

ETHICAL CONSIDERATIONS IN THE INCLUSION OF LGBT CARE



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Director of LGBT Program



“No financial conflicts of interest to disclose”

Jackie Baras, RN



RWJUH LGBT Navigator

Lead Group Facilitator, PROUDLY ME Education/Support Group

Lead Group Facilitator, PROUD Community Advisory Council

Chair, PROUD Business Resource Group

President, Philippine Nurses Association of New Jersey 2020

RWJUH names Baras LGBT navigator

By: *Jessica Perry*

September 19, 2018 12:37 pm



Jackie Baras will serve as LGBT health navigator for Robert Wood Johnson University Hospital.-(ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL)

Jackie Baras will serve as LGBT health navigator for Robert Wood Johnson University Hospital, the New Brunswick-based RWJBarnabas facility announced today. Jackie Baras will serve as LGBT health navigator for Robert Wood Johnson University Hospital, the New Brunswick-based RWJBarnabas facility announced today.



Robert Wood Johnson University Hospital Names Jackie Baras LGBT Health Navigator

ON SEP 19, 2018

Robert Wood Johnson University Hospital (RWJUH) has named Piscataway resident Jackie Baras, MSN, MBA, RN, LGBT health navigator.

LEARNING OBJECTIVES

- Define *basic terminology* of LGBTQIA+, Gender Identity and Sexual Orientation.
- Define and describe at least *3 LGBTQIA+ health disparities* in LTC continuum.
- List at least *3 strategies in improving the healthcare needs* of LGBTQIA+ older adults in LTC other nursing care settings.

INFORMATION NOT COVERED

- Transitioning: Social, Medical and Legal
- Hormone Affirmation Therapy
- Gender Affirming Surgical Procedures
- Financial Cost or Insurance coverages
- LGBT Protection Laws

Is it a boy or a girl?



Sex & Sexual Orientation

- ***Sex*** refers to person's biological and physiological characteristics that differentiate man and woman. Refers to the presence of genitalia, chromosomes, hormones, etc. (aka biological sex, natal sex)
- ***Sexual Orientation*** refers to a person's sexual, emotional, or romantic attraction towards persons of the opposite sex, same sex or gender, to both or to no one (aka Sexual Identity).

L

LESBIAN

A person who identifies as a woman or girl and is emotionally, spiritually, physically, and/or sexually attracted primarily to members of the same gender



G

GAY

A person who is emotionally, spiritually, physically, and/or sexually attracted to those of the same gender



B

BISEXUAL

A person who is emotionally, spiritually, physically, and/or sexually attracted to multiple genders



T

TRANSGENDER

A person whose gender identity and/or expression is different from cultural expectations based on the gender they were assigned at birth



Q

QUEER

An umbrella term used by sexual and gender minorities to express an identity that does not correspond to established ideas of sexuality and gender, especially heterosexual norms

I

INTERSEX

A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female

SOURCE: Garden State Equality

Gender

- ***Gender Binary*** concept based on societal norms that there are only two genders: male and female.
- ***Gender Roles*** - culturally stereotyped where men and women are compelled to participate in masculine and feminine roles specific to their assigned sex at birth (Connell, 2002)
- ***Gender nonconformity*** refers to the extent to which a person's gender identity, role, or expression differs from the cultural norms prescribed for people of a particular sex (Institute of Medicine, [2011](#))

Gender Identity

Deeply held, internal sense of self as male, female, a blend of both, or neither or as a gender beyond binary.

Cisgender is a person whose gender identity or gender expression matches his or her sex assigned at birth.

Transgender is an umbrella term used to describe people whose assigned sex at birth is not fully aligned or congruent with their current gender identity or expression (IOM, 2011) e.g. transwoman, transman

Gender Expression

Refers to the way a person uses appearance, mannerisms, clothing, and other personal traits to communicate their gender.



Gender in Other Cultures



- In Bugis Society, gender system recognizes 5 genders:
- *Oroané*
- *Makkunrai*
- *Bissu (intersex)*
- *Calabai*
- *Calalai*.



KATHOEY



MUXE



HIJRA

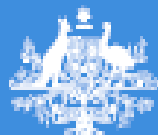


BAKLA



Recognition of Gender Diversity

- December 2007, Supreme Court of Nepal issued a groundbreaking verdict in favor of gender minorities and recognition of a third gender and in 2015 to issue passports to gender minorities (Huffington Post Canada, 2015)
- November, 2013 Germany became the first European country to officially recognize a third gender for babies born with ambiguous genitalia (Nandi, 2013)
- April, 2014 India Supreme Court recognized “T” as third gender



Declaration: gender change in travel document

Use **BLACK PEN**

and print within the boxes in

BLOCK LETTERS

Use **CROSSES** in boxes marked with an 'X'



This form must be completed by a registered medical practitioner or psychologist where required.

It is an offence under the *Australian Passports Act 2005* to deliberately mislead the Department.

1. DETAILS OF APPLICANT

Applicant's full name

Applicant's current address (including city/town, state/province and country)

☐ Male

☐ Female

☒ Indeterminate

2. GENDER TO APPEAR IN THE TRAVEL DOCUMENT

☐

Male (M)

☐

Female (F)

☐

Intersex/Indeterminate/Unspecified (X)

GENDERQUEER



Genderqueer, also called GenderQueer, gender queer, is an umbrella term covering non-normative gender identity and gender expression.



Gender Incongruence Gender Transition

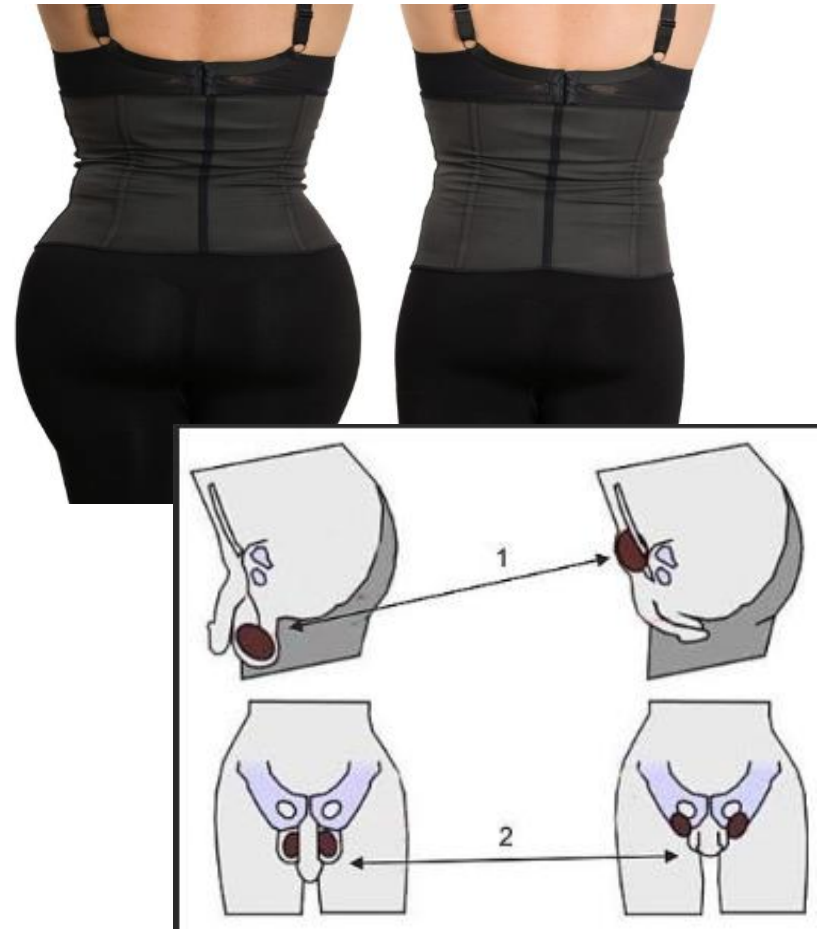
A person adoption of characteristics that they feel match their gender identity (WPATH, 2012)

Gender transitioning can involve

- a. Social aspects e.g. changing appearance, dress, pronouns
- b. Legal – name, driver's license, SSS, birth certificates
- c. Hormonal / Medical
- d. Surgical Interventions

Remember: Transgender individuals maybe different in stages of Transitioning.... or they can choose NOT to transition at all

Gender Expression



In Trans community: Examples of these methods include padding, binding, packing, tucking

Gender is less like this:



- Be conscious of our own biases
- There is NO sexual or gender binary in nature
- Everyone has a gender & sexual orientation
- Individual's genitalia does not define gender Identity
- Avoid assumptions about a patient's sexuality based on their natal sex, gender identity or gender expression
- There is no single, right or wrong way to become man or woman



And more like this:



How many people are lesbian, gay, bisexual, and transgender?



