

Social determinants of health in the LGBT community

Executive summary

The Lesbian, Gay, Bisexual, Transgender (LGBT) community is a heavily disadvantaged community in terms of lack of access to services and resources, increased likelihood of acquiring physical and mental health conditions, and increased exposure to violence and abuse. They constantly face discrimination, stigmatization, and marginalism due to their different sexual identity. This predisposes them to severe health problems with several social factors preventing them from getting appropriate healthcare.

Some of the important social determinants of health for this population are constant discrimination faced by them in the society, low education status, low employment prospects, economic instability, poor housing, low nutritional status, and regular exposure to abuse and violence. All these factors lead to a variety of physical and mental health illnesses among members of this community. Additionally, some healthcare providers also discriminate against LGBT members making them reluctant to access healthcare services. Provision of culturally insensitive care to them results in treating only the symptom or the complaint with which the patient arrived, while missing the bigger picture. Therefore, all social factors are inter-related affecting the overall quality of life of LGBT people.

Nurses are placed in a very good position to influence change because of their increased interaction with their patients. They need to be trained to identify members of this community, understand their individual social factors, and provide sensitive healthcare to them to enhance their health outcomes. They can also work at the community and the institutional level by providing specific services to these people and influencing policy changes to ensure that the barriers to their accessibility of healthcare services are removed.

Background

The Lesbian, Gay, Bisexual, Transgender (LGBT) community is a sexual minority community with homosexual orientation, as opposed to the sexual majority community with heterosexual orientation. Currently, the LGBT community represents 3.5% of the total population in Australia (Wilson et al., 2020). This group faces extreme levels of discrimination and stigmatization, which consequentially leads to anxiety, depression, suicidal inclination, alcohol abuse, and substance abuse. It also leads to extremely low levels of health and well-being in the LGBT population as compared to the non-LGBT population. Specifically, they are at an increased risk for mental health problems

because of constant harassment, hostility, and inequality faced by them in the society (Wilson and Cariola, 2020).

Due to their history of discrimination, the LGBT community often has poor physical and mental health outcomes. An important social determinant of health for this population is lack of equality, which has occurred as a result of the oppression they face because of their sexual orientation. This population also faces social exclusion, which is another social determinant of health experienced by them due to differences in their gender identity. A consequence of social exclusion is marginalization, discrimination, and stigmatization of this population, which has long-standing impacts on the mental health of these people. These social factors not only have a negative impact on the health of this community, but also serve as barriers in accessing healthcare services. Members of the LGBT community often do not access these services, or delay seeking healthcare, making them more vulnerable to severe physical and mental illnesses (Haire et al., 2021).

As a nurse, it is extremely important to understand the social determinants of health of the LGBT community, to be able to provide appropriate and sensitive healthcare services to them. Nurses need to ask their LGBT patients about their social history and the challenges they face on a daily basis, and refer them to local services that can support their healthcare and other needs appropriately. This will ensure that LGBT members receive physical and mental healthcare in a timely manner, thereby avoiding more severe health conditions in the future. Learning about the social history of the patient can also help the nurse make an appropriate diagnosis and assess if the patient is facing physical or mental abuse at home or in their workplace. This type of sensitivity needs to become a part of nursing practice, so that appropriate care plans can be prepared and the patient can be guided to avoid such situations in the future (Andermann, 2016).

Methods

In order to understand the social determinants of health pertaining to the LGBT community and the nurse's role in identifying and addressing these social factors, a comprehensive literature review was conducted using the databases, PubMed and CINAHL. Different combinations of the keywords, "Social determinants of health", "LGBT", and "Nursing" were used to identify relevant articles that threw light on the objectives of this report. The year range of the selected articles was between 2011 and 2021, and the population studied was LGBT community in Australia.

All information was subjected to thematic analysis, dividing the facts into different social determinants of health surrounding the LGBT community and the nurse's role in

assessing each of these determinants. The findings of the literature search divided into relevant themes are discussed below.

