



NATIONAL LGBT HEALTH
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE



Addressing Social Determinants of Health for Sexual and Gender Minority (SGM) People (Part 1)

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Our Roots

Fenway Health

- Independent 501(c)(3) FQHC
- Founded 1971
- Mission: To enhance the wellbeing of the LGBTQIA+ community as well as people in our neighborhoods and beyond through access to the highest quality health care, education, research, and advocacy
- Integrated primary care model, including HIV and transgender health services

The Fenway Institute

- Research, Education, Policy



LGBTQIA+ Education and Training

The National LGBT Health Education Center offers educational programs, resources, and consultation to health care organizations with the goal of providing affirmative, high quality, cost-effective health care for lesbian, gay, bisexual, transgender, queer, intersex and asexual (LGBTQIA+) people.

- Training and Technical Assistance
- Grand Rounds
- ECHO Programs
- Online Learning
 - Webinars and Learning Modules
 - CE, and HEI Credit
- Resources and Publications
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Creating a Transgender Health Program
at Your Health Center:
From Planning to Implementation

SEPTEMBER 2018



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Disclosure

I have no financial conflicts of interest.

Learning Objectives

- Understand Social Determinants of Health (SDOH) as described by Healthy People 2020
- Understand how SDOH are experienced in particular ways by SGM people
- Understand how SDOH affect SGM people's health and access to health care

Determinants of Health

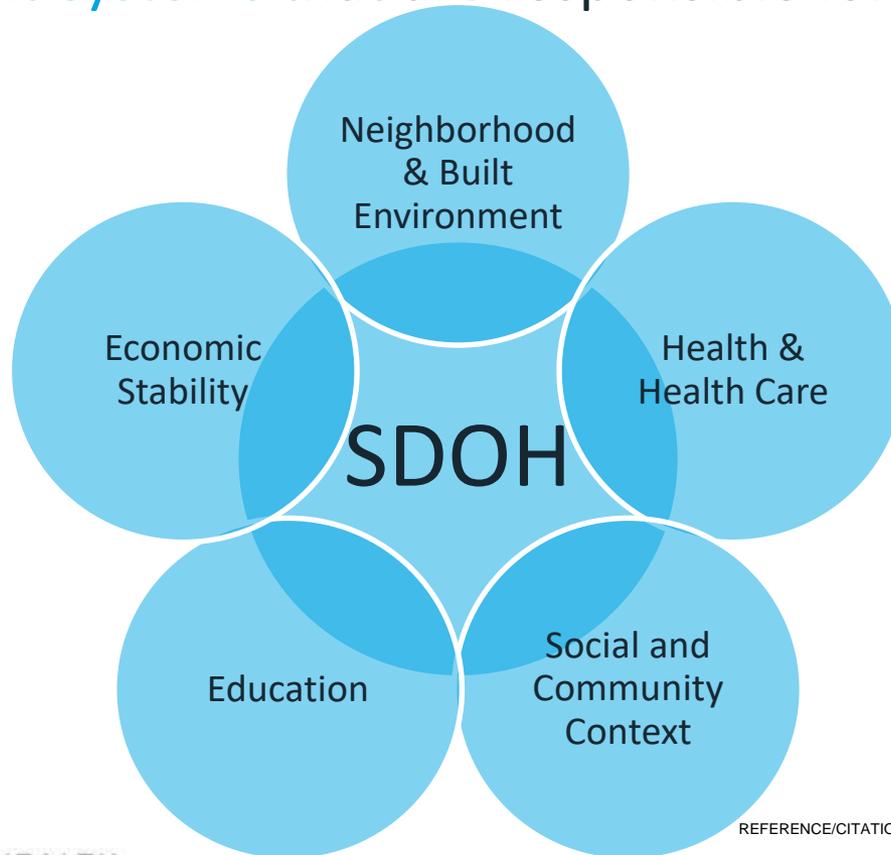
Factors that contribute to a person's current state of health. These factors may be biological, socioeconomic, psychosocial, behavioral, or social in nature. Scientists generally recognize five determinants of health of a population:

- Biology and genetics. Examples: sex and age
- Individual behavior. Examples: alcohol use, injection drug use (needles), sex without condoms, and smoking
- Social environment. Examples: discrimination, income, and gender
- Physical environment. Examples: where a person lives and crowding conditions, air quality, access to healthy food, public transportation, parks and recreation
- Health services. Examples: Access to quality health care and having health insurance

REFERENCE/CITATION: U.S. Department of Health and Human Services, Healthy People 2020 Draft. 2009, U.S. Government Printing Office.

Social Determinants of Health:

The complex, integrated, and overlapping **social structures** and **economic systems** that are responsible for most **health inequities**.



