LGBTQ Health 101

How to be an Ally in the Health Professions

American Medical Student Association - Gender and Sexuality Action Committee

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• Defining “LGBTQ”

• A Brief History of the LGBTQ Movement

• Health Disparities Faced by the LGBTQ Community

• How to be an Ally and an Advocate
Terminology
The Gender Unicorn

Gender Identity
- Female / Woman / Girl
- Male / Man / Boy
- Other Gender(s)

Gender Expression
- Feminine
- Masculine
- Other

Sex Assigned at Birth
- Female
- Male
- Other / Intersex

Physically Attracted to
- Women
- Men
- Other Gender(s)

Emotionally Attracted to
- Women
- Men
- Other Gender(s)

To learn more, go to: www.transstudent.org/gender

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• Sex assigned at birth is based on:
  • Anatomy
  • Hormones
  • Chromosomes
What does Intersex mean?

• Intersex individuals are born with anatomy, hormones, or chromosomes that doesn’t fit the societal definitions of “male” or “female.”

• Historically, intersex babies have underwent “corrective” surgeries after birth.
  • Currently, there is momentum to end these unnecessary and damaging surgeries.

• The Intersex Society of North America states that at least 1 in 1500 to 1 in 2000 people are born intersex.
• **Gender Identity**: an internal sense of being male, female, neither, both, or another gender

• For transgender people, gender identity does not match sex assigned at birth.
Cisgender
Gender Identity = Sex Assigned at Birth

Transgender
Gender Identity ≠ Sex Assigned at Birth
Cisgender

Cis Women  Cis Men

Transgender

Trans Women  Trans Men

Non-Binary

Genderqueer

Genderfluid

Bigender

Agender

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Transgender is an umbrella term used to describe those whose gender identity does not align with the sex they were assigned at birth.

- **Transgender Man**: A person assigned female at birth who identifies as a man
- **Transgender Woman**: A person assigned male at birth who identifies as a woman
- **Non-Binary**: An umbrella identity describing a person who does not identify exclusively in the gender binary
  - Agender
  - Bigender
  - Genderfluid
  - Genderqueer
Gender Identity Spectrum

Man

Genderqueer
not subscribe to conventional gender distinctions; identifying with neither, both, or a combination of genders

Agender
not having a particular gender

Woman
• Gender expression: **the physical manifestation of one’s gender identity**
  • Clothing, hairstyle, voice, chosen name, pronouns, and other attributes

• Transgender people seek to make their gender expression match their gender identity, rather than their sex assigned at birth.
Physical attraction: who one is attracted to both **sexually and sensually**

• Romantic attraction ≠ physical attraction
• Romantic attraction may or may not involve physical attraction or desire for sexual contact.
Emotional attraction refers to the desire to get to know someone and connect with them emotionally.

- Often a result of personality instead of physicality
- Romantic attraction is heavily linked to emotional attraction.
Sexual Orientation Spectrum

Asexual
No sexual attraction

Demisexual
Little sexual attraction

Allosexual
Sexual attraction

Heterosexual
Emotional, physical, spiritual and/or sexual attraction to people of another gender

Bisexual/Pansexual
Emotional, physical, spiritual and/or sexual attraction to people of more than one/all genders

Homosexual
Emotional, physical, spiritual and/or sexual attraction to people of the same gender

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History
1950s

- **1950** – 500 “homosexuals and other sex perverts” fired from federal jobs and 438 discharged from military in “Lavender Scare.”
- **1952** – American Psychiatric Association lists homosexuality as a personality disturbance.
- **1953** – Eisenhower signs executive order banning homosexuals from working in government.

1960s

- **1961** – Illinois is the first state to decriminalize homosexuality.
- **1969** – Stonewall riots occur at the Stonewall Inn in New York City, beginning the modern LGBTQ civil rights movement in America.
1970s

- **1970** – First pride parade held on Stonewall anniversary
- **1973** – Maryland bans same-sex marriage, while the APA removes homosexuality from its list of mental disorders.
- **1978** – Harvey Milk is elected to public office in January and murdered in November. The first rainbow flag is designed by Gilbert Baker inspired by Milk.

