

PFLAG

SOUTHERN MARYLAND

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REPRESENTATION,

AND

The Key to LGBTQ+ Health Equity

RESPECT, AND

Paul Quade (he/they)

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Vice-President, PFLAG Southern Maryland

RESILIENCE:



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OBJECTIVES

- **Learn about PFLAG**
- **Identify LGBTQ+ Disparities**
- **Review the Healthcare Equity Index**
- **Reflect on Practices**
- **Identify Strategies to Create an Affirming Space**

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WHAT IS PFLAG?

PFLAG Southern Maryland is a chapter of the nation's largest organization working to create a caring, just, and affirming world for LGBTQ+ people and their loved ones.

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PFLAGProud

▶ WATCH NOW

PARENTS
of Gays
UNITE
SUPPORT for
our CHILDREN



WHO WE ARE?

Our chapter's members & volunteers are

LGBTQ+ people, parents, family, and

allies from Calvert, Charles, and St.

Mary's counties & surrounding areas.



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WHY WE'RE

Our vision is an **equitable, inclusive**

Southern Maryland community where

**every LGBTQ+ person is safe, celebrated,
empowered, and loved.**

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WHAT WE DO

Our chapter members **support** families, **educate** allies, and **advocate** for equitable and inclusive legislation and policies.



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WHAT WE DO

SUPPORT

- Monthly Meetings
- Social Events
- Volunteer Meetings
- “Proud to be...”
Campaign

EDUCATE

- Professional
Development
- Visit Local Student
Groups
- Social Media
Campaigns
- Safe Space
Stickers
- Resource Page
- Mental Health Fairs

ADVOCATE

- School Board
 - SMCPS
Educational Equity
Citizens’ Advisory
Committee
 - Community
Visibility
 - LGBTQ+ Affirming
Policies
 - Community
Partnerships
- 

WHY ALLY?

Lindsey Dawson, Brittini Frederiksen, Michelle Long, Usha Ranji,
and Jennifer Kates. LGBT+ People's Health and Experiences
Accessing Care. [Published July 22, 2021] Available from:
<https://www.hff.org/report/question/lgbt-peoples-health-and-experiences-accessing-care-report/>

LOOKIN

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AT





WHY ALLY?

- **1 in 5 LGBTQ+ adults postponed healthcare treatment due to disrespect or discrimination by healthcare providers.**
- **Nearly half (45%) of LGBTQ+ people who had visited a health care provider in the past two years reported at least one negative experiences with a provider or during a health care visit, compared to one-third (33%) of non-LGBTQ+ people.**
- **Three in ten (29%) LGBTQ+ people said it is difficult to find a doctor who explains things in a way that is easy to understand, higher than the share of**

non-LGBTQ+ people (19%)



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WHY ALLY?

- **LGBT+ adult demographics look similar to non-LGBT+ adults with respect to gender, race/ethnicity, urbanicity, and working status.**
- **LGBT+ adults are significantly younger, with almost two-thirds (62%) between the ages of 18 and 35 compared to 36% of non-LGBT+ adults.**
- **LGBT+ people are also more likely than non-LGBT+ people to have lower incomes, with 44% of LGBT+ people earning less than 200% of the federal poverty level (\$13,590 per year in 2022 for an individual) compared to 36% of non-LGBT+ people.**



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WHY ALLY?

- **One-quarter (25%) of LGBT+ people reported being in fair or poor health compared to 18% of non-LGBT+ people, especially among LGBT+ people with low incomes and those covered by Medicaid.**
- **Half (50%) of LGBT+ people reported that they had an ongoing health condition that requires regular monitoring, medical care, or medication.**
- **Additionally, a larger share of LGBT+ people reported having a disability or chronic disease that keeps them from participating fully in work, school, housework, or other activities than non-LGBT+ people (25% v. 16%).**



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WHY ALLY?

