



## Los Angeles County Lesbian & Bisexual Women's Health Collaborative Resource Guide

2014

The selections below offer a sample of research publications and are not exhaustive of all of the available publications related to various aspects of lesbian and bisexual women's health. For further information about this guide, or the LA County Lesbian and Bisexual Women's Health Collaborative, please see the contact information at the end.

TITLE	PUBLICATION OVERVIEW
<b>HEALTH CARE PROVIDER TRAINING</b>	
<p><b>Lesbian, Gay, Bisexual and Transgender-related Content in Undergraduate Medical Education</b> Obedin-Maliver J, Goldsmith ES, Stewart L., et al, 2011</p> <p><a href="http://static.squarespace.com/static/50ee60c9e4b029771ee32d96/t/50ef9059e4b02cdfa2b29f9f/1357877337736/Obedin-Maliver%20et%20al%20-%20JAMA%20-%202011.pdf">http://static.squarespace.com/static/50ee60c9e4b029771ee32d96/t/50ef9059e4b02cdfa2b29f9f/1357877337736/Obedin-Maliver%20et%20al%20-%20JAMA%20-%202011.pdf</a></p>	<p><u>Study Findings:</u> The average time that schools reported was dedicated to LGBT content was 5 hours. During preclinical years, the hours dedicated to LGBT content were higher than compared to clinical years.</p> <ul style="list-style-type: none"> <li>• 33% of medical schools reported 0 hours of LGBT-related content during clinical years</li> <li>• 7% of schools reported 0 hours of LGBT-related content during preclinical years</li> <li>• 4% of schools reported 0 combined hours of LGBT-related content during both preclinical and clinical years</li> <li>• More Canadian allopathic and U.S osteopathic schools had 0 hours of LGBT-related content in clinical years of study compared to U.S allopathic schools</li> <li>• Although 97% of the schools taught their students to ask patients if they “have sex with men, women, or both” when taking a sexual history, only 72% of schools reported also teaching students the distinction between sexual behavior and identity</li> <li>• Of the 16 topics included in the study questionnaire, 63% of schools reported teaching half of the topics in their required curriculum and only 8% of schools reported teaching all 16.</li> <li>• Only 24% of Deans evaluated their schools’ coverage of the LGBT-related topics as very good or good</li> <li>• 67% of schools interspersed LGBT-related content throughout various parts of their curriculum, rather than having discrete modules of LGBT content</li> </ul>

	<ul style="list-style-type: none"> <li>• 71% of school did not offer LGBT focused clinical sites</li> <li>• 29% of schools did not evaluate the teaching of LGBT topics</li> </ul>
<p><b>Clinical Guidelines for Care of LGBT Patients, Gay &amp; Lesbians Medical Association:</b></p> <p><a href="http://www.gлма.org/_data/n_0001/resources/live/Welcoming%20Environment.pdf">http://www.gлма.org/_data/n_0001/resources/live/Welcoming%20Environment.pdf</a></p>	<p><u>Overview:</u></p> <ul style="list-style-type: none"> <li>• General guidelines on patient forms</li> <li>• Initiating patient-provider discussions</li> <li>• Creating a welcoming environment</li> <li>• Specific issues to discuss with LGBT patients</li> </ul>
<p><b>Kaiser Permanente’s Provider’s Handbook on Culturally Competent Care: Lesbian, Gay, Bisexual, and Transgender Population, 2<sup>nd</sup> Edition, 2004</b></p> <p><a href="https://www.madisonstreetpress.com/cgi-bin/shop.shtml?id=25">https://www.madisonstreetpress.com/cgi-bin/shop.shtml?id=25</a></p>	<p><u>Overview:</u></p> <p>Offers providers a comprehensive guide in addressing a variety of LGBT issues in delivering inclusive and culturally competent care. Some topics include:</p> <ul style="list-style-type: none"> <li>• Demographics</li> <li>• Health Beliefs</li> <li>• Risk Factors</li> <li>• Mental Health</li> <li>• Specialty Care</li> </ul>
<p><b>Lesbian Health 101: A Clinician’s Guide</b> Dibble SL, Robertson PA. <i>Lesbian Health 101: A Clinician’s Guide</i>. San Francisco: UCSF Nursing Press; 2010.</p>	<p><u>Topics Include:</u></p> <ul style="list-style-type: none"> <li>• <i>Health Screenings:</i> Discussions of barriers to health care and various health risks.</li> <li>• <i>Clinical Care and Patient-Centered Care:</i></li> <li>• <i>Sexual Health.</i> Discussions of intake of sexual history and risk assessment, sexual practices and sexual health education</li> <li>• <i>Lesbian Relationships:</i> Psychosocial and legal issues</li> <li>• <i>Fertility, Pregnancy, &amp; Parenting:</i></li> <li>• <i>Smoking, Alcohol &amp; Drug Abuse:</i> Targeted tobacco advertising, substance abuse, and treatment.</li> <li>• <i>Obesity &amp; Physical Activity:</i> Factors that contribute to higher obesity risk, treatment, and barriers to physical activity</li> <li>• <i>Other Health Concerns:</i> orthopedic issues, gynecology, menopause, back pain, osteoporosis, diabetes, &amp; urinary incontinence</li> <li>• <i>Mental Health:</i> depression, co-morbid disorders, suicide, social influences on depression, treatments/therapies, and serious mental illness.</li> <li>• <i>Intimate Partner Violence/Violence:</i> power and control, screening and assessment, treatment,</li> </ul>