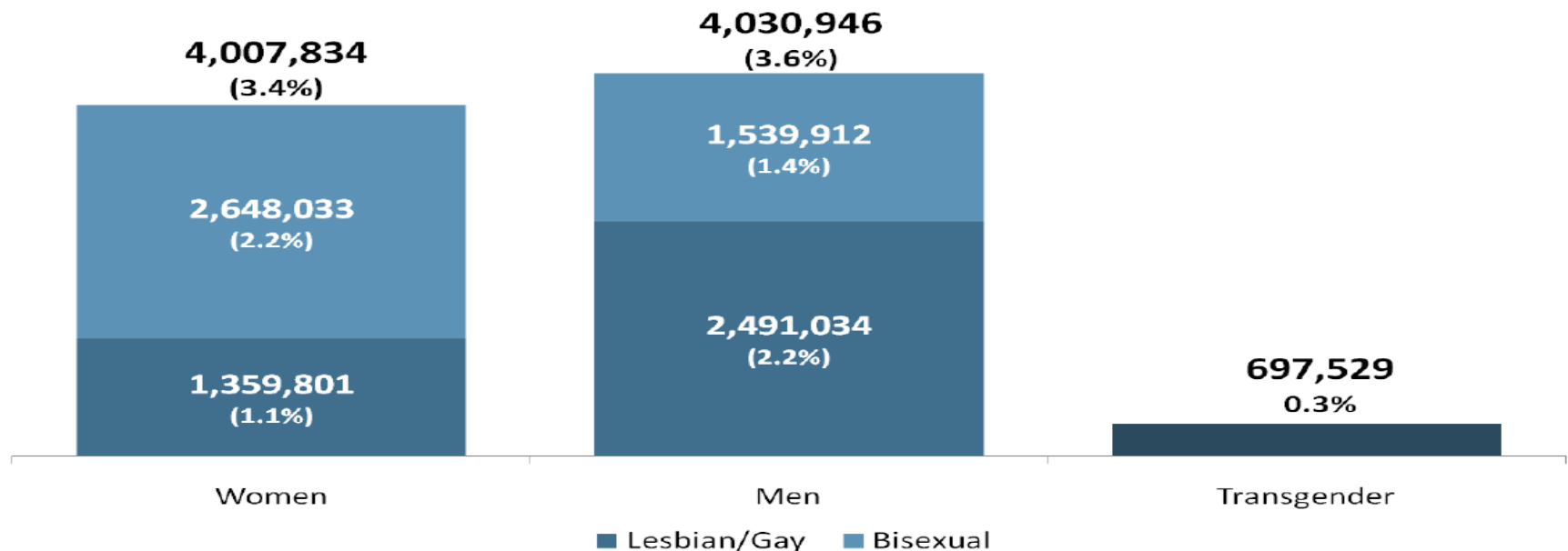
the
Williams
INSTITUTE

by Gary J. Gates, Williams Distinguished Scholar

April 2011

- Estimated 3.5% adults in US identify as LGB
- Estimated 0.3% adults are Transgender
 - 9 million LGBT Americans

Figure 5. Percent and number of adults who identify as LGBT in the United States.



How many people are lesbian, gay, bisexual, and transgender?



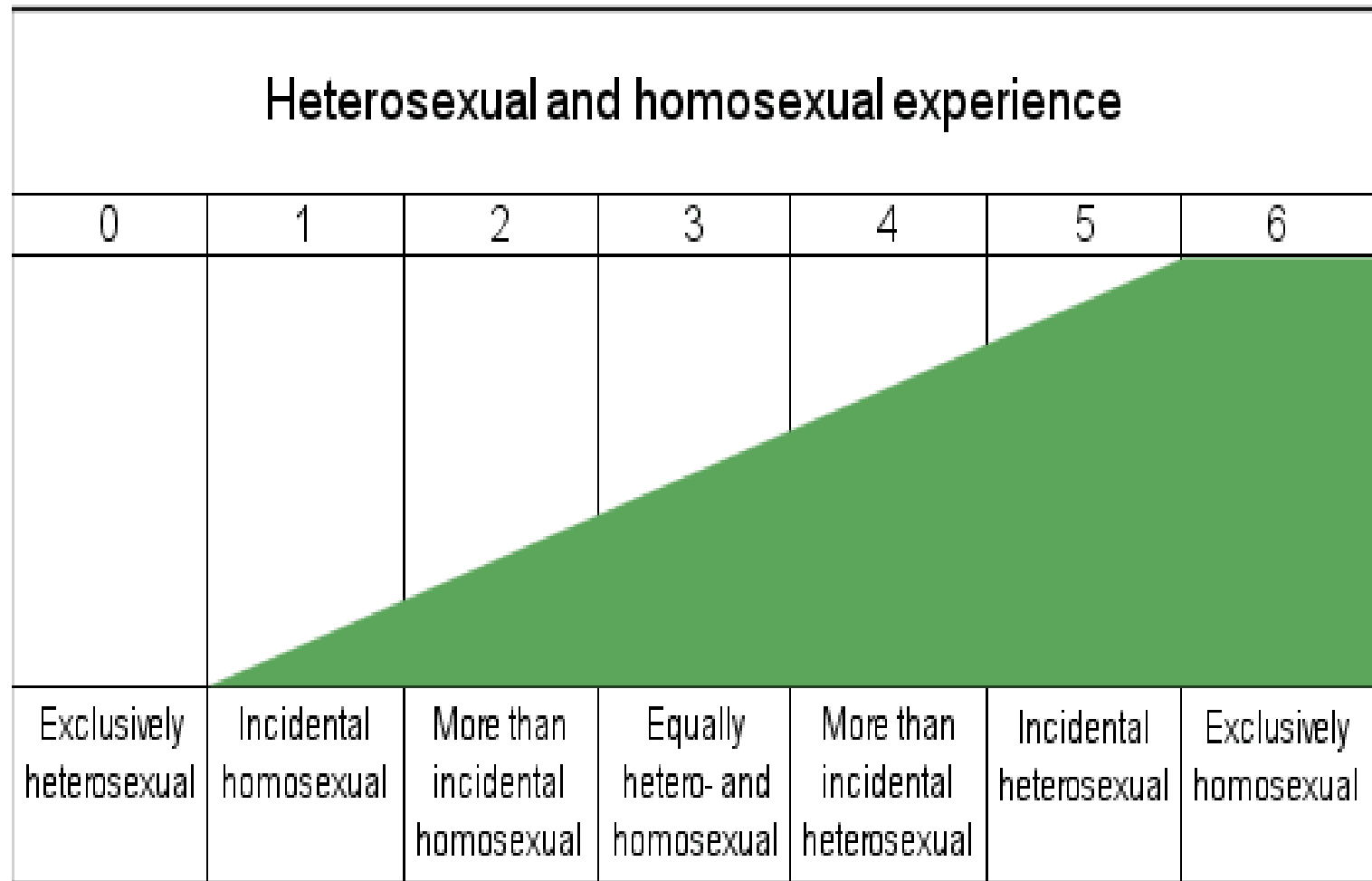
the
Williams
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by Gary J. Gates, Williams Distinguished Scholar

April 2011

- Estimates of those who report any lifetime same-sex sexual behavior and any same-sex sexual attraction are substantially higher than estimates of those who identify as LGB. An estimated 19 million Americans (8.2%) report that they have engaged in same-sex sexual behavior and nearly 25.6 million Americans (11%) acknowledge at least some same-sex sexual attraction.

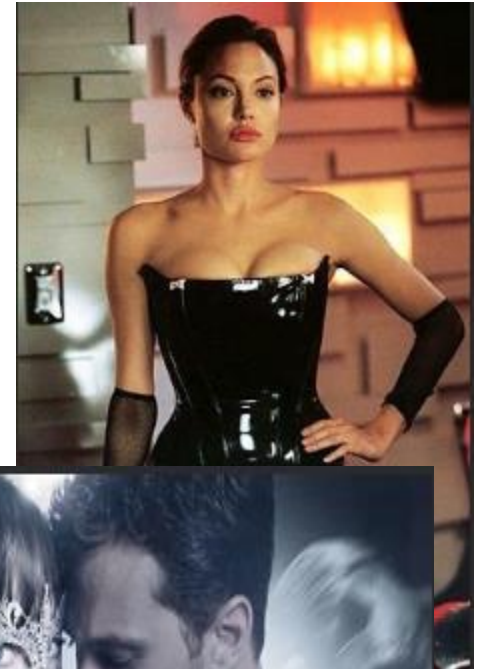
The Kinsey Scale of Sexual Behavior



Not all Man and Woman who have sex with the same man or woman are gay or lesbian respectively (Fredriksen-Goldsen & Kim, 2017)

Sexual Practices \neq Sexual Orientation

- **Sexual Identity** (Heterosexual, Homosexual, Bisexual, WSM, MSMW, WSMW, Pansexual,
- **Sexual Behavior** (fantasies, clothing, role playing, masturbation)
- **Sexual Pleasure** (toys, use of condom, latex)
- **Sexual Roles** (insertive and/or receptive, dominant, submissive)
- **Sexual function and satisfaction** (self, partners, group, chemsex,)



700,000

THE NUMBER OF ESTIMATED PEOPLE WHO IDENTIFY AS TRANSGENDER IN THE U.S.

