Addressing LGBT Tobacco & Cancer Health Disparities:
Training Webinar for FL DOH
August 3, 2017

Anthony R. Campo, MA
Education, Training, & Outreach Manager
LGBT HealthLink, a Program of CenterLink
Roadmap

- LGBT 101
- LGBT Health Disparities
- Tobacco & Cancer in LGBT Communities
- LGBT Tobacco & Cancer Control: Best Practices/Recommendations
- Closing Thoughts & Questions
About Us
CenterLink

- Nonprofit founded in 1994
- Helps develop strong, sustainable LGBT community centers with a national network of 190+ organizations
- Builds a thriving network of centers for healthy, vibrant communities
- Recognized by the White House as a “Champion of Change”
LGBT HealthLink

➢ Advance LGBT wellness by addressing LGBT tobacco and cancer health disparities

➢ Link people with information and promote adoption of best practices

➢ One of eight CDC-funded cancer and tobacco disparity networks

www.lgbthealthlink.org

www.LGBTCenters.org  •  954-765-6024  •  information@LGBTCenters.org
LGBT HealthLink Promotes:

- Tobacco prevention & cessation
- Decreased second-hand smoke exposure
- Cancer prevention and screenings
- Improved quality of life for those with cancer
LGBT HealthLink Provides:

- Technical Assistance
- Trainings/Webinars/Presentations
- Needs Assessment Tool
- Sample non-discrimination policies
- Other resources such as educational materials
- Tobacco Census (and soon to be Cancer Assessment)
- Cross-sectoral connections between health systems, providers, community centers, and departments of health
- Linkages for information and best and promising practices

www.LGBTCenters.org  •  954-765-6024  •  information@LGBTCenters.org
LGBT HealthLink Partners

So No One Faces Cancer Alone®

www.LGBTCenters.org  •  954-765-6024  •  information@LGBTCenters.org
LGBT HealthLink Team

Dr. Regina R. Washington
Program Director

Ana Machado
Program Manager

Anthony R. Campo
Outreach Manager

Donna Solomon-Carter
Program Specialist

Quiviya Eldridge
Program Evaluator

Lora Tucker
CenterLink CEO

www.LGBTCenters.org  •  954-765-6024  •  information@LGBTCenters.org
LGBT 101
About LGBT Communities

- LGBT is NOT one single community
- There are an estimated 9 million LGBT individuals in the U.S. (3) across all congressional districts
- LGBT people face isolation, violence, overt discrimination and inequitable benefits/policies, including challenges related to health care access
- LGBT communities tend to lack trust with institutions and government
- Strong LGBT community structures exist that offer social support, legal assistance, health services, and provide an organized platform
- Partnership with LGBT communities and centers is largely an UNTAPPED resource for change

www.LGBTCenters.org • 954-765-6024 • information@LGBTCenters.org
LGBTQIA: Alphabet Soup

• Lesbian
• Gay
• Bisexual
• Transgender
• Queer or Questioning
• Intersex
• Asexual or Allies
Defining Terms: Orientation

- **Sex**
  - Biological classification assigned at birth, usually based on appearance of external anatomy (male/female/intersex)

- **Gender**
  - Based on social/cultural characteristics of men & women such as norms, roles, etc. (presumed based on sex)
Defining Terms: Orientation

- **Sexual attraction**
  - Refers to the sex or gender to which someone feels attraction (male/female/both)

- **Sexual behavior**
  - Refers to the sex of a person’s sexual partners (same/different/both)

- **Sexual identity**
  - Refers to the way a person self-identifies
  - Lesbian, gay, bisexual, and straight are most common
  - Generally, gay/lesbians are primarily attracted to those of the same sex
  - However, the concepts of sexual identity, attraction, and behavior do not always follow these patterns
  - For example, individuals may not identify as gay/lesbian even if attracted to the same sex
Defining Terms: Identity

- **Gender identity**
  - Refers to a person’s internal sense of gender (how one perceives oneself)
  - Often, a person’s gender identity is consistent with their sex assigned at birth
  - However, one’s gender identity can be different than the sex assigned at birth
  - One’s gender identity may or may not match one’s appearance or others’ perceptions

- **Transgender**
  - Describes anyone who has a gender identity that differs from their sex assigned at birth
  - Some transgender individuals use hormones or elect for gender-affirming surgery, but not all transgender individuals do this
  - Transgender identity is NOT dependent upon physical appearance or medical procedures
  - Gender identity and sexual orientation are not the same. Transgender people may be straight, lesbian, gay, bisexual, or queer. For example, a person who transitions from male to female and is attracted solely to men would typically identify as a straight woman
Other Identity Terms

