

## PATIENT PROVIDER RELATIONSHIPS

PUBLICATION	PUBLICATION OVERVIEW
2019	
<b>Title:</b> Healthcare Equality Index (HEI)	HEI is the national LGBTQ benchmarking tool that evaluates healthcare facilities' policies and practices related to the equity and inclusion of LGBTQ patients, visitors, and employees.
<b>Citation:</b> Healthcare Equality Index, 2019.	
<b>Link:</b> <a href="https://www.hrc.org/hei">https://www.hrc.org/hei</a>	
<b>Title:</b> Tailoring Care of LGBT Patient: Healthcare Providers' Practices in a Rural State	This study describes LGBT friendly healthcare providers' self-reported practices to tailor their care for LGBT patients. LGBT health disparities are discussed and specific action priorities are suggested to provide integrated care to LGBT populations,
<b>Citation:</b> Aleshire, M. & Fallin, A. 2019.	
<b>Link:</b> <a href="https://sigma.nursingrepository.org/handle/10755/17676">https://sigma.nursingrepository.org/handle/10755/17676</a>	
2018	
<b>Title:</b> Proportion of Patients who Disclose their Sexual Orientation to Healthcare Providers and its Relationship to Patient Outcomes	This is a meta-analysis and review of patient centered care that emphasizes the need to form a therapeutic and trusting relationship between patients and providers. Only 14% of patients reported being asked their sexual orientation by their healthcare provider.
<b>Citation:</b>	

<p>Ruben, M. &amp; Fullerton, M. (2018). Proportion of patients who disclose their sexual orientation to healthcare providers and its relationship to patient outcomes: A meta-analysis and review. Patient Education and Counseling, 101(9), 1549-1560.</p>	
<p><b>Link:</b></p> <p><a href="https://www.sciencedirect.com/science/article/abs/pii/S0738399118301988">https://www.sciencedirect.com/science/article/abs/pii/S0738399118301988</a></p>	
<p><b>Title:</b></p> <p>Provider Perspectives on the Application of Patient Sexual Orientation and Gender Identity in Clinical Care</p>	<p>Although the federal government has recommendations that healthcare institutions collect and document patient sexual orientation and gender identity information to advance the understanding of sexual health and gender minority populations, little is still known.</p>
<p><b>Citation:</b></p> <p>Dichter, M., Ogden, S., &amp; Scheffey, K. (2018). Provider perspectives on the application of patient sexual orientation and gender identity in clinical care: A Qualitative Study. Journal of General Internal Medicine, 33(8), 1359-1365.</p>	<p>The study finds that it is important for providers to continue to inquire about patient behaviors and anatomy to informal individual risk and needs assessments. Findings from the study can inform the following to improve individual and population health:</p> <ul style="list-style-type: none"> <li>• Development of guidelines</li> <li>• Trainings</li> <li>• Practices for incorporation of patient sexual orientation and gender identity information</li> </ul>
<p><b>Link:</b></p> <p><a href="https://link.springer.com/article/10.1007/s11606-018-4489-4">https://link.springer.com/article/10.1007/s11606-018-4489-4</a></p>	
<p>2017</p>	
<p><b>Title:</b></p> <p>Create Your Care Plan</p>	<p>Sage Advocacy and Services for LGBT elders serves as a guide and a practical tool for those who are facing surgery or another medical procedure. This allows the LGBT community to take control of their own care while planning for a successful recovery.</p>
<p><b>Citation:</b></p> <p>Sage, 2018</p>	
<p><b>Link:</b></p> <p><a href="https://www.sageusa.org/wp-content/uploads/2018/05/sageusa-">https://www.sageusa.org/wp-content/uploads/2018/05/sageusa-</a></p>	

