Healthin Exploring Sexual Orientation & Gender Identity

June 18, 2025

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Learning Objectives



- Acknowledge the impact of current events on clients who identify as queer or gender diverse.
- Explore methods to initiate discussions with clients regarding their gender expression and sexual orientation.
- Determine strategies to foster an environment where clients feel comfortable asking for gender affirming care.



Gender Affirming Treatments

- Collecting data on sexual orientation and gender identity
- Creating a welcoming environment
- LGBTQ+-friendly or protective policies and trainings
- Use of appropriate language (identifiers, pronouns, names, etc.)
- Providing appropriate services
- Providing suitable referrals (Hardacker, et. Al., 2014)



Fear is High



- There are serious sociopolitical issues facing queer and gender diverse individuals right now
- Things are particularly charged in Idaho



Looking at Fear

- Patients are asking for removal of gender dysphoria, ASD, sexual orientation off records and treatment plans
- Patients want to know where we stand
- Losing access to medications on which the patient is well established on
- Access to medications and medical care out of the state
- Out of pocket medical costs increasing, chronic conditions being ranked
- Increasing use of black-market products
- Avoiding care through referrals or appointments
- Giving vague, inaccurate, or incomplete history
- Lack of confidentiality with new Parent Access Laws increasing risk for youth
- Increased suicidality
- More...



Responding to Fear

- Acknowledge fear
- Invite conversation
- Encourage reciprocal dialogue
- Inform clients of your stance on providing affirming care
- Use protective documentation strategies
- Reminding patients who has access to their records, diagnosis and when they are shared
- Connect with like-minded providers
- Talk to your trusted providers to know where they stand







Initiating Conversation

Introductions

- "My name is Dr. Wall and my pronouns are she/her."
- "Remind me what your name and pronouns are."
- "How would you like to be addressed?"

Commitment to meeting them where they are

- "Before we get started, I want to share a few things about me. I am committed to providing all my patients get closer to their personal health goals."
- "I wonder if you may be curious about my thoughts on ..."
- "Often patients know doctors are in a hurry and feel like it isn't ok to ask me questions. It is important to me that you take time to get all your questions answered before we talk about how to forward."

• Assure them they are not being singled out or targeted

- "I ask all my patients the same starting questions to make sure I'm providing the best possible care. Some of these questions are very personal like gender identity and sexual health. Would that be alright?"
- "Everyone has different ideas about what is easy or hard to talk about openly. For me it is.... What areas are hardest for you and what helps make talking about those easier?"

Confirm right to assent

- "If any question feels too personal or you'd prefer not to answer, that's completely okay."
- "I will let you know if answering any particular question will impact my recommendation or prescribed treatment."
- Clarify consequences of disclosure
 - "I want you to know that when I am documenting gender identity, I..."
 - "I want you to know that when I am documenting sexual orientation, I ..."





Making Affirming Referrals in an EPIC World



- Consider the relevance of revealing gender identity and sexual orientation during referrals
- Vet the provider personally
- Keep the client's circle small when possible
- Remind them what information will be shared prior to referral



Creating Affirming Space

- Display art/supportive works of various race, gender, sex, size, etc.
- Consider symbols
- Gender neutral bathroom signs (not quirky ones)
- Have LGBT literature in common areas
- Include queer and gender diverse language in all paperwork
- Know & make available local LGBT resources
- Consider making a statement on website
- Confront homophobia, transphobia, etc.
- Provide training to staff and physicians about working with queer and gender diverse patients







New Approach to Affirming Paperwork

- Use open ended/fill in the blank space for self definition
- Use a statement about who will see this paperwork and offer to ask it not be shared/discussed in person even outside of HIPAA protected categories
- Include a statement that care will not be refused because of gender identity or sexual orientation
- Audit now that this is on your mind







Note on Data Collection

- Huge serge in research for funding of LGBTQIA+ experiences in health care, especially responding to gender affirming treatments past 10 years
 - 77% of practices collect data on gender identity
 - 76% on sexual orientation
 - 34% provided LGBTQ+ training for clinicians
 - 39% provided LGBTQ+ training for staff
 - Those seeing the majority Medicaid (more than 50%) are more likely to engage in tracking, treatment, and training
 - Rural practices are less likely to engage in tracking, treating, training (Akre, et. All, 2025)

- Fear about data collection and being on a "list" related to gender identity, gender affirming care, and sexual orientation is HIGH.
 - Consider creating a statement in documents asserting refusal to answer questions about gender identity, sexual activity, sexual orientation, or sexual orientation will not prevent care



Summary of Key Points

- It is essential to acknowledge the impact of current events on patients who identify as queer or gender diverse.
 - Fear is high
- Initiate discussions with patients regarding their gender expression and sexual orientation.
 - Disclosure has more consequences that ever for your patients
- Foster an environment where you patients feel comfortable asking for gender affirming care, if desired.
 - Even if you routinely provided gender affirming care for years, you may want to adjust your approach



References

Akre EL, Yang CW, Bauer GR, Mackwood MB, O'Malley AJ, Fisher ES, Schifferdecker KE. Sexual Orientation- and Gender Identity-Affirming Activities Provided in Primary Care. JAMA Netw Open. 2025 Mar 3;8(3):e250392. doi: 10.1001/jamanetworkopen.2025.0392. Erratum in: JAMA Netw Open. 2025 Apr 1;8(4):e2511171. doi: 10.1001/jamanetworkopen.2025.11171. PMID: 40063021; PMCID: PMC11894487.

