



# PATIENT-CENTERED TELEHEALTH FOR LGBTQIA+ COMMUNITIES

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NATIONAL LGBTQIA+ HEALTH  
EDUCATION CENTER

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## INTRODUCTION

This publication is designed to support health centers in using telehealth programs to increase access to patient care and services for lesbian, gay, bisexual, transgender, queer, intersex, asexual, and all sexually and gender diverse (LGBTQIA+) people. Telehealth, in which technology is used to provide health care services at a distance, has become an essential approach to providing patient care and services for underserved communities, including LGBTQIA+ people. Telehealth eliminates geographic restrictions, which increases access to providers who can provide culturally affirming and knowledgeable health care for LGBTQIA+ people. Although telehealth has the potential to improve health outcomes for LGBTQIA+ patients, considerations need to be made to ensure equitable access. The purpose of this publication is to educate health center staff on how to reduce barriers to LGBTQIA+ patient care by improving telehealth programming.

### TELEHEALTH FACTS

In response to the COVID-19 public health emergency, telehealth use increased.

- 95% of health centers reported delivering medical care using telehealth as of 2021.<sup>1</sup> Telehealth can be **synchronous**, in which there is real-time patient care or education, or **asynchronous**, in which electronically stored information can be accessed by the patient or provider at any time.

Telehealth modalities include:

- *Telemedicine*
  - » Patient care or education is directly provided using audio or video technology.
- *mHealth (mobile health)*
  - » Mobile phones or other wireless technology (e.g., apps or text messaging on a phone or computer) are used for receiving medical education and care, self-managing care, or communicating with a provider.
- *Store and forward information*
  - » Health information is captured, stored, and forwarded by one site or provider to another site or provider.
- *Remote patient monitoring*
  - » A patient's condition is continuously monitored from a different location.

## IMPORTANCE OF TELEHEALTH PROGRAMS FOR LGBTQIA+ PATIENTS

### *Barriers to Care*

LGBTQIA+ people encounter many barriers when accessing health care. In addition to potential cost issues (such as general economic insecurity, being uninsured, and discriminatory policies resulting in high out-of-pocket expenses), LGBTQIA+ people have a difficult time finding a doctor to whom they feel comfortable disclosing their sexual orientation or gender identity. As a result, many LGBTQIA+ Americans avoid seeking medical care.<sup>2</sup>

### *Discrimination and Health Care Access Among LGBTQIA+ People*

Of the LGBTQIA+ adults who responded to a 2022 national survey conducted by the Center for American Progress<sup>3</sup> regarding their experiences within the prior year:

- More than 33% experienced discrimination
- Approximately 50% experienced workplace discrimination or harassment, which resulted in some respondents being fired, denied a promotion, or having their hours cut
- Nearly 30% experienced housing discrimination or harassment, which resulted in some respondents being denied buying a home or access to a shelter
- Approximately 33% reported a negative experience or form of mistreatment by a mental health professional
- More than 33% postponed or avoided medical care because of cost barriers
- Nearly 80% took at least one action to avoid possible discrimination, including by avoiding medical offices
- More than 20% avoided medical treatment because of discrimination or disrespect by providers

### ***Telehealth Benefits***

Increased telehealth use has allowed engagement of some of the most marginalized populations in health care, such as LGBTQIA+ communities.

Telehealth is considered a low-barrier program because it eliminates or reduces common barriers to accessing care, such as long geographic distances, lack of transportation, and inflexible work schedules. For LGBTQIA+ people, telehealth also broadens the availability of clinicians trained to provide culturally responsive and tailored care for LGBTQIA+ people.