	<p>social context violence, prevalence, sexual identity development and implications</p> <ul style="list-style-type: none"> <li>• <i>Disability</i>: Discussions of who are lesbians with disabilities, barriers to health care, health risks, and protective factors</li> <li>• <i>Cancer</i>: cancer rates, quality of life and domains, cancer survivorship,</li> <li>• <i>Infectious Disease</i>: Discussions of bacterial infections, diarrheal illness, hepatitis, and UTIs.</li> <li>• <i>Cardiovascular Issues</i>: Discussions of lesbians and heart disease, sex differences, presentation of cardiovascular disease (CVD), and risk factors.</li> <li>• <i>Urinary Incontinence</i>: Discussions of background, epidemiology, risk factors, evaluation, and treatments</li> <li>• <i>Osteoporosis</i>: Discussions of background, pathogenesis, risk factors, screening, and prevention</li> <li>• <i>Diabetes</i>: Discussions of epidemiology, screening, types of diabetes, diagnosis, management, and Type 2 diabetes</li> <li>• <i>Palliative Care</i>: Discussions of definitions, curative vs. palliative care, toward end-of-life care, advance care planning, ethical principles/cultural issues, end-of-life care for lesbians, and care recommendations</li> <li>• <i>Old Age</i>: discrimination and mental health, physical health, social support, spirituality, financial, legal and care issues, and elder abuse</li> </ul>
<p><b>A Guide to Taking a Sexual History</b>  U.S. Department of Health and Human Services; 2011</p> <p><a href="http://www.cdc.gov/std/treatment/SexualHistory.pdf">http://www.cdc.gov/std/treatment/SexualHistory.pdf</a></p>	<p>The guide helps health care professionals to assess the five P's:</p> <ul style="list-style-type: none"> <li>• <i>Partners</i>: Ask patients about the number and gender of their sex partners</li> <li>• <i>Practices</i>: If the patient has had multiple sexual partners in the past year, then ask questions about their sexual practices and condom use</li> <li>• <i>Protections: from STDs</i>, Ask about sexual practices to help determine which risk-reduction strategies to discuss with patient</li> <li>• <i>Past history of STDs</i>: Ask what patients have been previously diagnosed with to determine their future STD risk</li> <li>• <i>Prevention of Pregnancy</i>: Ask if pregnancy is desired</li> </ul>

