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LGBTQI+ Health and Rights

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The European Medical Students´ Association (EMSA) represents medical students across Europe. We envision a healthy and solidary Europe in which medical students actively promote health. EMSA empowers medical students to advocate health in all policies, excellence in medical research, interprofessional healthcare education and the protection of human rights across Europe.

Problem Statement

LGBTQI+ populations are often excluded from research, prevention strategies and medical practice. Many health care providers lack the knowledge and cultural competencies needed to provide quality of care to LGBTQI+ individuals. These populations are therefore likely to face significant stigmatization, discrimination and marginalization in medical settings, resulting in unique health needs, decreased behaviour towards seeking professional medical help and increased health disparities.[7]

Discrimination in health care towards lesbian, gay, bisexual, transgender, queer, intersex and other gender and sexually diverse populations is still a major problem in many countries. LGBTQI+ populations often have specific health needs, which are not being addressed adequately and there's not much to be found in the medical curriculum. This often results in increasing health disparities,[7,8] both mentally and physically. Consequently, medical staff and healthcare personnel often lack the knowledge and cultural competences needed to provide quality of care to LGBTQI+ individuals.

Studies on the inclusion of LGBTQI+ patient care in the medical curriculum have shown that LGBTQI+ related curricular content is very minimal or lacking in most medical schools. In another study it was found that one in six students has witnessed discrimination towards LGBTQI+ patients, while one in three students has witnessed heteronormativity. In addition to that, almost 90% of the students have reported to be interested in further education about LGBTQI+ health issues.

Health needs

It is important that clinicians know the specificities of the problems affecting the LGBTQI+ community, the amplitude of human relationships and gender identities, so they can provide a better standard of care.[3]

The health needs usually faced by the LGBTQI+ community are:

1. The discrimination they face while trying to access healthcare;[1]
2. Physicians being less likely to discover cancers in areas where the patient has anatomical dysphoria;[2]
3. The pathologizing of the identity of trans and intersex individuals and forced sterilisation;[1,4,11,12]
4. Stigmatization of the patient and negative experiences in healthcare, deterring the patient from seeking medical care in the future, delaying diagnosis and treatment of health problems;[1,10]
5. A higher incidence of mental health problems compared to their peers that are less likely to seek help for or to attempt suicide;[1]
6. The higher incidence of HIV and the failure of healthcare, revealing the need for comprehensive HIV prevention and care services.[1,7,8]

It is of uttermost importance to realise there are no LGBTQI+ specific diseases or ailments.[9] However, LGBT people are more likely to experience certain health issues that are mostly related to the stigma and discrimination experienced in their daily lives or at health care settings.[8,9]

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There is also the factor of lack of awareness regarding how hormone replacement therapy (HRT) affects transgender patients' health risks and prognosis. Many physicians are still unaware of the fact that the risk of prostate cancer is still there, even when the prostate becomes atrophic due to androgen suppression in trans women, or that cervical dysplasia can mimic cervical atrophy due to current or prior testosterone use (and vice versa).[2] It's also necessary to inquire whether transgender patients who have estrogen receptor - positive cancers are taking testosterone, due to the fact that the testosterone can be aromatized to estradiol. It might be difficult, both emotionally and physically, for these patients to consider stopping their hormone treatment and psychological counselling should be provided, if it comes to that.[2]

When it comes to mental health the statistics are troubling. Over 52% of LGBTQI+ people sampled have experienced depression in the last year and over 60% have anxiety. In another study examining substance use and abuse among LGBTQI+ people, it was found that LGBTQI+ adults are twice as likely as heterosexual adults to have engaged in substance abuse. An important risk factor for mental health problems of LGBTQI+ populations is "parental and caregiver rejecting behaviour" associated with poorer health outcomes most of the times.[6]

Discrimination in healthcare

It has become clear that many LGBTQI+ people have unique health needs and, consequently, often suffer from health disparities, which could be a result of a hetero- and cis-normative society and healthcare system.[5,8] As a result, people deviating from these norms may experience prejudice, stigmatisation, and insensitive communication, intentional or unintentional, which may lead them to avoid revealing their identity to the physician or to avoid healthcare altogether.[1]
This could have negative consequences for their health, and ultimately even increase already existing health disparities.

When assessing the health and health needs of LGBTQI+ people, lifestyle and behaviour issues, such as substance abuse and unsafe sex, are often the main focus. This illness-based approach could result in further negative judgments and stigmatisation by healthcare providers. Accessing healthcare limitations include inappropriate questions and curiosity, exclusion from drug trials and medical research, denied access to (fertility) treatments, exclusion from population screening programs, and pathologizing of trans-bodies and intersex conditions.[1] The latter includes practices such as misdiagnosis, executing surgical procedures without consent and forced sterilisation. In addition to that, LGBTQI+ family members of patients often experience discrimination as well, resulting in a lack of consultation about the care given to their family members or even being denied their visitation rights.[1]

LGBTQI+ health and rights within medical curricula

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In order to prepare medical students to be doctors that will provide equal quality of care for LGBTQI+ people, it is important that the current medical curriculum be revised to be more inclusive of LGBTQI+ patients and their health needs.