REFERENCE/CITATION: Healthy People 2020. Understanding Social Determinants of Health 2013

Social Determinants of Health:

These social structures and economic systems include the **social environment, physical environment, health services,** and **structural and societal factors.**

Social determinants of health are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world.

Social determinants of health contribute to health disparities.

REFERENCE/CITATION: Commission on Social Determinants of Health (CSDH), Closing the gap in a generation: health equity through action on the social determinants of health. Final report of the Commission on Social Determinants of Health. 2008, World Health Organization: Geneva.

Health Disparities:

- A type of difference in health that is closely linked with social or economic disadvantage.
- Health disparities negatively affect groups of people who have systematically experienced greater social or economic obstacles to health.
- These obstacles stem from characteristics historically linked to discrimination or exclusion such as race or ethnicity, religion, socioeconomic status, gender, mental health, sexual orientation, or geographic location.

REFERENCE/CITATION: U.S. Department of Health and Human Services, Healthy People 2020 Draft. 2009, U.S. Government Printing Office.

Health Disparities:

- Gay and bisexual men, transgender women at higher risk of HIV and other STIs
- Lesbians and bisexual women may have higher rates of ovarian and breast cancer related to nulliparity
- Lower rates of preventative cancer screenings
- Lesbian women nearly 3 times more likely to be obese or overweight than other women
- Exogenous hormone use may lead to higher risk of cardiovascular disease
- These disparities intersect with racial/ethnic disparities (e.g. Black lesbian women and obesity, diabetes)

Examples of SGM Disparities:

Transgender people:

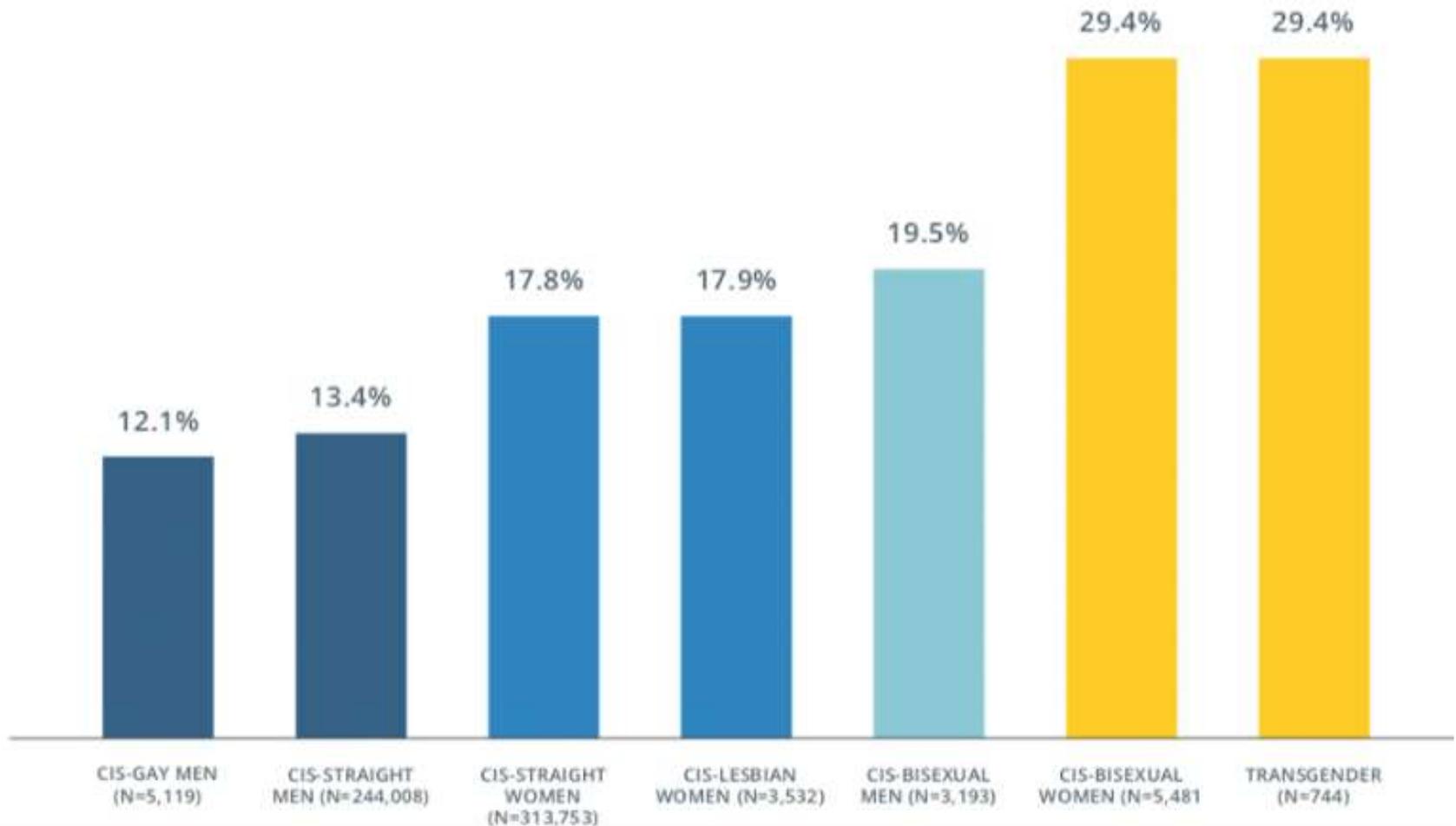
- experience a high prevalence of HIV/STIs (especially trans women), hate crimes, behavioral health issues, and suicide
- have difficulty accessing preventive and urgent care,
- are less likely to have health insurance than heterosexual or cisgender sexual minority individuals