<a href="http://www.tandfonline.com/doi/abs/10.1080/13691058.2017.1298844">creating-your-care-plan-lgbt-guide-medical-procedures.pdf</a>	
<p><b>Title:</b></p> <p>Health and identity-related interactions between lesbian, bisexual, queer and pansexual women and their healthcare providers.</p>	<p>This study examined the various factors which can effect whether or not a women of sexual minorities disclose their sexual identity. It also looked into the interactions which involve healthcare providers and sexual minority women discussing sexual identity and health.</p> <p>Results: Both quantitative and qualitative data were collected and analyzed. They found that bisexual and pansexual women did not disclose their sexual identity as often as lesbian women did. Results were not significantly different between women of different ages or ethnicities.</p>
<p><b>Citation:</b></p> <p>Baldwin A, Dodge B, Schick V, et al. <i>Culture, Health &amp; Sexuality</i>. 2017;19(11):1181-1196.</p>	
<p><b>Link:</b></p> <p><a href="https://www.tandfonline.com/doi/abs/10.1080/13691058.2017.1298844">https://www.tandfonline.com/doi/abs/10.1080/13691058.2017.1298844</a></p>	
2013	
<p><b>Title:</b></p> <p>Asking Patients Questions about Sexual Orientation and Gender Identity in Clinical Settings: A Study in Four Health Centers</p>	<p>This study of diverse patient groups at 4-community health centers evaluated standardized sexual orientation and gender identity questions.</p> <p>Results:</p> <p>Respondents:</p> <ul style="list-style-type: none"> <li>• Understood the importance of sexual orientation and gender identity questions to healthcare</li> <li>• 4 out of 5 felt it was important for their providers to know about their sexual orientation.</li> <li>• Less than one in five would make changes to the sexual orientation question</li> <li>• 79% of homosexuals strongly agreed that the questions accurately documented their sexuality</li> <li>• Only 55% of bisexuals strongly agreed</li> <li>• 7% of transgender men and 16% of transgender women would not answer a question about the sex they were assigned at birth</li> </ul>
<p><b>Citation:</b></p> <p>The Fenway Institute, 2013.</p>	
<p><b>Link:</b></p> <p><a href="http://thefenwayinstitute.org/wp-content/uploads/COM228_SOGI_CHARN_WhitePaper.pdf">http://thefenwayinstitute.org/wp-content/uploads/COM228_SOGI_CHARN_WhitePaper.pdf</a></p>	
2012	
<p><b>Title:</b></p> <p>Under What Conditions do Lesbians Disclose their Sexual Orientation to Healthcare Providers? A Review of the Literature</p>	<p>Background</p> <ul style="list-style-type: none"> <li>• Lesbians who disclose their sexual orientation tend to: engage in healthier behaviors (i.e. not smoking), actively seek and receive primary and preventive health care regularly, receive more</li> </ul>

<p><b>Citation:</b></p> <p>St. Pierre M. <i>J Lesbian Studies</i>. 2012;16(2):199-219.</p>	<p>quality care, experience better communication with health care providers, and feel more satisfied with the care they receive.</p> <ul style="list-style-type: none"> <li>• Lesbians' disclosure of sexual orientation is integral to providers' ability to offer them customized care.</li> <li>• Three conditions encourage/discourage disclosure: patient attributes, perceived relevancy, and the healthcare.</li> </ul> <p>Study Findings</p> <ul style="list-style-type: none"> <li>• Lesbians who disclosed tended to: be comfortable with their sexual orientation, be in partnered relationships, and believe they have health issues.</li> <li>• Lesbians who believed disclosure was related to their medical complaint were more likely to disclose.</li> <li>• The presence of GLBT symbols and information in waiting areas, intake forms with inclusive language, ensured confidentiality, and the type of healthcare setting all influenced disclosure.</li> <li>• Women were more likely to disclose with a provider that was comfortable or sensitive to LGBT health.</li> <li>• Women also considered other practical factors before they would disclose such as: provider competency, empathy, and listening skill.</li> </ul>
<p><b>Link:</b></p> <p><a href="https://www.tandfonline.com/doi/abs/10.1080/10894160.2011.604837">https://www.tandfonline.com/doi/abs/10.1080/10894160.2011.604837</a></p>	
<p><b>Title:</b></p> <p>Top Ten Issues to Discuss with Your Provider</p>	<p>Discusses the ten most important issues that bisexuals, lesbians, and transgender individuals should discuss with their healthcare providers that different issues amongst lesbians and bisexual women.</p>
<p><b>Citation:</b></p> <p>GLMA, 2012.</p>	
<p><b>Link:</b></p> <p><a href="http://www.glma.org/index.cfm?fuseaction=Page.viewPage&amp;pageId=947&amp;grandparentID=534&amp;parentID=938&amp;nodeID=1">http://www.glma.org/index.cfm?fuseaction=Page.viewPage&amp;pageId=947&amp;grandparentID=534&amp;parentID=938&amp;nodeID=1</a></p>	
<p>2011</p>	
<p><b>Title:</b></p> <p>Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People</p>	<p>Goal: To provide information about safe and effective healthcare for transsexual, transgender, and gender-nonconforming people in order to maximize their overall health, psychological well-being, and self-fulfillment.</p> <p>Topics Include:</p>
<p><b>Citation:</b></p>	