According to 2011 findings from the Williams Institute, the transgender population represents about 0.3% of

Estimate of U.S. Transgender Population Doubles to 1.4 Million Adults



Representatives of several groups stood on the steps of the State Capitol in Pierre, S.D., for Trans Kids Support Visibility Day in February. Jay Pickthorn/The Argus Leader, via Associated Press

New York Times, 2016

Landscape of Older Americans

By 2050, the number of people over age of 65 will double to 83.7 Mio, 95 Mio by 2060. *U.S. Census Bureau, 2016*

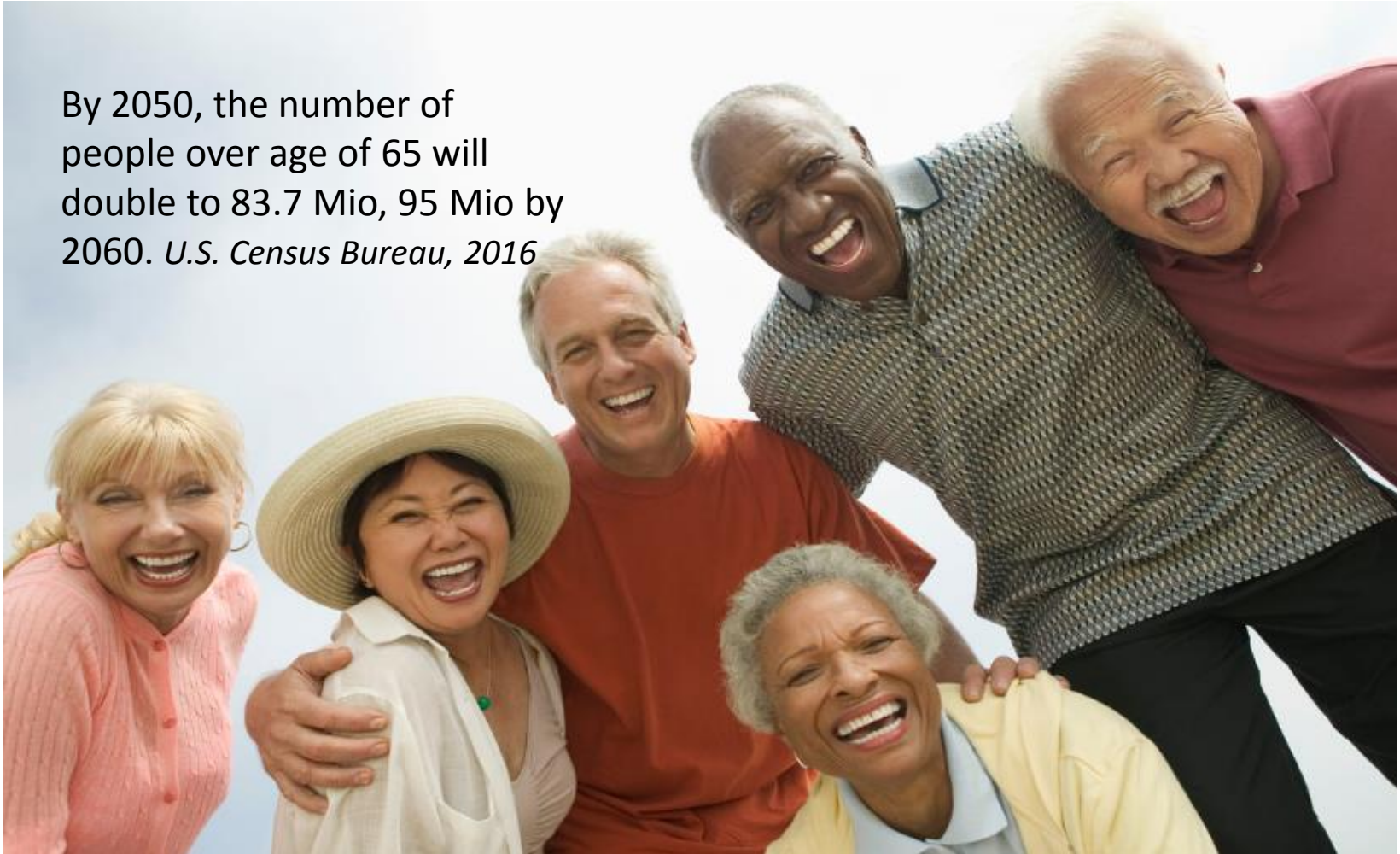
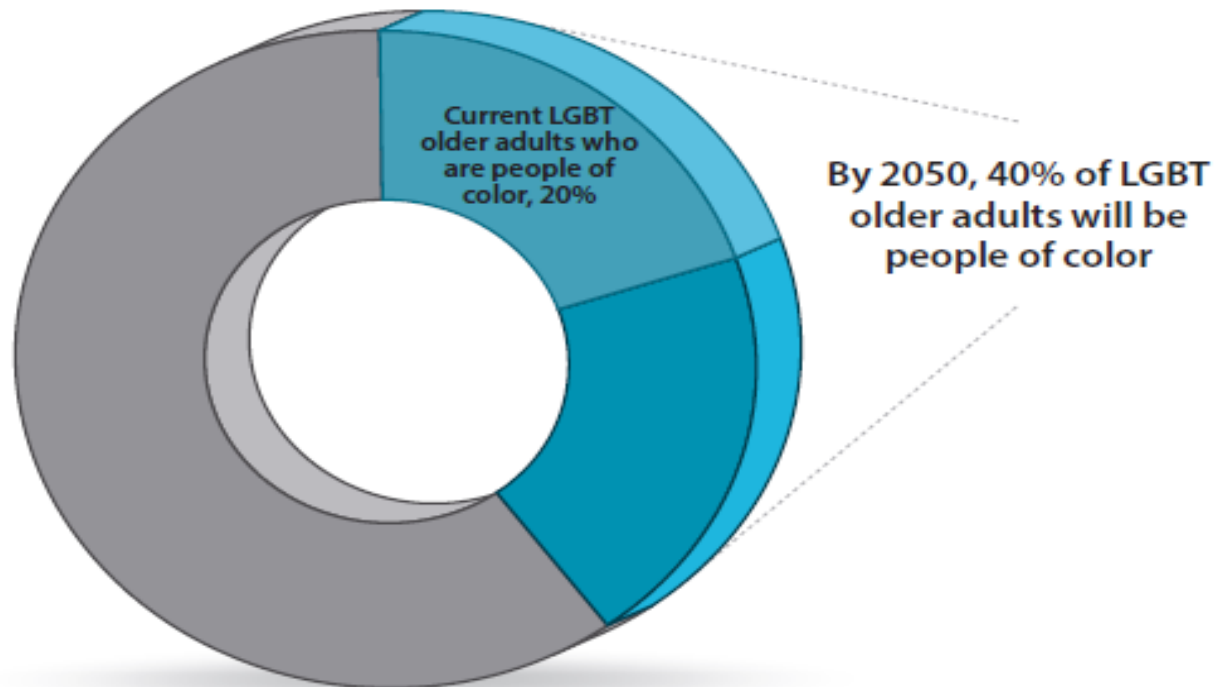


Figure 1: One in Five LGBT Older Adults is a Person of Color
% of LGBT People 50 and Over Who are People of Color



Source: Michael Adams, "An Intersectional Approach to Services and Care for LGBT Elders," *Generations: Journal of the American Society on Aging* 40, no. 2 (2016).

Landscape of Older Americans

- Average age life expectancy 78.6 (living longer with more disability)
- Racially & ethnically diverse
- More are divorced, living alone,
- Working longer: 26% Men, 18% Women
- Wide Economic disparities: 7% White, 17% Latinos, 19% African American
- Americans living with Alzheimer's disease will be doubled by 2050
- SS and Medicare expenditures will increased from 8.7% GDP to 11.8% by 2050, further raising the eligibility age

Landscape of Healthcare

- The health-care system in the USA faces a significant shortage of all types of healthcare workers, especially those trained to care for older adults. *-Institute of Medicine, 2008*
- The current shortage of nursing professionals trained in geriatric care will be compounded by the reality that aging adults will soon be the most culturally diverse our nation has ever seen. *-MetLife Mature Market Institute, 2006*

The World Health
Organization predicts a

12.9 MILLION

healthcare worker shortage
globally by **2035**



In fact, by **2013**
← that number
was already ...
7.2 MILLION



**THE U.S.
BUREAU
OF
LABOR
STATISTICS**

There is an expected shortage of
61,700 TO 94,700 PHYSICIANS
in the next 10 years in the U.S. alone

According to The Association of
American Medical College

**FORECASTS 1,000,000 NURSES
WILL NEED TO BE HIRED**
between 2012 and 2022



Landscape of LGBT Older Americans

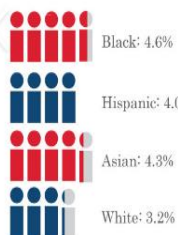
3.4%

of U.S. Adults Identify as LGBT

*Gallup findings based on more than 120,000 interviews

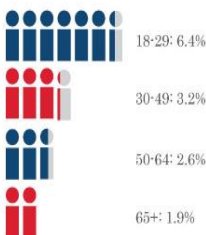
RACE/ETHNICITY

Nonwhite individuals are more likely to identify as LGBT.



AGE

Younger Americans are more likely to identify as LGBT.



INCOME

LGBT Americans tend to have lower levels of income.



