



5 Steps Your Health Center Can Take To Address LGBT Health Disparities

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Presenter Information

Katie Douglas, LCSW-R

Director of Mental Health

kdouglass@Callen-Lorde.org

Gal Mayer, MD

Medical Director

gmayer@Callen-Lorde.org

Callen-Lorde Community Health Center

356 West 18th Street

New York, NY 10011

www.callen-lorde.org





Learning Objectives

1. Raise staff awareness about LGBT health disparities
2. Develop an LGBT-inclusive registration form
3. Take an LGBT-competent social and medical history
4. Cultivate a welcoming environment to LGBT patients
5. Identify and avoid common missteps in providing care to LGBT patients



Our Mission

Callen-Lorde Community Health Center provides sensitive, quality healthcare and related services primarily to New York's lesbian, gay, bisexual, and transgender communities – in all their diversity – regardless of ability to pay. To further this mission, Callen-Lorde promotes health education and wellness and advocates for gay, lesbian, bisexual, and transgender health issues.



Callen-Lorde's Services:

- Medical Care
 - Primary Care
 - Hormonal Therapy for Transgender Patients
 - Comprehensive HIV Care
 - Sexual Health Clinic/TG Sexual Health Clinic
 - Gynecologic Care
 - Alternative Insemination
 - Anal Cancer Screening and Prevention
- Oral Health (Dentistry)
- Mental Health
 - Psychotherapy and Psychiatry
 - New expanded license (Art 31) for seriously persistently mental ill



Callen-Lorde's Services:

- Stand-alone HIV Counseling and Testing
- Intensive Care Coordination/Case Management:
 - HIV-infected
 - Women
 - Transgender
- Adolescent Health (HOTT Program)
- Mobile Medical Unit

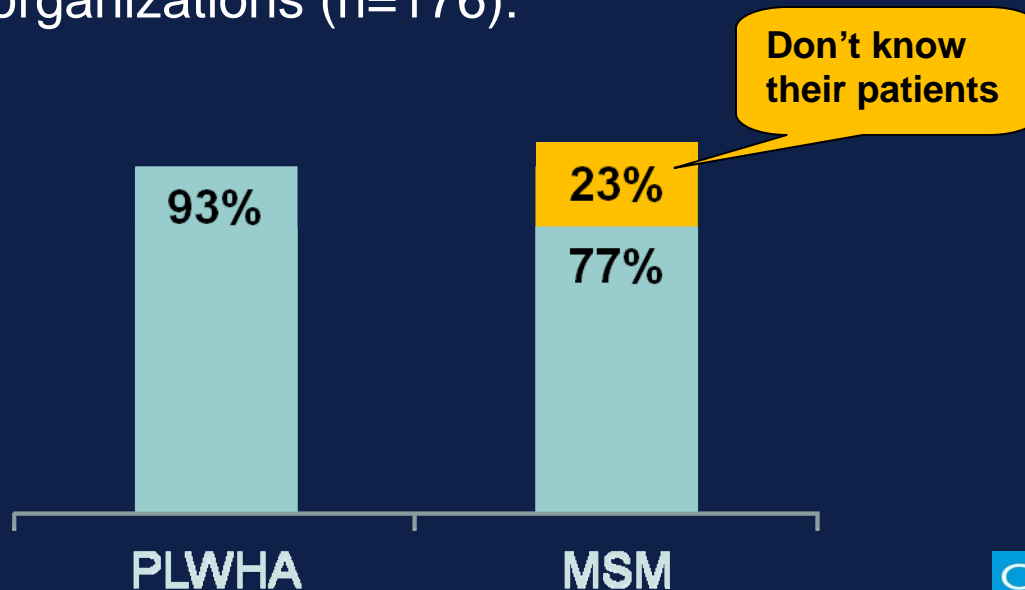


Basic Terminology

- Sexual Orientation:
 - LGB = Lesbian, Gay, Bisexual
 - SGL = Same Gender Loving
- Gender Identity
 - T = Transgender
 - I = Intersex
- Sexual Behavior:
 - MSM = Men who have sex w/ men
 - WSW = Women who have sex w/ women
- Q = Questioning

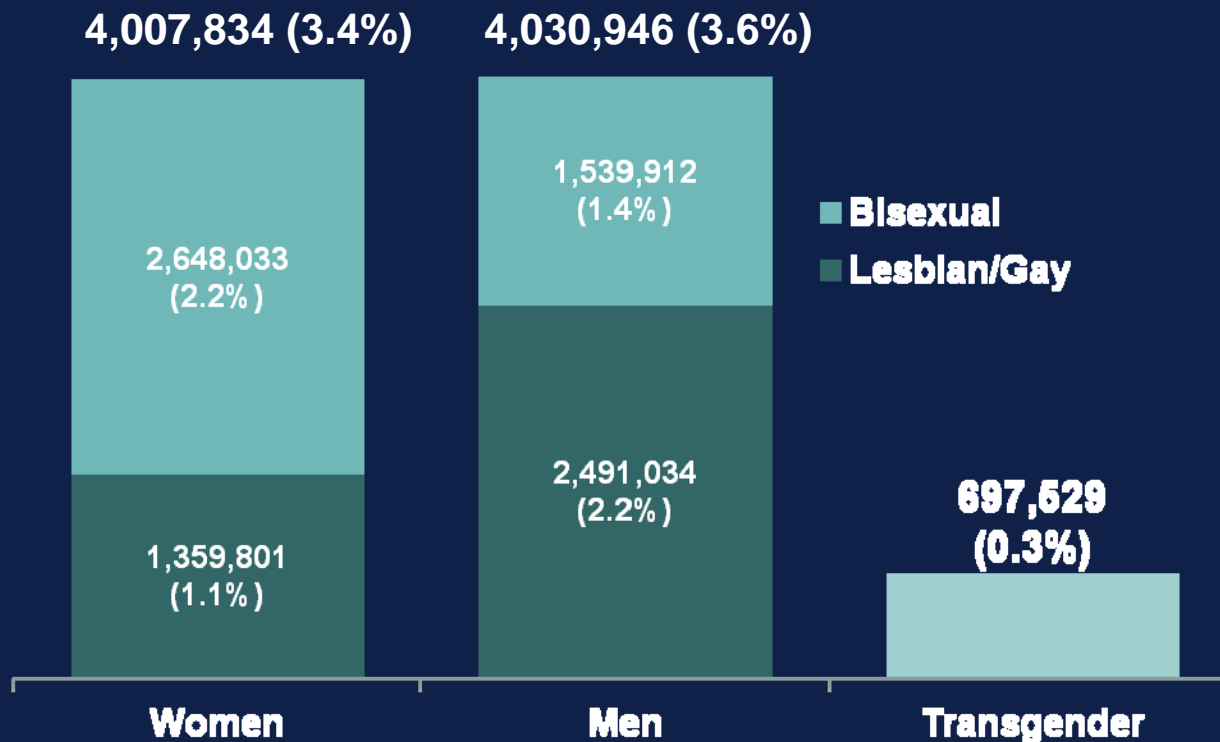
Do LGBT People Come to Your Health Center?