More specifically, telehealth programs can help to:

- Ensure that transgender and gender diverse patients have access to gender-affirming medical care, such as hormone therapy, regardless of geographic location
  - » Non-urban areas may have limited providers trained in gender-affirming care; some jurisdictions have restrictions on provision of gender-affirming care
- Increase access to providers trained in culturally responsive LGBTQIA+ health care, and thus able to provide the highest quality of care and create welcoming and inclusive health care environments for LGBTQIA+ people
- Improve health outcomes of LGBTQIA+ people and thereby reduce health disparities<sup>4</sup>

## **SPECIAL CONSIDERATIONS FOR LGBTQIA+ PATIENTS**

### ***Assess Needs***

When using telehealth, it is important that the technology meets the needs of your patient population. To understand whether your LGBTQIA+ patients have equitable access to telehealth at your health center, consider assessing their telehealth service needs, barriers, and facilitators. Assessment strategies may include:

- **Ask:** Talk to your LGBTQIA+ patients about their telehealth experiences using informal conversation or structured surveys. Elicit the following information: What is working and not working? What are the barriers to using telehealth? What are the facilitators? To save time, you can add one or two questions to patient satisfaction surveys, or ask these questions during existing LGBTQIA+ support groups.
- **Analyze:** Cross-check your health center's patient demographic data (e.g., sexual orientation and gender identity data, race and ethnicity data)<sup>5,6</sup> with patient telehealth usage data. What patterns do you see? Are there disparities in telehealth usage?

### ***Optimize the Workflow***

To reduce patient and staff burden, determine how telehealth visits can be optimized so that they are well-integrated with patient flow. For example:

- Are you able to collect all pertinent patient information for telehealth visits through the patient portal?
- Does this information include the patient's affirmed name and pronouns to be used during the visit?
- Can links to health screeners be sent via text before each visit so that providers can review them in advance?
- Can your health center use software to send texts with patient confirmation and appointment reminders to help reduce no-show rates?
- Can you pilot changes to telehealth services with a subset of providers and patients and use a plan-do-study-act (PDSA) approach for quality assurance?

### ***Improve Privacy and Confidentiality***

LGBTQIA+ patients may have unique privacy risks that can interfere with telehealth visits. Notably, LGBTQIA+ patients may not be “out” (i.e., have disclosed their sexual orientation or gender identity) to the people in their household or workplace where they have their telehealth visits. If they cannot find a sufficiently private space, confidentiality will be compromised, and they will not feel safe discussing gender-affirming care, sexual activity, or relationships with their provider.<sup>7</sup>

To address these issues, it is recommended that health centers train providers to confirm with the patient, at the beginning of each telehealth visit, whether or not the patient is in a private space where no one else can hear them. If the patient is not in a private space, then the provider can determine how to tailor the discussion in a way that does not compromise the patient's confidentiality.<sup>7</sup>

Ideally, the health center is able to set up a plan with patients in advance that enables the patient to safely and privately conduct a telehealth visit. For patients who cannot access a safe or private space, consider creating a telehealth room, such as a small office with a laptop, at your health center or a satellite office so these patients can access care with providers at other locations.<sup>7</sup>

### ***Establish Trust***

LGBTQIA+ people may mistrust healthcare systems and providers due to a long history of stigma and discrimination. This mistrust may extend to the use of telehealth and other technologies. Thus, it may be especially important to cultivate trust and build relationships during the telehealth visit. If possible, take time at the beginning of the visit to check in with the patient and ask open-ended questions. As always, all health center staff should be offered [training in culturally responsive care for LGBTQIA+ people](#).

### ***Hold Virtual Support Groups***

LGBTQIA+ people have a higher risk of isolation compared to non-LGBTQIA+ people. Telehealth technology can be leveraged to offer virtual support groups to various communities of LGBTQIA+ people.<sup>7</sup> Fenway Health, for example, offers virtual bereavement groups for LGBTQIA+ older adults and families.

