Providing Culturally Competent Care to LGBTQ Youth
Check in question

Why does talking about this population matter to the work you are doing?
Objectives

1. Explain the difference between sexual orientation and gender identity and the issues of privilege related to both.

2. Describe health disparities experienced by LGBTQ Youth

3. Share tips for providing culturally competent care to LGBTQ Youth.
The Genderbread Person

**Gender Identity**
- Woman
- Genderqueer
- Man

Gender identity is how you, in your head, think about yourself. It’s the chemistry that composes you (e.g., hormonal levels) and how you interpret what that means.

**Gender Expression**
- Feminine
- Androgynous
- Masculine

Gender expression is how you demonstrate your gender (based on traditional gender roles) through the ways you act, dress, behave, and interact.

**Biological Sex**
- Female
- Intersex
- Male

Biological sex refers to the objectively measurable organs, hormones, and chromosomes. Female = vagina, ovaries, XX chromosomes; male = penis, testes, XY chromosomes; intersex = a combination of the two.

**Sexual Orientation**
- Heterosexual
- Bisexual
- Homosexual

Sexual orientation is who you are physically, spiritually, and emotionally attracted to, based on their sex/gender in relation to your own.
Decoding the LGBTQ

- Sexual Orientation
  - Homosexuality
  - Heterosexuality
  - Bisexuality
- Gender Identity (Sex vs. Gender)
  - Cisgender
  - Transgender
- Fluidity: Queer/Questioning

http://www.transstudent.org/gender
Social Norms

- Heteronormativity
- Cisnormativity
- Heterosexism
- Homophobia
- Transphobia
Privilege

Basic definition: unearned benefits reserved for a special group

For our purposes: A way of framing social issues surrounding social inequality focusing as much on the advantages that one group accrues from society as on the disadvantages that another group experiences.

://everydayfeminism.com/2015/07/what-privilege-really-means/
The Heterosexual Questionnaire

• Developed by Martin Rochlin, 1972
  – Pioneering gay affirming psychologist
• Examining the implications of heterosexism, heterosexual privilege
• Same lens can be applied to gender identity/gender expression
Health Disparities Experienced by LGBTQ Youth\(^1\)

- **Violence**
  - Bullying
  - Teasing
  - Harassment
  - Physical Assault
  - Suicide (LGBT youth 2-3 more times likely to attempt)

- **Sexual Health**
  - HIV infection among young men who have sex with men aged 13–24 years increased by 26% over 2008–2011
  - 50% of youth who are infected by HIV don’t know it
  - Higher rates of unintended pregnancy than heterosexual peers

\(^1\)http://www.cdc.gov/hiv/group/age/youth/index.html
Health Disparities Experienced by LGBTQ Youth

• Homelessness (40% youth homeless are LGBTQ)²
• Increased rates of alcohol & tobacco use
  – 2-3 more times likely to start smoking than heterosexual peers³
  – Substance use rates significantly higher (Male youth, 190% times higher, bi youth 340% higher, 400% for females)
  – Twice as likely to have sex while intoxicated
• Higher rates of depression and anxiety⁴ (response to trauma/stigma, minority stress)

³http://teen.smokefree.gov/LGBTSmoking.aspx#.ViaHGfiVk0\n⁴http://www2.nami.org/Content/ContentGroups/Multicultural_Support1/Fact_Sheets1/MH_Risk_Factors_among_GLBT_Youth_07.pdf
School Climate

- GLSEN 2013 School Climate Survey:
  - 55% LGBT students felt unsafe at school because of sexual orientation, 38% because of gender expression
  - 71% heard ‘gay’ used in a negative way frequently or often, 91% said this felt distressing
  - 71% verbally harassed because of SO, 36% physically harassed
  - 68% LGBT students avoided school functions and extracurricular activities because they felt unsafe or uncomfortable
  - 63% transgender youth avoid gender segregated spaces (locker rooms, restrooms) because they felt unsafe or uncomfortable

Bathrooms

Public Health Impact of HB2
• Impact of microaggressions, stress, stigma

Screening Tips

American Academy of Pediatrics:

• Substance use
• Sexual health risk reduction
• Suicidal ideation
• Depression

http://pediatrics.aappublications.org/content/pediatrics/132/1/198.full.pdf
Providing Culturally Competent Care and Services

- Recognize one’s own bias.
- Refrain from making assumptions.
- Use inclusive language.
- Consider pronouns.
- Make forms inclusive.
- Know community resources.
- Identify oneself as an ally.
Impact of Providing Culturally Competent Care

• Closing health disparities.
• Achieving health equity.
• Improving health outcomes.
• Increasing “community trust” of health care establishments.
• Creating safe spaces.
• Decrease in ability of stigma to function as a barrier to care.
Thank you!

Questions?

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