American Foundation for Equal Rights

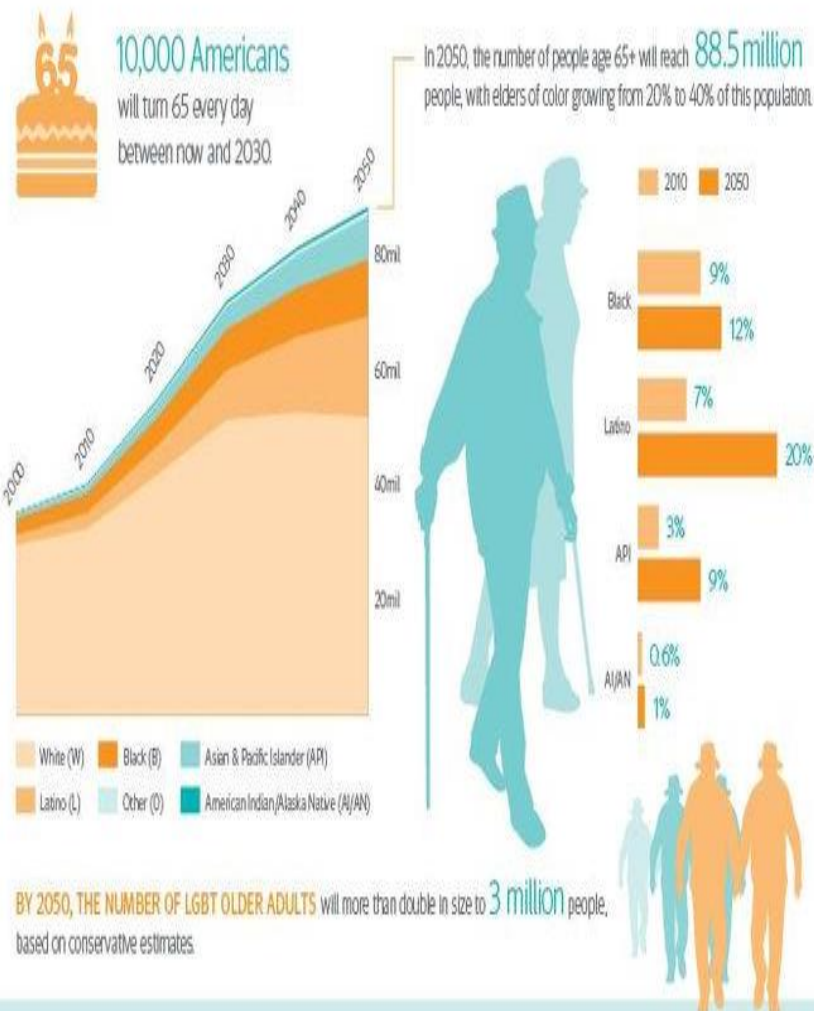
THERE ARE MORE THAN
2.7 MILLION

LGBT ADULTS WHO ARE 50 YEARS OR
OLDER LIVING ACROSS THE COUNTRY



Source: Gallup, 2017

The number and diversity of people age 65+ in the U.S. is growing by leaps and bounds.



Landscape of LGBT Older Americans

- Single & Childless
 - Gay men are more likely than lesbians to be single, live alone and have smaller support systems.
 - Bisexuals are least likely to be “out”
 - Transgender adults have the higher increased risk of isolation
- Estranged from biological family
 - Reliance on chosen families (72% friends)
- Without traditional support systems, they rely on nursing homes or other institutions providing long term care
- 5 times less likely to access health and social services

RISK FACTORS

Economic Security

- A lifetime of discrimination, especially in housing and employment, and a *long-term lack of legal and social recognition* combine to create deep economic insecurity for LGBT elders.
- 42% of LGBT adults reported being very or extremely concerned that they will outlive their retirement savings as compared to 25% of non-LGBT adults.

Social Connections

- A reliance on “chosen family” *due to family rejection and legalized discrimination*, creates social isolation and vulnerability for LGBT older adults.
- 9 out of 10 *LGBT older adults have no children* to help care for them as compared to 2 out of 10 heterosexual older adults.
- Friend networks don’t have the legal recognition to take time away from work, share health insurance plans, or make medical decisions for one another.

RISK FACTORS

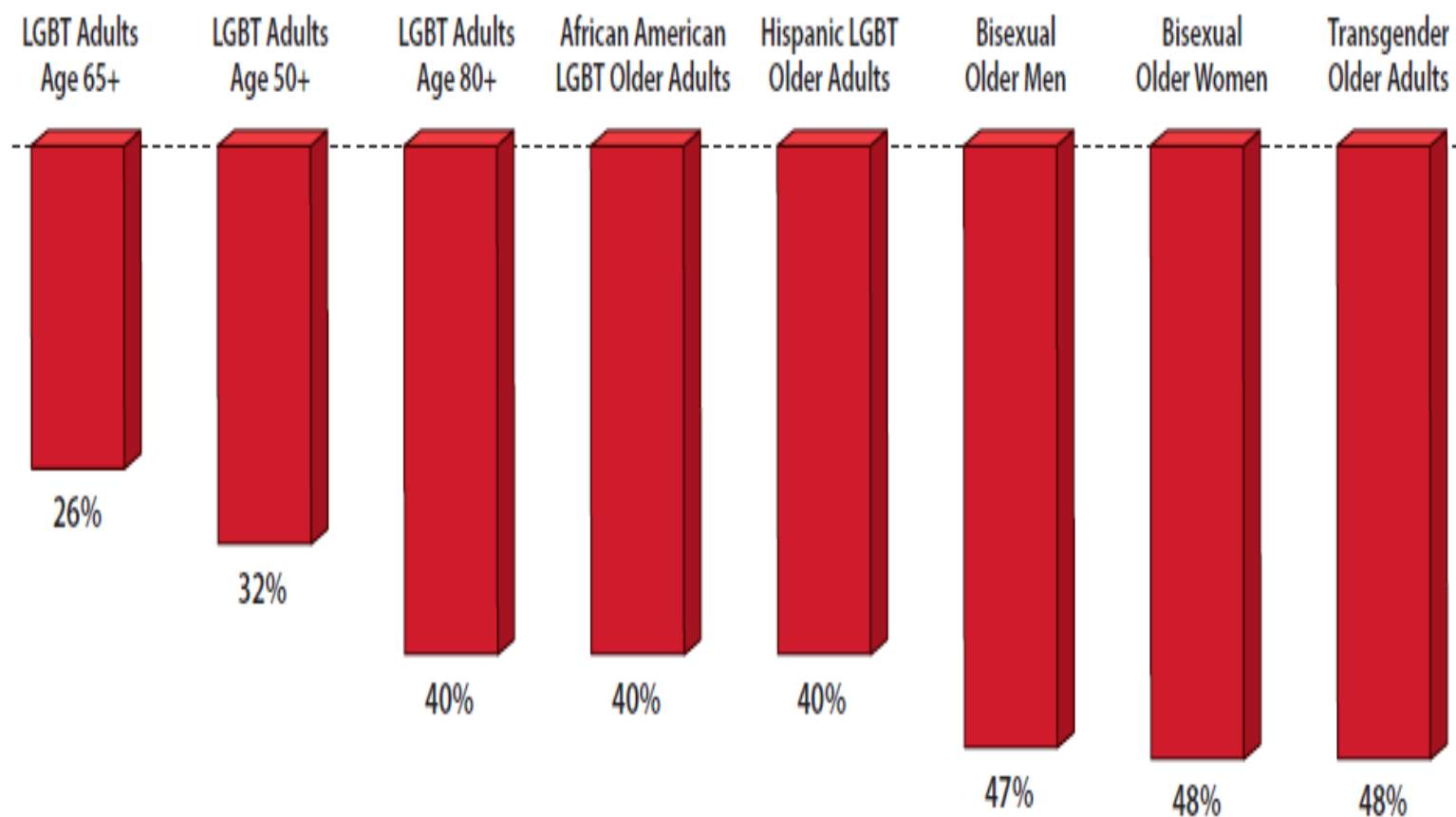
Health & Well being

Long-term discrimination, combined with *a lack of competent, inclusive healthcare* leads to difficulties in accessing care and specific mental and physical health disparities for LGBT older adults.

- LGBT older adults face difficulties when accessing health care including legal restrictions on visitation, medical decision making and family leave for friends and chosen family, and overt discrimination from health care providers.
- LGBT older adults have a significantly higher rate of psychological distress than heterosexual older adults
- LGBT individuals are 2 to 3 times more likely to live alone. Living alone increases social isolation and loneliness which are significant predictors of depression among older adults.

Figure 6: LGBT Older Adults are More Likely to Live in Poverty

% of Older Adults Who Live at or Below 200% of the Federal Poverty Level, by Population



Source: Charles A. Emlet, "Social Economic, and Health Disparities Among LGBT Older Adults," *Generations: Journal of the American Society on Aging* 40, no. 2 (2016).

LGBT HEALTH DISPARITIES

Access to health care and health insurance

■ Heterosexual ■ LGB ■ Transgender

Health Disparity #1: Heterosexual adults are more likely to have health insurance coverage.⁵

% of adults with health insurance



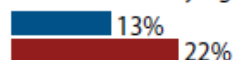
Health Disparity #2: LGB adults are more likely to delay or not seek medical care.⁶

% of adults delaying or not seeking health care



Health Disparity #3: LGB adults are more likely to delay or not get needed prescription medicine.⁷

% of adults delaying or not getting prescriptions



Health Disparity #4: LGB adults are more likely to receive health care services in emergency rooms.⁸

% of adults receiving ER care

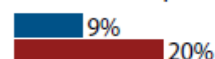


Impact of societal biases on mental health and well-being

■ Heterosexual ■ LGB ■ Transgender

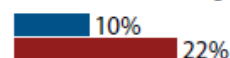
Health Disparity #11: LGB adults are more likely to experience psychological distress.¹⁵

% of adults experiencing psychological distress in past year



Health Disparity #12: LGB adults are more likely to need medication for emotional health issues.¹⁶

% of adults needing medication for mental health



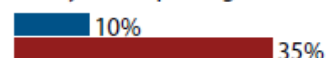
Health Disparity #13: Transgender adults are much more likely to have suicide ideation.¹⁷

% of adults reporting suicide ideation



Health Disparity #14: LGB youth are much more likely to attempt suicide.¹⁸

% of youth reporting suicide attempts





50% OF SINGLE LGBT OLDER PEOPLE BELIEVE THEY WILL HAVE TO WORK WELL BEYOND RETIREMENT AGE, AS COMPARED TO **27%** OF SINGLE NON-LGBT PEOPLE.



