

UNC-Chapel Hill Safe Zone Training

Inclusive Health Care Reference Outline

A program of the UNC-Chapel Hill LGBTQ Center

Terri L. Phoenix, Ph.D., Director

April S. Callis, Ph.D., Assistant Director

Mariel F. Eaves, Administrative Support Specialist

lgbtq.unc.edu

919-843-5376

History of Safe Zone

1998: The Safe Zone program at UNC-Chapel Hill started by Office of the Dean of Students and B-GLAD.

2003: UNC LGBTQ Office (now Center) assumes responsibility for the Safe Zone program to ensure continuity.

2006: First Health Care SZ training at Carolina

Health Care Safe Zones have comprised an increasing ratio of Safe Zone trainings:

- 6.3% in 2015-2016
- 16.7% in 2016-2017
- 16.7% in 2016-2017
- 25% in 2018-2019

Purpose of Safe Zone

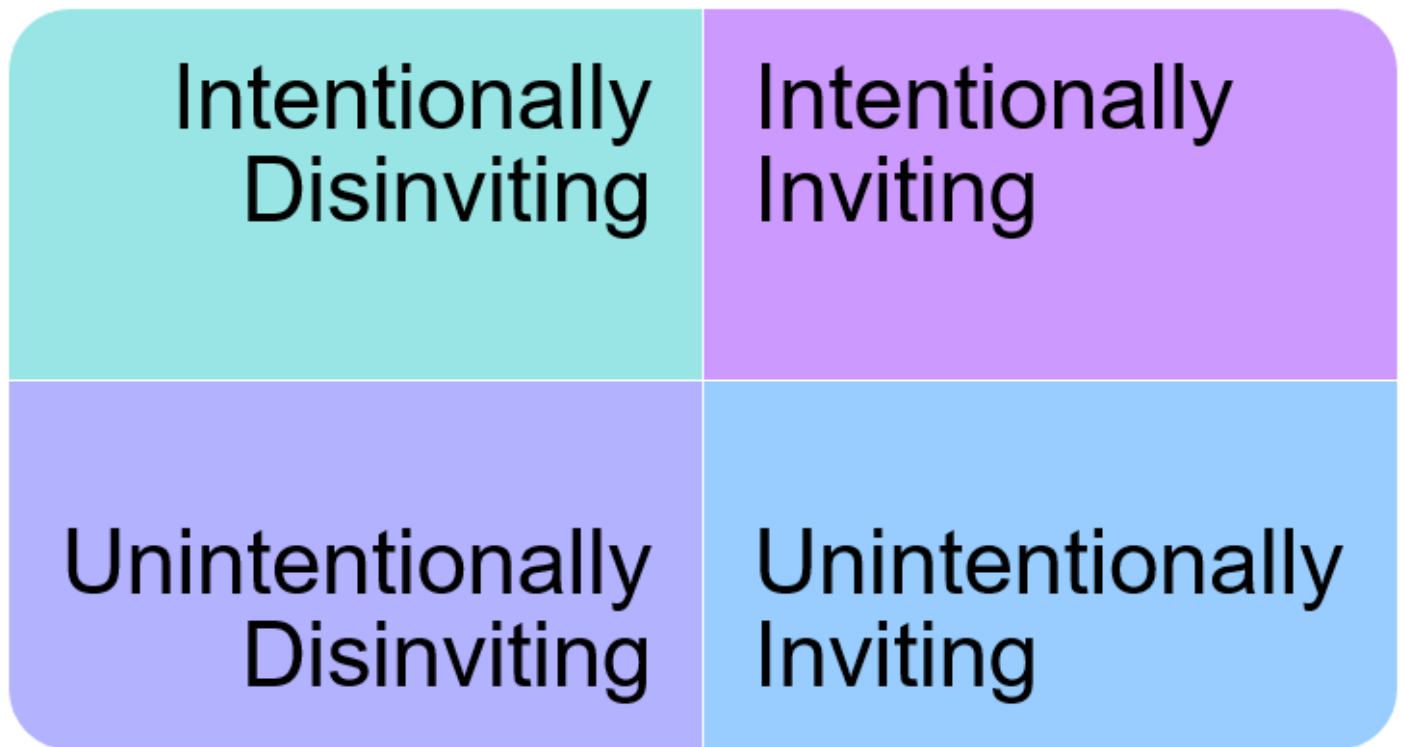
The Safe Zone Ally program is a symbol of this University's efforts to increase awareness and acceptance of the diverse gay, lesbian, bisexual, transgender, intersex, and queer (LGBTIQA+) communities.

The purpose of Safe Zone is to create a network of allies for people of all sexual orientations, gender identities, and gender expressions.

