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# LGBTQ+ Health: Creating a Welcoming Environment in the Primary Care Office

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# LGBTQ+ Health:

*Creating a Welcoming Environment in  
the Primary Care Office*

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Chester, VT

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# 2. Problem Identification & Description of Need

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## LGBTQ+ patients are at increased risk for discrimination and poor health outcomes

Healthy People 2020<sup>1</sup>:

- LGBT youth are more likely to be **homeless** and/or attempt **suicide**
- Lesbians are less likely to get preventive services for cancer
- Gay men are at higher risk of HIV and other STDs, especially among communities of color
- Lesbians and bisexual women are more likely to be overweight or obese
- LGBT populations have the highest rates of tobacco, alcohol, other drug use

Lambda Legal's Survey on Discrimination Against LGBT People and People Living with HIV, 2010<sup>2</sup>:

- More than half of all respondents reported that they experienced discrimination in health care
  - **8%** of LGB respondents and **27%** of transgender respondents had been outright **denied care**

## LGBTQ+ patients need health professionals who are trained to meet their needs

- Many LGBTQ+ patients have had bad past experiences with the health care system
- Creating a welcoming clinical environment is an important component of **culturally competent care**

# 3. Cost

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In Vermont, **4.9%** of people identify as lesbian, gay, bisexual, or transgender<sup>3</sup>

- LGBT people are at high risk to use tobacco, alcohol, and other drugs
- LGBT youth are 2-3 times more likely to attempt suicide
- Gay men and transgender people are at higher risk of HIV and other STDs

**Nationally:**

- Annual health cost of tobacco, alcohol and other drugs: **\$130 billion**, **\$25 billion**, and **\$11 billion**, respectively<sup>4</sup>
- Suicide costs society over **\$44.6 billion** a year in combined medical and work loss costs<sup>5</sup>
- The average suicide costs **\$1,164,499**<sup>5</sup>
- The lifetime treatment of an HIV infection is estimated to cost **\$379,668**<sup>6</sup>

**Culturally competent care** increases **cost savings** by reducing medical errors, number of treatments, legal costs, and missed medical visits<sup>7</sup>

# 4. Community Perspective and Support for Project

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“When we bring our youth to the walk-in clinic, it can be traumatizing. Many of them have had **negative experiences in hospitals**...Sometimes providers are uneducated about being trauma-informed and sensitive.”

*-Tara Chase, Windsor County Youth Services*

The doctor startled me by lifting up my shirt to check for scoliosis **without telling me or giving any warning**. It made me really uncomfortable. I generally like knowing what the doctor is about to do.”

*-Local LGBT young adult*

“**As a professional I have never encountered or been offered LGBTQ friendly documents or trainings**... I am saddened to say I have worked with people who are so uncomfortable and uneducated that when talking about transgender clients they referred to them as ‘**she-he’ ‘he-she’ or ‘it.’**”

*-Local health care professional*

“When a nurse comes out and calls you by your birth name, yet your appearance is more in-line with your preferred name, it makes people take a second look. This makes for a very **uncomfortable situation** that could have easily been avoided...

...Outright Vermont is a great organization with a lot of information and support groups, however they are located in Northern Vermont. **There is very little support in Southern Vermont.**”

*-Parent of local LGBT patient*

# 5. Intervention and Methodology

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## Objectives

- Illustrate discrimination and poor health outcomes in the LGBTQ+ population
- Discuss importance of culturally competent care
- Discuss importance of identifying language
- Discuss concepts of gender and sexuality
- Discuss strategies for creating a welcoming environment for LGBTQ+ patients

## Methods

- Gather community perspective
- Gather information on LGBTQ+ health needs and disparities from multiple sources
- Create a **PowerPoint presentation** with focus on creating an approachable discussion of the importance of culturally competent care for LGBTQ+ patients
- Share presentation with office staff at Chester Family Medicine, Springfield Community Health Team, Windsor County Youth Services, Health Care & Rehabilitation Services of Vermont



# 7. Evaluation of Effectiveness & Limitations

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## Proposed Evaluations:

- Pre- and post-presentation **quizzes** for health care professionals and office staff
- Survey LGBTQ+ patients regarding their **satisfaction** with the health care provided

## Limitations:

- Although additional resources are provided, individuals working through the resource as a module do not receive the same **immediate feedback and answers to questions** as those participating in the presentation (with live presenter) version of the material
- As LGBTQ+ related language is constantly evolving, the discussion on identifying language focused on concepts rather than particular definitions
- There is no central location for providers and health centers to access LGBTQ+ resources and trainings in **Southern Vermont**

# 8. Future interventions/projects

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## Continue **expanding** training efforts

- Distribute copies of the presentation to additional Family Medicine practices, as well as Psychiatry and Pediatrics
- Train individuals in the community to lead discussion of presentation
- Create similar training modules for schools, other community organizations
- Create modules that go into an intermediate level of detail, **building** on the basics of this module

**Reach out** to the LGBTQ+ community in the area, build stronger ties between health care providers and LGBTQ+ patients

## Continue creating more LGBTQ+ resources in **Southern Vermont**

- Interest in support groups for families with transgender and gender-expansive children

# 9. References

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2. When Health Care Isn't Caring: Lambda Legal's Survey on Discrimination Against LGBT People and People Living with HIV  
[https://www.lambdalegal.org/sites/default/files/publications/downloads/whcic-report\\_when-health-care-isnt-caring.pdf](https://www.lambdalegal.org/sites/default/files/publications/downloads/whcic-report_when-health-care-isnt-caring.pdf)
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