Discussion

The social determinants of health are non-medical social factors pertaining to the environment in which people live and work that have significant impact on their health outcomes. These social determinants are broadly classified into 5 different categories, namely economic stability, education, neighbourhood and physical environment, healthcare system, and community and social context (Matthews et al., 2018). Discussed below are the specific social determinants that direct health outcomes in the LGBT community.

Education

Education is a very important social determinant of health in all populations. The relationship between education and health outcomes is directed by health literacy, practice of health promoting behaviours, smart decision-making with respect to one's health, and accessing local resources for providing healthcare for oneself and one's family. People who do not pursue higher education have lesser job prospects and have to undertake menial jobs that do not pay well. This is more of a challenge for people in the LGBT community who have limited job prospects due to their sexual orientation. Additionally, having a lower education status makes it even more difficult for them to sustain themselves and their families, let alone access healthcare services (Matthews et al., 2018).

Adolescents belonging to the LGBT community are often victims of bullying, discrimination, and victimization, all of which lead to high levels of dropout and poor academic achievement, thereby depriving them of good education (Olsen et al., 2014). Students of the LGBT community are reported to be twice more likely to be bullied as compared to their heterosexual counterparts (Aragon et al., 2014). Therefore, this not only leads to poor education and job prospects, but increases the possibility of engaging in health risk behaviours such as alcohol abuse and substance abuse. As a nurse, it is important to be aware of the possibility of bullying and discrimination in school and college settings so that appropriate rehabilitation services can be provided to adolescent LGBT members who seek healthcare services (Matthews et al., 2018).

Job status and financial situation

A considerable percentage of the LGBT population is found to live below the poverty line when compared to their heterosexual counterparts. The reasons attributed to this difference in financial situation are discrimination in the workplace, difficulty in finding a job because of certain attributes of their personality, and an overall reduced

earning potential of people in the LGBT community (Johnson et al., 2014). Living in an economically disadvantaged environment poses several health problems for this community leading to poor housing conditions, malnutrition, and inability to access good healthcare services. These people are also more likely to face mental health problems due to stress, anxiety, and depression, and physical health problems due to poor living conditions. When they do get ill, lack of finances serves as a barrier for them to access appropriate healthcare services (Matthews et al., 2018).

There are several local healthcare services that provide free basic healthcare for all. When a nurse encounters patients belonging to the LGBT community, s/he should guide them towards these services so that they can access basic services for the protection and promotion of their health. This will ensure that possibly severe health conditions are detected early and appropriate healthcare is delivered to prevent them from getting worse (Matthews et al., 2018).

Living in the society and community

Society refers to the immediate physical environment in which a person lives and works, and the cultural context that directs the specifics of this environment. The related factors that are linked to health outcomes include discrimination, incarceration, and social cohesion. A minority community such as the LGBT often faces discrimination, harassment, and even violence in matters of employment, housing, civil rights, social and community functions, and accessibility to local services. Apart from this, LGBT members are exposed to institutional stressors that limit their resources and opportunities (Kattari et al., 2016). According to the minority stress model, social determinants that LGBT members are exposed to at the institutional and social levels are linked to an increased likelihood of engagement in health risk behaviours such as alcohol abuse, smoking, substance abuse, inappropriate sexual behaviours, and mental health disorders (Corte et al., 2016).

Social factors are probably the most significant determinants of health outcomes in LGBT patients, which, if not handled appropriately, can worsen over time. This is because discrimination and marginalization faced by the LGBT community in the society can result in a very poor quality of life leading to increase in several different types of physical and mental health problems. Their lack of education also affects their accessibility to local services that can help them in their situation. Therefore, it is extremely important for nurses to understand their LGBT patients' social contexts and guide them to the relevant local services who specialize in enhancing the living conditions of the LGBT population (Fredriksen-Goldsen et al., 2014).

Healthcare

The social determinants of health pertaining to healthcare include health literacy and accessibility to healthcare services. Not only is accessibility to healthcare barred by poor economic status of the LGBT population, but also there are several hindrances in the healthcare system which acts as a deterrant for LGBT members from accessing healthcare. The interaction of the LGBT patients with healthcare providers at the facilities is also an important determinant of the likelihood of these people in accessing healthcare (Jacobs et al., 2014).