2012 survey by NYC DOHMH on the training needs of clinical service providers in NYC working with high-risk populations (homeless, adolescents, PLWHA, drug users, etc.) asked about which populations are served by their organizations (n=176):



Do LGBT People Come to Your Health Center?

Adults who Identify as LGBT in the United States



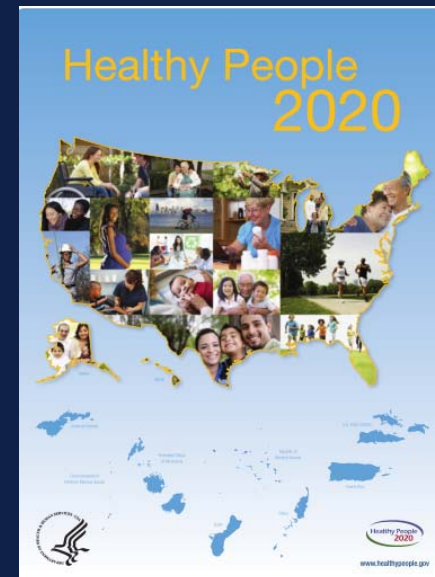
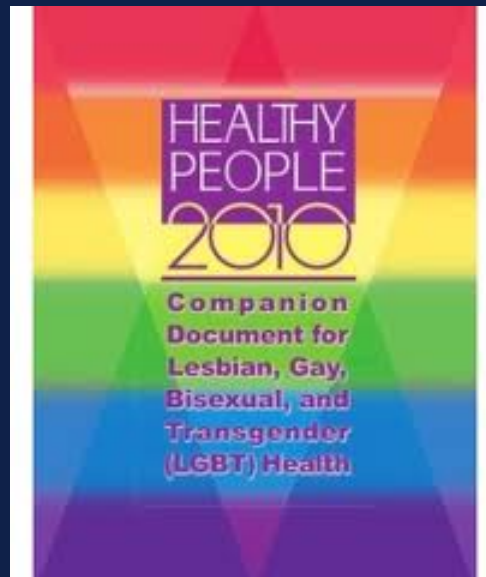
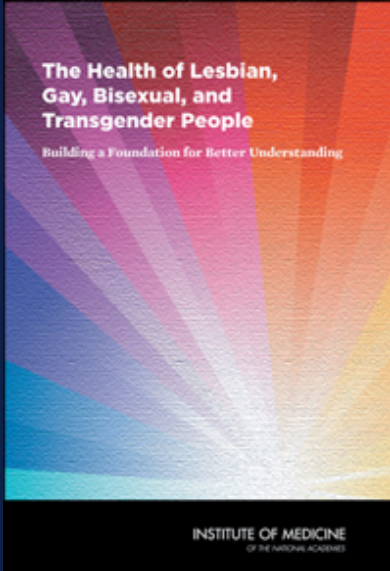


Step 1

Educate your Staff about LGBT Health Disparities

LGBT Health Disparities

- Well documented in recent publications:
 - IOM Report 2011
 - Healthy People 2010 Companion Document
 - Healthy People 2020