What We Mean by “Ally”

- Ally does NOT mean expert
- Ally is NOT a static identity
- Being an ally is using your privilege to disrupt systems of marginalization
- This means you can be an ally AND part of the LGBTQ community

Creating Intentionally Inviting Spaces



These concepts exist in a matrix of “invitingness” and “intentionality.”

- Intentionally disinviting = refusing to use the requested pronouns
- Unintentionally disinviting = assuming incorrect pronouns
- Unintentionally inviting = assuming correct pronouns
- Intentionally inviting = introducing oneself with, asking for, and using correct pronouns.

Adapted from: Purkey, William W. “Introduction to Invitational Theory.”

Language and Terminology

Knowing terminology is one way to be an ally/intentionally inviting! As you learn new terms, keep the following in mind:

- Language is Fluid: it changes over time, by region, demographic, and cultural characteristics.
- Language is Contested: disagreements occur within communities that hold similar identities.
- Learn to Understand: the purpose of learning terminology is to understand people's experiences rather than to assign labels.

Assigned Sex at Birth

Term used to refer to the way one's sex is classified at birth as male, female, or intersex based on anatomical, chromosomal, and hormonal characteristics.

Intersex

Refers to people who are born with any of a range of sex characteristics that may not fit a doctor's notions of binary "male" or "female" bodies. Some traits are identified at birth, while others may not be discovered until puberty or later in life.

Gender Identity

The gender an individual identifies as psychologically, regardless of what gender they were assigned at birth.

Gender Expression

How someone performs or expresses themselves in appearance, behavior, speech, or other mannerisms. This may or may not be analogous to their gender identity.

Two Spirit

A term sometimes used within Native American communities to refer to someone who self-identifies as having both male and female genders or having a gender other than that assigned at birth.

Nonbinary

Term used to describe an identity that encompasses both male and female, neither male nor female, or beyond male and female.

Transgender

An umbrella term used to describe a loose association of people who transgress gender norms in a wide variety of ways. Used also to refer to people whose gender identity differs from their assigned sex at birth.

Cisgender

Term used to refer to a person whose gender identity aligns with their assigned sex at birth.

Sexual Orientation

A term that refers to how someone self-identifies their sexual feelings and desires, and/or who they are open to being in a sexual relationship with.

Romantic Orientation

A term that refers to how someone self-identifies their romantic feelings.

Same-Gender-Loving

A term coined by activist Cleo Manago that is sometimes used by Black people to express an alternative sexual orientation.

Asexual

A sexual orientation characterized by a lack of sexual desire, or low/absent interest in sexual activity.

Lesbian

Typically used to refer to a woman who is attracted to and may form sexual and affectionate relationships with other women.

Gay

Typically used to refer to a man who is attracted to and may form sexual and affectionate relationships with other men.

Bisexual or Pansexual

Typically refers to individuals who may feel attraction to and may form sexual and affectionate relationships with people of varying gender identities.

Queer

In the mid-late 1900s this was a derogatory slang term for the LGBTQ community and currently is still used by some in this manner. Some people use this as an all-inclusive or umbrella term to refer to all people who identify as LGBT.

Coming Out

Process of recognizing and accepting one's sexual orientation, gender expression, and/or identity. Also used to refer to the act of disclosing one's sexual orientation, gender expression, and/or identity to others.

Heterosexism

Societal and institutional reinforcement of heterosexuality as the privileged and norm; with the assumption that everyone identifies as heterosexual.

LGBT Population Estimates

Approximately 11 million people in the U.S. identify as LGBT
Approximately 4% of NC population identify as LGBT

- 22% are African-American
- 11% are Latinx
- 26% are raising children

Sources: Gallup (2018), Williams Institute (2019)

Discrimination & Stigma Cause Health Disparities

Interpersonal discrimination includes:

- Name-calling
- Harassment
- Verbal Abuse
- Physical Abuse
- Refusal to Provide Services

Structural Discrimination includes:

- Health Coverage and Insurance
- Legal Barriers
- Housing
- Education
- Employment

Adapted from (Ard, 2015)

Coverage Exclusions

Even when a transgender person has health insurance, plan language may exclude coverage for both routine care and transition-related care.

Example:

2019 NC State Health plan does not cover transition related care.

Language: "Treatment or studies leading to or in connection with sex changes or modifications and related care."

Source: 2019 State Health Plan Benefits Booklets

Postponing Needed Treatment: LGB Individuals

In a 2014 study, 15.2% of women who identified as gay or lesbian failed to obtain needed medical care due to cost as compared to 9.6% of those who identified as straight.¹

Sources: CDC 2014, UCLA Center for Health Policy Research 2018

Postponing Needed Treatment: Transgender Individuals

“Nearly one-quarter (23%) of respondents reported that at some point in the past year they needed health care but did not seek it due to fear of being disrespected or mistreated as a transgender person.”