- **Cisgender**
  - Sex assigned at birth matches gender identity (those who are not transgender)

- **Gender Binary**
  - Socially constructed dichotomy of male or female

- **Gender Non-Conforming**
  - Those who don’t fit into gender binary notion (gender expansive, pansexual, non-binary, genderqueer, gender-fluid)
## Categories & Descriptors

### SEX
- Male
- Female

### SEXUAL ORIENTATION
- Lesbian
- Gay
- Bisexual
- Heterosexual
- Queer or Questioning
- Asexual

### GENDER/GENDER ROLE
- Man/Masculine
- Woman/Feminine

### GENDER IDENTITY
- Transgender
- Transsexual
- Man
- Woman
- Non-binary
- Queer or Genderqueer
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)

Graphic by: TSER
Trans Student Educational Resources

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

Design by Landyn Pan and Anna Moore
Pronouns

• Everyone has the right to determine their own appropriate pronouns

• As healthcare professionals, it is important to respect the identity and terms your client/patient uses/is comfortable with

• Pronouns may include:
  – He/Him/His
  – She/Her/Hers
  – Gender-neutral
    • They/Them/Theirs
    • Others
“My support system, many of whom are trans and gender variant people, were made to feel very uncomfortable by my doctors and medical staff due to disregard for pronoun use, sideways glances, and overall awkward responses. My friends composed my entire support system and were critical to my care. The reluctance to respectfully interact and, in some cases, communicate clearly with my friends was extraordinarily difficult for me and led to much added stress. I already felt so alone without my family.”

LGBT Best and Promising Practices Throughout the Cancer Continuum, LGBT HealthLink
LGBT Health Disparities
Understanding LGBT Health

• Understanding LGBT health starts with understanding the history of oppression and discrimination that these communities have faced \(^{(2)}\)

• For example:
  – Legal discrimination in access to health insurance, employment, housing, marriage, adoption, and retirement benefits
  – Lack of laws protecting against bullying in schools
  – Lack of social programs targeted to LGBT youth, adults, and elders
  – Shortage of health care providers who are knowledgeable and culturally competent in LGBT health
An intersectional lens can be used to examine the interrelationship of race, ethnicity, age, gender identity, class, sexual orientation, religion, and other factors in relation to health.

The intersection of these characteristics helps shape one’s health; access to care; and experience with health care systems/utilization of care.

This lens pushes back on the assumptions that LGBT communities are homogeneous, by placing attention on the diverse health needs of LGBT communities.
8 Ways Tobacco Affects Vulnerable People

Tobacco use is 71% HIGHER among adults with mental illness
- National Council for Behavioral Health

Tobacco use is OVER 50% HIGHER among LGBT adults
- LGBT HealthLink

Asian American men smoke at a 215% HIGHER rate than Asian American women
- The RAISE Network

1.5 TIMES as many Hispanic middle school students report using tobacco compared to other middle school students
- Nuestras Voces

22.4% of people in remote areas smoke
- Geographic Health Equity Alliance

14.7% of their urban counterparts smoke
- SelfMade Health Network

Tobacco use is 310% HIGHER among homeless adults compared to the general population

Tobacco use is 35% HIGHER among American Indian and Alaskan Native adults
- National Native Network

African Americans smoke menthol-flavored cigarettes at nearly 3 TIMES the rate of Whites, and are more likely to die from smoking-related illness.
- National African American Tobacco Prevention Network

This infographic brought to you by:

CenterLink
The Community of LGBT Centers

www.LGBTCenters.org • 954-765-6024 • information@LGBTCenters.org
Research from the Institute of Medicine suggests that LGBT people “face barriers to health care that profoundly affect their overall well-being;” “have higher prevalence of tobacco use,” “higher risk of depression and anxiety disorders,” and show “less frequent use of preventative screening” for cancer. (1)
LGBT Health Disparities

- Alcohol
- Drugs
- Mental Health
- HIV
- Tobacco
- Cancer

Studies show that LGBT individuals are more likely to use alcohol and drugs and have higher rates of substance abuse, compared with the general population (4)

http://askrecoveryrob.com/wp-content/uploads/2012/06/alcohol.jpg
Tobacco in LGBT Communities
Tobacco in LGBT Communities

- Tobacco use is the leading cause of preventable disease and death in the US (21)

- Across available research, population-based studies, large cohort studies, and convenience samples, the findings stay consistent: some, if not all, LGBT groups demonstrate significantly higher smoking rates than the general population, and the disparity increases among LGBT of color (6)

- Unless the trend is countered aggressively, this disparity is poised to continue
• LGBT people smoke at much higher rates than the general population

• National Adult Tobacco Survey data found that LGBT people smoke at rates 50% higher than the general population (5)
The American Cancer Society estimates that more than 30,000 LGBT deaths each year are from tobacco-related diseases.
Nearly all tobacco use begins during youth and young adulthood

In 2016, e-cigarettes remained the most commonly used tobacco product among middle & high school students

Tobacco and Youth (21)

- Most e-cigarettes contain nicotine, which can cause addiction and harm the adolescent brain.