<p><b>New Communication Protocols, Inclusive Policies, and Ongoing Training Lead to Culturally Competent Care for Lesbian, Gay, Bisexual, and Transgender Patients</b> Agency for Healthcare Research and Quality, 2010</p> <p><a href="http://www.innovations.ahrq.gov/content.aspx?id=3851">http://www.innovations.ahrq.gov/content.aspx?id=3851</a></p>	<ul style="list-style-type: none"> <li>• Modified: patient registration, electronic forms and verbal communication protocols to contain inclusive language</li> <li>• Requires all employees with a high patient volume/high volume of LGBT patients to participate in a training program to enhance their LGBT knowledge and skills</li> <li>• Offers additional ongoing cultural competency training sessions in various formats</li> <li>• Requires all first- and second-year students to complete mandatory readings and case-based sessions on LGBT health risks and disparities.</li> <li>• Documents equal visitation rights in the medical center’s visitation policy</li> <li>• Extends equal visitation rights to the patients’ partners and to same-sex parents</li> <li>• Provides an online list of “out” LGBT providers</li> </ul> <p><u>Result:</u> The medical center became the only facility in the country to achieve two consecutive perfect scores on the Healthcare Equality Index</p> <p><u>Planning Process:</u> The medical center: secured leadership support, formed an inclusive language committee, drafted new policies, revised all forms for language and monitors policy adherence, and designed a dedicated training program</p> <p><u>Program Adoption:</u> To adopt the strategies:</p> <ul style="list-style-type: none"> <li>• Identify your organization’s strengths and weaknesses</li> <li>• Review policies to ensure that equitable care of LGBT patients is provided</li> <li>• Use leadership commitment to improvement to maintain staff and community support</li> <li>• Offer ongoing training</li> <li>• Ensure policy adherence by engaging and supporting staff</li> <li>• Post policy standards in visible areas</li> </ul>
<p><b>Informational Guide to Effective Practices for Gay, Lesbian, Bisexual, and Transgender (GLBT) Students and Patients</b> Association of American Medical Colleges, 2012</p> <p><a href="https://www.aamc.org/members/gsa/54702/gsa_glbt.html">https://www.aamc.org/members/gsa/54702/gsa_glbt.html</a></p>	<p>Curricular components by the University of California, Irvine School of Medicine on lesbian, gay, bisexual, transgender and intersex health care provided:</p> <ul style="list-style-type: none"> <li>• Education and training in areas pertaining to GLBT health, developed by UC San Francisco, are also provided</li> <li>• <i>Policies Based on:</i> The University of</li> </ul>

	<p>Massachusetts Medical School best practice recommendations</p> <ul style="list-style-type: none"> <li>• <i>Services</i>: UC San Francisco’s tool for institutional self-assessment and LGBT resource center demonstrate how to show support for GLBT students and patients.</li> <li>• <i>Appendices</i>: The Joint AAMC-GSA and AAMC-OSR recommendations regarding institutional programs and educational activities address medical schools’ responses to the educational needs of GLBT medical students and attitudes toward GLBT patients.</li> </ul>
<p><b>Clinical Trials Guidelines and Tools</b> Lesbian Health &amp; Research Center Web Site, 2010</p> <p><a href="http://www.lesbianhealthinfo.org/community/clinical_trials.asp">http://www.lesbianhealthinfo.org/community/clinical_trials.asp</a></p>	<ul style="list-style-type: none"> <li>• The gaps in knowledge about LGBT specific health issues can be addressed by collecting sexual orientation and gender identity data</li> <li>• The assessment item should be used to differentiate sexual and gender minority subgroups from general population majority groups. <ul style="list-style-type: none"> <li>○ Example: Do you consider yourself to be one of the following: <ul style="list-style-type: none"> <li>- Straight, gay, lesbian, bisexual, transgender or do not know.</li> </ul> </li> </ul> </li> <li>• A guide on how to use inclusive language is also provided.</li> </ul>
<p><b>Lesbian, Gay, Bisexual, Transgender and Intersex Health Care</b> Association of American Medical Colleges, 2012</p> <p><a href="https://www.aamc.org/linkableblob/54764-6/data/lgbticurriculumfromucirvine-data.pdf">https://www.aamc.org/linkableblob/54764-6/data/lgbticurriculumfromucirvine-data.pdf</a></p>	<ul style="list-style-type: none"> <li>• <i>Objectives</i>: UCI’s LGBTI health care curriculum: introduces medical students to LGBTI health care issues; provides guidelines for sensitive LGBTI patient interviewing; identifies issues in the LGBTI community; makes students aware of discrimination and violence in the LGBTI community; and identifies LGBTI patient and physician factors that affect the quality of doctor-patient relationships.</li> </ul> <p><u>Curricular Activities:</u></p> <ul style="list-style-type: none"> <li>• <i>1<sup>st</sup> Year</i>: lecture/discussions of sensitive sexual history taking; an AMSA heterosexist challenge is given to all students; workshops about condom use and disease prevention are provided; standardized patient sexual history interviews are done by each student; students attend panels with LGBTI community members; one of two mini-electives relating to LGBTI topics must be taken.</li> <li>• <i>2<sup>nd</sup> Year</i>: Problem-based learning sessions are required of medical students.</li> <li>• <i>3<sup>rd</sup> Year</i>: Medical students have pediatrics, Ob-Gyn, and Family Medicine rotations that deal</li> </ul>