Chart: Figure 7.6 of The Report of the 2015 U.S. Transgender Survey

Source: The Report of the 2015 U.S. Transgender Survey

Negative Experiences and Bias

Transgender Individuals

Of transgender people who had seen a health care provider in the previous year:

- 33% reported at least one negative experience
- 8% reported being refused transition related care
- 2% were victims of violence in doctor's offices

Source: The Report of the 2015 U.S. Transgender Survey

Health-Related Behavior Indicators of U.S. Adults, by Sexual Orientation

Bisexuals had worse health indicators than gay/lesbian or straight respondents.

H.I.V.

Men who have sex with men (MSM) accounted for 70% of all new HIV diagnoses in the United States in 2017

A 2019 study found that 14.1% of trans women and 3.2% of trans men were HIV positive.

Black trans women had the highest rates of HIV infection, at 44.2%

Chart from CDC.gov: New HIV diagnoses among gay and bisexual men in the United States and dependent areas in 2017 by race/ethnicity:

- Blacks/African Americans = 37 percent;
- Whites = 28 percent;
- Hispanics/Latinos = 29 percent;

- Multiple Races = 2 percent;
- Asians = 3 percent;
- American Indians/Alaska Natives = 1 percent;
- Native Hawaiians and Other Pacific Islanders = greater than 1 percent.

Source: CDC 2015 National Health Interview Survey.

Note: “straight, not gay” and “straight, not gay or lesbian” were response options vs. “gay” for men and “gay or lesbian” for women; gay/lesbian is how they reported the data (not separated out).

Physical Violence

- Sexual Orientation was 3rd highest motivator of reported hate crimes (15.8%)
- 70% of LGBTQ students had experienced verbal harassment at school in the past year based on sexual orientation, 59% based on gender expression.
- 28.9% of LGBTQ students were physically harassed in the past year at school because of sexual orientation, 24.4% because of gender expression.

Sources: Hate Crime Statistics, 2017; Kosciw et. al, 2018 (GLSEN 2017 study out of 23,001 students grades 6 through 12)

Intimate Partner Violence and Sexual Assault

2019 AAU study found higher rates of sexual assault among transgender people, asexuals, and bisexuals.

- Heterosexual = 9.1%
- Gay or Lesbian = 10.8%
- Bisexual = 16.9%
- Asexual, Queer or Questioning = 15.6%

Mental Health and Suicidality

- 39% of trans individuals reported experiencing current serious psychological distress, versus 5% of the general population.
- 29% LGB teens have attempted suicide, versus 6.4% of non-LGB teens.²
- 40% of transgender individuals reported attempting suicide, compared to 4.6 of US population.³

Source: The Report of the 2015 U.S. Transgender Survey, Kann et al 2016, 2011 US National Transgender Discrimination Survey

Summary: Health Disparities

There are well-documented health disparities.

Health disparities are a result of systemic and structural barriers.

It's important to examine within group differences.

It's important to be attentive to intersecting

Lived Experiences

LGBT Voices: Perspectives on Health Care

Video Source: <https://vimeo.com/143918389>

Transition

A process by which one begins to live in accordance with their gender identity and desired gender expression.

Highly individualized and multifaceted.

Falls into three categories:

Social Transition

- Asking that others use specific pronouns and titles
- Asking to be referred to by a chosen name
- Changing physical appearance

Medical Transition

Hormone Therapy

- 78% of respondents wanted to receive hormone therapy at some point in their life.
- 49% of respondents have had hormone therapy, with likelihood increasing with age.

Surgical Procedures

Among Transgender Men:

Source: 2015 U.S. Transgender Survey Figure 7.12.

Among Non-Binary Respondents with Female on Original Birth Certificate:

Source: 2015 U.S. Transgender Survey Figure 7.13.

Among Transgender Women:

Source: 2015 U.S. Transgender Survey Figure 7.14.

Among Non-Binary Respondents with Male on Their Original Birth Certificate

Source: 2015 U.S. Transgender Survey Figure 7.15.

Legal Transition

Legal document changes require court orders of name change and medical documentation.

- 11% had their chosen name and gender on all IDs and records
- 49% did not have an ID or record with their chosen name
- 67% did not have an ID or record with their gender
- 32% were mistreated when showing an ID with a name/gender that did not match their gender presentation:
 - 25% were verbally assaulted;
 - 16% were denied gender;
 - 9% were asked to leave;
 - 2% were assaulted.

