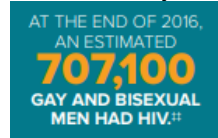


LGBTQ+ Health: Why Does It Matter to All of U.S.?

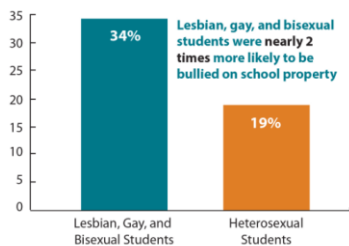
HEALTH DISPARITIES LGBTQ+

- ACS: Lesbians and bisexual women have **higher rates** of breast cancer than heterosexual women
- CDC 2017: Gay men disproportionately affected by HIV



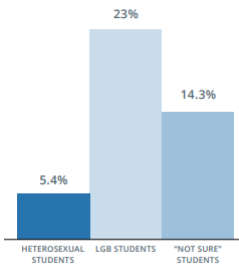
- CDC 2016: LGBTQ school youth bullied
34% LGBTQ vs. 8% of heterosexual students

Percentage of high school students who were bullied on school property



Source: CDC Morbidity and Mortality Weekly Report "Sexual Identity, Sex of Sexual Contacts, and Health-Related Behaviors Among Students in Grades 9-12, 2015"

- CDC 2017: Attempted youth **suicides by sexual identity**
5.4% heterosexual; 23% LGBT; 14.3% unsure



Source: Kann et al. 2018

WHY IS LGBTQ+ HEALTH IMPORTANT TO ALL?

Health disparities, inequalities, and inequities in vulnerable populations affects us all. Historically, minority populations that experience health inequities have negative health outcomes. LGBTQ+ persons are diverse and heterogeneous, experience the same diseases and conditions as the broader society, yet face additional unique health challenges. There are significant health disparities between LGBTQ+ and other demographics and are considered a vulnerable population.

LGBTQ+ BARRIERS TO CARE:

- Psychosocial barriers
- Exclusion from a partner's health insurance
- Mismatch between LGBTQ+ needs and services available
- Healthcare provider-related discrimination
- 1 in 3 transgender patients report being refused care



LAWS & ETHICS

Code of Ethics for Nurses: Provision 1.1 "The need for and right to health care is universal, transcending all individual differences."

2010 HHS: Hospitals not permitted to deny visitation privileges based on sexual orientation

2010 ACA: Section 1557 - First federal civil rights law to prohibit discrimination based on sex in healthcare

2010 HHS: retained policy to defer MSM as blood donors.

2011 OMH: ACA Section 4302

Requires Secretary of DHHS establish data collection to include sexual orientation and gender identity

2011 JCAHO: Surveying LGBT-inclusive, non-discriminatory standards as a condition for accreditation

2011 IOM: defined LGBT populations and advocates for advancing a research agenda on LGBT health disparities

2013 OMH: published LGBT-inclusive enhanced National CLAS standards

2016 HHS: ACA Section 1557 OCR published final rule implementation, challenged and preliminary injunction issued prohibiting enforcement

2016: H.R. 5373 (114th) LGBT Data Inclusion Act not enacted

2019 HHS: ACA Section 1557 revised to remove protections against discrimination based on gender identity with final public comment on Federal register 8/2019. Court hearing pending.

NATIONAL LGBT HEALTH INITIATIVES

- 2010: HHS first national older LGBT resource center
- 2010: Healthy People 2020 - LGBT-specific health goals
- 2011: NIH / IOM Report: The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a foundation for better understanding
- 2012: HHS outlined LGBT issues objectives for 2011 & 2012
- 2012: IOM Workshop – collecting sexual orientation and gender identity data in Electronic Health Records
- 2013: Healthy People 2020 - Health disparities data available based on sexual orientation

LOOKING AHEAD: NATIONAL, STATE & LOCAL POLICY

-Advocate and promote laws and policies towards reducing barriers and improving LGBTQ+ health

-Develop and implement policies that prohibit bias and discrimination based on sexual orientation, gender identity and expression

PRACTICE

-Understand the basic medical needs of LGBTQ+ patients

-Reduce barriers to discrimination and increase access to care and coverage

-Standardized competencies for LGBTQ+ health for healthcare professionals and healthcare organizations

EDUCATION

-Increase LGBTQ+ awareness and education in universities, healthcare, research, and policy towards equitable and culturally competent care

RESEARCH

-Health research and surveys should include sexual orientation and gender identity to identify health care needs and discrimination

-Federal funding to continue research of LGBTQ+ populations aimed at improving health and wellness

-Engage in best practices towards collecting and using sexual identity and sexual orientation data towards providing appropriate clinical and culturally appropriate care.

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