

LGBT Communities in Minnesota

Increasing the cultural competence of health care providers serving diverse populations

In order to provide equitable and effective health care, clinicians need to be able to function effectively within the context of the cultural beliefs, behaviors, and needs of consumers and their communities.



According to the Office of Minority Health, lesbian, gay, bisexual, and transgender (LGBT) people have limited access to health care services and insurance, and face unique health challenges. Inadequate health care and inadequate health insurance often leads to negative health outcomes and life-long health problems for people in the LGBT community.¹

Research also suggests that these negative outcomes may be due to a lack of cultural competence in the health care system, which can be expressed in an unwelcoming and negative attitude expressed by staff toward people in this community. Also important for this community, for example, are medical programs that provide insurance coverage for sexual reassignment surgery and hormone therapy.

Unique Health Challenges

Health issues can often go undetected for this population. For example, data show that lesbian and bisexual women receive less routine care than other women, including breast and cervical cancer screening. It is important for LGBT people to feel welcome and comfortable enough to seek care and routine health screenings, and for health care providers to be positive and tolerant of sexual and gender diversity. Providers and staff are encouraged to recognize that gender nonconformity is not a disorder.

Providers also need to know about the illnesses and health issues prevalent among lesbian, gay, bisexual, and transgender people. For example, more than half of new HIV infections in the U.S. each year are found in bisexual men, and HIV prevalence among transgender women is over 25 percent. And, nearly 30 percent of LGBT youth report having been physically abused by family members because of their sexual orientation or gender identity.²



Stratis Health is a nonprofit organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.

Stratis Health works with the health care community as a quality improvement expert, educational consultant, convenor, facilitator, and data resource.

Lesbian, gay, bisexual, and transgender (LGBT) people often have limited access to health care services and insurance.

Inadequate care and inadequate health insurance often lead to negative health outcomes and life-long health problems for people in the LGBT community.

Health Data Collection: The First Step to Improving Care for LGBT Populations

A 2011 Institute of Medicine report, *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding*, recommends data collection of gender identity and sexual orientation on federally supported surveys.

The report outlines a research agenda and identifies gaps and opportunities related to LGBT health. It also provides guidance to state Medicaid agencies on financial protections for same-sex couples and rules requiring hospitals to protect patients' right to choose their own visitors during a hospital stay, including a same-sex domestic partner.

In 2013, the Department of Health and Human Services began collecting data for identification of health issues and reduction of health disparities among lesbian, gay, bi-sexual, and transgender populations. Under Section 4302 of the Affordable Care Act, federally conducted or supported health care or public health programs, activities, or surveys are required to collect and report demographic data related to designated health disparities. Questions about sexual orientation and gender identity will be integrated into the National Health Interview Survey. Many researchers, including the Williams Institute at the University of California Los Angeles and the Center for Population Research in LGBT Health at the Fenway Institute have been working on such data collection for several years.

In addition to demographic data collection, in 2012, the National Coalition for LGBT Health and the Rainbow Access Initiative began offering opportunities for LGBT consumers to tell their personal health care stories. The collection of stories by LGBT consumers who have previously been left out of the health care conversation, will then be available online. Information collected will be used to improve LGBT health care. Contributors are asked to respond to the following questions:

- What was your best and worst health care experience?
- Where do you go for your medical care?
- What are your big health care hurdles?
- When did you come out to your health care provider?
- How LGBT culturally competent are your health care providers?
- What would improve your health care experience?
- If you don't have health insurance, what do you do for medical care?³

Health Care for the Transgender/Transexual Population

Within the LGBT population, are a variety of individuals often referred to as transgender whose behaviors tend to vary from conventional gender roles—cultural and social norms generally accepted as appropriate for either a man or a woman in an interpersonal relationship.

Transgender can refer to gender identity or self-identification as a woman, man, or both—although not corresponding to the physical sex assigned at birth (based on genitals). Transgender people may consider conventional terms of sexual orientation inadequate to describe them. Rather, they may identify anywhere on a transgender continuum as heterosexual, homosexual, bisexual, pansexual (all sexual identities), polysexual (many sexual identities), or asexual.

In order for health care professionals to understand how to provide the most effective, culturally competent care for transgender people, the World Professional Association for Transgender Health (WPATH) recently released the seventh revised edition of Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People (SOC). SOC was first published in 1979. SOC is viewed as the standard of reference on caring for the transsexual, transgender, and gender nonconforming population and offers detailed clinical guidelines to address the unique needs of children, adolescents, and adults who require psychological, hormonal, or surgical care. SOC Committee Chair Eli Coleman, PhD, is a Professor and Director of the Program in Human Sexuality at the University of Minnesota.