- **LGBT+ people reported lower rates of having a regular doctor or provider than their non-LGBT+ counterparts (72% v. 77%).**
- **Telehealth has become an increasingly common way to access care, including among LGBT+ people, who reported higher use of telehealth visits over the past two years than did non-LGBT+ people (63% v. 53%).**
- **A higher share of LGBT+ people reported taking at least one prescription medication on a regular basis than non-LGBT+ people, despite being a younger population overall (62% v. 55%)**





WHY ALLY?

- **Thirty-five percent (35%) of LGBT+ people ages 18-64 have been tested for HIV in the past two years, higher than the share of non-LGBT+ people (19%).**
- **Nearly four in ten (37%) LGBT+ people ages 18-64 have been tested for an STI (other than HIV) such as chlamydia or herpes in the past two years, higher than the share of non-LGBT+ people (19%).**
- **Over half (55%) of LGBT+ reproductive-age people assigned female at birth who used contraception in the past year did so for a reason other than preventing pregnancy compared to 35% of their non-LGBT+ counterparts.**





WHY ALLY?

- **Across their lifespan, four in ten LGBT+ people ages 18-64 assigned female at birth have ever been pregnant compared to seven in ten non-LGBT+ females**
- **Two-thirds (67%) of LGBT+ people reported needing a mental health service over the past two years, compared to four in ten (39%) non-LGBT+ people.**

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HEALTHCARE

1. Non-Discrimination & Staff Training

2. Patient Services & Support

3. Employee Benefits & Policies

4. Patient & Community Engagement

5. Responsible Citizenship

<https://www.thehrcfoundation.org/professional-resources/hei-scoring-criteria>



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NON-DISCRIMINATION & STAFF TRAINING

- **Patient Non-Discrimination**

- Does your patient non-discrimination policy include the term "sexual orientation" AND the term "gender identity or expression"?
- Is your patient non-discrimination policy communicated to patients in at least two different ways?
- Is your patient non-discrimination policy communicated to your employees in at least one way?

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NON-DISCRIMINATION & STAFF TRAINING

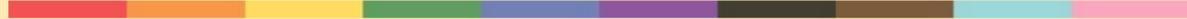
- **Equal Visitation Policy**

- **Does your visitation policy grant equal visitation to LGBTQ+ patients and their visitors?**
- **Is your equal visitation policy communicated to patients in at least two different ways?**
- **Is your equal visitation policy communicated to your employees in at least one way?**

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NON-DISCRIMINATION & STAFF TRAINING

- **Employment Non-Discrimination**

○ Does your employment non-discrimination policy (or equal employment opportunity policy) include the term "sexual orientation" AND the term "gender identity or expression" (or "gender identity")?

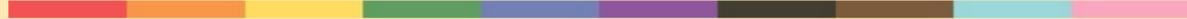
○ Is your employment non-discrimination policy communicated publicly in at least one way?

TRAINING

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NON-DISCRIMINA

• Staff Training

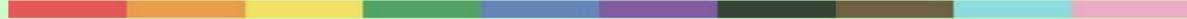
- Does your facility have a minimum number of hours dedicated to LGBTQ+ training (health equity, culturally competent care, etc.)?
- What staff are trained?
- Does that include organization leadership? Nursing Management? Patient relations? Admissions? Human resources?

TRAINING

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PATIENT

• LGBTQ+ Patient Services & Support

SERVICES & Does your facility have a written strategy or plan for reducing health disparities specifically among LGBTQ+ patients and/or explicitly incorporates LGBTQ+ patients into a plan for reducing all patient

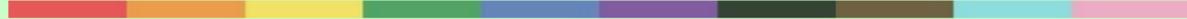
disparities?

SUPPORT Does your facility have an internal advisory or planning committee that is focused on LGBTQ+ patient care issues?

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PATIENT

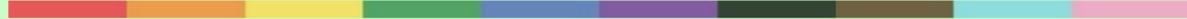
• LGBTQ+ Patient Services & Support

- # SERVICES & SUPPORT
- Does your facility make LGBTQ+ knowledgeable and -friendly providers known? Is there a confidential mechanism to make referrals?
 - Does your facility provide and promote HIV specific services?
 - Does your facility provide and promote LGBTQ+ specific clinical services?
 - Does your organization create, distribute, or provide educational LGBTQ+ related health information and/or links on facility website?