42% OF LGBT OLDER PEOPLE FEAR THEY WILL OUTLIVE THE MONEY THEY HAVE SAVED FOR RETIREMENT, AS COMPARED TO **25%** OF NON-LGBT OLDER PEOPLE.



40% OF LGBT OLDER PEOPLE, AGES 60-75, SAY THEIR HEALTHCARE PROVIDERS DON'T KNOW THEIR SEXUAL ORIENTATIONS.



40% OF LGBT OLDER PEOPLE SAY THEIR SUPPORT NETWORKS HAVE BECOME SMALLER OVER TIME, AS COMPARED TO **27%** OF NON-LGBT PEOPLE.



LGBT OLDER PEOPLE ARE **TWICE AS LIKELY (14% VS. 7%)** AS NON-LGBT OLDER PEOPLE TO SEE THEMSELVES AS MENTORS.



1 IN 3 (34%) LGBT OLDER PEOPLE LIVES ALONE, AS COMPARED TO **21%** OF NON-LGBT PEOPLE.



1 IN 3 (32%) LGBT OLDER PEOPLE IS CONCERNED ABOUT "BEING LONELY AND GROWING OLD ALONE," AS COMPARED TO **19%** OF NON-LGBT PEOPLE.



1 IN 4 (25%) TRANSGENDER OLDER ADULTS REPORTS DISCRIMINATION WHEN SEEKING HOUSING.

• MAR 26, 2018

Majority of LGBT Adults Concerned About Social Support and Discrimination in Long-Term Care

New AARP national survey finds most LGBT adults want but don't have access to LGBT-sensitive care and services

- 60% of LGBT adults fear of discrimination in health care (highest level concerns are within LGBT of color)
- 20% of LGBTQ seniors were comfortable being open about their sexual orientation,
- 88% want providers in LTC who are specifically trained and competent.
- 80% respondents would welcome signs or symbols that indicate a facility is LGBT friendly
- Providers or staff, who are themselves LGBT, to work openly in LTC facility.

LGBT Older Adults in LTC facilities: Stories from the Field

- 22% (60/278) LGBT older adults could be open with the facility staff
- Of the 289 service providers who answered the survey, 247 felt that LGBT older adults were not safe coming out or were not sure that they should come out.

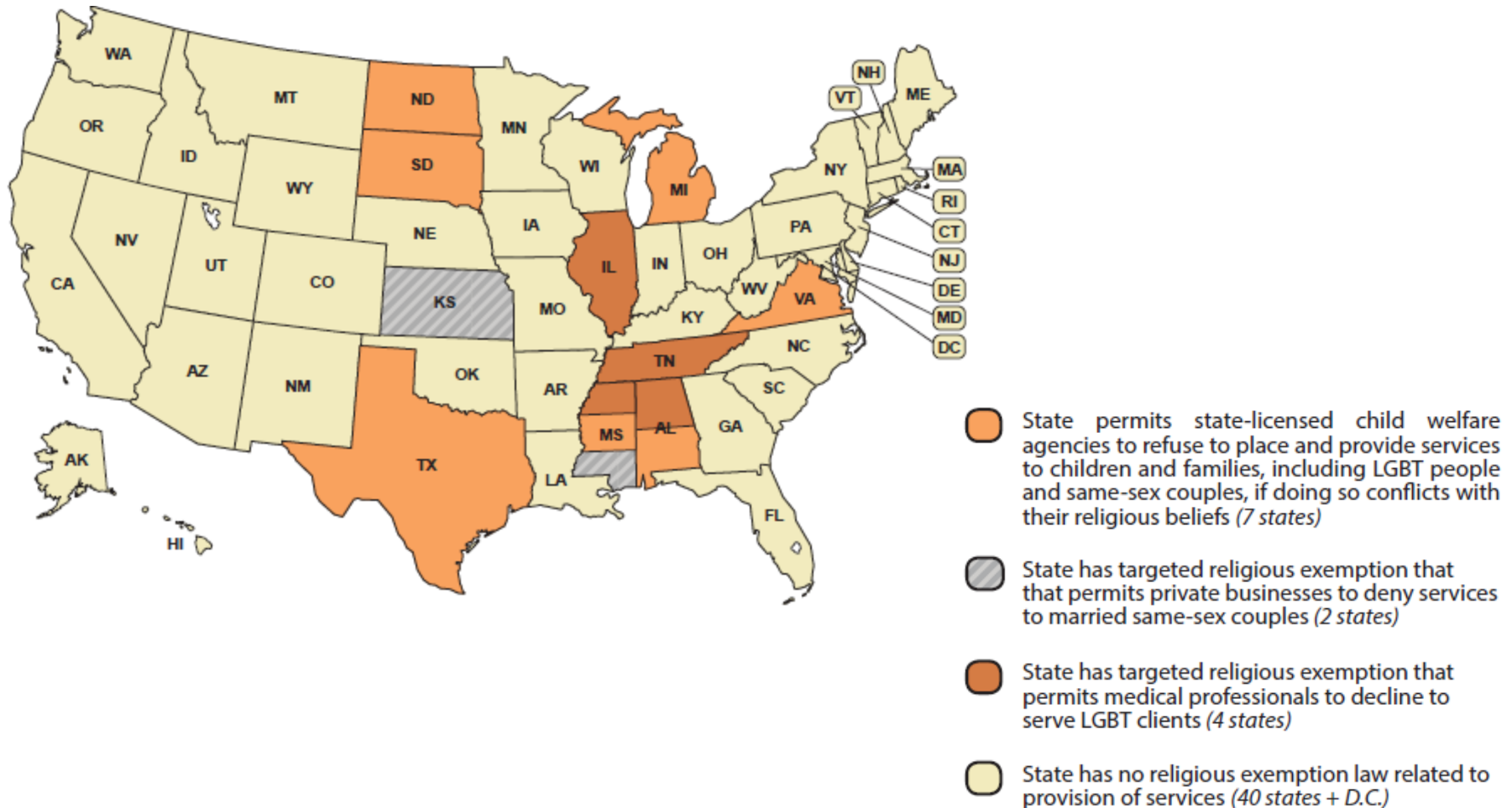
Experiences Related to Resident's Real or Perceived Sexual Orientation and/or Gender Identity	Number of Instances	Percent of All Instances
Verbal or Physical Harassment From Other Residents	200	23%
Refused Admission or Re-admission, Attempted or Abrupt Discharge	169	20%
Verbal or Physical Harassment From Staff	116	14%
Staff Refused to Accept Medical Power of Attorney from Resident's Spouse or Partner	97	11%
Restriction of Visitors	93	11%
Staff Refused to Refer to Transgender Resident by Preferred Name or Pronoun	80	9%
Staff Refused to Provide Basic Services or Care	51	6%
Staff Denied Medical Treatment	47	6%
Total	853	100%

Source: The National Senior Citizens Law Center et al., "LGBT Older Adults in Long-Term Care Facilities: Stories from the Field," accessed May 11, 2017, http://www.lgbtagingcenter.org/resources/pdfs/NSCLC_LGBT_report.pdf.

Nursing Home Reform Act

- The law is clear regarding the facility's obligation to provide necessary care in both nursing homes and assisted living facilities.
- Under the NHRA's regulations, a "resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights."
- Federal guidelines for this right instruct government inspectors to "[p]ay close attention to resident or staff remarks and staff behavior that may represent deliberate actions to promote or to limit a resident's autonomy or choice, particularly in ways that affect independent functioning."

Several States have target License to Discriminate laws



Source: Movement Advancement Project, "LGBT Equality Maps: State Religious Exemption Laws", accessed October 16, 2017, http://www.lgbtmap.org/equality-maps/religious_exemption_laws.

New Jersey Law Against Discrimination (LAD)

[The New Jersey Law Against Discrimination \(N.J.S.A. 10:5-12\)](#) (*LAD*) makes it unlawful to subject people to differential treatment based on race, creed, color, national origin, nationality, ancestry, age, sex (including pregnancy), familial status, marital status, domestic partnership or civil union status, **affectional or sexual orientation, gender identity or expression**, atypical hereditary cellular or blood trait, genetic information, liability for military service, and mental or physical disability, perceived disability, and AIDS and HIV status. The LAD prohibits unlawful discrimination in employment, housing, **places of public accommodation**, credit and business contracts.

The State of New Jersey Department of Law and Public Safety, Office of the Attorney General (11/17/2017). About the NJ Law Against Discrimination (*LAD*). Retrieved from <http://www.nj.gov/oag/dcr/law.html#LAD>

NJ Law Against Discrimination

- New Jersey Law Against Discrimination (LAD) prohibits discrimination on the basis of actual or perceived sexual orientation, gender identity or expression, in **places of public accommodation** (example: hospital)
- Facility that has sex-segregated facilities are allowed, access must be permitted on the basis of gender identity.



American Geriatric Society

Care of LGBT Older Adults

Position Statement

- I. Equal Treatment for LGBT Individuals
- II. The Need For Training in LGBT Health Concerns
- III. Healthcare and Social Circumstances of LGBT Individuals
- IV. The Reality of Unequal treatment under laws and Social Service Programs
- V. Research in LGBT Health

American Geriatric Society

Care of LGBT Older Adults

Position Statement

I. Equal Treatment for LGBT Individuals

- Sexual orientation should be included in the patient non-discrimination policy.
- Gender identity and gender expression should be included in the patient nondiscrimination policy.
- The visitation policy should grant equal access for same-sex and transgender couples and should allow equal access to support persons that the patient designates who may not be legal family members.
- The visitation policy for children should grant equal access for same-sex and transgender parents.