Older SGM individuals face additional barriers to health because of isolation, fewer family supports, and a lack of social and support services

Delving more deeply into Social Determinants of Health: Economics

- Despite stereotype that SGM people are wealthy...
- 2019 Williams Institute analysis found higher rates of poverty among bisexual women, men, trans people
- SGM people of color poorer than white SGM people.
- Black, White, Asian, and other-race SGM people have higher poverty rates than same-race cis straight people.
- SGM people in rural areas (26.1%) have the highest poverty rates, compared to SGM people in urban areas (21.0%) and cisgender straight people in either rural (15.9%) or urban (15.5%) areas.

LGBT Poverty in the United States



Badgett, Choi, Wilson (2019). *LGBT poverty in the United States: A study of differences between sexual orientation and gender identity groups* (BRFSS data)

Transgender People Especially Vulnerable to Poverty and Discrimination

- 29% live in poverty (vs. 14% of US population)
- 15% unemployed (vs. 5% of US population)
- 30% lifetime homelessness, 12% in past year
 - US Transgender Survey 2015, n=27,715

Neighborhood and Built Environment

- According to Healthy People 2020, this Social Determinant of Health includes:
 - Access to Foods that Support Healthy Eating Patterns
 - Quality of Housing
 - Crime and Violence
 - Environmental Conditions

<https://www.healthypeople.gov/subtopics-of-sdoh/neighborhood-and-built-environment>

Violence

- On per capita basis, SGM people are more likely to be targets of hate crimes than any other group in America
 - New York Times. June 16, 2016.
- 19% of reported hate crimes in U.S. based on sexual orientation, 2% based on gender identity
 - Federal Bureau of Investigation, 2014 Hate Crime Statistics.
- Gay men report being victims of violent hate crimes at a higher rate than any other targeted group.
 - Stotzer, Williams Institute, 2012
- Transgender women, Black SGM people vulnerable
 - 46% of transgender Americans reported verbal harassment, 9% reported being physically attacked in past year
 - US Transgender Survey 2015.

Housing

- SGM people, and especially transgender people, experience housing discrimination
- 2016 Suffolk University Law School: Transgender and gender nonconforming individuals experienced differential treatment 61% of the time, compared to non-transgender individuals
 - 27% less likely to be shown additional areas of apartment complex
 - 21% less likely to be offered financial incentive to rent
 - 12% more likely to hear negative things about apartment, area
 - 9% more likely to be quoted higher rental price
 - Langowski, Berman, Holloway, McGinn (2017). *Yale Journal of Law & Feminism*, 29(2).

Social and Community Context

- According to Healthy People 2020, this Social Determinant of Health includes:
 - Social Cohesion
 - Civic Participation
 - Discrimination
 - Incarceration

<https://www.healthypeople.gov/subtopics-of-sdoh/social-and-community-context>

Anti-SGM Discrimination

- One in four SGM Americans reported experiencing discrimination in 2016 (Singh and Durso, CAP, 2017)
- SGM people experience discrimination in employment, housing, and public accommodations, including health care
- According to the 2017 Center for American Progress study, 69% of those who reported discrimination said it affected their psychological well-being, and 44% said it affected their physical well-being
- 57% said it negatively affected their neighborhood and community environment