Source: 2015 U.S. Transgender Survey

Care Guidelines

Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People (Volume 7)

- Published by The World Professional Association for Transgender Health (WPATH).
- The overall goal of the SOC is to provide clinical guidance for health professionals to assist transsexual, transgender, and gender nonconforming people with safe and effective pathways to achieving lasting personal comfort with their gendered selves, in order to maximize their overall health, psychological well-being, and self-fulfillment.

Source: <https://www.wpath.org/publications/soc>

Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People (2016)

- Provides clinical care recommendations from the UCSF Transgender Care program.
- Published by UCSF's Center of Excellence for Transgender Health (Trans CoE).

Source: <https://prevention.ucsf.edu/transhealth>

Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society* Clinical Practice Guideline (2017)

- Establishes a framework for the appropriate treatment of these individuals
- Standardizes terminology to be used by healthcare professionals
- Emphasizes that a broader healthcare team is needed to provide mental health services and other treatments, such as gender-affirmation surgery

Source: <https://www.endocrine.org/clinical-practice-guidelines/gender-dysphoria-gender-incongruence>

Safe Zone Health Care Reference Outline. Last Updated 4/20/2020

Strategies for Allyship

- Be visible as an ally
- Educate yourself about resources
- Share resources readily
- Use inclusive language
- Avoid making assumptions
- Speak up to interrupt systemic inequality

Pronouns

- She, her, hers
- He, him, his
- Ze, hir, hers
- Xe, xem, xyrs
- They, them, theirs

This is not a comprehensive list.

Source: practicewithpronouns.com

Providing Intentionally Inclusive Care

Intake and Data Collection

Recommended data to be obtained regarding gender identity:

1. What is your gender identity? (Choose ALL that apply)

- Woman
- Man
- Cisgender
- Transgender
- Two-Spirit
- Self-Identify _____
- Decline to Answer

2. What sex were you assigned at birth?

- Female
- Intersex
- Male
- Decline to Answer

3. What pronouns do you use (e.g. he/him, she/her, they/them)?

Adapted from: Primary Care Protocol for Transgender Patient Care, April 2011. Center of Excellence for Transgender Health. University of California, San Francisco, Department of Family and Community Medicine.

During a Visit

- Ensure that the information about chosen name or pronouns is communicated to next staff member who will interact with the patient
- Ensure that the patient has time with provider without other family members in the exam room
- Make at least one gender non-specific bathroom prominently available to patients without their having to ask for access to it
- Ask “Do you have a health care power of attorney or someone who you would want to be involved in health care decisions if you were not able to state your preferences?”

Resources

Best Practices

The GLMA Handbook on LGBT Health (2019)

- The first handbook on LGBT physical and mental health created by the world's oldest and largest association of lesbian, gay, bisexual, and transgender health care professionals.
- Published by GLMA: Health Professionals Advancing LGBTQ Equity.

Source: <https://www.abc-clio.com/ABC-CLIOCorporate/product.aspx?pc=A3432C>

Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community: A Field Guide (2012)

- Urges US hospitals to create a more welcoming, safe, and inclusive environment that contributes to improved health care quality for lesbian, gay, bisexual, and transgender (LGBT) patients and their families.

Source: <http://www.jointcommission.org/lgbt/>

Improving The Health Care Of Lesbian, Gay, Bisexual And Transgender People: Understanding and Eliminating Health Disparities (2012)

- Offers a brief but comprehensive overview of the major issues relevant to the health and health care of lesbian, gay, bisexual and transgender people.
- The authors discuss LGBT demographics, terminology, and concepts; they also review LGBT health disparities across the life span.
- One offering from the National LGBT Health Education Institute, a program of The Fenway Institute.

Source: <https://www.lgbthealtheducation.org/lgbt-education/publications/>

Healthcare Equality Index 2019

- The national LGBTQ benchmarking tool that evaluates healthcare facilities' policies and practices related to the equity and inclusion of their LGBTQ patients, visitors and employees.
- Evaluates more than 1,600 healthcare facilities nationwide.
- Published by Human Rights Campaign (HRC).

Source: <https://www.hrc.org/hei>

Support

Trevor Project

Founded in 1998; leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, queer & questioning (LGBTQ) young people under 25.

- Trevor Lifeline: 1-866-488-7386.
- TrevorChat
- TrevorText: available by texting START to 678678.

Trans Lifeline

Trans Lifeline is a national trans-led 501(c)(3) organization dedicated to improving the quality of trans lives by responding to the critical needs of our community with direct service, material support, advocacy, and education.

Our vision is to fight the epidemic of trans suicide and improve overall life-outcomes of trans people by facilitating justice-oriented, collective community aid.

Hotline: 1-877-565-8860

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