American Geriatric Society

Care of LGBT Older Adults

Position Statement

II. The Need For Training in LGBT Health Concerns

Taking a social history, medical history and sexual history that is inclusive of the LGBT experience.

III. Health care and Social Circumstance of LGBT Individuals

Consideration of the role of partners or other chosen family in healthcare decision making and caregiving and the individual's right to choose a healthcare proxy who maybe a partner or a friend.

Creation of a culture of respect for LGBT Older person in supportive living situations, including training for all types of healthcare workers

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LOCAL —

N.J. LGBT ELDER BILL OF RIGHTS ADVANCES

by Gary L. Day 📅 May 23, 2019

The LGBTQ Older Adults Bill of Rights:

- Establishes Bill of Rights for LGBTQ older adults in long-term care facilities.
- Protects LGBTQ seniors under the Older Americans Act, thereby directing critical funding and resources.
- Prohibits discrimination in long-term care facilities.
- Mandates LGBTQ sensitivity training for employees in long-term care facilities.
- Protects people living with HIV and those with intersex conditions in each of these areas.



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STATE LANDSCAPE

21 states and D.C. have laws that prohibit discrimination based on sexual orientation.
16 states and D.C. do so based on gender identity.



- Sexual orientation and gender identity
- Only sexual orientation

29 states have failed to pass laws that protect gay and transgender workers. 71 percent of U.S. square miles have no protections.



- No sexual orientation or gender identity protections

[First Reprint]
SENATE, No. 3484

STATE OF NEW JERSEY
218th LEGISLATURE

INTRODUCED FEBRUARY 14, 2019

Sponsored by:

Senator TROY SINGLETON

District 7 (Burlington)

Senator RICHARD J. CODEY

District 27 (Essex and Morris)

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Co-Sponsored by:

Senators Weinberg and Gopal

LGBTQ Seniors Bill of Rights

Senate Bill 3484/Assembly Bill 5075 (sponsored by Senators, Singleton, Codey, Vitale, and Gopal, and Assembly Persons Huttel, Downey, Jasey, Jackson-Reynolds, Tucker, and Giblin) would:

- Provide protections to lesbian, gay, bisexual, transgender, and intersex seniors and seniors living with HIV;
- Establish certain minimum rights protections for LGBTQI seniors and seniors with HIV who reside in long-term care facilities;
- **Mandate biennial training** for employees of long-term care facilities;
- Require the State to treat LGBTQI seniors and seniors living with **HIV as older individuals who have the “greatest social need”** for the purposes of implementing the Federal Older Americans Act of 1965

LGBTQ Seniors Bill of Rights

Under the bill, long-term care facilities are defined to include, but not be limited to:

- Nursing homes
- Assisted living residences
- Comprehensive personal care homes
- Residential health care facilities
- Dementia care homes

Long-term care facility staff is defined to include all individuals **employed or contracted** by a long-term care facility.

LGBTQ Seniors Bill of Rights

The bill prohibits long-term care facilities, and their staff from discriminating against any person on the basis of their **HIV status**, or **sexual orientation** and/or **gender identity** and **gender expression**.

Specifically prohibited actions include:

- Denying admission, transferring an individual, or refusing to transfer them, discharge or eviction;
- Denying a request to share a room;
- Prohibiting a resident from using, or harassing a resident who seeks to use, a restroom matching their gender identity;
- Willfully and repeatedly refusing to use a resident's chosen name and pronouns (regardless of status of legal name);

LGBTQ Seniors Bill of Rights

Prohibitions Continued:

- *Denying a resident the right to wear* clothing, accessories, or cosmetics that are allowed to any other resident;
- Restricting the resident's right to associate with other residents, or visitors, including the right to consensual sexual relations, unless such are prohibited uniformly for all residents, and in a non-discriminatory manner (this does not mean that long-term care facilities cannot have a policy prohibiting sexual activity between residents and staff);
- Denying or restricting medical care.

LGBTQ Seniors Bill of Rights

Each long-term care facility **shall post the following notice** alongside its current non-discrimination policy in all places and on all materials where that policy is posted:

“FACILITY NAME does not discriminate and does not permit discrimination, including, but not limited to, bullying, abuse, or harassment, on the basis of actual or perceived sexual orientation, gender identity, gender expression, or HIV status, or based on association with another individual on account of that individual’s actual or perceived sexual orientation, gender identity, gender expression, or HIV status. You may file a complaint with the Office of the State Long-Term Care Ombudsman, [provide current contact information], if you believe you have experienced this kind of discrimination.”

LGBTQ Seniors Bill of Rights

- At the time of admission, each long-term care facility shall ensure that *resident records* include the resident's gender identity and the resident's chosen name and pronouns, as indicated by the resident. If a resident transitions during their time at a long-term care facility, records will be updated at that time.
- Unless required by State or federal law, a long-term care *facility shall not disclose any personally identifiable information* regarding:
 - A resident's sexual orientation
 - A resident's transgender status
 - A resident's transition history
 - Or a resident's HIV status

LGBTQ Seniors Bill of Rights

- There are provisions in the bill language to *ensure privacy* during physical examinations, so that transgender and intersex residents are not unduly observed during physical examinations.
- We are working with the Department of Human Services to clarify the language so that it is workable for both residents and long-term care facilities.

LGBTQ Seniors Bill of Rights

- LGBTQI residents shall be *provided access to medical and mental health care providers* who are knowledgeable about the health care needs of the LGBTQI population.
- Transgender residents will be *provided with access to transition-related care* (this does not mean that the long-term care facility is responsible for the costs of such care, but rather that they are responsible for ensuring that the resident have access to health care professionals who can provide such).
 - In NJ, most insurers, including Medicaid, cover transition-related care.

LGBTQ Seniors Bill of Rights

The LGBTQ Seniors Bill of Rights also *mandates biennial training* for employees of long-term care facilities.

- Training must cover care for LGBTQI seniors and seniors living with HIV, and preventing discrimination on the basis of sexual orientation, gender identity and expression, intersex status, and HIV status;
- Training is a *condition of new employment, and must be followed up on every two years from date of first training*
- Long-term care facilities must document the training;
- Training must be provided by an entity that has expertise in the legal, social, and medical challenges faced by LGBTQI seniors and seniors living with HIV;
- Long-term care facilities are to assume the cost of providing the training.

LGBTQ Seniors Bill of Rights

Finally, the bill requires the State to treat LGBTQI seniors and seniors living with HIV as older individuals who have the “greatest social need” for the purposes of implementing the Federal **Older Americans Act of 1965 (OAA)**.

The OAA defines greatest social needs as:

“the need caused by non-economic factors, which include: (a) physical and mental disabilities; (b) language barriers; and (c) cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, that: (i) restricts the ability of an individual to perform normal daily tasks; or (ii) threatens the capacity of the individual to live independently. 42 U.S.C. §3002(23)-(24)(2016)

LGBTQ Seniors Bill of Rights

The federal government has never recognized LGBTQI seniors or seniors living with HIV as falling under the category of greatest social need.

A bill has been introduced in Congress that would do such, but it has never been passed.

However, as the federal government disburses this funding to the states, the State Agency, in New Jersey's case Department of Human Services, receiving the funding can identify additional groups that would fall under this category.

*Several states now recognize LGBTQ seniors for the purposes of administering the OAA. **If this bill is passed, NJ will be the first state to recognize LGBTQ seniors AND seniors living with HIV.***

LGBTQ Seniors Bill of Rights

- A long history of anti-LGBT stigma and discrimination has created both individual and structural barriers to access healthcare and achieving optimal health outcomes
- Establishing inclusive and welcoming healthcare environment for LGBT people can help eliminate disparities by:
 - Increasing access to and retention in care
 - Encouraging patients to be open about their SOGI, enabling providers to offer more appropriate, targeted, and sensitive care **Create inclusive environments and remember, learning about LGBT healthcare can be a lifelong process; take advantage of the many venues currently offering educations through journals, webinars, grand rounds and conferences**

Addressing LGBT Health disparities

- Be mindful of language used with all patients (2 questions: speech and forms)
- Ask patient's name and (if applicable) pronouns they use
- Don't assume a person's sexual orientation based on gender identity (e.g. significant other)
- Don't assume a trans patient wants to medically or surgically affirm their gender
- Ask questions that are only related to patient's presenting symptoms
- Among LGBT population, pay specific attention to health disparities
- Be aware of context that increase health risks
 - What leads people to smoke, drink, or engage in sexual risk behaviors?
- Assess for social stressors and Ask for support system
 - be aware of possible rejection by family or community of origin, harassment, and discrimination

Changing Organizational Culture

- *Create a welcoming, inclusive, safe and respectful gender affirming environment*
 - Preferred names on Registration e.g. Max vs. Maxine
 - Interacting with patients. Using Pronouns: she, her, he, his, ze, hir, they,
 - EHR/patient forms: Marital Status vs. Relationship status
 - Mirror language that patients use for themselves, their partner, and their bodies
 - Patient ID Band : Legal Name “Preferred Name” Last Name
 - DO NOT make assumptions about past, current, future sexual behaviors
 - Provide Bathroom Options: Gender Neutral or All Gender bathrooms

STRATEGY # 1 ADVOCACY

Policy and Procedures

23 Feb. Draft: 4/12/2019

Robert Wood Johnson University Hospital

Hospital Administration: Access to Guidelines for Quality Care for Transgender Patients RWJUH New Brunswick

Access to Guidelines for Quality Care for Transgender Patients RWJUH New Brunswick

Originally Created	08/2011
Date Revised/Reviewed	08/2018/09/2019
Approved By/Group/Committee	Multi-disciplinary Policy and Procedure Committee

TITLE: Access to Guidelines for Quality Care for Transgender Patients RWJUH New Brunswick

EFFECTIVE DATE: August 1, 2018

TARGET AUDIENCE:

Robert Wood Johnson University Hospital Inc. New Brunswick

- Bed Management
- Nursing Leadership
- Diversity and Inclusion
- Clinical Administration

APPROVED BY: Patient Care Policy & Procedure 9/2018, Multi-disciplinary Policy & Procedure 9/2018

ATTACHMENTS: NA

Robert Wood Johnson | RWJBarnabas
University Hospital HEALTH

Gender Inclusive Patient Interaction

Ways of Saying It

You can say things like "Hello!" or "Good morning/evening!" or "Greetings!" These are entirely gender-inclusive ways of starting a conversation or a meeting.