<p>The World Professional Association for Transgender Health, 2011</p>	<ul style="list-style-type: none"> <li>• Purpose, use, and applicability of the Standards of Care</li> <li>• Living in institutional environments</li> <li>• Disorders of sex development</li> <li>• Difference between gender nonconformity and gender dysphoria</li> <li>• Epidemiologic considerations</li> <li>• Therapeutic approaches for gender dysphoria</li> <li>• Assessment and treatment of children and adolescents with gender dysphoria</li> <li>• Mental Health Hormone Therapy</li> <li>• Reproductive Health</li> <li>• Voice and Communication</li> <li>• Therapy Surgery Postoperative Care and Follow-Up</li> <li>• Lifelong Preventive and Primary Care</li> </ul>
<p><b>Link:</b></p> <p><a href="https://www.wpath.org/media/cms/Documents/Web Transfer/SOC/Standards of Care V7 - 2011 WPATH.pdf">https://www.wpath.org/media/cms/Documents/Web Transfer/SOC/Standards of Care V7 - 2011 WPATH.pdf</a></p>	
<p><b>Title:</b></p> <p>The Health of Lesbian, Gay, Bisexual and Transgender (LGBT) People: Building a Foundation of Better Understanding</p>	
<p><b>Citation:</b></p> <p>Committee on Lesbian, Gay, Bisexual, and Transgender Health Issues and Research Gaps and Opportunities; Washington, D.C.: National Academies Press, 2011.</p>	<p>This report provides information relating to LGBT health status in the US, research on LGBT populations, childhood, adulthood, and recommendations. It was created to provide the public with a better understanding of lesbian, gay, bisexual, and transgender peoples' health.</p>
<p><b>Link:</b></p> <p><a href="https://www.nap.edu/read/13128/chapter/1">https://www.nap.edu/read/13128/chapter/1</a></p>	
<p>2010</p>	
<p><b>Title:</b></p> <p>Approved: New and Revised Hospital EPs to Improve Patient-Provider Communication</p>	<p>Background</p> <ul style="list-style-type: none"> <li>• 2010 Joint Commission revised requirements to improve patient-provider communication, and to increase quality and safety through effective communication, cultural competence, and patient-and family-centered care.</li> <li>• The revised elements of performance address: qualifications for language interpreters/translators; identifying and addressing patient communication needs; collecting race, ethnicity, and language data; patient access to chosen individuals for support; non-discrimination in patient care; and providing language services.</li> <li>• Contains implementation guide with resources and improve patient-provider communication.</li> </ul>
<p><b>Citation:</b></p> <p>The Joint Commission, 2010.</p>	
<p><b>Link:</b></p> <p><a href="http://www.imiaweb.org/uploads/pages/275_2.pdf">http://www.imiaweb.org/uploads/pages/275_2.pdf</a></p>	