- E-cigarette use is strongly associated with the use of other tobacco products among youth and young adults, including combustible tobacco products.

Therefore, to reduce tobacco product use among U.S. youth, focus must be on proven tobacco control strategies on all types of tobacco products.
WHY ARE WE SEEING SUCH HIGH STATS?
- Cultural norm (socially transmitted disease)
- Unhealthy coping strategy/outlet from stress associated with stigma and discrimination, especially among LGBT youth
Tobacco industry advertising is everywhere, and a long, aggressive history of targeting the LGBT community shows no signs of abating.
Freedom. To speak. To choose. To marry. To participate. To be. To disagree. To inhale. To believe. To love. To live. It’s all good.
Cancer in LGBT Communities
CANCER AND GAY, BISEXUAL & QUEER MEN
What you need to know

CANCER AND LESBIAN, BISEXUAL & QUEER WOMEN
What you need to know

TRANS INDIVIDUALS AND CANCER
What you need to know
LGBT & Cancer Risk Factors

- LGBT people are at an elevated risk for many types of cancer
- Higher tobacco rates are likely to lead to higher rates of smoking-related cancers, including lung cancer
- Gay/bi men are at a higher risk for anal (19, 20) and skin cancer (15, 16)
- Lesbian/bi women have higher risk factors for breast cancer (14) and initiate the HPV vaccine at a lower rate, increasing their risk for cervical cancer (10)
Transgender individuals are also generally at risk for the cancers that are associated with their sex assigned at birth as well as some new cancers related to their medical transition (12).

For example, trans men are still at risk for breast cancer even if they have a mastectomy, and trans women likely face a risk similar to cisgender women (13, 14).
LGBT INDIVIDUALS ARE ALSO LESS LIKELY TO ACCESS CARE
Cancer in LGBT Communities

• History of discrimination in healthcare systems
  – Avoidance of healthcare = fewer advance screenings, early detection, and treatment/survivorship
  – And LGBT people may be less likely to get cancer screenings if they feel uncomfortable or are not “out” to their provider (8)
  – Indeed, 28% of transgender individuals have delayed seeking care due to fear of discrimination (9)
Cancer in LGBT Communities

• Lower rates of health insurance
  – Many health insurance policies don’t cover unmarried partners. This makes it harder for many lesbians and bisexual women to get quality health care. (1)

• Many employers do not offer coverage for unmarried domestic partners.
LGBT Health Care Access in Utah

LGBT Health Care Utilization in Utah

LGBT Tobacco Use in Utah

Other LGBT Risk Factors in Utah
WHAT ARE OTHER CHALLENGES TO OVERCOME?
LGBT Cancer Challenges

• Do they feel safe coming out to an oncologist?
• Option to join gay/lesbian/bi/trans cancer support group?
• Would a lesbian women feel safe being open at support group comprised of straight women?
• Would her female partner (in a spousal support group) feel comfortable discussing the effect of chemo on their sex life in a room full of men?
LGBT Cancer Challenges

• Data is limited
  – Lack of data collection
  – Lack of an evidence base to justify policy and research attention

• Lack of data prevents identification of disparities
  – Resulting in lack of tailored resources to support LGBT population
  – Lack of specialized and culturally competent programs
  – Insufficient info to develop LGBT-specific screening guidelines
  – Lack of best practices for LGBT communities

• Alarming, due to the increasing evidence of LGBT cancer disparities
HOW DO WE ADDRESS THESE ISSUES?
LGBT Best & Promising Practices
LGBT Best and Promising Practices for Comprehensive Tobacco Control Programs

LGBT Best and Promising Practices
Throughout the Cancer Continuum
Measures for LGBT-tailored Comprehensive Tobacco Control Programs

1. Promote LGBT professional safety & leadership in public health
2. Include LGBT community members in policy planning steps
3. Monitor impact of tobacco on LGBT populations
4. Establish cultural competency standards for statewide programs
5. Fund community-based programs to help reduce LGBT tobacco disparities
6. Routinely integrate LGBT tailored efforts into larger wellness/tobacco campaigns
7. Disseminate findings and lessons learned
1. Promote LGBT professional safety & leadership in public health

http://www.freedomforallamericans.org/publicaccommodationsprotections/
Strategy: Add LGBT to Your Employee & Contractor Nondiscrimination Protections

Office of Federal Contract Compliance Programs (OFCCP)

Frequently Asked Questions
EO 13672 Final Rule

On December 3, 2014, the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) announced a Final Rule that will prohibit federal contractors from discriminating in employment on the basis of sexual orientation or gender identity. The Final Rule implements Executive Order (EO) 13672, signed by President Barack Obama on July 21, 2014, which adds sexual orientation and gender identity to the prohibited bases of discrimination in EO 11246. Additional information about the new Final Rule is provided in the below list of Frequently Asked Questions.