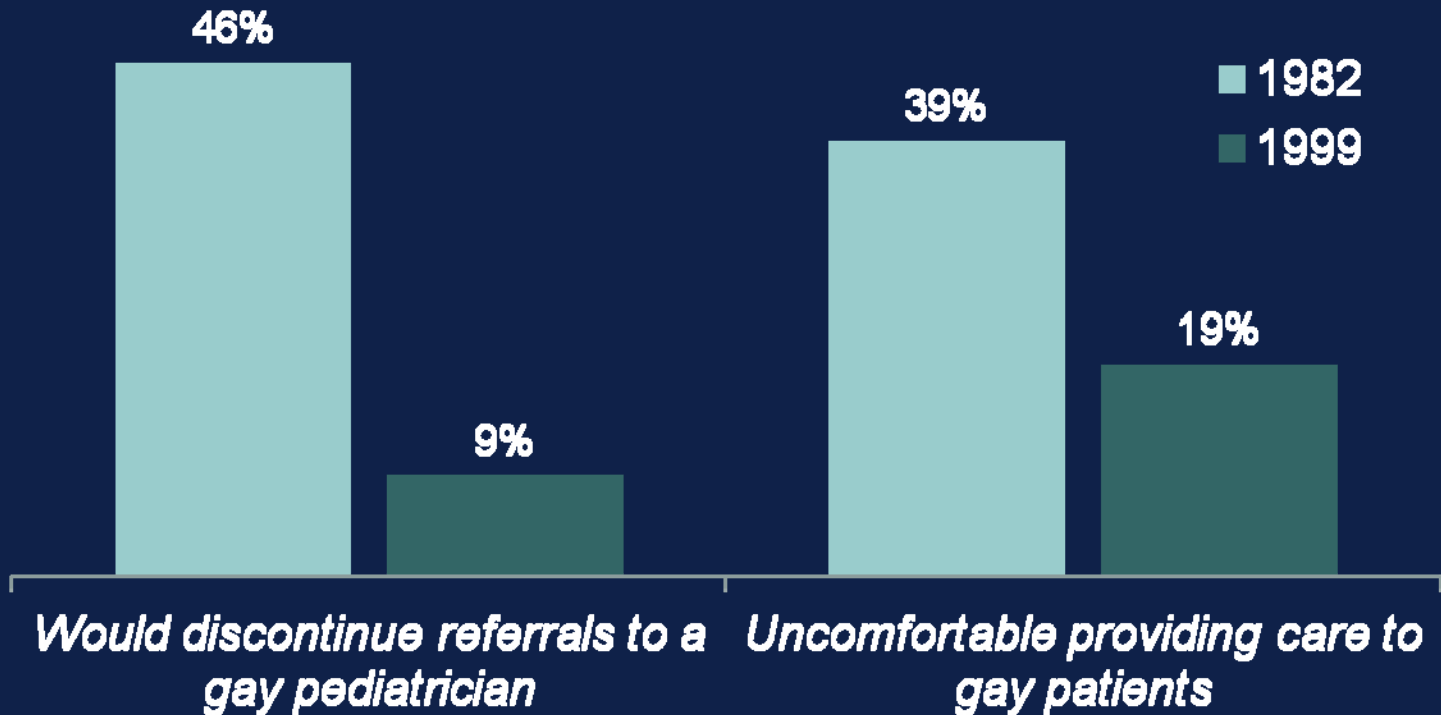
The Perfect Storm



LGBT Health Disparities

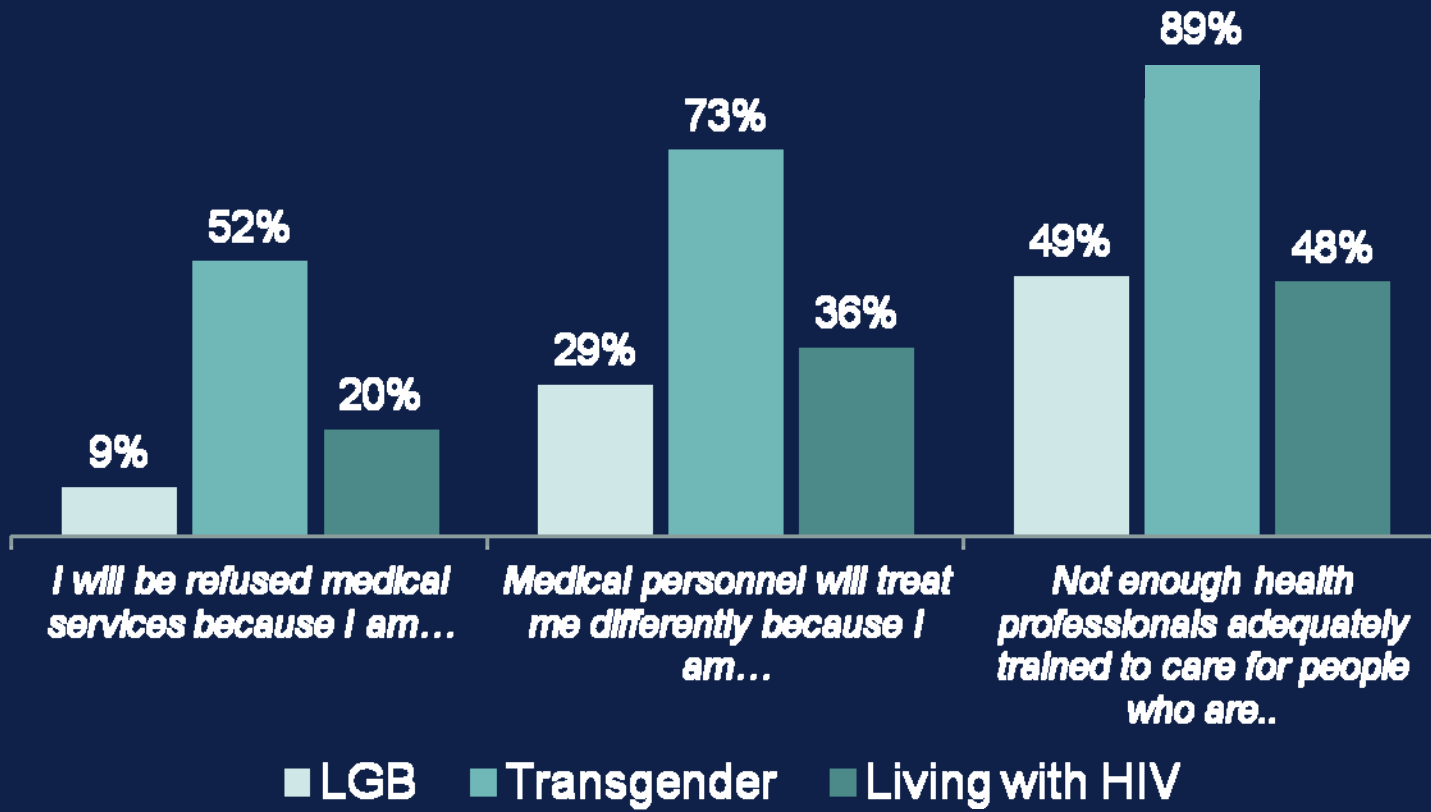
Bias in Healthcare

Physician Attitudes Over Time



Bias in Healthcare

Patients' Fears 2010





Coming Out to a Medical Provider is Good for You

- Lesbians who are out to their primary care provider are more likely to...
 - Seek health and preventive care
 - Have a Pap test
 - Not smoke
 - Discuss difficult issues

White & Dull, 1998



Systematic Discrimination

- Lack of universal legal protection from discrimination (i.e. no inclusion of sexual orientation/gender identity as a protected characteristic)
- ~~Although~~ ~~Domestic Partnerships~~ ~~(DPA)~~ ~~Domestic Partnerships~~ ~~(DPA)~~ couples have less depression & stress recognition ~~of~~ ~~married~~ ~~couple~~ ~~of~~ ~~Aggle, et al.~~
→ ²⁰¹⁰ barring access to 1138 rights & privileges:
 - Immigration
 - Survivor benefits
 - FMLA inapplicable to unmarried partners
 - Hospital visitation rights (new HHS regulations address this)
 - Employer-sponsored health plans



Social Determinants of Health

- GBT (L?): lower incomes than other people with similar educations and occupations *(IOM Report, 2011)*
- No federal marriage recognition
 - tax and insurance differences
 - less disposable income for LGBT people
- LGBT are less likely to be insured than others of similar socioeconomic backgrounds *(Harris Poll, 2002)*
- Most insurance plans specifically exclude transgender care from coverage

The Perfect Storm



LGBT Health Disparities



LGBT Health Disparities

“Although LGBT people share with the rest of society the full range of health risks, they also face a profound and poorly understood set of additional health risks due largely to social stigma.” – 2011 IOM Report



LGBT Health Disparities

- Access to competent care
 - Uninsured/underinsured
 - Provider knowledge
 - Avoidance of unwelcoming/hostile environments
- Mental Health (depression, suicide risk, substance use, smoking, etc.)
- Harrassment, Bullying, Violence
- Nontraditional family structures (insuring children, support for elderly)



Lesbian Health Disparities

- Decreased utilization of preventive health services
- Same or higher unwanted pregnancy rates (young WSW)
- Under-recognition of STIs that are transmitted by female-to-female sexual contact
- Under-recognition of cervical cancer risk
- Higher risk for breast cancer (?)
- Higher BMI
- Higher risk for cardiovascular disease (?)



