

VA



U.S. Department  
of Veterans Affairs



# The LGBT Health Program at VHA: What Psychology Leaders Need to Know

Diversity Issues for Psychologists and Veterans  
Panel at the 21<sup>st</sup> Annual VA Psychology Leadership Conference  
May 31, 2018 San Antonio TX

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# LGBT\* Health Program at VHA

- Special Emphasis Program Managers address LGBT Employees
- In 2012, the Office of Patient Care Services created the LGBT Health Program (10P4Y), which provides policy recommendations, provider-education programs, and clinical services to support personalized, pro-active, patient-driven healthcare for LGBT Veterans \*and related identities.

*Policies, trainings, and other resources can be found at the website*

<http://www.patientcare.va.gov/LGBT/index.asp>

Contact us by email: [VALGBTProgram@va.gov](mailto:VALGBTProgram@va.gov)

Summary of Program: Kauth, M.R. & Shipherd, J. C. (2016).

Transforming a System: Improving Patient-Centered Care for Sexual and Gender Minority Veterans. *LGBT Health*, 3(3), 1-3.

doi:10.1089/lgbt.2016.0047



# Do We Have LGBT Veterans at VHA? YES!

- ~22 million Veterans in US. ~9 million in VHA.
- Estimated **1 million** gay and lesbian Veterans (appx. 3%) with 65,000 gay and lesbian active duty service members (Gates & Newport, 2012).
- Thus, if LGB Veterans come to VHA at same rate as other Veterans, potentially **400,000+** LGB Veterans in VHA.
- Using diagnostic codes\*, **@9,000** transgender Veterans in VHA.
- But, VHA does not routinely collect sexual orientation and gender identity data. Self-Identified Gender Identity field in early phase. So, this is left for providers to assess as part of routine care.