In a questionnaire conducted in 2016 in a medical school in London, 75% of students who participated, agreed that they would feel confident taking history from and examining an LGB patient, including using appropriate language, but only 35% felt confident taking history from and examining a transgender patient. Clinical training for medical students leaves more room for improvements before future doctors can be fully equipped to treat LGBTQI+ patients with the same quality of care that can be given to their heterosexual counterparts. In the same study, 62% of medical students felt confident using appropriate terminology to describe sexual orientation and only 41% felt confident to describe gender identity. In order for communication with future patients to be effective, medical students need to be taught the terms and terminology that will be necessary in health-related discussions involving sexual orientation and gender identity, in a way that will be accurate, acceptable and non-offensive.[35]

In the same questionnaire, up to 91% of medical students agreed that LGBTQI+ people face health and social inequalities that are relevant to clinical practice. Unlearning bias is a constant process and while medical school cannot fully prepare students for every patient they will come across, it can encourage medical students to think critically and equip them with skills necessary for dealing with their biases. Medical faculties should develop their curriculum to include sexual anatomy and gender identity of transgender and intersex individuals, sexual orientation and behaviours of LGBTQI+ people.[35]

Our View. Aim.

As EMSA, we believe healthcare must be accessible and provided without discrimination based on health status, race, ethnicity, age, sex, sexuality, disability, language, religion, national origin, income and social status. It is clear to us that healthcare for LGBTQI+ patients and medical education around this topic can improve in most European countries. Medical students, as future health professionals, should take a leading role in shaping their medical curriculum to ensure that they will be equipped with the skills and knowledge to tackle these issues, but the contribution from European Institutions that recognise this situation is necessary.

Recommendations

EMSA calls upon EMSA Faculty Member Organizations and Medical Students across Europe to:

- Actively work on the topic through projects on the topic and raise awareness regarding the disparities regarding LGBTQI+ Health and Rights
- Join advocacy and educational initiatives organised by EMSA
- Participate in processes that can bridge the gap between the healthcare discrepancies of LGBTQI+ and their dignified access to healthcare

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EMSA calls upon medical faculties and university hospitals across Europe to:

- Make sure that LGBTQI+ populations are not excluded from medical research and medical practice
- Integrate sexuality and gender diversity in medical curricula, including specific health needs of LGBTQI+ populations, and potential disadvantageous effects of sexual orientation non-disclosure
- Train healthcare personnel in inclusive provider-patient communication, both in a verbal and non-verbal way, and their competencies to provide culturally sensitive care
- Protect students and healthcare personnel against discrimination on the basis of their sexual orientation or gender identity and ensure inclusive learning and working environments
- Make sure that medical environments are being welcoming of different sexual orientations and gender identities, both for patients and their family members
- Practically adapt medical environments to a sexually and gender diverse public by, among others,
    - Creating gender-neutral facilities
    - Offering the possibility to register under a non-binary gender identity and to change registered sex
- Develop and implement accessible reporting systems for patients, students or healthcare personnel facing discrimination on grounds of sexual orientation or gender identity, develop complementary policies to adequately address these problems and make sure to take necessary actions in case healthcare personnel has been found guilty of discrimination towards LGBTQI+ people

EMSA calls upon the European Medical Organisations (EMOs) and European institutions to:

- Recognise the importance of equal access to healthcare settings of LGBTQI+ individuals by organising anti-discrimination campaigns and publishing a joined statement on LGBTQI+ Health and Rights, emphasizing the role of education
- Highlight the healthcare inequalities and consequences these cause to LGBTQI+ and to promote solutions through their official means

EMSA calls upon European Member States to:

- Develop policies and strategies to ensure equal access to inclusive, safe, discrimination-free health care services, including mental health services, and prevention and screening programmes
- Integrate LGBTQI+ health and rights into Comprehensive Sexual Education, for the elimination of the stigma from an early age
- Collaborate with organisations representing LGBTQI+ populations and healthcare personnel, and include them in policy-making and decision-making processes
- Develop programmes that strengthen and develop primary care services' relationships with their LGBTQI+ patients, to better support the needs of LGBTQI+ people, increase knowledge of health professionals and increase their confidence in working with LGBTQI+ communities

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EMSA pledges to:

- Raising awareness among its members for the topic of discrimination towards LGBTQI+ people in healthcare, empowering members to fight stigmatisation and discrimination in healthcare settings and helping members to develop skills to advocate for inclusive healthcare
- Developing and implementing strategies to create an inclusive, safe and empowering environment for members, in which they feel comfortable to express their sexual orientation and gender identity
- Ensuring that official internal and external documentation reflects gender and sexual diversity

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