Gay Men's Health Disparities

- Higher prevalence of eating disorders (anorexia/bulimia)
- Higher prevalence/risk of HIV (particularly among young black MSM)
- Higher prevalence/risk of STIs
- Under-recognition and inadequate testing of oral/anal STIs
- Higher risk of anal cancer (especially in HIV+)



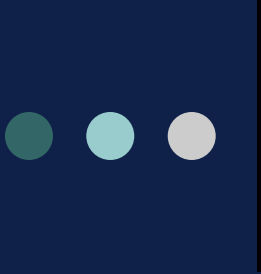
Transgender Health Disparities

- Access to hormones and surgery
- Higher prevalence of HIV (TG women)
- Increased HIV risk among gay-identified TG men (?)
- Increased risk of sexual assault (TG women)
- Under-recognition of cervical cancer risk in TG men
- Very little data on long-term risk of hormones in TG people, though most data shows they are generally safe



Step 2

Implement an LGBT-inclusive Registration Form



Benefits of Identifying who is LGBT in your Health Center

- Acknowledgment of identity/visibility
- Decreased sense of alienation
- Ability to collect data on health outcomes and quality improvement
- Can help guide clinical decision making
- Can help guide customer service

LGBT Registration Form

Legal last name: _____ Legal first: _____

Chosen first name (if different): _____ Da

“We require the following information for the purposes of helping our staff use the most respectful language when addressing you, understanding our population better, and fulfilling our grant reporting requirements. The options for some of these questions were provided by our funders. Please help us serve you better by selecting the best answers to these questions. Thank You.”

Sex listed in insured's health insurance plan: Male Female

Address of insur

CALLEN LORDE
COMMUNITY HEALTH CENTER

REGISTRATION FORM # _____

PATIENT INFORMATION

Legal last name: _____ Legal first: _____ Middle: _____ Today's date: ____/____/____

Chosen first name (if different): _____ Date of Birth: ____/____/____ Social Security number: _____

Billing address: _____ Apartment #: _____ Cell phone number: (____) _____-____-____
Home phone number: (____) _____-____-____
Work phone number: (____) _____-____-____

City: _____ State: _____ Zip Code: _____

Language interpretation services needed? No Yes, language: _____

We require the following information for the purposes of helping our staff use the most respectful language when addressing you, understanding your population better, and fulfilling our grant reporting requirements. The options for some of these questions were provided by our funders. Please help us serve you better by selecting the best answers to these questions. Thank You.

Sex Assigned at Birth: <input type="checkbox"/> Male <input type="checkbox"/> Female	Sexual Orientation: <input type="checkbox"/> Lesbian <input type="checkbox"/> Gay <input type="checkbox"/> Bisexual <input type="checkbox"/> Queer <input type="checkbox"/> Something Else <input type="checkbox"/> Decline to Answer	Races: <input type="checkbox"/> American Indian/ Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Other Pacific Islander <input type="checkbox"/> White/Caucasian <input type="checkbox"/> More than one race <input type="checkbox"/> Decline to Answer	Migrant Worker? <input type="checkbox"/> Yes <input type="checkbox"/> No Homeless? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, select which best applies: <input type="checkbox"/> Double <input type="checkbox"/> Homeless Shelter <input type="checkbox"/> Transitional <input type="checkbox"/> Doubling Up <input type="checkbox"/> Not paying rent <input type="checkbox"/> Other <input type="checkbox"/> Decline to answer	When did you first learn of Callen-Lorde? <input type="checkbox"/> Friend/Partner <input type="checkbox"/> Referral <input type="checkbox"/> Health Fair/ Presentation <input type="checkbox"/> Callen-Lorde website/ Internet <input type="checkbox"/> Callen-Lorde Brochure/Ad <input type="checkbox"/> Facebook/ Social Media <input type="checkbox"/> TV/Radio/Print Media
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Anticipated annual household income for this year: _____ Total # of people living in household, including yourself: _____

Please select the statement that best describes your Primary Medical Care status:
 I am here for a full physical exam or to establish a relationship with a primary care provider.
 I have a primary care provider outside of Callen-Lorde and I plan to continue getting primary care with that provider.
 I do not currently have a primary care provider and I am not here to establish primary care.

Emergency Contact

Emergency contact name: _____ Emergency contact phone: (____) _____-____-____

INSURANCE INFORMATION **Please give your insurance card to the front desk staff. **
 If you do not have health insurance, your income will be used to determine your sliding scale discount.

Insurance carrier: _____ Policy #: _____ Group #: _____

Who did you select as your Primary Care Provider with your insurance carrier? _____ Employer: _____

Relationship to insured: Self Child Partner Spouse Other
Sex listed in insured's health insurance plan: Male Female Insured's birth date: ____/____/____

Name of insured (if different): _____ Address of insured: Same as Patient

I verify that the above information is correct to the best of my knowledge.

Patient Signature _____ Date: ____/____/____

No marital status question, but “partnered” would be an option if we had one.

Sex Assigned at Birth:
 Male Female

Sexual Orientation:
 Lesbian
 Gay
 Bisexual
 Queer
 Straight
 Something Else
 Decline to Answer

Gender Identity:
 Male/Man
 Female/Woman
 TransMale/Transman
 TransFemale/Transwoman
 Genderqueer/Gender nonconforming
 Something Else
 Decline to Answer

Veteran?
 Yes No

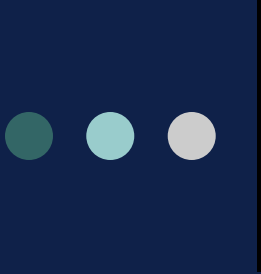
Hispanic?
 Yes No

Anticipated annual household income for this year: _____



Step 3

Collect an LGBT-inclusive Medical and Social History



Collect Information without Presumption or Judgment

- Ask open ended questions about family structure and home life (i.e. “Who lives with you at home?”)
- Avoid questions that assume heterosexuality (i.e. “Do you have a boyfriend?” v. “Do you have a partner?”)
- Listen for the language patients use to describe themselves and their anatomy and follow their lead (i.e. lesbian referring to her partner as “wife”, TG man referring to vaginal sex as “frontal sex”)
- Be empathic, respectful and nonjudgmental