	<p>with LGBT issues.</p> <ul style="list-style-type: none"> <li>• <i>4<sup>th</sup> Year:</i> students develop teaching presentations related to domestic violence,</li> </ul>
<p><b>LGBT Inclusion in the Curriculum and Beyond: UC San Francisco</b>  Association of American Medical Colleges, 2012</p> <p><a href="https://www.aamc.org/linkableblob/54766-7/data/lgbtcurriculuminclusionfromucsf-data.pdf">https://www.aamc.org/linkableblob/54766-7/data/lgbtcurriculuminclusionfromucsf-data.pdf</a></p>	<p><u>Curriculum Map.</u> Curriculum subject areas were identified where LGBT content could be integrated.</p> <p><u>1<sup>st</sup> Year:</u> A lesbian health case study is assigned to all students.</p> <ul style="list-style-type: none"> <li>• Students also attend lectures on general and sexual history-taking with LGBT-related concerns in mind.</li> </ul> <p><u>2<sup>nd</sup> Year:</u> An intersex case study is assigned to all students.</p> <ul style="list-style-type: none"> <li>• All students: receive 3 hours of instruction on LGBT health, are assigned mandatory readings, attend a lecture and LGBT panel, and discuss 3 clinical cases in small groups.</li> <li>• All students also learn about transgender health.</li> </ul> <p><u>3<sup>rd</sup> &amp; 4<sup>th</sup> Year:</u> Sessions on ethics and professionalism include LGBT patient issues.</p> <ul style="list-style-type: none"> <li>• In 3 clerkships, faculty presents on relevant LGBT health issues.</li> <li>• A LGBT focus has been included in: admission outreach, student orientations, LGBT faculty development, mentoring of LGBT students, high-level LGBT recognition, and institutionalized LGBT resources.</li> </ul>
<p><b>AAMFT –CA: LGBT Affirmative Psychotherapy Online Certification Curriculum</b>  American Association for Marriage &amp; Family Therapy, 2012</p> <p><a href="http://aamftca.org/aamft-ca-certification-programs-lgbt/">http://aamftca.org/aamft-ca-certification-programs-lgbt/</a></p>	<p><u>Overview.</u> This is 36-hour continuing education training.</p> <ul style="list-style-type: none"> <li>• Pre-licensed and out-of-state (outside of CA) clinicians are invited to take this course, but only licensed CA clinicians are eligible to receive CE credits.</li> </ul> <p><u>Training.</u> The certification training consists of: basic text, task force reports, journal articles, case studies, hours of video, and material written exclusively for this curriculum.</p> <ul style="list-style-type: none"> <li>• Topics featured in the curriculum are: queer youth resiliency, gender diverse children and adolescents, domestic violence, heterosexism and heteronormativity, transference and countertransference issues, polyamorous and bisexual patients; diversity of same-sex families, ethnic minorities, transgender experiences in psychotherapy, and legal and ethical concerns for religious conservative therapists.</li> </ul>