1980s

- **1981** – The CDC publishes the first official report of AIDS.
- **1987** – Reagan publicly recognizes the AIDS crisis for the first time.
1990s

- **1990** – H.W. Bush signs the Ryan White CARE Act, the first federal program to help fund people with AIDS.
- **1993** – Clinton signs “Don’t Ask, Don’t Tell.”
- **1996** – Clinton signs Defense of Marriage Act, defining marriage as a “legal union between one man and one woman.”

2000s

- **2000** – Vermont becomes the first state to legalize civil unions between same sex couples.
- **2003** – Supreme Court strikes down “homosexual conduct” law in Texas, decriminalizing same-sex sexual conduct.
- **2008** – California Supreme Court rules that limiting marriage to opposite-sex couples is unconstitutional, white voters in California approve Prop 8, making same-sex marriage illegal.
2010s

• **2011** – “Don’t Ask, Don’t Tell” is repealed.

• **2013** – Supreme Court strikes down Defense of Marriage Act, ruling that legally married same-sex couples are entitled to federal benefits.

• **2015** – Supreme Court strikes down all state bans on same-sex marriage, making it legal in all fifty states.

• **2016** – Secretary of Defense announces Pentagon will lift ban on transgender people serving openly in the military.

• **2017** – Trump announces his ban on transgender individuals serving in any capacity in the military.

• **2019** – Supreme Court allows Trump’s transgender military ban to go into effect.
Health Disparities
What is a Health Disparity?

• Health disparities are *preventable differences* in the burden of disease, injury, violence, or in opportunities to achieve optimal health.
• Experienced by *socially disadvantaged* racial, ethnic, and other population groups and communities
• The LGBTQ community experiences many health disparities.
What causes LGBTQ Health Disparities?

• Minority stress
  • Prejudice and discrimination experienced by LGBTQ individuals contribute to chronically stressful events that may lead to negative health outcomes.

• Social determinants of health
  • LGBTQ individuals face discrimination when seeking employment and safe housing, especially LGBTQ people of color and transgender individuals.

• Lack of physician competency and training
  • A 2011 study found that medical students receive a median of only five hours of training on LGBTQ health
  • A 2018 survey of 658 New England medical students found that 80% of students felt they were “not competent” or “somewhat not competent” with medical treatment of gender and sexual minorities.

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• LGBTQ individuals face stressors and risks for substance abuse including:
  • Homophobia, Biphobia, Heterosexism, or Transphobia
  • Social/structural violence and discrimination

• Influencing factors of depression and anxiety in LGBTQ patients:
  • Continual concealment of identity
  • Victimization or fear of verbal or physical attack
  • Issues relating to self-acceptance
  • Social isolation and lack of social supports
  • Isolation from the LGBTQ community (in the case of transgender and bisexual individuals)
Suicide

• LGBTQ individuals are at a higher risk for suicide than non-LGBTQ individuals.
  • LGBT youth are four times more likely to attempt suicide.

• Between 38% and 65% of transgender individuals experience suicidal ideation.

• An individual with a non-accepting family is eight times more likely to have attempted suicide than an individual with an accepting family.
• Gay and bisexual men are overrepresented in the population of men who are diagnosed with eating disorders.
  • 30% - 60% of gay and bisexual men report greater odds to diet for weight loss.
• Lesbian and bisexual women are more likely to be obese than heterosexual women.
• A positive association has been found between alcohol intake and depression, leading to weight gain.
• High rates of healthcare discrimination may influence LGBTQ individuals to underutilize healthcare services for fear of being mistreated.