Focus on Health Disparities

- Take the usual comprehensive medical/social history
- Areas of specific concerns for LGBT:
 - Violence victimization (bias-related crimes, intimate partner violence)
 - STI and HIV testing, including anal infections, viral hepatitis vaccination
 - History of hormone use (prescribed and street) and other transitions
 - Weight control
 - Mental health (depression, anxiety, PTSD, eating disorders)
 - Substance use (alcohol, smoking, drugs)
 - Appropriate cancer screening (anal, cervical, breast)
 - Sexual behavior (anal sex, sharing toys, arrangements other than traditional monogamy)



Step 4

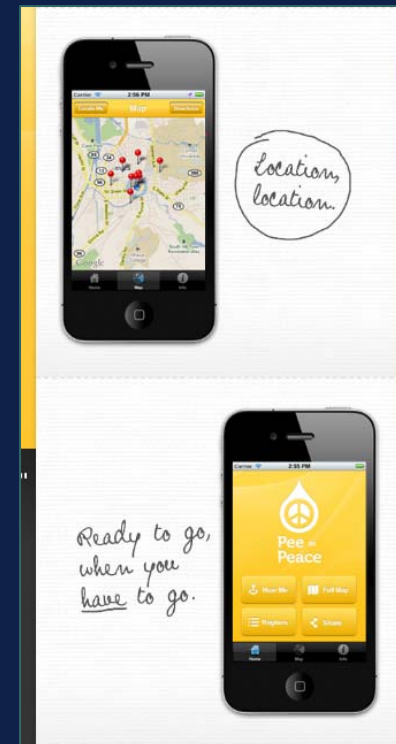
Cultivate a Welcoming Environment for LGBT Patients



Help LGBT Patients Feel Safe and Well Cared For

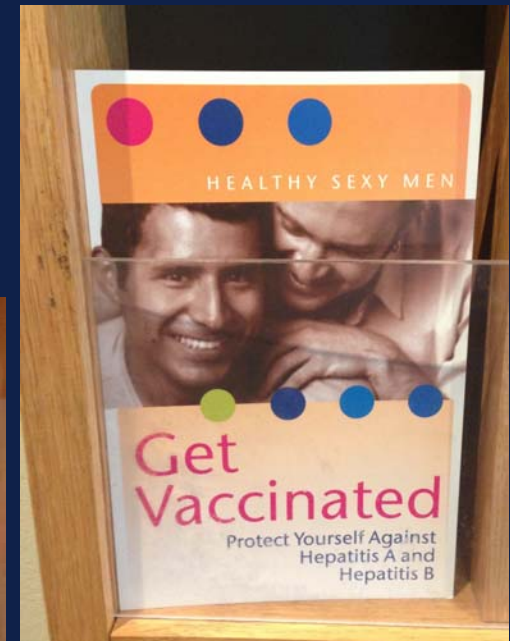
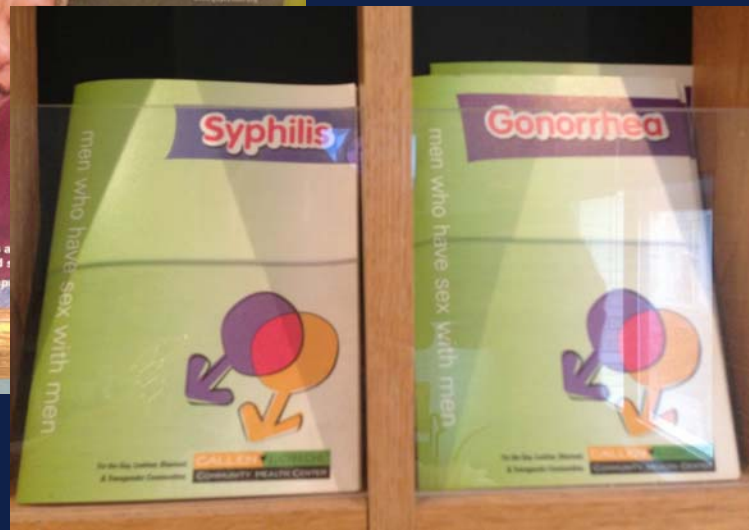
- Unisex and single-use bathrooms are important to transgender people

Help LGBT Patients Feel Safe and Well Cared For

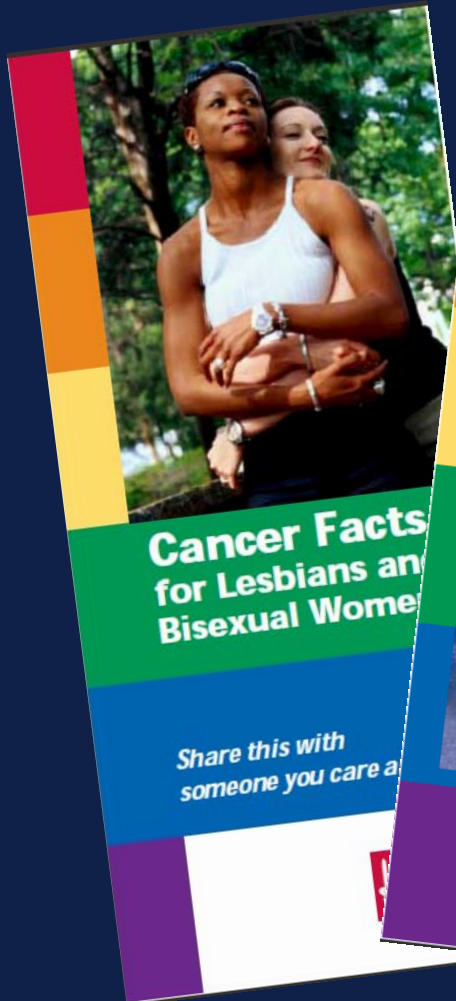


Get Health Ed Materials for ALL your Patients

- LGBT-inclusive or LGBT-specific health education brochures say a lot about your Health Center's commitment to caring for everyone




