

Session 2

Social Determinants Affecting LGBT Individuals: Addressing Exclusion of a Minority Population

Dr. Sherry Hendrickson has an active interest in public health applications to acute and chronically ill patients. She teaches both in the Public Health and Acute & Chronic care courses at UT Austin School of Nursing.

Ms. Kari McDonald is a PhD student at the University of Texas at Austin. She has been an educator for nine years and has a background in women's and children's health, and global health. Her primary dissertation focus is LGBT adolescents and mental health.

SOCIAL DETERMINANTS AFFECTING LGBT INDIVIDUALS: ADDRESSING EXCLUSION OF A MINORITY POPULATION

Sherry Hendrickson, PhD, APRN, ACNS-BC
Kari McDonald, MSN, RN
University of Texas at Austin School of Nursing
Acknowledging: David Walsh, MSN, RN, PMHNP-BC

GOALS

- Background: Social Determinants
 - Demographics
 - Health Concerns
 - Major Trends in LGBT Data
- Findings: Nursing School Survey
- Recommendations



LGBT
Lesbian Gay Bisexual Transgender

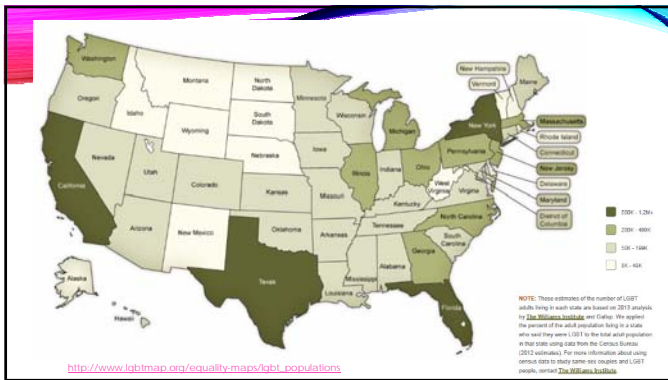
OBJECTIVES

- discuss the social determinants of health most directly related to LGBT populations
- explain how HP 2020 findings r/t social determinants are expressed as oppression & discrimination
- describe evidence-based practice to address inequities
- identify how you can increase culturally competency in professionals working with LGBT populations

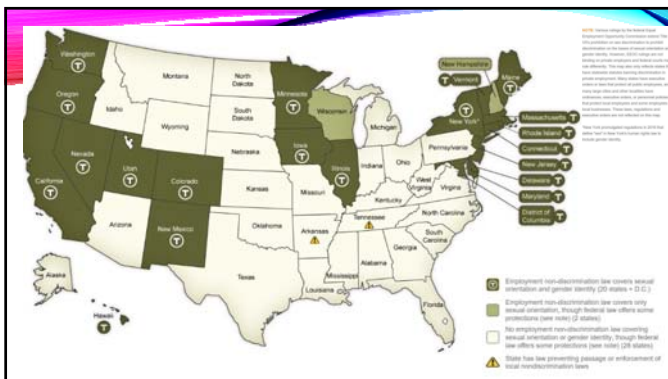
DEMOGRAPHICS

- United States
 - 8 million adults*
 - 5.1 million LGBT Women**
 - Adolescents
 - 40% are homeless***
- State of Texas
- LGBT Statistics
 - Transgender individuals

<http://williamsinstitute.law.ucla.edu/wp-content/uploads/Gates-How-Many-People-LGBT-Apr-2011.pdf> *
<http://www.lgbtmap.org/file/playing-an-unfair-price-lgbt-women.pdf> **
<http://www.houstonstateofhealth.org> ***



http://www.lgbtmap.org/equality-maps/lgbt_populations



HEALTH CONCERNS

- HIV, Syphilis, other STDs
- Lower SES
- Violence
 - Intimate partner violence
 - Society violence
- Mental Health
 - Suicide
 - Depression
- Lack of Access
- Tobacco Use

- LGBT Adolescents
 - Pregnancy
 - Homelessness
 - Survival Sex
- Societal Issues:
 - Stigma
 - Invisibility
 - Heterosexism
 - Institutional laws, social policies & religious beliefs

MAJOR TRENDS IN LGBT DATA

- High prevalence of HIV
 - Particularly young black men who have sex with men
- Suicidal ideation, suicide attempts, depression
- Higher alcohol and substance abuse
- Disproportionate number of LGB youth that are homeless

Institute of Medicine Committee. *The Health of Lesbian, Gay, Bisexual and Transgender People*. Washington, DC: National Academic Press: 2011. Summary.