### ***Use a Telehealth Drop-in Model***

LGBTQIA+ people have a higher risk of experiencing complex barriers to engaging in health care. These barriers, such as substance use disorders, mental health disorders, and unstable housing, make it more difficult to make and keep a scheduled appointment. Drop-in care models are effective for engaging these patients. Health centers can consider offering a telehealth version of drop-in care for behavioral health and certain types of medical care. As an example, Fenway Health started offering virtual drop-in behavioral health care during the beginning of the COVID-19 pandemic that mirrored the in-person patient experience. When a patient logs into the videoconference platform, a patient services representative greets the patient, confirms their identity, and virtually moves them into a “therapy room.” The staff member then notifies the clinician that the patient is available. The platform has “breakout” rooms that enable this type of service as well as the ability to serve several clients at once.<sup>7</sup>

### ***Increase Pharmacy Access***

Some LGBTQIA+ people need frequent access to prescriptions, such as gender-affirming hormones or HIV medications. For health centers that have onsite or nearby pharmacies, an advantage of in-person care is that patients can go directly to the pharmacy after a visit to pick up prescriptions. Health centers therefore need to consider how to increase prescription convenience for patients who are using telehealth. Some strategies include receiving prescriptions by mail or sending prescriptions electronically to pharmacies closer to the patient’s home.<sup>7</sup>

## EQUITY & ACCESS FOR ALL

Although telehealth has the potential to improve equity, it also has the potential to widen health disparities if we do not work to close the digital divide among marginalized and underserved populations. It is therefore imperative to include technology access and literacy in every patient's treatment plan.<sup>8</sup>

Some strides are being made toward technology equity. For example, federal actions have been taken to expand telehealth access, such as discounting broadband internet access for qualifying households.<sup>9</sup> However, broadband is still not available to everyone, and some locations do not have the infrastructure to support access to reliable broadband. This lack of technology equity can prevent some patients from receiving needed care.

The figure below highlights five key approaches for improving the equity of your telehealth program for LGBTQIA+ patients and all marginalized and underserved populations.



### ***Increasing Convenience and Access***

Below we provide suggested strategies for increasing LGBTQIA+ patient access to telehealth services:

- **Connect patients with devices:** If patients have socioeconomic barriers to participating in telehealth, such as paying for a device or Wi-Fi, consider how your organization can apply for grants in order to provide phones, tablets, and hot spots to patients who need them.
- **Enable patients to test their connection prior to their visits:** Check to see if your telehealth platform enables users to test their connection ahead of a visit so they are less likely to experience technical difficulties at the time of the visit.
- **Involve support teams:** Consider designating a care team member to call patients the day prior to their first telehealth visit to ensure the patient has access and is comfortable with the technology.
- **Provide an audio-only option:** For patients who cannot, or prefer not to, use video, provide the option of using audio only.
- **Support hesitant patients:** If patients are new to telehealth and are nervous about using a new technology, listen to their concerns and determine how barriers can be overcome. It may be helpful to remind hesitant patients that if telehealth does not work out for them, they can switch back to in-person care at any time.

### ***Expanding Into New Modalities***

Innovators are developing an ever-growing assortment of new telehealth modalities that may benefit your patients. Examples include remote physiologic monitoring (e.g., of glucose levels); asynchronous telehealth (i.e., a patient sends health information through a patient portal, which is later reviewed and responded to by the provider); and submission of videos through an app to show compliance with medication.

If you are adopting a new technology, consider using the [Telehealth and Digital Tools Equity Assessment](#).<sup>10</sup> This assessment includes questions to ask vendors to determine if their platform or tool supports your patient population's needs with regard to privacy, language, digital literacy, and technology access. Remember, also, to communicate to both patients and providers about any changes or upgrades to your telehealth tools, and offer education in the use of those tools.



## RESOURCES

- **US Department of Health and Human Services:**
  - » [Telehealth for LGBTQIA+ Patients](#)
  - » [Health Equity in Telehealth](#)
  - » [HIPAA and Telehealth](#)
- **National LGBTQIA+ Health Education Center:**
  - » [Telehealth for LGBTQIA+ Patients](#)
  - » [Telehealth and LGBTQIA+ Communities Toolkit](#)
  - » [Collecting SOGI Patient Data](#)
- **Community Care Cooperative:** [Telehealth Playbook for FQHCs](#)
- **National Consortium of Telehealth Resource Centers**

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