American Cancer Society



**Cancer Facts
for Lesbians and
Bisexual Women**

*Share this with
someone you care about.*



**Cancer Facts
for Gay and
Bisexual Men**

*Share this with someone
you care about.*

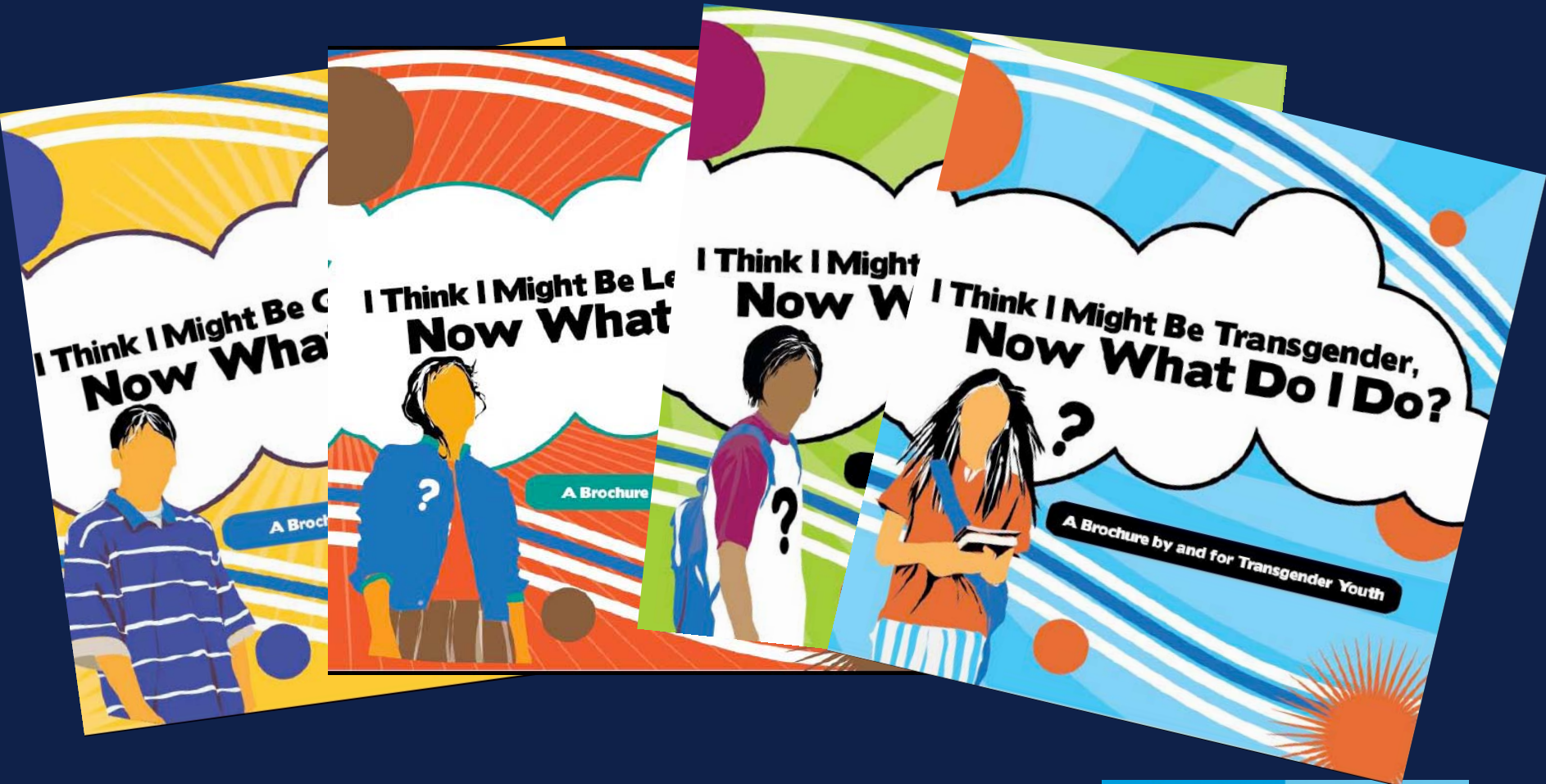


**Tobacco
and the
GLBT
Community**

*Share this with
someone you care about.*



Advocates for Youth



Massachusetts Department of Health

Deserves the same care,
no matter
who these lips kiss.



Gay, lesbian, bisexual, and transgender people deserve the same care as everyone else. Thousands of healthcare providers in Massachusetts agree. They're working to eliminate barriers to healthcare access, so everyone can be treated well.

The Gay, Lesbian, Bisexual and Transgender Health Access Project
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

Deserves the same care,
no matter
who this heart holds.



Lesbian, gay, bisexual, and transgender people deserve the same care as everyone else. Thousands of healthcare providers in Massachusetts agree. They're working to eliminate barriers to healthcare access, so everyone can be treated well.

The Gay, Lesbian, Bisexual and Transgender Health Access Project
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH
www.glbhealth.org

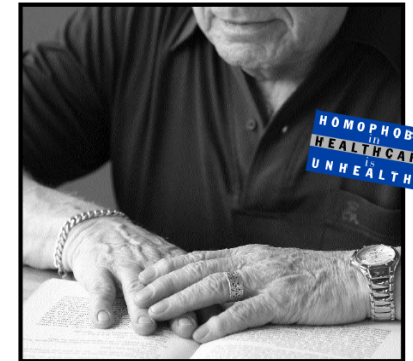
Deserves the same care,
no matter
who these hands care for.



Gay, lesbian, bisexual, and transgender people deserve the same care as everyone else. Thousands of healthcare providers in Massachusetts agree. They're working to eliminate barriers to healthcare access, so everyone can be treated well. And stay well.

The Gay, Lesbian, Bisexual and Transgender Health Access Project
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

Deserves the same care,
no matter
who these hands embrace.



Lesbian, gay, bisexual, and transgender people deserve the same care as everyone else. Thousands of healthcare providers in Massachusetts agree. They're working to eliminate barriers to healthcare access, so everyone can be treated well. And stay well.

The Gay, Lesbian, Bisexual and Transgender Health Access Project
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH
www.glbhealth.org

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Transgender, gay, lesbian, and bisexual people deserve the same care as everyone else. Thousands of healthcare providers in Massachusetts agree. They're working to eliminate barriers to healthcare access, so everyone can be treated well. And stay well.

The Gay, Lesbian, Bisexual and Transgender Health Access Project
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH
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CalLEN LORDE
COMMUNITY HEALTH CENTER

Top 10 Things Lesbians Should

Following are the health issues GLMA's healthcare providers apply to everyone. While not all of these items apply to

1 Breast Cancer

Lesbians are more likely to have risk for breast cancer yet less likely to get screened. This combination means that lesbians diagnosed early when the disease is not

2 Depression/Anxiety

Lesbians may experience chronic stress discrimination. This stress is worse for need to hide their orientation as well as who have lost important emotional support of their orientation. Living with this stress depression and anxiety.