<p><b>Continuing Education: Learning Modules</b> The Fenway Institute, 2012</p> <p><a href="http://www.lgbthealtheducation.org/training/learning-modules/">http://www.lgbthealtheducation.org/training/learning-modules/</a></p>	<p><u>Overview.</u> The Learning Modules on LGBT Health were created to facilitate teaching of LGBT health topics to health care professionals and students.</p> <ul style="list-style-type: none"> <li>• <i>Module 1:</i> Is an introduction to LGBT populations and their healthcare needs. Topics include: LGBT terminology, population demographics, culturally appropriate care for LGBT populations, etc.</li> <li>• <i>Module 2:</i> Explains how to take an inclusive patient history, and how to tailor it for LGBT patients.</li> <li>• <i>Module 3:</i> Summarizes the most recent LGBT health research, and outlines key clinical approaches to promote health.</li> <li>• <i>Module 4:</i> Explores healthcare issues of LGBT youth. Topics include: barriers to accessing health care, confidentiality concerns, etc.</li> <li>• <i>Module 5:</i> Provides context on LGBT relationships and parenting.</li> <li>• <i>Module 6:</i> Recognizes LGBT elders (age 65+).</li> <li>• <i>Module 7:</i> Familiarizes clinicians with health needs of transgender individuals.</li> </ul>
<p><b>Removing the Barriers: Providing Culturally Competent Care to Lesbians and Women who Partner with Women</b> The Mautner Project, 2012</p> <p><a href="http://www.mautnerproject.org/education/MautnerBrochure_6-6-12_Corexcel_Mautner.pdf">http://www.mautnerproject.org/education/MautnerBrochure_6-6-12_Corexcel_Mautner.pdf</a></p>	<ul style="list-style-type: none"> <li>• <u>Overview:</u> <i>Intended Audience:</i> Healthcare professionals with direct and indirect patient contact including nurses, clinical specialists, physicians, physician assistants and social workers.</li> <li>• Lesbians and women who partner with women (WPW) have different patterns of access to health care and experience barriers based on their sexual orientation.</li> <li>• <i>Learning Objectives:</i> Users should be able to: list the major findings of the 1999 Institute of Medicine report that is discussed; recognize the culture of sexual orientation; define terms such as sex, gender identity, and heterosexism; describe barriers faced by lesbians and WPW when accessing health care; identify three lesbian health issues; state the impact of a breach in confidentiality and privacy for lesbians or WPW; and list three ways to make a practice more culturally competent.</li> </ul>
<p><b>The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a</b></p>	<p>The IOM's report assessing current research on the health status of LGBT populations, and proposed</p>

<p><b>Foundation for Better Understanding</b> Institute of Medicine. The National Academies Press; 2011.</p> <p><a href="http://www.nap.edu/catalog.php?record_id=13128">http://www.nap.edu/catalog.php?record_id=13128</a></p>	<p>research agenda. The following are challenges in conducting this research:</p> <ul style="list-style-type: none"> <li>• <u>Challenge:</u> Lack of LGBT data. <ul style="list-style-type: none"> <li>○ <i>Recommendation.</i> Sexual orientation data should be collected in all federally funded surveys, and electronic health records.</li> </ul> </li> <li>• <u>Challenge:</u> Asking study participants their sexual orientation <ul style="list-style-type: none"> <li>○ <i>Recommendation:</i> NIH should support research to evaluate sexual orientation questions and to develop additional measures. Sexual orientation questions on federal surveys should be standardized so that comparisons and combinations of data can be made across studies.</li> </ul> </li> <li>• <u>Challenge:</u> Large LGBT samples are difficult and costly to recruit, in general population surveys, for analysis. <ul style="list-style-type: none"> <li>○ <i>Recommendation.</i> NIH should support methodological research aimed at the development of innovative ways to conduct research with LGBT populations and determining ways to collect information on sexual minorities.</li> </ul> </li> <li>• <u>Challenge:</u> Limited NIH-sponsored research exists for LGBT health. <ul style="list-style-type: none"> <li>○ <i>Recommendation:</i> NIH should create a comprehensive research training program, and encourage researchers to include sexual minorities in their study samples.</li> </ul> </li> </ul> <p><u>Research Agenda:</u> To advance knowledge of LGBT health, the IOM proposed a research agenda covering: demographic research, social influences, health care inequalities, intervention research and transgender health needs.</p> <p><u>Other Findings:</u> Current research focuses more on gay and lesbian populations, than on bisexual and transgender populations.</p> <ul style="list-style-type: none"> <li>• More research has been conducted among LGBT adults than among LGBT youth and elders.</li> <li>• Racial/ethnic sexual minority groups have not been examined in current research.</li> </ul>
<p><b>Communicate to Make a Difference: Exploring Cross-Cultural Communication</b> Empire State Public Health Training</p>	<p>Free online training</p> <ul style="list-style-type: none"> <li>• Training on case studies of responding to cultural differences between staff and patients</li> <li>• scenarios presented between physicians and a</li> </ul>