Specific Relational Terms

Instead of brother/sister, you can say sibling.
Instead of husband/wife, you can say spouse or partner.
Instead of boyfriend/girlfriend, you can say partner or significant other.
Instead of father/mother, you can say parent.

ADDRESSING PATIENTS

You can also avoid using "Mr. /Mrs. /Miss/Ms." by calling someone by their first name or by using their first and last name together.

FOR ADMITTING or other patient areas

Avoid assuming people have an opposite-sex partner or spouse -> "You said you are married...what's your spouse's name?"

Politely ask if you are unsure about a patient's preferred name -> politely ask what name a patient prefers (why add the uncertainty part? Make it standard practice.); For example, "And what should we call you while you're here with us? Anything other than your first name?"

If you make an error: apologize sincerely: "I apologize for using the wrong pronoun or name."

Robert Wood Johnson | RWJBarnabas
University Hospital HEALTH

New Brunswick

TO: Robert Wood Johnson University Hospital New Brunswick

FROM: Mary C. Kelso, Director of Patient Access

DATE: 3/8/19

SUBJECT: Changes to the Patient Wristband

On Thursday, March 14, 2019, we will be removing the item "**Sex**" from the patient wristband. This is in light of inquiries by patients questioning the continued listing of one's **Sex at Birth** as opposed to the patient's **Current Gender Identity**. This is a System-wide implementation to continue to create an inclusive culture where everyone is treated with respect and dignity. Over the month of March, all of the System facilities will be removing the item "**Sex**" from the patient wristband.

In August 2018, New Brunswick moved to include both the patient's **Legal Name** and **Preferred Name** on the patient's wristband. Both the **Legal** and **Preferred Names** are displayed on the wristband with the Preferred Name placed next to the legal name in parentheses.

Sex at Birth, Current Gender Identity, Legal Name and **Preferred Name** will remain a part of the registration data collection process and will be accessible in the permanent patient's record to ensure appropriate care, delivery, and medical decision making. Those data elements will also be visible in the patient banner bar in SCM Allscripts and on all Optimum facesheets.

*The two required patient identifiers of **Name** and **Date of Birth** remain on the wrist band.*

Below is an example of the new wristband, which will go into effect on Thursday, March 14, 2019. The example below shows what the wristband will look like with the removal of "**Sex**" and the **Legal** and **Preferred Names**.

Displays some signs of Acceptance



Everyone deserves access
to the best health care –
regardless of what pronoun they use.

Robert Wood Johnson University Hospital
is dedicated to providing the best care to
everyone who walks through our doors.
We are working to eliminate barriers to
ensure lesbian, gay, bisexual and transgender
individuals can access the health care services
they need and are treated with the dignity
and respect they deserve.



To learn more about our commitment to diversity and inclusion, visit www.rwjuh.edu.



RWJBarnabas Health
stands with our
communities.

*Today, tomorrow
and always.*



FAMILY Support Group



PROUD TRANSITIONS



PROUD TRANSITIONS TRANSGENDER FAMILY SUPPORT GROUP

3rd Thursday of Each Month

7 - 9 p.m.

Robert Wood Johnson University Hospital Somerset
Family Practice Conference Room
110 Rehill Ave., Somerville

This free support group will help spouses, partners
and adult children better understand, accept and
cope with their transgender family members.

*Light dinner will be served.
Confidentiality maintained. Admission is free.*

Needs Assessment

- Most transgender support groups focus on either transgender individuals or a combination of individuals and their families
 - Some support groups charge fees to attend
- RWJ transgender family support group serves the needs of spouses, families and allies
 - Support group is free
 - Organizations supports the group



TRANSGENDER EDUPORT PROGRAM (EDUCATION & SUPPORT)

2nd Thursday of Each Month
7 - 9 p.m.

Robert Wood Johnson University Hospital New Brunswick
100 Kirkpatrick Street #201
New Brunswick, NJ 08901

This free education and support program will help the Transgender and Non-Binary confirming community members by creating a safe space of learning through peer support and resources. The sessions will be hosted in a caring and understanding environment to discuss all available resources for the Transgender Community.

The sessions are led by facilitators from Robert Wood Johnson University Hospital. Come and join us to be empowered and connect with others who share the same experiences.

*Light dinner will be served.
Confidentiality maintained. Admission is free.
Free parking for the first 3 hours.*

For more information, call or email
Jackie Baras at 908-442-5609 or proud@rwjbh.org.



Robert Wood Johnson University Hospital | RWJ Barnabas Health

EDUPORT Program



proud PROMOTING RESPECT, OUTREACH, UNDERSTANDING, AND DIGNITY
PROUDLY ME!
TRANS GENDER EDU PORT PROGRAM

TRANSFORM

Realizing the inner YOU



Featured Speaker:
Jeremy Sinkin, MD

Pre-registration required
 Light Dinner will be served
 Free Parking at Plum Street Deck
 RSVP at Jackie.baras@rwjbh.org

proud PROMOTING RESPECT, OUTREACH, UNDERSTANDING, AND DIGNITY
PROUDLY ME!
TRANS GENDER EDU PORT PROGRAM

Bridging the Gap between Law Enforcement & TRANS community



September 12, 2019 Thursday
 RWJUH—New Brunswick
 AUDITORIUM, 6:00PM to 8:00PM
 Support group will follow after the talk....

Light Dinner will be served
 Free Parking at Plum Street Deck

Robert Wood Johnson University Hospital | **RW Barnabas HEALTH**

Pre-registration REQUIRED.
 RSVP at Jackie.baras@rwjbh.org

DISCLAIMER: Please be advised that the views, thoughts, opinions or information expressed and shared in the support group belong solely to the invited speakers/guests, and not necessarily an opinion from facilitators of RWJUH's PROUDLY ME.
 Discussions may contain content that children find confusing or upsetting and may require the guidance of parents and guardians. Therefore, this is not recommended for persons under 18 without guidance from parents or guardians.

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PROUDLY ME!
TRANS GENDER EDU PORT PROGRAM

Transgender Day of Remembrance

Enlighten the world
 and honor lives lost to HATRED and VIOLENCE

PROUDLY Me in collaboration with PROUD Community Advisory Panel and RWJUH Pastoral care
 We cordially invite you to our candle lighting in observance of our Transgender Day of Remembrance

TRANS GENDER EDU PORT PROGRAM

TRANS HEALTH HAT GUIDE

Hormone Affirming Therapy



Ian Marshall, MD, associate professor of pediatrics
 Gloria Bachman, MD, professor and interim chair of obstetrics gynecology and reproductive sciences, lead the health

Pre-registration required, seats limited to 40 people
 Light Dinner will be served
 Free Parking at Plum Street Deck

Featured Speaker:
Ian Marshall, MD & Gloria Bachman, MD

TOPIC: Hormone Therapy and Monitoring

When: Thursday, September 13 2018

Where: RWJUH—New Brunswick

1st Floor Conference Room B
 Time: 6:00 pm— 8:00pm

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PROUDLY ME!
TRANS GENDER EDU PORT PROGRAM

TRANSCENDING THE BARRIERS: NARRATIVES OF PEOPLE OF COLOR



OCTOBER 10, 2019
 VJUH AUDITORIUM
 6:00PM to 8:00PM
Registration REQUIRED.

RSVP at Jackie.baras@rwjbh.org
 JACKIE J. BARAS, MSN, MBA, RN
 LGBT HEALTH NAVIGATOR

Light Dinner will be served
 Free Parking at Plum Street Deck

DISCLAIMER
 This disclaimer informs attendees that the views, thoughts, opinions or information expressed in the support group belong solely to the invited speakers/guests, and not necessarily opinions from facilitators of RWJUH's PROUDLY ME.
 Discussions may contain content that children find confusing or upsetting and may require the guidance of parents and guardians. Therefore, this is not recommended for persons under 18 without guidance from parents or guardians.

Robert Wood Johnson University Hospital | **RW Barnabas HEALTH**

proud PROMOTING RESPECT, OUTREACH, UNDERSTANDING, AND DIGNITY
PROUDLY ME!
TRANSGENDER EDUPORT PROGRAM

1
YEAR
ANNIVERSARY

BE PROUD & BEAUTIFUL!!!

A CLASS ON BASIC MAKEUP APPLICATION
A step by step make up look that's great on every face...every day

Featured Speaker: **ALLY CASTLE**

Ally Castle is a NARS cosmetics beauty expert at Saks 5th Avenue and a freelance make up artist at CBS TV New York City.

Ally is a regular co-host of YouTube program:

GIRLS LIKE US

Come and Join us as Ally shares her journey of transitioning, dating and finding oneself.