WPATH promotes evidence-based care, education, research, advocacy, public policy, and respect in transgender health. It recognizes that well-being requires a social climate that eliminates prejudice, discrimination, and stigma, and promotes a positive and tolerant society that embraces sexual and gender diversity.⁴

LGBT Resources

- **Centers for Disease Control and Prevention.** Resources on health inequities and issues affecting LGBT communities. <http://www.cdc.gov/lgbthealth/about.htm>
- **Gender Education Center.** A Minnesota nonprofit corporation dedicated to support, advocacy, and education related to differently gendered people. <http://www.debradavis.org/gecpage/indexgec.shtml>

- ♦ **GLBT National Help Center.** A national nonprofit organization meeting the needs of the GLBT community and those questioning their sexual and gender identity. <http://www.glnh.org/index2.html>
- ♦ **GLBTA Programs.** The Gay, Lesbian, Bisexual, Transgender, Ally (GLBTA) Programs Office for Diversity and Equity at the University of Minnesota. <https://diversity.umn.edu/glbta/>
- ♦ **“The Importance of LGBT Health on a Global Scale.”** An article by Nils Dauilaire, MD, MPH, U.S. Department of Health and Human Services. http://online.liebertpub.com/doi/full/10.1089/lgbt.2013.0008#utm_source=PR&utm_medium=email&utm_campaign=LGBT
- ♦ **Out with Cancer.** A social network for LGBT men and women who have been diagnosed with cancer. Contact support@outwithcancer.com.
- ♦ **Minnesota Transgender Health Coalition.** A coalition committed to improving health care access and quality for trans and gender nonconforming people. <http://www.mntranshealth.org/>
- ♦ **Rainbow Health Initiative.** A Minnesota nonprofit organization whose mission is to advance the health and wellness of lesbian, gay, bisexual, transgender, and queer communities through education, research, and advocacy. <http://www.rainbowhealth.org/rhi2/>
- ♦ **Transgender Health Services.** University of Minnesota Family Medicine and Community Health provides health and psychological services for the transgender community. <http://www.med.umn.edu/fm/phs/clinic/transgender/home.html>
- ♦ **Trevor Project.** A national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, and questioning youth. <http://www.thetrevorproject.org/>
- ♦ **LGBT Health.** A peer reviewed journal dedicated to promoting optimal health care for sexual and gender minority persons. http://www.liebertpub.com/lgbt#utm_source=PR&utm_medium=email&utm_campaign=LGBT

Sources

¹Office of Minority Health, <http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlid=208>, viewed October 25, 2012

²Improving Data Collection for the LGBT Community, http://minorityhealth.hhs.gov/assets/pdf/checked/1/Fact_Sheet_LGBT.pdf, viewed October 14, 2012

³National Coalition for LGBT Health, <http://lgbthealth.webrevolutionary.com/about>, viewed October 05, 2012

Stratis Health has a long record of success in reducing health disparities among communities of color and underserved populations. Our efforts to reduce health disparities include increasing the cultural competence and effectiveness of providers serving culturally diverse populations, improving health literacy in the community, and working with specific populations on targeted clinical conditions.

Culture is essential in assessing a person’s health and well-being. Understanding a patient’s practice of cultural norms can allow providers to quickly build rapport and ensure effective patient-provider communication. Efforts to reduce health disparities must be holistic, addressing the physical, emotional, and spiritual health of individuals and families. Also important is making connections with community members and recognizing conditions in the community.

Get to know your patients on an individual level. Not all patients from diverse populations conform to commonly known culture-specific behaviors, beliefs, and actions. Generalizations in this material may not apply to your patients.

WWW.CULTURECARECONNECTION.ORG

Culture Care Connection is an online learning and resource center dedicated to supporting Minnesota’s health care organizations in their ongoing efforts to provide culturally competent care. Funding to support Culture Care Connection has been provided by UCare.

Contact us for assistance with your quality improvement and patient safety needs related to reducing health care disparities.



2901 Metro Drive, Suite 400
Bloomington, MN 55425-1525

(952) 854-3306 telephone

(952) 853-8503 fax

1-877-STRATIS (1-877-787-2847) toll-free

info@stratishealth.org

(2/13)