-  State law explicitly prohibits discrimination based on sexual orientation and gender identity *(22 states, 2 territories + D.C.)*
-  State explicitly interprets existing prohibition on sex discrimination to include sexual orientation and/or gender identity (see note) *(2 states, 0 territories)*
-  State law explicitly prohibits discrimination based on sexual orientation only *(1 state, 0 territories)*
-  No explicit prohibitions for discrimination based on sexual orientation or gender identity in state law *(25 states, 3 territories)*
-  State is in a federal circuit with a ruling that explicitly interprets existing federal prohibition on sex discrimination (under Title VII) to include discrimination based on sexual orientation and/or gender identity. Visit [this page](#) for more information *(26 states, 3 territories)*



State law explicitly prohibits discrimination based on sexual orientation and gender identity *(21 states, 0 territories + D.C.)*



State explicitly interprets existing prohibition on sex discrimination to include sexual orientation and/or gender identity (see note) *(2 states, 0 territories)*



State law explicitly prohibits discrimination based on sexual orientation only *(1 state, 0 territories)*



No explicit prohibitions for discrimination based on sexual orientation or gender identity in state law *(26 states, 5 territories)*

SGM Elders have unique SDOH

- Lifecourse perspective: Many came of age at a time with homosexuality was criminalized, viewed as a disease and a sin
- Older Americans are more likely to morally disapprove of homosexuality
- Social isolation
- Behavioral health



Minority Stress

- Caused by external, objective events and conditions
- Caused by expectations of such events (anticipatory anxiety)
- Caused by internalization of societal attitudes
- Caused by navigating disclosure, concealment of sexual orientation and/or gender identity
 - Ilan Meyer, *Psychological Bulletin*, 2003



Incarceration

- SGM youth may be overrepresented in juvenile justice system; could carry over into adult corrections
 - Selp N, True Colors United, 2017
- 2% of transgender respondents on 2015 national survey were incarcerated in the past year vs. 0.9% of the general population
 - 2015 National Transgender Discrimination Survey
- Gay men are 11 times as likely to be raped in prison; bisexual men and transgender people are 10 times as likely to be raped
 - Beck, Johnson, Bureau of Justice Statistics, 2012; Beck, Johnson, BJS, 2014

Health and Health Care

- Prior to health care reform, many SGM people did not have health insurance
- Many people living with HIV could not get insurance
- Health care reform cut the uninsurance rate among LGB people in half, from 22% to 11%
 - Karpman, Skopec, Long. Health Reform Monitoring Project, 2015.
- Uninsurance rate dropped for low-income transgender people from 59% to 35%
 - Baker, Durso, Cray, Center for American Progress, 2014
- Many low-income SGM people, especially in South, lack insurance due to non-expansion of Medicaid



Discrimination in Health Care is Barrier to Accessing Care

2009 survey of 4,916 SGM people found that 56% of LGB patients, 70% of trans patients reported:

- Being refused needed care
- Health providers refusing to touch them, using excessive precautions (latex gloves)
- Being blamed for their health status
- Health providers being rough or abusive
 - Lambda Legal, *When health care isn't caring*, 2010

Causes SGM people to not seek subsequent care

FENWAY  HEALTH

DISCRIMINATION AND HEALTH IN
MASSACHUSETTS: A STATEWIDE SURVEY OF
TRANSGENDER AND GENDER
NONCONFORMING ADULTS

Reisner SL, White JM, Dunham EE, Heflin K, Begenyi J, Cahill S, and the Project Voice Team



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Impact on health

- Public accommodations discrimination associated with two-fold increased risk of adverse physical (RR=1.84), emotional (RR=1.99) symptoms in past 30 days.
- Those reporting discrimination in health care 19% less likely to seek emergency care, 25% less likely to seek routine or preventive care



Education

- SGM and questioning youth experience widespread victimization in schools
- According to GLSEN 2015 School Climate Survey (n= 10,528), 27% were physically harassed based on their sexual orientation, 20% based on gender identity
- 71% verbally harassed for sexual orientation, 55% verbally harassed for gender identity
- LGB youth more likely to feel unsafe, get in fight, bring weapon to school
 - 2017 CDC Youth Risk Behavior Survey data
- Affects behavioral health, school performance, truancy



Tying it all together

- These unique experiences and disproportionate impacts can affect SGM people's health and wellbeing
- SGM people, especially SGM people of color and older SGM people, may experience medical mistrust
- Experiences of discrimination can cause SGM people to not seek health care subsequently, whether preventive, routine care or emergency care

Addressing Social Determinants of Health for SGM People (Part 2) Learning Objectives

- Understand the importance of outreach and engagement in healthcare and research settings
- Understand key concepts to keep in mind when engaging with the LGBTQIA+ community
- Understand the various methods and strategies of outreach and engagement with the LGBTQIA+ community and how they can be used

We hope you can join us for Part 2 of this session on May 12, 2020!

Questions?



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Thank you!

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