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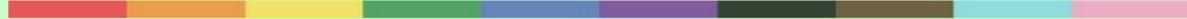


PATIENT

• Gender Affirming Services & Support

- # SERVICES & SUPPORT
- Does your facility have a written policy aimed at eliminating bias and insensitivity, and ensuring welcoming interactions with trans patients?
 - Does your organization offer gender affirming services?
 - Does your facility have a program or position to provide patient navigation/advocacy services specifically to gender diverse patients?
 - Does your facility offer all gender restrooms for patients and visitors and have clear signage to use the restroom that aligns with gender identity?





PATIENT

• Medical Decision Making

SERVICES &

Does your organization inform patients of their right to designate a person of their choice, including same-sex partner, as medical decision maker?

- If your organization provides employees with training related to medical

decision making, does the training include LGBTQ+ specific information?

SUPPORT

- Does your facility have a policy or official practices related to the treatment of intersex children that delays medically unnecessary

procedures until the patient is old enough to make an informed decision?

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PATIENT

• Patient Identification and Data Collection

SERVICES &

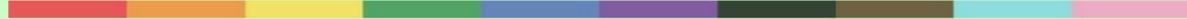
Do your organization's health records/documents offer explicit options for patients to indicate that their current gender identity differs from the gender they were assigned at birth and/or the gender on ID & insurance?

- Do your (electronic) health records use a two-question process to collect data on gender identity (i.e. gender identity AND sex assigned at birth)?

SUPPORT

- Does your organization offer a way for indicating a patient's sexual orientation, if they volunteer this information?

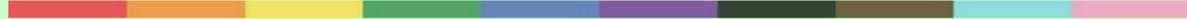




PATIENT

• Patient Identification and Data Collection

- # SERVICES &
- Do your organization's health records offer options for capturing the patient's pronouns AND prominently displays them in the banner/pop-up?
 - Do your organization's health records capture the patient's name in use if it differs from their legal name AND prominently displays this name in the banner or a pop-up?
 - Does your organization's health records offer a way for indicating a patient's sexual orientation, if they volunteer this information?



PATIENT

• Patient Identification and Data Collection

SERVICES &

Does your organization provide employees with training explicitly reminding them that **LiBTO+ status is confidential patient information?**

- Do your organization's health records offer explicit options for patients'

parents beyond "mother" and "father" (e.g., "parent/guardian 1"), to be inclusive of same-sex parents and other diverse families?

SUPPORT

- Does your organization record patient's marital or relationship status, offering options such as "single" and "married"?





EMPLOYEE

- **Equal Benefits**

BENEFITS & Does your facility offer health care benefits to domestic partners of benefits-eligible employees?

- Does your facility offers LGBTQ+ inclusive health coverage, including support for family formation, gender affirming care, and sexual health?

POLICIES Does your facility have an FMLA-equivalent benefit that allows employees to care for domestic partners & children (biological or adoptive)?

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EMPLOYEE

- **Supports for LGBTQ+ Employees**

- # BENEFITS & POLICIES
- Does your facility have a confidential human resources system that capture demographic information including orientation & gender identity?
 - Does your facility commemorate an LGBTQ+ Awareness Day each year?
 - Are your facility's hiring/recruitment efforts explicitly LGBTQ+ inclusive?
 - Does your facility have one or more openly LGBTQ+ people serving in a high-level leadership position that is visible facility-wide?

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PATIENT &

- **LGBTQ+ Community Engagement and Marketing**

COMMUNITY

- Does your organization support, sponsor, or host any LGBTQ+ related events or initiatives? For patients, community?
- Does your organization engage in LGBTQ+ inclusive marketing or

advertising and social media?

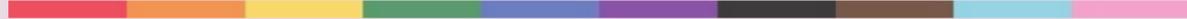
ENGAGEMENT

- Does your organization publicly support LGBTQ+ equality under the law?

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PATIENT &

- **Understanding the Needs of LGBTQ+ Patients**

COMMUNITY

Does your organization's patient experience survey allow patients to identify as LGBTQ+?

