LGBTQ+ Experiences Accessing Health Care

Advancing Health Equity

Health equity is realized when each individual has a fair opportunity to achieve their full health potential, regardless of their social, economic, demographic or other differences (World Health Organization, 2017). Reducing health inequities or disparities requires addressing equity in access, treatments, and outcomes. Lesbian, gay, bisexual, transgender, and queer (LBGTQ+) individuals still experience discrimination by health care providers, including refusals to provide treatment (Center for American Progress, 2019). Medical schools provide very little education on LGBTQ+ health issues (Association of American Medical Colleges, 2019). While media attention and visibility of LGBTQ+ communities is growing, community stories highlight stark disparities and fundamental barriers in accessing care. The key findings and recommendations from community focus groups can address disparities and improve health care quality for all Californians.

Improving access to care

- There are few providers that specialize or have training on LGBTQ+ issues.
- Accessing transgender health care is a challenge; for example, one transgender individual reported being questioned by their provider about the necessity of the particular hormone therapy being requested.
- There is a lack of all-gender bathrooms at health care facilities.

“I had to choose from a list of providers... After meeting with her and telling her my story, she suggested a specific provider that specializing and works well with gay men’s health.”

– Focus group participant

RECOMMENDATIONS

- Increase the number of health care providers who have training and experience with LGBTQ+ health, especially transgender health care.
- Identify health care providers who are culturally and linguistically competent in serving the LGBTQ+ community in provider directories and lists.
Improving experiences with providers

- LGBTQ+ individuals shared how comments from a specialist delayed reproductive health care, and in other situations, provider religious views deterred utilization or limited options, altogether.

- Providers often make assumptions or inappropriate statements about LGBTQ+ individuals and families, “I took my daughter to the ER, and my sexual orientation gives me a lot of anxiety. My doctor asked me ... who is the mother? Those questions aren’t asked when a male and female take a child to the ER... There’s a lot of fear on my end and I’m gauging how they see me and my daughter. It sounds paranoid, but in the back of my mind, I’m worried: what if this person doesn’t like gay people?”

- LGBTQ+ want their providers to use correct name and pronouns, avoid assumptions, ask patients about their needs and preferences, and do the homework of researching things they don’t understand, and follow-up.

“A therapist can gauge better what you need if you give your background. I try to put the most honest answers [about my LGBTQ+ identity] to make sure I get the best answers and resources.”

- Focus group participant

RECOMMENDATIONS

- Provide training to health care providers on patient and family-centered care, cultural competency, implicit bias, and trauma-informed care.

- Improve care coordination, including between physical health and mental health services, specialty services, and with health plans.

METHODOLOGY

CPEHN and Diversity Collective Ventura County partnered in 2019 to learn more about the experiences of LGBTQ+ individuals and caregivers in accessing quality, culturally and linguistically appropriate care. Diversity Collaborative recruited LGBTQ+ community members living in the Ventura County region. Participants had health coverage, used or had a family member who had used health care in the past year, were over 18 years old, self-identified as LGBTQ+, and were available to participate at the designated time and place of the focus group.

California Pan-Ethnic Health Network - www.cpehn.org
Diversity Collective Ventura County - www.diversitycollectivevc.org

Supported by the California Health Care Foundation (CHCF), which works to ensure that people have access to the care they need, when they need it, at a price they can afford – www.chcf.org

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