client is a male-identified person/ trans man)</p>	<p><b>Genitals, Patient-named</b> (i.e. "front hole" for TG man, etc.)</p> <p>Sounds like: <i>What would you prefer for me to call your genitals when we are speaking about them during this time?</i>            (or)            Sounds like: <i>How would you like me to refer to your body or anatomy?</i></p>



# 5

## THINGS YOU SHOULD KNOW ABOUT TRANS PEOPLE

1

NOT ALL TRANS PEOPLE IDENTIFY AS MALE OR FEMALE. TRANS PEOPLE HAVE ALL SORTS OF DIFFERENT IDENTITIES OUTSIDE THE GENDER BINARY.



2

TRANS FOLKS ACTUALLY HAVE MANY DIFFERENT SEXUAL ORIENTATIONS. GENDER IDENTITY AND SEXUAL ORIENTATION ARE SEPARATE SPECTRA. LEARN MORE AT: [WWW.TRANSSTUDENT.ORG/GENDER](http://WWW.TRANSSTUDENT.ORG/GENDER)



TRANS PEOPLE LED THE STONEWALL RIOTS. SYLVIA RIVERA AND MARSHA P. JOHNSON WERE TWO AMONG MANY TRANS WOMEN OF COLOR WHO WERE ON THE FRONT LINES.

3

4

NOT ALL TRANS PEOPLE WANT SURGERY AND EVEN FEWER GET SURGERY.



THE WORD TRANSGENDER WAS POPULARIZED BY ACTIVIST VIRGINIA PRINCE IN 1969. SHE FIRST PUBLISHED THE WORD IN THE DECEMBER 1969 ISSUE OF "TRANSVESTIA".

5

t transstudent

f /transstudent

@transstudent

FOR MORE INFORMATION,  
GO TO [TRANSSTUDENT.ORG/GRAPHICS](http://TRANSSTUDENT.ORG/GRAPHICS)

**TSER**  
Trans Student Educational Resources

DESIGN BY LANDYN PAN



# 7 ways to be a good trans ally



## Use their chosen pronouns and name at all times

Reality check: what you think their pronouns should be and whether you agree with their name change does not matter a single bit. Trans people deserve respect. Use the name and pronouns that they tell you to use.



## Listen more; speak less

The trans\* community is really diverse and what you see in the media about trans\* people is not representative of all trans\* people in the world. Listen to what trans\* people are saying and respect their lived experiences.



## Educate yourself and others; call out transphobia

One of the best ways to break down prejudice and encourage acceptance is by learning and sharing about gender and identity. Transphobia in society can take many forms including jokes, insensitive remarks, violence and abuse. Stand up for trans\* people by calling it out.



## Don't be defensive

You're a great person, but there are times when you too make mistakes. Own it, reflect, learn and move on. That's how life should be.



## Stop asking inappropriate questions

Questions such as "what is your real name?" and "are you really a man or a woman?" are a no-no, as are questions about genitals. Such questions are rude, intrusive and insensitive. You would not ask such questions of cisgender people, so why would you pose them to trans\* people?



## Be inclusive; don't segregate

Being a good trans\* ally starts with recognizing that trans\* people have as much right to use public facilities and be in public spaces as you do. Harassment of trans\* people in bathrooms is very real. Offering to accompany a trans\* person to use a bathroom is a good step, but respect their choice to accept or decline your offer.



## Do not "out" anybody

Disclosing an individual's identity for them can lead to serious consequences such as eviction, being dismissed from one's job, expulsion from school and violent attacks. Allow the person to disclose their own identity only when they feel ready to do so. Transitioning is a personal journey, not a path set in stone. Choosing not to take hormones or undergo surgery does not make a person less trans\*.



# HOW YOU CAN BE BETTER

- Don't assume
- Don't judge
- If you don't know, ask!



# BECOME AN ALLY

Consider joining:

Gay Lesbian Medical Association (GLMA)

Provider Directory ([www.glma.org](http://www.glma.org))

Show your support by updating your provider profile and clinic web page

# RESOURCES

- <http://www.transhealth.ucsf.edu/>
- <http://www.cdc.gov/std/tg2015/default.htm>
- <http://www.lgbthealtheducation.org/>
- <http://www.lgbthealtheducation.org/lgbt-education/lgbt-health-resources/>
- <https://www.prideinpractice.org>
- <http://www.transpeoplespeak.org/>

# RESOURCES

TABLE VII

## Resources About LGBT Health

Name	Website
Services and Advocacy for Gay, Lesbian, Bisexual & Transgender Elders (SAGE)	<a href="http://www.sageusa.org">www.sageusa.org</a>
Gay and Lesbian Medical Association (GLMA)	<a href="http://www.glma.org">www.glma.org</a>
American Society on Aging (ASA) LGBT Aging Resources Clearinghouse	<a href="http://www.asaging.org/larc">www.asaging.org/larc</a>
National Gay and Lesbian Task Force	<a href="http://www.thetaskforce.org/issues/aging">www.thetaskforce.org/issues/aging</a>
Gay, Lesbian, Bisexual, and Transgender (GLBT) Health Access Project	<a href="http://www.glbthealth.org">www.glbthealth.org</a>
National Coalition for LGBT Health	<a href="http://www.lgbthealth.net">www.lgbthealth.net</a>
CenterLink (formerly The National Association of Lesbian, Gay, Bisexual and Transgender Community Centers)	<a href="http://www.lgbtcenters.org">www.lgbtcenters.org</a>
My Right Self	<a href="http://www.MyRightSelf.org">www.MyRightSelf.org</a>
Human Rights Campaign	<a href="http://www.hrc.org/issues/aging.asp">www.hrc.org/issues/aging.asp</a>
Vancouver Coastal Health Transgender Health Program	<a href="http://www.vch.ca/transhealth">www.vch.ca/transhealth</a>
<i>The Fenway Guide to Lesbian, Gay, Bisexual and Transgender Health</i> <sup>10</sup>	<a href="http://www.acponline.org/atpro/timssnet/catalog/books/fenway.htm#TOC">www.acponline.org/atpro/timssnet/catalog/books/fenway.htm#TOC</a>

Abbreviation: LGBT, lesbian, gay, bisexual, and transgender.



# REFERENCES

- Centers for Disease Control and Prevention (CDC). (2014, March 14). Likely Female-to-Female Sexual Transmission of HIV-Texas 2012. *MMWR*. Morbidity and Mortality Weekly Reports. Retrieved from <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6310a1.htm>
- Eckstand, K.L., & Ehrenfeld, J.M. (2016). *Lesbian, Gay, Bisexual, and Transgender Healthcare*. Springer International Publishing Switzerland.
- Makadon, H. J., Mayer, K. H., Potter, J., & Goldhammer, H. (Second Edition). *Fenway guide to lesbian, gay, bisexual, and transgender health*. Philadelphia, PA: American College of Physicians.