	<ul style="list-style-type: none"> <li>Sexual orientation data is not included among the demographic data collected. Sexual orientation data is necessary because it aids providers in tailoring health care for LGBT patients.</li> <li>Many LGBT patients still cite the fear of discrimination as a barrier to utilizing health care.</li> <li>Many LGBT patients still express wanting to bring their partners for support, but provider discomfort often inhibits them in doing so.</li> </ul>
<b>Title:</b> Barriers to Optimal Care between Physicians and Lesbian, Gay, Bisexual, Transgender, and Questioning Adolescent Patients	Residents and attending physicians were surveyed regarding practice, knowledge, and attitudes pertaining to LGBTQ adolescents in order to identify barriers to optimal care between physicians and LGBTQ adolescents.  Most physicians did not: <ul style="list-style-type: none"> <li>Regularly discuss sexual orientation, sexual attraction, or gender identity while taking a sexual history from adolescents.</li> <li>Ask about sexual orientation if an adolescent presented with depression, suicidal thoughts, or had attempted suicide.</li> <li>Ask additional sexual health-related questions if an adolescent stated they were not sexually active.</li> <li>Believe they had all the skills needed to address issues of sexual orientation with adolescents.</li> </ul>
<b>Citation:</b> Kitts, RL. <i>Journal of Homosexuality</i> . 2010.	
<b>Link:</b> <a href="https://www.tandfonline.com/doi/full/10.1080/00918369.2010.485872?src=recsys&amp;">https://www.tandfonline.com/doi/full/10.1080/00918369.2010.485872?src=recsys&amp;</a>	
2009	
<b>Title:</b> Lesbian Women’s Experiences with Health Care: A Qualitative Study	Qualitative study addresses: <ul style="list-style-type: none"> <li>Forced disclosure of sexual orientation</li> <li>Inappropriate care offered even with disclosure of sexual orientation</li> <li>Appreciation of provider support</li> <li>Provider acceptance and comfort</li> <li>Characteristics of an uncomfortable provider</li> <li>Provider misconceptions regarding lesbian patients</li> <li>The relevance of medical disclosure</li> <li>The “coming out” process</li> <li>Provider prejudices</li> </ul>
<b>Citation:</b> Bjorkman M, Malterud K. <i>Scandinavian J Prim Health Care</i> . 2009;27(4):238-243.	
<b>Link:</b> <a href="http://europepmc.org/articles/PMC3413916">http://europepmc.org/articles/PMC3413916</a>	
2008	
<b>Title:</b> Healthcare Preferences Among Lesbians: A Focus Group Analysis	This study used age stratified focus groups and semi-structured interviews to characterize lesbians’ experiences with, and preferences for women’s healthcare.  Results: Participants wanted care that is:
<b>Citation:</b>	