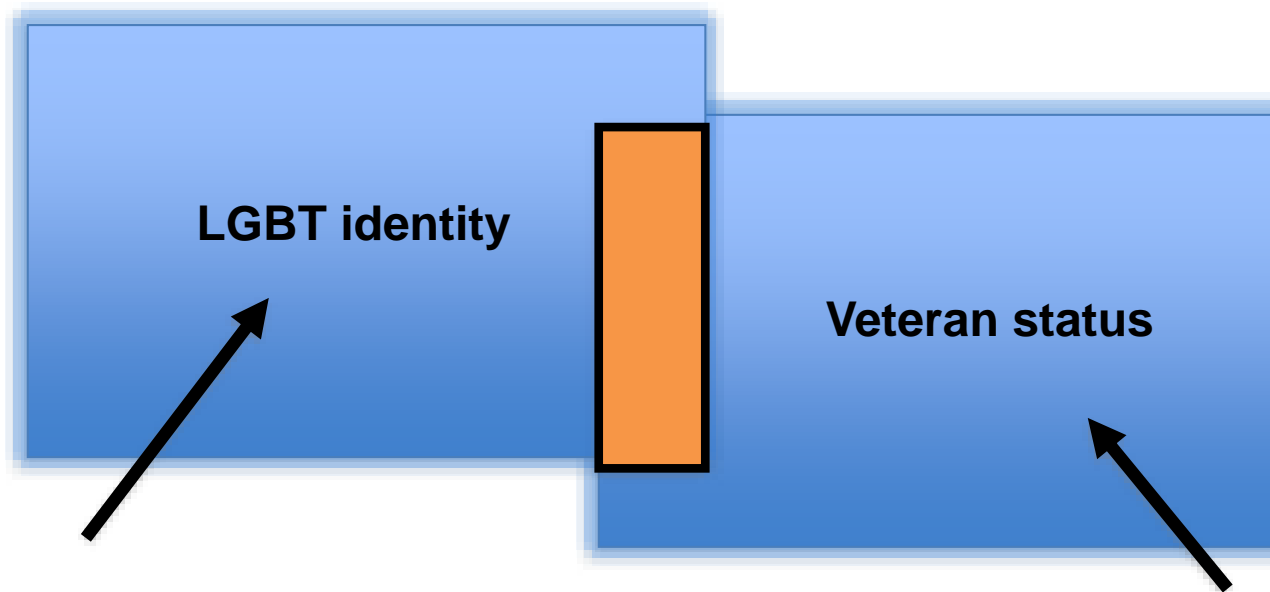


# Social Determinants of Health

- Sexual orientation identity and gender identity are social determinants of health, like sex assigned at birth, age, race/ethnicity, education, socioeconomic status, where you live, service in the military, etc.
- **Minority Stress Theory** can explain elevated rates of most health conditions elevated in LGBT people (e.g., depression, drug abuse, drinking, smoking, heart disease, cancer, etc.).
  - Also healthcare access issues (they expect discrimination).
  - Less professional training available about LGBT needs.
- Bottom line: **Sexual orientation** and **gender identity** are social determinants of health and must be assessed annually due to potential changes in identity over time and/or as comfort with provider improves.



# Minority Stress: LGBT identity and Veteran status on health



Higher risk of poor mental health and suicidal ideation and attempts; higher risk of some physical health issues.

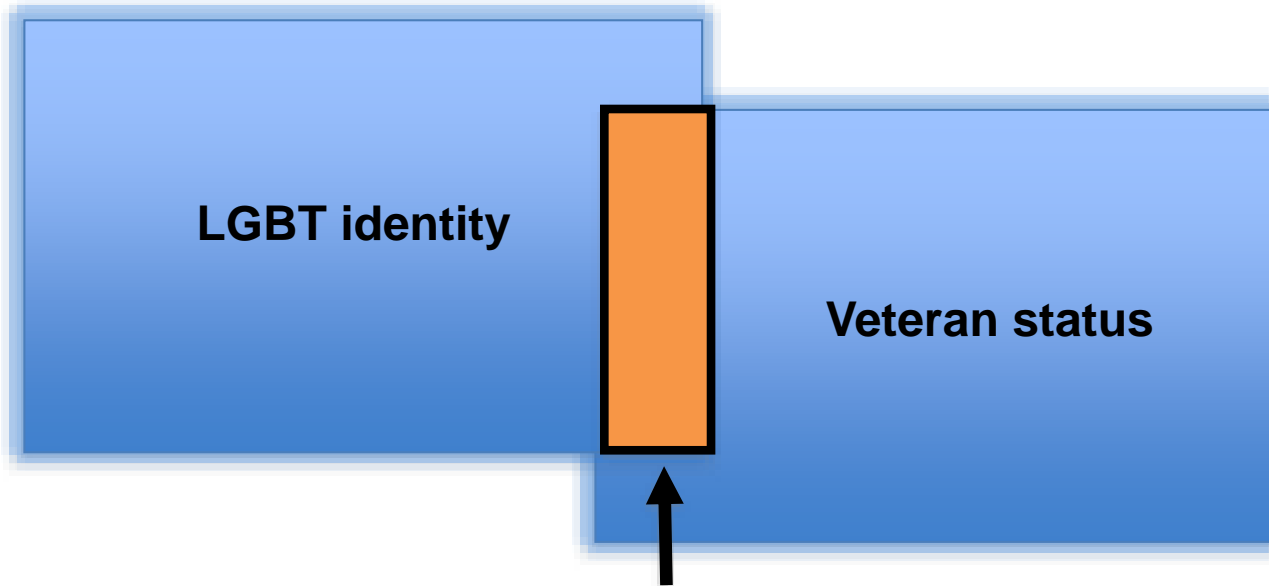
Higher prevalence of poor mental health and suicidal ideation and attempts; higher rates of gun ownership and risk of firearm suicide<sup>1</sup>; higher risk of many physical conditions

\*Adapted from J. Blosnich

<sup>1</sup>Miller, Barber, Young, Azrael, Mukamal & Lawler, 2012



# LGBT Veteran Health Disparities: Dual Minority



Higher prevalence of: **trauma (including MST for LB women and transgender Veterans), PTSD, substance abuse (including smoking), poorer mental and physical health outcomes, increased suicidal ideation\***.