3 Heart Health

Heart disease is the leading cause of death for women. Smoking and obesity are the factors for heart disease among lesbians. They should get yearly medical exams for high blood cholesterol problems, and diabetes. Healthcare providers can also offer tips on quitting increasing physical activity, and controlling

4 Gynecological Cancer

Lesbians have higher risks for certain gynecological (GYN) cancers compared to women. Having regular pelvic exams can find cancers early and offer the best chance for cure.

5 Fitness

Research shows that lesbians are more likely to be overweight or obese compared to women. Obesity is associated with high blood pressure, heart disease, and premenstrual syndrome. Lesbians need competent and supportive healthcare providers who can help them about healthy living and healthy eating habits and exercise.

Ten Things Gay Men Should

Following are the health issues GLMA's healthcare providers apply to everyone. It's wise to be aware of these

1 Come Out to your Healthcare Provider

In order to provide you with the best care possible, your clinician should know you are gay. It should prompt questions about you and offer appropriate do not seem comfortable with you as a provider.

2 HIV/AIDS, Safe Sex

Many men who have sex with men are at an increased risk of HIV infection, but the effectiveness of safe sex practices is one of the gay community's greatest success stories. If you are HIV positive, you need to see your HIV provider. Safe sex is proven to reduce the risk of HIV. You should also discuss with your provider as well.

3 Hepatitis Immunization and Screening

Men who have sex with men are at an increased risk of sexually transmitted infections with the viruses that condition of the liver known as hepatitis. It is potentially fatal, and can lead to very serious issues such as liver failure and liver cancer. Immunizations are available to prevent two of the three universal immunizations for Hepatitis A and B. A vaccine is recommended for all men who have sex with men. It is effective at reducing the risk of viral hepatitis. There are new, more effective treatments for that infection.

4 Fitness (Diet and Exercise)

Problems with body image are more common among gay men. They are more likely to experience bulimia or anorexia nervosa. While regular exercise is a good thing, substances such as anabolic steroids and supplements can be dangerous. Obesity also affects many of health problems, including diabetes and heart disease.

5 Substance Use/Alcohol

Gay men use substances at a higher rate than the general population, and not just in larger cities. These substances range from amyl nitrate ("poppers"), to marijuana, Ecstasy, and amphetamines. The long-term effects of many of these substances are unknown, however, potentially serious consequences as we at interacting with work, school or relationship provider can connect you to help.

Ten Things Bisexuals Should Discuss with

The following are health issues identified as most commonly of concern for people everyone, it's wise to be aware of these issues. The other fact sheets in this series may

1 Come Out to your Healthcare Provider

In order to provide you with the best care possible, your clinician should know you are bisexual. It should prompt him/her to ask specific questions about you and offer appropriate testing. Many providers are less familiar with bisexuality and may make assumptions about your behavior. Be honest and you will get better care. Remind your provider each time you see them about your current partners as it may change the screening tests they offer you. If your provider does not seem comfortable with your sexual orientation, find another provider.

2 HIV/AIDS, Safe Sex

Many men who have sex with men are at an increased risk of HIV infection, but the effectiveness of safe sex practices is one of the LGBT community's greatest success stories. If you are HIV positive, you need to be in care with a good HIV provider. Safe sex is proven to reduce the risk of receiving or transmitting HIV. You should also discuss and be aware of what to do in the event that you are exposed to HIV (Post-Exposure-Prophylaxis)—contacting your provider immediately following an exposure to explore your options. If you are in a relationship where one of you is positive, you should discuss options for prevention with your provider as well. Although women who have sex with women have lower rates of HIV, if you have sex with a gay or bi man (who have increased rates) it is important to understand their HIV status and how to protect yourself.

3 Hepatitis Immunization and Screening

If you have sex with multiple partners (of any gender) you are at an increased risk of sexually transmitted infections with the viruses that cause the serious condition of the liver known as hepatitis. These infections can be potentially fatal, and can lead to very serious long-term issues such as liver failure and liver cancer. Immunizations are available to prevent two of the three most serious viruses. Universal immunization for Hepatitis A Virus and Hepatitis B Virus is recommended for all sexually active people. Safe sex is effective at reducing the risk of viral hepatitis, and is currently the only means of prevention for the very serious Hepatitis C Virus. If you have Hepatitis C there are new, more effective treatments for that infection.

4 Fitness (Diet and Exercise)

Problems with body image are more common among bisexuals and are much more likely to experience an eating disorder such as bulimia or anorexia nervosa. While regular exercise is very good for your health too much of a good thing can be harmful. The use of substances such as anabolic steroids and certain supplements can be dangerous. Being overweight or obese are problems that also affect many bisexuals. These can lead to a number of health problems, including diabetes, high blood pressure, and heart disease and breast cancer.

5 Substance Use/Alcohol

Bisexuals may use substances at a higher rate than the general population, and not just in larger communities such as New York, San Francisco, and Los Angeles. These include a number of substances ranging from amyl nitrate ("poppers"), to marijuana, Ecstasy, and amphetamines. The long-term effects of many of these substances are unknown, however,

Ten Things Transgender Persons Should Discuss with their Health Care Providers

Following are the health issues GLMA's healthcare providers have identified as most commonly of concern for Transgender People. While not all of these items apply to everyone, it's wise to be aware of these issues.



1 Access to Healthcare

It is not easy to find a healthcare provider who knows how to treat transgender people. Sometimes it is difficult to find someone who will agree to treat you. Some providers may feel that there is something wrong with you because you are a transgender person. They are not correct. Of course, they may not understand that you have always been this way. Even if you do find someone who will treat you, your insurance may not pay for the treatment. Ask your provider if your costs will be covered by your insurance. If they will not, ask if they will reduce your bill so you can pay.

2 Health History

It is important for you to be able to trust your healthcare provider. Tell them about the medicines you have taken and the surgeries you may have had. If your provider knows what has happened with you in the past, he or she will be better able to give you the best treatment today.

3 Hormones

Talk with your provider about hormone treatment. If you are starting hormones for the first time, ask about the things you need to watch out for while taking these medicines. If you are a transgender woman, ask about estrogen and blood clots, swelling, high or low blood pressure and high blood sugar. If you are a transgender man, ask about the blood tests you will need to be sure your testosterone dose is safe. Be sure and take only the hormones prescribed by your provider.