<p>Center, 2014</p> <p><a href="http://www.phtc-online.org/learning/pages/catalog/cc/">http://www.phtc-online.org/learning/pages/catalog/cc/</a></p>	<p>lesbian patients who did not disclose their sexual orientation.</p>
<p><b>Institute of Medicine’s The Health of LGBT People</b> 2011</p> <p><a href="http://www.iom.edu/Reports/2011/The-Health-of-Lesbian-gay-Bisexual-and-Transgender-People.aspx">http://www.iom.edu/Reports/2011/The-Health-of-Lesbian-gay-Bisexual-and-Transgender-People.aspx</a></p>	<p><u>Overview:</u> IOM evaluated the health status of lesbian, gay, bisexual, and transgender populations to identify research gaps and opportunities and outlines a research agenda to help NIH focus its research in this area.</p> <p><u>Results:</u> To advance understanding of LGBT health needs, researchers need:</p> <ul style="list-style-type: none"> <li>• More demographic data about these populations</li> <li>• Improved methods for collecting and analyzing data</li> <li>• Increased participation of sexual and gender minorities in research</li> <li>• A more solid evidence base for LGBT health concerns</li> </ul>
<p><b>LGBTQ Cultures: What Health Care Professionals Need to Know About Sexual and Gender Diversity</b> J. Eliason et al. 2009</p> <p><a href="http://www.nursingcenter.com/Inc/static?pageid=928987">http://www.nursingcenter.com/Inc/static?pageid=928987</a></p>	<p>Provides an overview of issues facing LGBTQ individuals and provides tools for health care professionals to create safer, more inclusive environments for patients and coworkers.</p> <p>Topics covered include:</p> <ul style="list-style-type: none"> <li>• Concepts Related to Sex/Gender and Sexuality</li> <li>• Diversity and LGBTQ Communities</li> <li>• Social and Health Effects of Stigma</li> <li>• Structural Barriers to Quality Care <ul style="list-style-type: none"> <li>○ Intake forms</li> <li>○ Confidentiality</li> <li>○ Health Insurance</li> </ul> </li> <li>• Legal issues <ul style="list-style-type: none"> <li>○ Living will</li> <li>○ Durable power of attorney</li> <li>○ Guardianship for minors</li> <li>○ Trusts</li> </ul> </li> <li>• Recommendations for Healthcare Training</li> </ul>
<p><b>Recommendations for Enhancing the Climate for LGBT Students and Employees in Health Professional Schools</b> Snowdon, Shane, MA</p> <p><a href="http://www.glma.org/data/n_0001/reso">http://www.glma.org/ data/n_0001/reso</a></p>	<p><u>Goal:</u> To provide guidance for health professional schools to create an LGBT welcoming climate and support LGBT students, faculty, and staff.</p> <p>Topics Addressed:</p> <ul style="list-style-type: none"> <li>• Institutional Equity</li> <li>• Transgender Services &amp; Support</li> <li>• Diversity Initiatives</li> </ul>

<p><a href="#">urces/live/Recommendations%20for%20Enhancing%20LGBT%20Climate%20in%20Health%20Professional%20Schools.pdf</a></p>	<ul style="list-style-type: none"> <li>• Admissions</li> <li>• Staff &amp; Faculty Recruitment, Retention and Training</li> <li>• Targeted and Inclusive Programs For LGBT Students &amp; Employees</li> <li>• Awareness-Building Activities</li> <li>• Mentoring &amp; Networking</li> <li>• Best Practices</li> </ul>
<p><b>Sexual And Gender Minority Health: What We Know And What Needs To Be Done</b> Mayer K. H., Bradford J. B., et al. 2008 <a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2377288/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2377288/</a></p>	<p><u>Overview:</u> Uses epidemiological and clinical investigations to discuss how clinicians and public health professionals can improve research methods, clinical outcomes, and service delivery for lesbian, gay, bisexual, and transgender people. Topics include:</p> <ul style="list-style-type: none"> <li>• Unique clinical concerns of sexual and gender minority populations</li> <li>• Defining and measuring sexual and gender minorities</li> <li>• Barriers to optimal health care for sexual and gender minority patients</li> <li>• Creating a healthier environment for sexual and gender minority patients</li> <li>• Advocacy and further research needs</li> </ul>

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