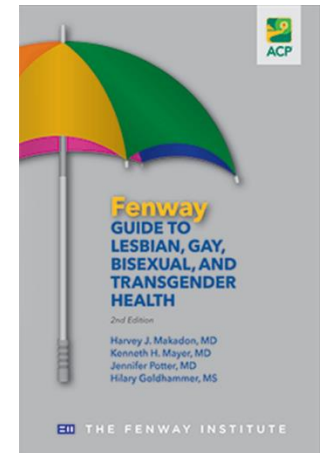
When: Thursday, FEBRUARY 14, 2019

Where: RWJUH- New Brunswick
AUDITORIUM



STANDARDS OF CARE

- WPATH: World Professional Association for Transgender
- Health Equality Index by HRC
- LGBT Health Laws
- Department of Health
- The Joint Commission
- Callen-Lorde Community Center Revised Guidelines (2012)
- USCF Center of Excellence (2009)
- Fenway Institute LGBT Health Guide (2007)



STRATEGY # 2 LEADERSHIP



Robert Wood Johnson University Hospital Names Jackie Baras LGBT Health Navigator

ON SEP 19, 2018

Robert Wood Johnson University Hospital (RWJUH) has named Piscataway resident Jackie Baras, MSN, MBA, RN, LGBT health navigator.

NJBIZ
ALL BUSINESS • ALL NEW JERSEY

READER
RANKINGS

EVENTS

LATEST
HEADLINES

DIGITAL
EDITIONS

VANGUARD
SERIES

EXECI
MOVE

EDUCATION ENERGY FOOD & HOSPITALITY GOVERNMENT HEALTH CARE LAW MANUFACTURING MONEY RE

RWJUH names Baras LGBT navigator

By: Jessica Perry

September 19, 2018 12:37 pm



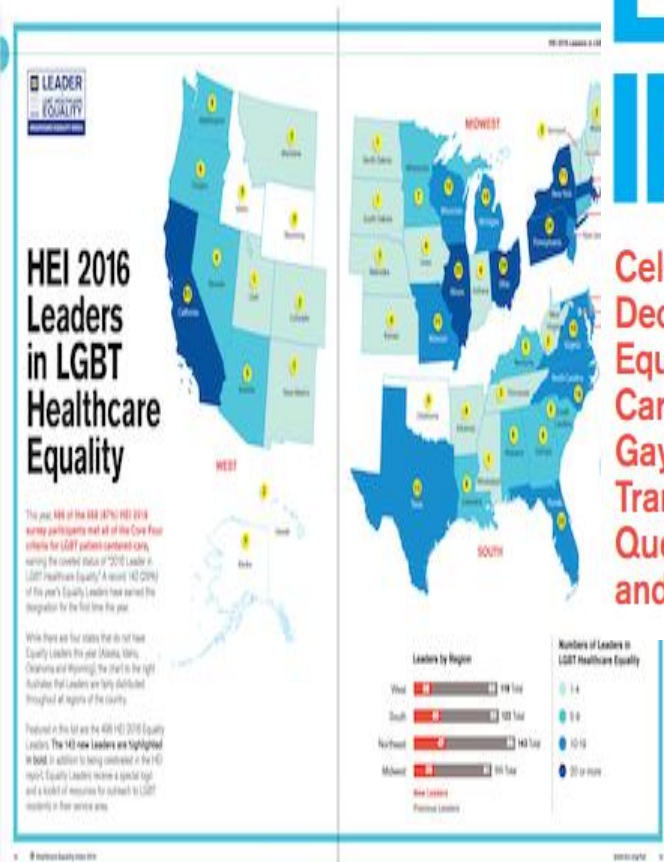
Jackie Baras will serve as LGBT health navigator for Robert Wood Johnson University Hospital.-(ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL)

Jackie Baras will serve as LGBT health navigator for Robert Wood Johnson University Hospital, the New Brunswick-based RWJBarnabas facility announced today. Jackie Baras will serve as LGBT health navigator for Robert Wood Johnson University Hospital, the New Brunswick-based RWJBarnabas facility announced today.

HEI 2016 Leaders in LGBT Healthcare Equality

HEALTHCARE EQUALITY INDEX 2017

Tweet



Celebrating a
Decade of Promoting
Equitable and Inclusive
Care for Lesbian,
Gay, Bisexual,
Transgender and
Queer Patients
and Their Families



Outcomes of Statewide Efforts to Date

- Doubled the number of N.J. hospitals designated “LGBTQ Healthcare Equality Leader” in two years, from 8 (2016) to 16 (2018)
- Increased number of collaborative efforts between hospitals and LGBT organizations
- Inclusion of LGBT individuals in Patient and Family Advisory Councils
- Increased number of hospital-based LGBT support groups
- More than 1000 Transgender patients have been served by PROUD Family Health

LGBT Training & Workshop



CONFERENCES

NEW JERSEY HEALTHCARE CONFERENCE FOR TRANSGENDER CARE:

Delivering Culturally Competent Care

Wednesday, May 15, 2019

7 a.m. – Noon

Robert Wood Johnson University Hospital
Arlene and Henry Schwartzman Courtyard
One Robert Wood Johnson Place
New Brunswick, NJ 08903-2601

Special Guest Speaker



Anne Koch, DMD

Topics and Speakers Include:

Keynote Address:

Treating the Transgender Patient: A Personal Narrative

Anne Koch, DMD

Transgender Physician and Advocate

Transgender Culturally Competent Care in a Large Health Care System

Andy Anderson, MD, MBA

Panel Discussion:

Medical Providers: Delivering Culturally Competent Clinical Care

Moderator: Gloria A. Bachmann, MD, MMS

Panelists: Richard L. Agag, MD; Arlex Matulac, MSN
Ian Marshall, MD; Paul F. Weber, MD, RPh, MBA

Panel Discussion:

Creating Culturally Competent Environments Policy, Advocacy and Education

Moderator: Jackie Davis, MSN, MBA



PANEL



PROUD Family Health

- Opened January **2017**
- 1st in NJ to offer primary health care services to the LGBTQIA community
- Services include:
 - Primary medical care
 - Hormone therapy
 - HIV Care
 - Health education and counseling



Legislative Affairs



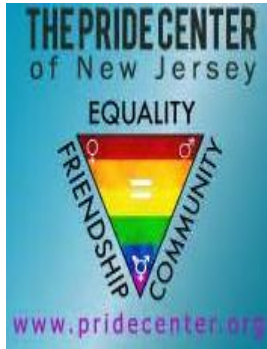
BABS SIPERSTEIN'S LAW



Winner, Business Impact Category
2017 Above and Beyond Awards
Diversity Best Practices
Network Affinity Leadership
Congress (NALC)

STRATEGY # 3

COMMUNITY COLLABORATION





in collaboration with PROUD Family Health
and PROUD Transitions presents...

2017 Annual Celebration of the **PROUD** Community

Thursday, June 22

12:30 - 2 p.m.

Fuld Auditorium

Robert Wood Johnson University Hospital Somerset



PROUD Community Outreach



REACH!



Diversity Matters!

Respect – GLSEN

Educate – Rutgers University

Advocate – NJ GSAs

Career – Johnson & Johnson

Health – Robert Wood Johnson Univ. Hosp.

On-going “Bridging the Gap” events - designed to connect Local NJ community resources to support the journey of LGBT youth as they transition to become contributing adult community members.

The strategy focuses on 5 pillars with the acronym **REACH!**

PROUD Community Advisory Panel



GENDER CENTER OF NJ



Robert Wood Johnson
University Hospital

RWJ Barnabas
HEALTH

New Brunswick

RUTGERS

Robert Wood Johnson
Medical School



Gender Affirming Surgery TEAM



PROUD AWARDS

AWARDEES

PROUD Legacy Award
Barbra "Babs" Casbar Siperstein

PROUD Hero Award
Martin Everhart

PROUD Humanitarian Award
Elaine Helms

PROUD Human Rights Advocacy
Aaron Potenza

PROUD's PRIDE Award
Nicole Brownstein

PROUD Community
Partner Award
Garden State Equality

PROUD Physician
Leadership Award
Gloria Bachmann, MD

PROUD Leadership Award
Larry Creech

PROUD Empowerment Award
RWJUH Somerset
Nurse Educators

PROUD Advocate Award
Vanessa Nazario

PROUD Star Award
Saleena Marria

PROUD Friends Award
Kathleen Roberts



PROUD Awards

The **PROUD** Awards recognize and honor community leaders and advocates, as well as RWJBarnabas Health Leadership, for their outstanding commitment and tremendous contributions to the advancement of the LGBT Community's healthcare needs.

Registration and Light Refreshments
5:30- 6 p.m.

Program
6 p.m.

proud  PROMOTING
RESPECT, OUTREACH,
UNDERSTANDING, AND DIGNITY

Please RSVP no later than Thursday, June 7
by e-mailing Proud@rwjbh.org



RESEARCH

- Recognition of Transgender health needs as medically necessary
- Studies on Non Binary Individuals
- Accurately data on LGBT Americans nationally
- Prevention of violence toward LGBT in schools, in workplace, etc.
- LGBT Parenting issues throughout the life course
- LGBT Elders health and well being
- Exploration of sexual/ gender identity among youth and elderly

RESOURCES

LGBT Aging Center

Lamda Legal

National Gay and Lesbian Task Force

National Center for Transgender Equality

Garden State of Equality

Gay and Lesbian Medical Association (GLMA)

Callen-Lorde Center

Fenway Health

SAGE

The Williams Institute

National Research Center on LGBT Aging

National Coalition for LGBT Health

Why do I fight for EQUALITY?



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