1. Promote LGBT professional safety & leadership in public health
Strategy: Create Internal SGM Advisory Panels
Like at: CDC, NIH, HHS, and more.
Examples of the impact of involving stakeholders
2020 Topics and Objectives – Objectives A–Z

Select a topic area from the list below to get started.
Each topic area includes an overview, objectives and data,* and resources.

- Immunization and Infectious Diseases
- Injury and Violence Prevention
- Lesbian, Gay, Bisexual, and Transgender Health
- Maternal, Infant, and Child Health
- Medical Product Safety
- Mental Health and Mental Disorders
Enhanced LGBT Measure As Tested

Across your lifetime, do you consider yourself to be gay, lesbian, bisexual, and/or transgender?
- No
- Yes

[If No continue. If Yes, probe with the following question.]
[If callers show concern about this question, feel free to add the following sentence:] “LGBT people smoke at higher rates than others; we ask this to ensure we’re serving all people equally.”

Thanks, indicate all of the following which apply to you:
- Bisexual,
- Gay or
- [for a woman] Lesbian,
- Queer,
- Transgender or gender variant and assigned male at birth,
- Transgender or gender variant and assigned female at birth.

*All square brackets indicate instructions to survey administrators, this is not information that is to be read aloud.
5 Fund community-based programs to help reduce LGBT tobacco disparities
5. Fund community-based programs to help reduce LGBT tobacco disparities.
5 Fund community-based programs to help reduce LGBT tobacco disparities
Fund community-based programs to help reduce LGBT tobacco disparities
LGBT Best and Promising Practices for Comprehensive Tobacco Control Programs

6 Routinely integrate LGBT tailored efforts into larger wellness/tobacco campaigns
Routinely integrate LGBT tailored efforts into larger wellness/tobacco campaigns.

I now use my social smoking time to actually get fresh air.

– Corey, former smoker

Smoking is a barrier to trans affirming surgery as it affects the vascular system which is crucial for healing.

– Jada, former smoker
Routinely integrate LGBT tailored efforts into larger wellness/tobacco campaigns
LGBT Best and Promising Practices for Comprehensive Tobacco Control Programs

Disseminate findings and lessons learned
LGBT Best and Promising Practices
Throughout the Cancer Continuum

www.lgbthealthlink.org
6 Stages, 5 Issues

STAGES OF CANCER CONTINUUM - Click Stage to discover its Best Practices

SHOW ALL CONTINUUM STAGES
PREVENTION | SCREENING | DIAGNOSIS | TREATMENT | SURVIVORSHIP | PALLIATIVE CARE & END OF LIFE

CROSS-CUTTING ISSUES - Click Cross-Cutting Issue icon to show its Best Practices

DATA | WORKFORCE | SYSTEMS | INFORMATION | DIVERSITY

www.LGBTCenters.org  •  954-765-6024  •  information@LGBTCenters.org
Closing Thoughts
Closing Thoughts

• Do you co-brand with LGBT trusted groups?
• Do you promote through LGBT media channels?
• Do your promotional materials include LGBT imagery?
• Are you collecting LGBT resources for referrals?
• Do you collect sexual orientation and gender identity data (in your programs, surveys, and evaluations)?
Closing Thoughts

• LGBT stressors that we may experience can lead to risk behaviors
• Lack of insurance and lack of trust are LGBT barriers to care
• Physicians/public health must set welcoming and accepting tone with open-ended questions and without judgement
• Establish trusting relationship for open dialogue around LGBT risks
• ACA & same-sex marriage ruling have helped but more needed
JOIN THE MOVEMENT TO ACHIEVE LGBT HEALTH EQUITY!

www.mylgbthealthlink.org

HealthLink members have access to:

- Weekly LGBT Health News Roundup
- Scholarships to help support and promote leadership in LGBT health
- Members-only online networking groups
- Exclusive webinars and resources available for download
- Co-branding opportunities
References

• (2) http://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health
• (4) http://www.cdc.gov/msmhealth/substance-abuse.htm
References

References