Does your organization's patient satisfaction survey include specific LGBTQ+ questions?

ENGAGEMENT

Does your organization work with LGBTQ+ organizations or community members to assess LGBTQ+ needs or address LGBTQ+ related concerns?

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PATIENT &

• Understanding the Needs of the LGBTQ+ Community

COMMUNITY

- Does your organization have a representative of an LGBTQ+ organization or an openly LGBTQ+ person serving on a governing or advisory board?
- Does your organization conduct or support LGBTQ+ health-related

academic and/or clinical research?

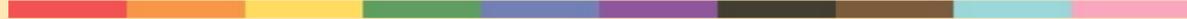
ENGAGEMENT

- Does your facility analyze patient satisfaction and HR data with an intersectional lens to identify LGBTQ+ health and programmatic needs?

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RESPONSIBLE

- **Does your organization support/sponsor one or more external community events or initiatives in your service area that include a focus on LGBTQ+ populations**
- **Does your organization host/organize one or more events or initiatives to engage or support LGBTQ+ individuals in your patient population or community.**

HOW TO ALLY?

Bass B, Nagy H. Cultural Competence in the Care of LGBTQ Patients. [Updated 2023 Nov 13]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2024 Jan-. Available from: <https://pub.ncbi.nlm.nih.gov/books/NBK563176/>

BEST PRACTICE

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CREATING A

- **Advertise practices** as accepting of members of the LGBTQ community

WELCOMING

- **Educate staff and providers** to be comfortable in discussing sexual orientation, gender orientation, and sexual practices

- **Include members of the LGBTQ community** as part of your staff and **train your staff to refer to patients by their name and pronouns** (Mr., Ms., Mrs., etc.)

PRACTICE

- **Maintain an open mind** and avoid judgment
- **Create inclusive intake forms**, include the term partner in addition to the spouse; include transgender as an option, remove uses of he/she or he/him.





CREATING A

- **Participate in referral programs** such as the **GLMA** or **GayHealth**

WELCOMING

- **Post LGBTQ symbols and posters** of ethnically and racially diverse transgender or same-sex couples

- **Provide patient brochures on sexually transmitted infection prevention, substance abuse, safe sex practices, and hormone therapy**

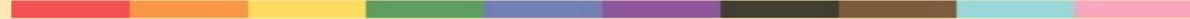
PRACTICE

- **Provide waiting room magazines about the LGBTQ community**
- **Support observances** of LGBTQ **Pride Day, World AIDS Day, etc.**
- **Train staff and provide continuing education on the care of LGBTQ patient**

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CASE STUDY A:

Scenario: Jordan, a nonbinary adult, arrives for a routine check-up. The intake form only lists Male/Female checkboxes. The receptionist repeatedly uses the name on the insurance card, which differs from Jordan's chosen name.

REGISTRATION

What immediate steps at registration? How to revise intake forms/EHR? What training or policy changes needed?

DESK



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CASE STUDY B:

Scenario: Sam, a transgender man recovering from surgery, is placed in a semi-private room with a male room mate, but staff repeatedly use female pronouns and birth name. The hospital has no formal pronoun policy.

INPATIENT

What to do right away (staff response)? How can EHR or rounds procedure support respecting pronouns/names? What policy should be developed or clarified?

ROUNDS

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CASE STUDY C:

Scenario: Alex, a staff pharmacist, learns their employer's health plan does not cover gender-affirming hormone therapy. HR says it's "not a covered benefit."

EMPLOYEE

What steps to take to include gender-affirming care? Who in the organization needs to be involved?

What kinds of policy or contract changes might be necessary?

HEALTH

BENEFITS

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CASE STUDY D:

Scenario: A local LGBTQ+ community center invites the hospital to host a free blood-pressure screening during Pride month. Leadership declines, saying “it’s not our target population.”

COMMUNITY

What are the harms of declining? What opportunities for visibility/trust/community health? What small outreach initiative might leadership approve?

