N ick, a gay male client, arrived for his appointment with his internist at a major medical center in Boston, Massachusetts. As he walked away from the reception desk, he overheard the secretary say to the nurse, “Tell the doctor his fag client is here!”

Sadly, Nick’s experience is all too common among persons identifying as lesbian/gay/bisexual/transgender (LGBT). Despite the advances and achievements in recent years for LGBT equal rights, health care professionals who maintain homophobic attitudes can adversely affect the quality of care for their LGBT patients.

A 2010 report by the American Cancer Society (ACS) found that health care access disparities are higher among members of the LGBT community, resulting in increased risks and higher rates of lung, breast, cervical, anal, and liver cancers. Overall, LGBT communities have higher percentages of obesity, high-fat diets, smoking, alcohol consumption, and recreational drug use. In addition, delayed childbirth among lesbians or not having children, as well as the overuse of hormones in the transgender community can increase the cancer risk in these communities. Other obstacles, such as lower rates of individual and domestic partner health insurance, discrimination, harassment, and homophobic bias can prevent LGBT people from seeking and receiving quality medical care.

Oncology nurses and social workers play a pivotal role in delivering compassionate and quality care to all patients. By understanding the specific health needs of LGBT people, you can personalize care to your patients, and also educate your peers in the oncology community. As a health care professional, the most important step you can take to ensure the delivery of quality care is to avoid making assumptions about a patient, their identity, and orientation. Caring for people from all walks of life and from various backgrounds includes being open about a person’s sexual orientation.

Encourage full patient disclosure, supported institutionally by having intake and assessment forms that are orientation positive and inclusive, such as “are you partnered?” instead of “are you married?” Make confidentiality policies public so that patients feel comfortable about sharing who they are. A comprehensive overview of a patient’s lifestyle, habits, and relationships can better inform nurses, social workers, and physicians about posttreatment concerns that could impact a patient’s quality of life. You can help encourage disclosure by asking open-ended questions and letting patients know about the hospital’s confidentiality policies both verbally and with written documents. If the facility’s policy permits, wearing an LGBT flag pin on your uniform or having LGBT-related reading material in the waiting room may also go a long way in helping LGBT patients feel comfortable and safe.

In late 2009, CancerCare e-mailed more than 400 members of its extensive professional
oncology network to gather information and gauge interest about meeting the most immediate needs of LGBT persons facing cancer. The response was overwhelmingly positive. Of the respondents, only 37 percent of oncology professionals stated that they were able to easily connect LGBT clients with cancer to LGBT-specific resources; conversely, 90 percent stated that it would be helpful to have an LGBT cancer-specific resource to refer to patients. As a result, CancerCare initiated specialized counseling services for the LGBT community, providing individual and group counseling locally and nationally. CancerCare offers counseling in person, over the phone, and online to anyone affected by cancer. All of our services, including education, referrals to resources, and financial assistance are offered completely free of charge.

You can also direct patients to the National LGBT Cancer Network (www.cancer-network.org), which is an important resource for the unique needs of the LGBT community. The American Cancer Society (www.cancer.org) offers fact sheets to improve understanding of the health risks that LGBT people face. The Human Rights Campaign (www.hrc.org) has conducted several surveys on improving the health care needs of the LGBT community that may provide insightful information. The Gay & Lesbian Medical Association (www.glma.org) offers resources for health care providers and researchers, including a webinar series on cultural competence.

The goal of quality health care for all patients should include the opportunity to receive medical care in a knowledgeable, safe, and welcoming environment, where sexual orientation is used only to identify risks as a component of a comprehensive medical assessment.

William Goeren is the Director of Clinical Services at CancerCare and a cofounder of the organization’s LGBT services.