Blosnich, Bossarte, & Silenzio, 2012; Blosnich, Farmer, Lee, Silenzio & Bowen, 2014; Blosnich & Silenzio, 2013; Brown & Jones, 2014; Brown & Jones, 2016; Cochran, Balsam, Flentje, Malte & Simpson, 2013; Kauth, Barrera, Denton & Latini, 2017; Lehavot & Simpson, 2014; Mattocks et al., 2013; Monin, Mota, Levy, Pachankis, Pietrzak, 2017; Ray-Sannerud, Bryan, Perry, Bryan, 2015; Shipherd, Mizock, Maguen & Green, 2012; Tucker, Testa, Simpson, Shipherd, Blosnich, & Lehavot, 2018; Tucker, Testa, Reger, Simpson, Shipherd, & Lehavot, 2018



# Unique Context of LGBT Veterans & Minority Stress

- DoD policy: “**Don’t Ask, Don’t Tell**” (1993-2011) – LGB
  - Followed many other bans on LGB military service.
  - Eliminated enlistment questions, allowed gay service in secret.
  - Discharged if LGB sexual orientation is discovered.
  - No one discharged for “asking”.
- DoD policy: No open **transgender** service until June, 2016.
- Aug 2017 DoD asked to **deny transgender enlistment** (and end **service by current personnel**) by March 2018. Overturned in four federal court cases.
  - Three gender confirming genital surgeries; DoD paid for one.
  - Enlistment of openly transgender recruits began Jan 2018.
  - DoD policy released in March 2018 (as ordered) but on hold by 4 federal rulings.
  - **Bottom line: Transgender people are currently serving openly.**





# Unique Context of LGBT Veterans

- **VHA has its own policies.**
  - 2011 – national transgender Directive issued guaranteeing care.
    - No access to surgeries or cosmetic procedures (e.g., electrolysis).
    - Directive 2013-003 has expired. Revision in concurrence.
  - 2017 – national Directive on care for Veterans who identify as lesbian, gay or bisexual issued (D1340).
    - Prohibits conversion therapy in VA nor paid for by VA.
  - Patient non-discrimination and family policies.
    - Sex, sexual orientation, gender identity or expression.
    - Family is defined by the Veteran.
- **“Don’t Ask, Don’t Tell” was not in VHA.**
  - But research says LGBT Veterans **expect discrimination** from VHA providers.<sup>1-2</sup>
- Providing routine assessments that include sexual orientation and gender identity demonstrates that LGBT Veterans are welcome and expected at VHA.



<sup>1</sup>Sherman, Kauth, Ridener, Shipherd, Bratkovich & Beaulieu, 2014; <sup>2</sup>Sherman, Kauth, Shipherd, & Street, 2014





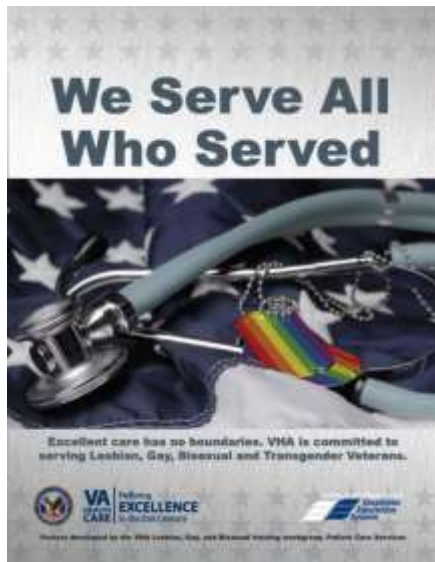
# LGBT Veteran Point of Contact Program

- Established March 2016 - LGBT Veteran Care Coordinator (VCC) at each facility and LGBT VCC VISN Leads.
  - At least one LGBT VCC at each facility
  - Clinical providers, many are psychologists
- April 2018, LGBT VCC minimum time requirements
  - 25,000 Veterans , minimum 4 hours per week
  - 25,000-75,000 Veterans, minimum 6 hours per week
  - Over 75,000 Veterans, minimum 8 hours per week
- Program aims to improve access for LGBT Veterans to qualified providers, identify and address gaps in clinical services, and assure a safe space/contact for remediating issues that arise at facility and collaborate with local groups.  
**Find your VCC here: <http://go.va.gov/LGBTVCC>**



# LGBT Veterans are Welcome at VHA

LGBT awareness Poster



Assessing Sexual Health poster



Pride month poster with the Women's Health Program





# LGBT Veteran health fact sheets

The image displays four overlapping fact sheets from the Department of Veterans Affairs, each titled "Get the Facts... LGBT VETERAN HEALTH CARE".