OUTREACH

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CASE STUDY E:

Scenario: Taylor, a 16-year-old transgender girl, arrives in the ED after a suicide attempt. The triage nurse insists on calling parents for consent before any care, despite Taylor's fear of parental rejection. Staff appear unfamiliar with minor consent and privacy laws for LGBTQ+ youth.

YOUTH IN CRISIS

What policies protect Taylor's privacy & autonomy? What training should staff have? Which departments (legal, youth services, mental health) should inform facility policy?

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RESOURCES

 NATIONAL LGBTQIA+ HEALTH EDUCATION CENTER
A PROGRAM OF THE FENWAY INSTITUTE

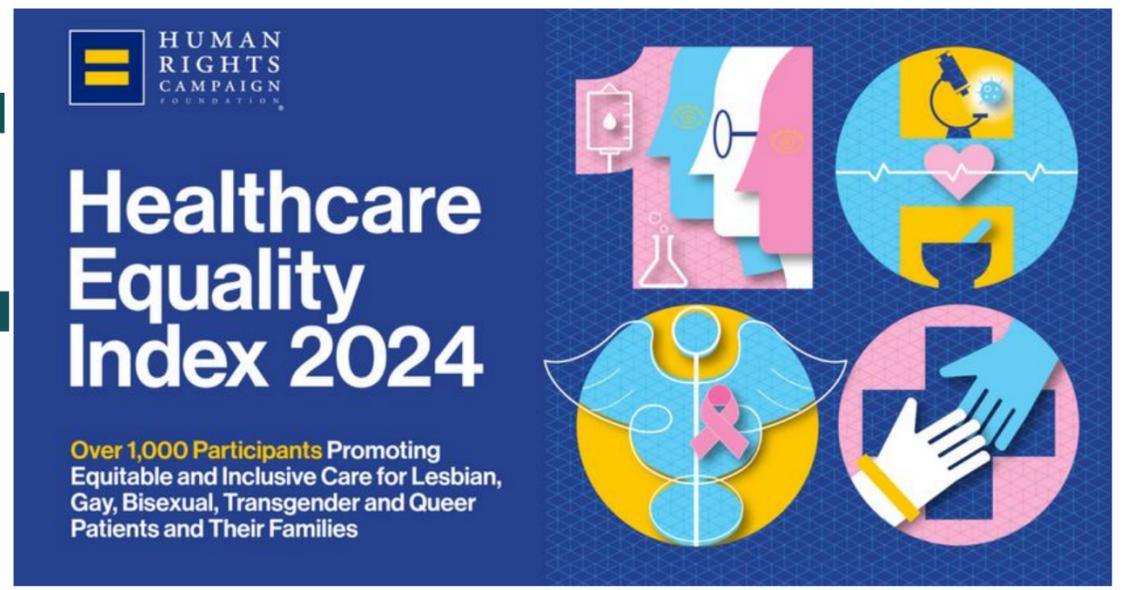
- Behavioral Health
- Cancer and LGBTQIA+ People
- Collecting Sexual Orientation and Gender Identity Data
- Diabetes and Heart Health
- Emergency Preparedness & Response
- HIV/STI Treatment and Prevention
- Intersex Health
- Introduction to LGBTQIA+ Health
- LGBTQIA+ Children and Youth
- LGBTQIA+ Older Adults
- LGBTQIA+ People of Color
- Organizational Change
- Patient Education Materials
- Pre-Exposure Prophylaxis (PrEP)
- Reproductive Health
- Sexual Minority Women
- Transgender Health
- Uncategorized

Click the images to open each resource.



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Healthcare Equality Index 2024

Over 1,000 Participants Promoting Equitable and Inclusive Care for Lesbian, Gay, Bisexual, Transgender and Queer Patients and Their Families



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Find Resources



PROFESSIONAL RESOURCES

Healthcare Professionals

The HRC Foundation works with health care facilities that are committed to providing inclusive care to their LGBTQ+ patients. Going beyond inclusive non-discrimination policies, these facilities are adopting best practices in the areas of LGBTQ+ patient care and support, employee policies and benefits, and LGBTQ+ patient and community engagement.



QUESTIONS

This is a safe space!

COMMENTS

THANKS!

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