

**10:15 am - 11:45 am**

**Concurrent Session 1G**

**\* Promoting Respectful and Inclusive Serious Illness  
Care for the LGBTQ+ Community: Practice, Research,  
and Policy Perspectives**

\*1.5 hours for Social Work CEU's will be given for this session.

In Person and Zoom

**Presenters**

**Cathy Berkman**, PhD, MSW, Fordham University Graduate School of Social Service, New York, NY

**Adam Schoenfarber**, MSW, Westchester Medical Center, Palliative Care Service, Valhalla, NY

**Logan Jardine**, MD, MPH, Assistant Professor of Emergency Medicine, Hospice and Palliative Medicine Fellow, Icahn School of Medicine at Mount Sinai Hospital

**Noelle Marie Javier**, MD, Icahn School of Medicine at Mount Sinai, Internal Medicine, Geriatrics, Palliative Care

**Description**

This session focuses on seriously ill persons who identify as LGBTQ+. We will present clinical and policy issues, as well as empirical findings related to best practices in providing healthcare to this population. Lesbian, gay, bisexual, transgender, and queer (LGBTQ+) individuals experience discrimination in health care – including palliative, hospice, and long-term care. Providers and institutions may be uncomfortable with, and often don't ask patients about sexual orientation and gender identity (SOGI). LGBTQ+ patients fear being open about their identities, not receiving equal, competent or safe treatment, and having their family of choice and surrogates disrespected or ignored. This session focuses on seriously ill persons who identify as LGBTQ+. We will present clinical and policy issues, as well as empirical findings, related to best practices in providing healthcare to this population.

The first presentation, by Adam Schoenfarber, will address clinician knowledge gaps in the provision of LGBTQ+ affirming care, including updates to language, legislation, and best practices with the LGBTQ+ population and families. Clinicians have an integral role in supporting the LGBTQ+ population throughout the course of a serious illness, both on micro and mezzo levels. Palliative and end-of-life care clinicians have reported limited knowledge and notable biases engaging individuals around issues of sexual orientation and gender identity in the setting of serious illness. Case studies will be presented to illustrate integration of best practices into palliative care and hospice settings.

The second presentation, by Cathy Berkman, presents findings from Project Respect, a mixed methods study of 290 LGBTQ+ patients and their partners. Findings describe specific ways in which healthcare was disrespectful and inadequate due to SOGI, including having treatment decisions disregarded, feeling judged for being LGBTQ+, having incorrect pronouns and chosen names used, being made fun of, having religious beliefs imposed on them, and being denied care. Partners were excluded from discussions about care and were denied access to the patient. Qualitative data provide descriptions of poor care and also good care. These findings have implications for staff training, practice, and institutional and public policy, including policy barriers to respectful and non-discriminatory care.

The third presentation, by Noelle Marie Javier, focuses on care to trans and gender diverse communities. Theories that support our understanding of the sociocultural, contextual, and individual factors contributing to the healthcare experience of this population, including barriers to care, are presented. Guiding principles for providing inclusive and affirming care, inclusive of minority stress, resiliency and robustness, lived experiences, and intersectionality are discussed. Finally, a multidimensional framework using the biopsychosocial, cultural, and spiritual approach to care to provide high quality palliative care is presented.

### **Learning Objectives**

After attending this session, participants will be able to:

1. Describe current terminology and critical concepts regarding the LGBT Community and apply a framework of cultural humility when approaching practice with the LGBT population in chronic and terminal illness settings.
2. Describe disrespectful and inadequate care to seriously ill persons who identify as LGBTQ+ and their partners.
3. Describe the multidimensional framework and best practices for providing inclusive and affirming healthcare to seriously ill persons who identify as LGBTQ +.