4 Cardiovascular Health

Transgender persons may be at increased risk for heart attack or stroke, not only from hormone use but from cigarette smoking, overweight, high blood pressure and diabetes. Transgender women may fear that their provider may make them stop estrogen if they develop heart trouble, and so they may not report feelings such as chest pain or trouble breathing. Be sure to tell your provider if you do have these feelings.

5 Cancer

It is very rare to develop cancer due to hormone treatment, but your provider will evaluate you for this possibility when he or she sees you for check-ups. Your provider will also check for possible cancer of your sex organs, if they have not been removed. Again this is very rare but it should be checked along with the rest of your physical examination.

6 Sexually Transmitted Diseases and Safe Sex

Transgender people, particularly young transgender people, may be engaging in sexual activity, just like anyone else. Transgender people may get a sexually transmitted disease. It is very important to practice safe sex, so you will not become infected with HIV or other sexually transmitted diseases. Ask your provider about safe sex practices.

7 Alcohol and Tobacco

Transgender persons who drink alcohol may drink too much and risk damage to the liver or other organs. Too much alcohol may also cause a person to treat themselves or other people badly, or to drive unsafely. Alcohol and hormones may be more dangerous when taken together. Many transgender people smoke cigarettes. This increases their risk of heart and lung disease, especially in persons taking hormones. Transgender persons who care about their health should not smoke, and they should drink only small amounts, if at all.

8 Depression

It is very easy for transgender persons to become sad and depressed. If our families or friends don't want to see us anymore, it is a very depressing time. Even after transition, depression can still be a problem. When someone is depressed, they cannot be happy no matter what they are doing. Depressed persons may make bad choices and may harm themselves. Please talk with your provider or your therapist about your feelings and tell him or her if you feel sad or depressed. Many good treatments are available for depression.

9 Injectable Silicone

Some transgender women want to look feminine and beautiful without having to wait for the effects of estrogen. They expect injections of silicone to give them "instant curves." The silicone, sold at "pumping parties" by non-medical persons, may move around in the tissues and cause ugly scars years later. It is usually not medical grade, may be contaminated and is often injected using a shared needle. You can get hepatitis or HIV through shared needles. Silicone is dangerous and should not be used.

10 Fitness (Diet & Exercise)

Many transgender people are overweight and do not exercise. It is hard to make time for exercise if you have to work long hours. A healthy diet and a frequent exercise routine are just as important for transgender persons as for anyone else. If you are planning to have surgery, your surgeon will want to be sure you are in good physical condition to do well during and after surgery. Try to eat a healthy diet and try to exercise for at least 20 minutes three times a week.

Rebecca A. Allison, MD, Board of Directors, Gay and Lesbian Medical Association. Revised May 2012

1326 18th Street NW, Suite 22 | Washington, DC 20036 | 202-600-8037 | fax: 202-478-1500 | info@glma.org | www.glma.org

Author: Robert J. Wynn, MD AAHRMS, Medical Director, Mazzoni Center, Philadelphia, PA. Revised May 2012.

1326 18th Street NW, Suite 22 | Washington, DC 20036 | 202-600-8037 | fax: 202-478-1500 | info@glma.org | www.glma.org

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Wear your Commitment on your Sleeve



Words that are **TRANSPHOBIC** and **WHY**

Transphobia: The fear or hatred of transgender people or people who are perceived as not meeting society's expectations around gender roles, identities, and presentations. Transphobia is closely linked with homophobia and biphobia.

You're such a Tranny.

Whether or not someone identifies as Trans, calling them a "tranny" can be extremely offensive. This may be a term that people within the community use and reclaim for themselves, but it should not be used as a joke or without consent.

That person doesn't really look like a man/woman.

What does it mean to look like a man or a woman? There are no set criteria. It also should not be assumed that all Trans men strive to be masculine or that all Trans women want to be feminine, or that all Trans people want to look like men or women. Gender presentation is fluid and distinct from gender identity, and all forms of gender expression deserve affirmation.

Why would you transition if you're going to be gay?

Gender identity and sexual orientation are two separate aspects of one's identity. This question demonstrates how heterosexuality is more valued in our society, and reinforces homophobia and heterosexism.

What is your REAL name? I mean the one you were given at birth.

This implies the person's gender identity and chosen name are not "real" and perpetuates the idea of Trans people as deceptive. It removes agency and any right to make decisions for themselves, and is incredibly invalidating. It presumes a right to intimate information, disregards privacy, and places Trans lives on public display.

Calling someone "it" or "He-She" is demeaning and does not validate their identity or respect them as a person.

Asking others about Transperson's identity, or offering information about someone.

Asking someone about another person's identity is inappropriate. Ask yourself why you want to know. If you are concerned about using the person's preferred pronouns, ask them directly.

Using the wrong pronouns or making assumptions about others' gender identities.

It is vital that we respect the names and pronouns that people prefer. It is impossible to know without asking. If you are not sure, ask: "What are your preferred pronouns?"

What are you REALLY? Have you had surgery? If not then you're not really a _____.

Asking anyone personal questions about their bodies and/or surgeries is invasive and inappropriate. We don't ask non-trans people what is under their clothes; we shouldn't ask Trans people either.



For more information contact the UC Davis LGBT Resource Center

lgbtrc.ucdavis.edu
phone: 530.752.2452

Designed by Clinton Andor



Step 5

Train your Staff on LGBT Do's and Don't's



Do

- Ask open ended questions
- Mirror the language a patient uses to describe them self and/or the important people in their life
- Apologize if you make a mistake
- Consider LGBT participation in your community advisory board(s)



Don't

- Assume that LGBT identity = behavior
- Assume that a patient's identity or behavior is static over time
- Ask questions simply out of curiosity
- Disclose a person's trans status or anatomy unless necessary to do your job
- Get worked up over mistakes



Resources

- Callen-Lorde Community Health Center: callen-lorde.org
- Gay & Lesbian Medical Association (GLMA): glma.org
- National Coalition of LGBT Health: lgbthealth.net
- Center for Disease Control and Prevention (CDC): cdc.gov/lgbthealth
- Substance Abuse and Mental Health Service Association (SAMHSA): samhsa.gov/obhe/lgbt.aspx
- American Cancer Society: cancer.org
- The Fenway Institute: lgbthealtheducation.org
- Advocates For Youth: advocatesforyouth.org
- Massachusetts Dept. of Health: glbthealth.org



Questions?