GAPS IN THE RESEARCH LITERATURE

- Demographics
 - Bisexual
 - Subpopulations
- Social support and mental health
- Healthcare inequities
- Interventions
 - School based
- Transgender-specific health needs



<http://transhealth.ucsf.edu/tcoe?page=protocol-evidence>
<http://williamsinstitute.law.ucla.edu/#mapus>

Institute of Medicine Committee. *The Health of Lesbian, Gay, Bisexual and Transgender People*. Washington, DC: National Academic Press: 2011. Summary.

HP 2020 RECOMMENDATIONS

- Work on policies
 - Antibullying/antiharrasment in schools
- Better data collection
- Updated Healthcare
 - Include sexual orientation and gender identity
 - Ensure equal treatment and coverage
- Provider education
- Changes to healthcare systems
 - Electronic Health Records
 - Healthcare providers

TO BEGIN ADDRESSING THE SOCIAL DETERMINANTSWHAT ARE WE TEACHING, WHAT ARE WE BEING TAUGHT?

- 1/3rd of medical schools in US and Canada devote *zero* curriculum hours to LGBT-related content (Obedin-Maliver et al., 2011)
- As few as 10% of nursing students have even "basic knowledge regarding the care" of our transgender patients (Alegria, 2011)
- A 2010 review of the top-10 nursing journals (2005-2009) found ONE article – out of 4,941 - with the keyword "transgender." Just 8 of those 4,941 addressed LGBT content.

2015 SURVEY OF TEXAS NURSING SCHOOLS

- Of the 111 surveys distributed, 20 responses (18%) were received in 3-week period
- Limitations:
 - small sample size and a limited response rate
 - broad topic with far-reaching implications
 - generalizing the results of the survey to all nursing schools in Texas is not possible
 - nor whether respondents differed from non-respondents in any way, and, if so, how they might have differed

RESULTS

- 3 of 21 respondents (14.29%) report teaching nursing care for a gender-reassigned patient. Some examples offered were lab values, hormone therapy, prostate screens, pap smears, and post-operative SRS care.
- 3 of 20 respondents (15%) think that their students know a referral source for the transgender patient considering transition.
- 1 of 19 respondents (5.26%) think that their students know medical/surgical therapy options for transgender patients.
- None of 20 respondents (0%) report teaching the WPATH standards of care (formerly known as the Harry Benjamin guidelines).

RESULTS – CON'T

- 12 of 21 respondents (57.14%) report teaching the concept of gender identity.
- 10 of 21 respondents (47.62%) report addressing transgender or transsexual persons.
- 6 of 21 respondents (28.57%) report teaching the difference between the terms *transgender* and the outdated (and offensive) *transvestite* and *transsexual*.

RESULTS – CON'T

- 15 of 21 responses averaged 1.6 hours of LGBT content, with a median of 1.5 hours.
- Describe ways transgender education is presently, or could be, incorporated into their nursing curriculum:
 - 3 of 10 respondents replied that they did not think it could be.
 - 5 of 10 respondents replied that it is/could be, incorporated into mental health nursing.
 - 2 of 10 respondents replied that it would need to be a part of the NCLEX blueprint or an element of the curriculum's textbooks.

DISCUSSION

- The findings support research findings of multiple studies:
 - 1) There is "shortage of providers who are culturally competent in and knowledgeable about LGBT health" &
 - 2) Nursing & medical education content to be limited or lacking

There *is something YOU* can do. See this online training program!!!!

- <http://www.healthhiv.org/what-we-do/education-training/national-coalition-for-lgbt-health-lgbt-health-training-and-certificate-programtm/>

HP 2020 *NEW* RECOMMENDATIONS

LGBT-1.2 (dev) Increase number of population-based data systems used to monitor Healthy People 2020 objectives which collect standardized data that identify lesbian, gay and bisexual populations

LGBT-1.4 (dev) Increase number of population-based data systems used to monitor Healthy People 2020 objectives which collect standardized data that identify transgender populations

Teach Students & Collect SOGI Information in your Agency:

- SOGI = **Sexual Orientation** and **Gender Identity**: 2 important aspects of the human sexuality (Sexual Life). *Sexual Orientation* stands for who you're attracted to, while *Gender Identity* is who you are.

