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Current Best Practices for Sexual and Gender Minorities in Hospice and Palliative Care Settings

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Although several publications document the healthcare disparities experienced by sexual and gender minorities (SGMs), including lesbian, gay, bisexual, and transgender (LGBT) individuals,¹⁻⁴ less is known about the experiences and outcomes for SGM families and individuals in hospice and palliative care (HPC) settings. This article provides a brief overview of issues pertaining to SGMs in HPC settings, highlighting gaps in knowledge and research. Current and best practices for SGM individuals and their families in HPC settings are described, as are recommendations for improving the quality of such care.

EXPERIENCES OF SEXUAL AND GENDER MINORITIES IN HEALTHCARE SETTINGS

Over the last decade, awareness of the bias and discrimination experienced by SGM individuals, their partners, and caregivers has increased. SGMs have been found to experience higher rates of poverty, housing insecurity, food insecurity, and workplace discrimination.² Research shows SGMs have reduced access to medical care and greater levels of discrimination in healthcare settings than their heterosexual counterparts.² These inequities in turn influence perceptions, attitudes, and values of SGM individuals in accessing healthcare. Several studies document high levels of mistrust of the healthcare system particularly among transgender, HIV-positive, and aging SGM populations.⁵ According to the landmark Institute of Medicine report,¹ lack of education and research on the needs of SGMs, lack of cultural competency training for providers, and the absence of legal protections are key factors that contribute to the healthcare disparities experienced by SGMs.

SGM individuals experience higher rates of chronic conditions and higher rates of mortality from chronic medical conditions. SGM individuals are more likely than heterosexuals to rate their health as poor and to have more chronic conditions and a higher prevalence and earlier onset of disabilities.⁶ Lesbian and bisexual women also are at heightened risk for some cancers and higher rates of cardiovascular disease.⁶ Similarly, gay and bisexual men experience more cancer diagnoses and have lower survival rates, as well as higher rates of cardiovascular disease and higher number of acute and chronic conditions.⁶ Gay men have a higher risk of anal cancer and HIV-related malignancies.⁷ Lesbian women have higher lifetime risk of breast, ovarian, and cervical cancer than heterosexual women.⁸ In 2010, gay and bisexual men and other men who have sex with men who only represented an estimated 2% of the US population accounted for 56% of all people living with the HIV virus and two-thirds of new infections.⁹ SGM individuals are two and a half times more likely to experience

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