<p>Seaver MR, Freund KM, Wright LM, et al. <i>Journal of Women's Health</i>. 2008;12(2):215-225.</p>	<ul style="list-style-type: none"> <li>• Comprehensive in scope</li> <li>• Person centered</li> <li>• Nondiscriminatory</li> <li>• Inclusive of them as lesbians</li> <li>•</li> </ul>
<p><b>Link:</b></p> <p><a href="http://online.liebertpub.com/doi/pdf/10.1089/jwh.2007.0083">http://online.liebertpub.com/doi/pdf/10.1089/jwh.2007.0083</a></p>	<p>Healthcare providers should:</p> <ul style="list-style-type: none"> <li>• Adopt an inviting, person centered approach toward lesbians seeking healthcare</li> <li>• Assure them access to healthcare information</li> <li>• Establish holistic healthcare delivery systems</li> </ul>
<p>2006</p>	
<p><b>Title:</b></p> <p>Regular healthcare use by lesbians: a path analysis of predictive factors.</p>	<p>Because lesbians often seek medical care less often despite having more health risks, this study wanted to understand the influence of the following on regular health care use among Canadian lesbians:</p> <ul style="list-style-type: none"> <li>• Providers asking about sexual orientation Perceived provider gay-positivity Disclosure of sexual orientation by patients</li> </ul>
<p><b>Citation:</b></p> <p>Steele LS, Tinmouth JM, Lu A. <i>Family Practice</i>. 2006;23(6):631-636.</p>	<p>Data was collected via community surveys.</p> <p>Results:</p>
<p><b>Link:</b></p> <p><a href="https://academic.oup.com/fampra/article/23/6/631/554677">https://academic.oup.com/fampra/article/23/6/631/554677</a></p>	<ul style="list-style-type: none"> <li>• 78.5% of women regularly use health services</li> <li>• 75.8% of women told their provider their sexual orientation</li> <li>• 24.4% of these women disclosed their sexual orientation after first being asked by their provider</li> <li>• 100% of women disclosed their sexual orientation after being asked to</li> <li>• Path analysis showed significant correlations between <ul style="list-style-type: none"> <li>○ Patient's interpreting gay-positivity from their provider and disclosure</li> <li>○ Level of patient "outness" and disclosure</li> </ul> </li> </ul> <p>Conclusion:</p> <p>Patients were found to disclose their sexual orientation when they felt their provider was gay-positive and/or when directly asked to disclose their sexual orientation.</p>

**Additional Resources:**

The same but different: clinician–patient communication with gay and lesbian patients.

Bonvicini KA, Perlin MJ. *Patient Educ Couns*. 2003;51(2):115-122.

[http://www.pec-journal.com/article/S0738-3991\(02\)00189-1/abstract](http://www.pec-journal.com/article/S0738-3991(02)00189-1/abstract)

Disclosure for same-sex attracted women enhancing the quality of the patient-doctor relationship in general practice. McNair RP, Hegarty K, Taft A. *Social Science & Medicine*. 2015;75(1):208-216.

<https://search.informit.com.au/documentSummary;dn=513882844745629;res=IELHEA>

Inclusion of Sexual Orientation and Gender Identity in Stage 3 Meaningful Use Guidelines: A Huge Step Forward for LGBT Health. Cahill SR, Baker K, Deutsch MB, et al. *LGBT Health*. 2016;3(2):100-102.

<https://www.liebertpub.com/doi/abs/10.1089/lgbt.2015.0136>

Patterns and Predictors of Disclosure of Sexual Orientation to Healthcare Providers among Lesbians, Gay Men, and Bisexuals. Durso LE, Meyer IH. *Sex Res Social Policy*. 2013;10(1):35-42.

<https://link.springer.com/article/10.1007/s13178-012-0105-2>

Veterans administration health care utilization among sexual minority veterans.

Simpson T, Cochran B, Balsan K, et al. *Psychol Serv*. 2013;10(2):223-232.

<http://psycnet.apa.org/buy/2013-18695-006>

Health Care Providers' Implicit and Explicit Attitudes Toward Lesbian Women and Gay Men. Sabin JA, Riskind RG, Nosek BA. *Am J Public Health*. 2015;105(9):1831-1841.

<http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2015.302631>

Healthcare Preferences Among Lesbians: A Focus Group Analysis. Seaver MR, Freund KM, Wright LM, et al. *Journal of Women's Health*. 2008;17(2):215-225.

<https://www.liebertpub.com/doi/abs/10.1089/jwh.2007.0083>

Improving Health Care for the Lesbian and Gay Communities. Makadon HJ. *N Engl J Med*. 2006;354(9):895-897.

[https://www.researchgate.net/profile/Harvey\\_Makadon2/publication/7266637\\_Improving\\_Health\\_Care\\_for\\_the\\_Lesbian\\_and\\_Gay\\_Communities/links/545cad3e0cf2c1a63bf8ba6b.pdf](https://www.researchgate.net/profile/Harvey_Makadon2/publication/7266637_Improving_Health_Care_for_the_Lesbian_and_Gay_Communities/links/545cad3e0cf2c1a63bf8ba6b.pdf)

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