LGBT patients who have negative experiences with their healthcare providers due to their sexual minority status are less likely to seek treatment and other healthcare services, have altered perceptions regarding the healthcare services available for them, and have lesser satisfaction with the overall healthcare system. The high levels of discrimination faced by LGBT patients within the healthcare system reduce their chances of seeking preventative healthcare services. Additionally, it has been reported that most healthcare providers are not aware of or are not sensitive to the needs, requirements, and context of illness in the LGBT patients, which affects their accessibility of curative as well as preventative healthcare services. Other factors include lack of health insurance, lack of partner benefits included in the insurance, healthcare providers' homophobia, and provision of culturally inappropriate healthcare. Due to all these reasons, a lot of LGBT patients choose not to reveal their sexual orientation to their healthcare provider, thereby eliminating the possibility of the provider guiding the patients appropriately (Li et al., 2015).

As a healthcare provider, it is important to create an open and inviting atmosphere for patients belonging to different minority groups so that they feel safe and comfortable in talking about their health and other issues with their providers. This will enable the providers to provide sensitive and appropriate care along with referral to relevant specialists, services, and resources for health promotion in this community (Matthews et al., 2018).

Built environment

The built environment refers to factors pertaining to the physical environment such as housing conditions, access to nutritious food, rates of neighbourhood crime, presence of parks and gardens that encourage physical activity, and environmental conditions. Segregation due to sexual minority status, extreme poverty, and exposure to violence are all predisposing factors for engaging in behaviours that are harmful to health. For instance, when a person is constantly exposed to violence in the society, it predisposes him/her to a wide range of physical and mental health problems (Goldmann et al., 2011). The specific health risk behaviours that are seen in the LGBT community are unprotected sexual encounters and substance abuse (Pachankis et al., 2016). A

nurse should be able to understand the effects of built environment on the health outcomes of the LGBT population and guide them to suitable facilities that can help them improve their housing conditions and place them in closer proximity to other LGBT members (Matthews et al., 2018).

Recommendations

The health needs of the LGBT people are slowly gaining prominence in delivery of healthcare services and are being represented in clinical practice cases. Nurses need to take up a more active role in altering the social determinants that impact health outcomes for the LGBT population. This may either be through policy advocacy or through volunteer work in the LGBT community. Barriers at the level of healthcare providers need to be addressed in order to increase accessibility of this population to healthcare services. Culturally appropriate care needs to be incorporated in the healthcare system that specifically targets the LGBT population. Finally, providing healthcare in a community setting will go a long way in enhancing accessibility to healthcare services, witnessing the social determinants of health, and ensuring better health outcomes for these people (Matthews et al., 2018).

Conclusion

Social determinants of health are often more important predictors of health rather than physical and medical factors. This is especially true for minority populations such as the LGBT, where members have a different sexual orientation as compared to their counterparts in the heterosexual majority population. Due to their unique sexual identity, these people face severe discrimination, marginalization, stigmatization, victimization, violence, abuse, and harassment in their society, educational setting, and workplace. As a result, they are more likely to experience physical and mental health conditions, and less likely to access healthcare services.

Due to heavy discrimination faced by LGBT members, they often have a lower education status and consequentially, lower employment opportunities. This makes them economically unstable which results in stress, depression, and inability to seek healthcare. They often cannot access nutritious food or live in an appropriate physical environment, further predisposing them to illnesses. They are also reluctant in accessing healthcare because of the negative attitude of some healthcare providers who are not sensitive to their specific health requirements. Some providers are reluctant to deliver care to these patients or they do so in a cursory manner without giving much thought to the social context of these people. Such experiences make them hesitant in accessing healthcare in the future.

Nurses need to take up the responsibility of providing appropriate healthcare services to the LGBT community by being sensitive to their healthcare needs, referring them to appropriate local resources and services, influencing policy changes, identifying and altering barriers to healthcare within the healthcare system, acquiring knowledge of the social determinants of health for this population, and providing culturally and socially appropriate healthcare to them.

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