- Top Left (Green header):** "LGBT VETERAN HEALTH CARE Male Veterans, Gay and Bisexual Health Care".
- Top Right (Blue header):** "LGBT VETERAN HEALTH CARE Male Veterans, Transgender Male Health Care".
- Bottom Left (Red header):** "LGBT VETERAN HEALTH CARE Female Veterans, Lesbian and Bisexual Health Care".
- Bottom Right (Purple header):** "LGBT VETERAN HEALTH CARE Female Veterans, Transgender Female Health Care".

Each sheet contains introductory text, a list of key findings, and a "VA" logo at the bottom. The sheets are arranged in a staggered, overlapping fashion.

<https://www.patientcare.va.gov/LGBT/index.asp>



# TMS Education Resources

- **Transgender Veteran online trainings**
    1. An Introduction to Transgender Care
    2. Transgender Mental Health Services
    3. Transgender Health: Prescribing Cross Sex Hormones
  - **LGB Veteran care online trainings**
    1. Do Ask, Do Tell: Assessing Sexual Health of LGBT Veterans (and Everyone Else)
    2. Do Ask, Do Tell: LGB Veteran Health Care
    3. Do Ask, Do Tell: 5 Awkward Minutes to Better Patient Care  NEW
- Also: VHA TRAIN Education System: <https://vha.train.org/>**
- Free! Public Health Foundation education system- continuing education



## Interprofessional Psychology Postdoctoral Fellowships in LGBT Health<sup>1</sup>

1. Bedford, MA
2. Boston, MA
3. Hines (Chicago), IL
4. Honolulu, HI
5. Houston, TX
6. Milwaukee, WI
7. New Haven, CT
8. San Diego, CA
9. San Francisco, CA

<sup>1</sup>Kauth, M.R., Shipherd, J.C., Barrera, T., Ortigo, K., & Jones, K.R., (2016). *Training and Education in Professional Psychology*, 10(3) 165-170.

[doi:10.1037/tep0000123](https://doi.org/10.1037/tep0000123)





# Transgender Health- Clinical Consultation

Since 2011, it was expected that VA facilities have transgender health capability.

## 1) **SCAN-ECHO Training** via nationwide video conference.

- **113 sites** have completed SCAN ECHO training.
  - This includes **709 providers** from various disciplines.
- **There is at least one team trained in every VA region.**
  - Team = at least one mental health provider **AND** one medical
- **20 sites** start training in May, 2018.

## 2) Nationwide **Transgender E-consultation** through CPRS<sup>3</sup>.

- Interdisciplinary expert team sends advice after reviewing chart.
- Over **970 E-consults** have been completed.

Clinical Consultation programs currently supported by Office of Rural Health

<sup>1</sup>Kauth, M., Shipherd, J.C., et al, 2015; <sup>2</sup>Shipherd, Kauth, Firek, et al., 2016; <sup>3</sup>Shipherd, Kauth & Matza, 2016



# Improving our Environment of Care

## TIPS

- Create a welcoming/supportive environment (debunk their expectation of discrimination).
- Assess sexual orientation and gender identity as routine care with all Veterans.
- Include discussion of minority stress (of many types) in clinical supervision.
- Review forms/paperwork for inclusivity.
- Protect the Veteran's confidentiality.
- Use inclusive language (e.g., "partner" not "wife/husband").
- Add your preferred pronouns to your email signature block (e.g., She/Her/Hers; He/Him/His; They/Them/Theirs).
- Use the Veteran's preferred name/pronoun in person and documentation (wherever possible).





# Questions and comments

[VALGBTProgram@va.gov](mailto:VALGBTProgram@va.gov)

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Veterans Health Administration  
Patient Care Services  
*LGBT Health*







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