• A 2017 survey by the College of American Pathologists stated that of LGBQ individuals surveyed:
  • 8% said a doctor or healthcare provider had turned them away due to sexual orientation.
  • 9% said a doctor or healthcare provider had used harsh/abusive language when treating them.
  • 7% said they had experienced unwanted physical contact from a doctor or other healthcare provider.
Lower Rates of Healthcare Utilization

• The same study reported that of transgender individuals surveyed:
  • 29% said a doctor or healthcare provider turned them away due to gender identity.
  • 23% said a doctor or healthcare provider intentionally misgendered them or used the wrong name.
  • 21% said a doctor or healthcare provider used harsh/abusive language when treating them.
  • 29% said that they experienced unwanted physical contact from a doctor or other healthcare provider.
Teen Issues

• LGBTQ teens may experience:
  • Bullying and harassment
  • Bathroom bills affecting transgender students
  • Anti-bullying laws excluding bullying based on sexual orientation
  • Struggle with identity throughout puberty
  • Difficulty accessing help resources due to banned books or blocked websites
  • Laws preventing educators from talking about LGBTQ issues
Unfortunately, few students are taught accurate information about LGBTQ people and topics. From history to art to sexual health education, it’s necessary for students’ health and academic success that they see themselves, and each other, reflected in the curriculum.

Only 19.8% of LGBTQ students were taught positive representations about LGBTQ people, history, or events in school. Less than half (41%) of LGBTQ students could find information about LGBTQ-related issues in their school library.

18.4% had been taught negative content about LGBTQ topics. Only 6.7% of LGBTQ students received LGBTQ-inclusive sex education at school.

But it doesn’t have to be this way. Research shows that LGBTQ students in schools with an inclusive curriculum feel safer in school and have better mental health and academic outcomes.

Less likely to hear homophobic remarks (42.9% vs. 64.6%) and negative remarks about transgender people (29.9% vs. 46.3%).

Less likely to feel unsafe because of their sexual orientation (41.8% vs. 63.3%) and gender expression (34.6% vs. 47.0%).

Higher self-esteem and lower levels of depression. Were less likely to miss school (23.6% vs. 37.7%). More likely to have higher GPAs (3.3 vs. 3.2 GPAs).

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Transgender-specific Issues

• Transition services and care can be difficult to access due to:
  • Stigma
  • Discrimination
  • Legal and socioeconomic barriers
  • Lack of physician competency
  • Insurance company policies

• Trans women of color experience a higher degree of violence than the rest of the LGBTQ population, often resulting in fatalities.

• In 2018, 29 trans people died because of fatal violence. The majority were trans women of color.
How to be an Ally and an Advocate
GLAAD, Gays & Lesbian Alliance Against Defamation, suggests the following steps to becoming a good ally to your LGBTQ peers:

- Listen
- Be open-minded
- Be willing to talk
- Be inclusive and inviting to your LGBTQ friends
- Don’t assume that all your friends, classmates, and coworkers are straight or cisgender
- Speak up when you hear others making anti-LGBTQ jokes or comments
- Confront your own internal prejudices and biases, even if it is uncomfortable to do so
- Help to defend your LGBTQ friends, classmates, and coworkers against discrimination
Being an Ally Goes Beyond Supporting LGBTQ People

• The LGBTQ population is as intersectional as any population. Supporting LGBTQ people means supporting all other minority populations and their struggles in American society.

• LGBTQ people of color, especially transgender women of color, are in much more dangerous positions than others in the community.

• Individuals of multiple minorities suffer multiple levels of discrimination.

• Being an ally means listening and learning from others and using your privilege as a tool in situations of injustice towards people of color.
Medical students receive a minimal amount of education about LGBTQ patients throughout their training, leading to a continued lack of competent care for the LGBTQ community.

You have a voice in what you want to learn and what kind of health professional you’d like to become.

Demand culturally diverse education so that you can practice cultural humility in your care.

Amplify the voices of LGBTQ individuals, students, medical students, and patients in your area.

Engage with the LGBTQ groups on your campus and support their events, fundraising efforts, and causes.

Join professional organizations, such as AMSA, that aid in the advancement of LGBTQ medical education.
Ways to Advocate for LGBTQ Individuals

• Advocate for LGBTQ individuals by volunteering for organizations pushing LGBTQ civil rights forward:

• AMSA – Gender & Sexuality Action Committee
• GLSEN – Gay, Lesbian & Straight Education Network
• GLAAD – Gay & Lesbian Alliance Against Defamation
• TSER – Trans Student Educational Resources
• The Trevor Project – LGBTQ Crisis Information
• Planned Parenthood – LGBTQ Care and Education
Contact!

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References


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