THE "2-QUESTION" IDENTITY VALIDATION

1. What is your sex or gender? (Check ALL that apply)


- (1) Male
- (2) Female
- (3) Transgender Male/Transman
- (4) Transgender Female/Transwoman
- (5) Genderqueer
- (6) Additional Sex or Gender: Please specify: _____
- (7) Unknown or Question Not Asked
- (8) Decline to State

2. What sex were you assigned at birth? (Check one)

- (1) Male
- (2) Female
- (3) Unknown or Question Not Asked

TAILORING HEALTHCARE OF TRANSGENDER CLIENTS

- Appropriate terminology & pronouns
- EBP Sources
 - UCSF <http://transhealth.ucsf.edu/trans?page=protocol-evidence>
 - HP 2020
- Referrals & advocacy:
 - Transgender Education Network of Texas
 - Ctr. of Excellence Transgender Hlth.
 - World Professional Association for Transgender Health (WPATH) Standards of Care





QUESTIONS?????



IT GETS BETTER PROJECT
WWW.ITGETSBETTER.ORG

<http://www.phillymag.com/g-philly/2015/03/05/top-lgbt-youth-centers-philadelphia-guide/>

REFERENCES

- Bostwick, W. B., Meyer, I., Aranda, F., Russell, S., Hughes, T., Birkett, M., & Mustanski, B. (2014). Mental Health and Suicidality Among Racially/Ethnically Diverse Sexual Minority Youths. *American Journal Of Public Health, 104*(6), 1129-1136.
- Bradford, J., & Mustanski, B. (2014, February). Health disparities among sexual minority youth: The value of population data. *American Journal of Public Health, 104*(2), 197. <http://dx.doi.org/10.2195/AJPH.2013.301818>
- Callahan, E. J., Hazanian, S., Yarborough, M., & Sanchez, J. P. (2014, September-October). Eliminating LGBTIQO health disparities: The associated roles of electronic health records and institutional culture. *Hastings Center Report, 34*(8-10), 348-352. <http://dx.doi.org/10.1002/hast.371>
- Centers for Disease Control and Prevention WISQARS. (2015). <http://www.cdc.gov/injury/wisqars/index.html>
- Fisher, C. B., & Mustanski, B. (2014). Reducing Health Disparities and Enhancing the Responsible Conduct of Research Involving LGBT Youth. *Hastings Center Report, 44*(28-31), 367. doi:10.1002/hast.367
- Gates, G. J. (2011). How many people are lesbian, gay, bisexual and transgender? Retrieved from <http://williamsinstitute.law.ucla.edu/research/census-lgbt-demographics-studies/how-many-people-are-lesbian-gay-bisexual-and-transgender/>
- Grossman AH, D'Augelli AR. Transgender youth and life-threatening behaviors. *Suicide & life-threatening behavior* 2007;37:527-537.
- Healthy People 2020. (2014). <http://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities>

REFERENCES CONTINUED

Hemick, A. L., Egan, J. E., Coulter, R. S., Friedman, M. R., & Stall, R. (2014). Raising Sexual Minority Youths' Health Levels by Incorporating Resiliencies Into Health Promotion Efforts. *American Journal Of Public Health, 104*(2), 206-210. doi:10.2105/AJPH.2013.301546

Institute of Medicine (US) Committee on Lesbian, Gay, Bisexual, and Transgender Health Issues and Research Gaps and Opportunities. *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding*. Washington (DC): National Academies Press (US); 2011. Summary. Available from: <http://www.ncbi.nlm.nih.gov/topics/NBK64799/>

Johnson, M. J., & Amella, E. J. (2014). Isolation of lesbian, gay, bisexual and transgender youth: a dimensional concept analysis. *Journal Of Advanced Nursing, 70*(3), 523-532. doi:10.1111/jan.12212

Lea, T., de Wit, J., & Reynolds, R. (2014). Minority stress in lesbian, gay, and bisexual young adults in Australia: associations with psychological distress, suicidality, and substance use. *Archives Of Sexual Behavior, 43*(8), 1571-1578. doi:10.1007/s10508-014-0266-6

Lesbian, Gay, Bisexual, and Transgender Health. (2014). Retrieved from <http://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health>

Marshall, M. P., Dietz, L. J., Friedman, M. S., Stall, R., Smith, H. A., McGinley, J., ... Brent, D. A. (2011). Suicidality and depression disparities between sexual minority and heterosexual youth: A meta-analytic review. *Journal of Adolescent Health, 49*(2), 115-123. <http://dx.doi.org/10.1016/j.jadohealth.2011.02.005>

REFERENCES CONTINUED

- Mayer, K. H., Bradford, J. B., Makadon, H. J., Stall, R., Goldhammer, H., & Landers, S. (2008, June). Sexual and gender minority health: What we know and what needs to be done. *American Journal of Public Health, 98*(6), 989-995. <http://dx.doi.org/10.1093/ajph.98.6.989>
- McAndrew, S., & Warne, T. (2012). Gay Children and Suicidality: The Importance of Professional Nurturance. *Issues In Mental Health Nursing, 33*(6), 348-354. doi:10.3109/01612840.2012.656821
- Mueller, A. S., James, W., Abrutyn, S., & Levin, M. L. (2015). RESEARCH AND PRACTICE. Suicide Ideation and Bullying Among US Adolescents: Examining the Intersections of Sexual Orientation, Gender, and Race/Ethnicity. *American Journal Of Public Health, 105*(5), 980-985.
- Mustanski, B., Birkett, M., Greene, G. J., Hatzenbuehler, M. L., & Newcomb, M. E. (2014). Envisioning an America Without Sexual Orientation Inequities in Adolescent Health. *American Journal Of Public Health, 104*(2), 218-225.
- Rew, L., Whittaker, T., Taylor-Seehafer, M., & Smith, L. (2005). Sexual health risks and protective resources in gay, lesbian, bisexual, and heterosexual homeless youth. *Journal For Specialists In Pediatric Nursing, 10*(1), 11-19 9p.
- Rew, L. (2001). Sexual health practices of homeless youth: a model for intervention. *Issues In Comprehensive Pediatric Nursing, 24*(1), 1-18 18p.

REFERENCES CONTINUED

- Russell ST, Joyner K. Adolescent sexual orientation and suicide risk: Evidence from a national study. *American Journal of Public Health* 2001;91:1276-1281.
- Saewyc, E. M. (2011). Research on adolescent sexual orientation: Development, health disparities, stigma, and resilience. *Journal of Research on Adolescence, 21*(1), 256-272. <http://dx.doi.org/10.1111/j.1532-7795.2010.00727.x>
- Spurr, S., Baily, J., Ogenchuk, M., & Walker, K. (2012, November-December). A framework for exploring adolescent wellness. *Pediatric Nursing, 38*(6), 320-326.
- Stone, D. M., Feijun, L., Lijing, O., Lippy, C., Hertz, M. F., & Crosby, A. E. (2014). Sexual Orientation and Suicide Ideation, Plans, Attempts, and Medically Serious Attempts: Evidence From Local Youth Risk Behavior Surveys, 2001-2009. *American Journal Of Public Health, 104*(2), 262-271.
- The Williams Institute, UCLA School of Law. (n.d.). <http://williamsinstitute.law.ucla.edu/mission/>
- van Bergen, D. D., Bos, H. W., van Lisdonk, J., Keuzenkamp, S., & Sandfort, T. M. (2013). Victimization and Suicidality Among Dutch Lesbian, Gay, and Bisexual Youths. *American Journal Of Public Health, 103*(1), 70-72.
- Walsh, D., & Hendrickson, S. (2015). Focusing on the "T" in LGBT: An online survey of related content in Texas nursing programs. *Journal of Nursing Education, 54*(6), 347-351.
- Williams, K. A., & Chapman, M. V. (2011). Comparing Health and Mental Health Needs, Service Use, and Barriers to Services among Sexual Minority Youths and Their Peers. *Health & Social Work, 36*(3), 197-206.
