Emergency Preparedness and Lesbian, Gay, Bisexual & Transgender (LGBT) People: What Health Centers Need to Know



"Part of being LGBT is being prepared. You cannot assume your family, relationship and/ or gender identity will be recognized or understood."

"As a same sex couple living in a southern US city, we are fortunate to have neighbors that are accepting and who reached out to us during a recent emergency. I know that others are not so lucky and may not know where to turn for help."

"Bathrooms are a huge deal for transgender people. In terms of access, health centers and emergency shelter providers need to be prepared and provide gender neutral restrooms and help to ensure safety for trans people." Health centers often serve as a key resource during a natural disaster or other public health emergency. Before an emergency strikes, it is important for health centers to consider the unique needs and circumstances of vulnerable populations, including LGBT individuals and families in the community. For LGBT people, some of the specific challenges they may face during an emergency include:

- LGBT youth experience high rates of homelessness, making it more difficult to reach them during an emergency
- LGBT seniors are more likely to be isolated, and are less likely to have children or other family compared to other seniors; therefore they may need additional assistance in receiving emergency messages and accessing resources
- Because many LGBT couples and families are not able to have legally recognized relationships, first responders may not recognize these relationships
- Transgender people may not be able to access shelter appropriate to their affirmed gender identity or to receive culturally sensitive health care
- Some LGBT people may not be trusting of emergency responders and health care systems based on prior discriminatory or other negative experiences.



Here are some tips for health centers to help address these challenges when developing emergency preparedness plans:

- Create an inclusive environment for LGBT people so they will feel safe seeking assistance at your health center during a disaster or other emergency.
 - Implement inclusive practices and policies (e.g., gender identity and sexual orientation nondiscrimination policies; inclusion of transgender identities and same-sex relationships on registration forms, etc.)
 - Train all health center staff on LGBT affirmative care and inclusive practices and policies.
- Include the LGBT community in emergency preparedness planning.
 - Work collaboratively with LGBT community groups and leaders.
 - Consider appointing openly LGBT people to the Governing Board.
- Recruit LGBT staff members and community volunteers to assist during times of emergency.
 - Work with staff LGBT resource group or LGBT health "champion" if you have one at your site.
 - Encourage LGBT people to work and volunteer at your health center by advertising in LGBT media and by being visible at local LGBT events.
- Use media (including social media) that are trusted sources in the LGBT community and make sure during any media announcements that your health center's inclusiveness is mentioned.
 - Research local LGBT newspapers and websites to promote your health center in general, and as a resource in an emergency.
 - Ensure your own website, Facebook, Twitter and other social media accounts prominently include images of LGBT people, inclusive statements, and symbols of support.
- Recognize LGBT couples and families without requiring documentation of relationship status.
 - Understand that during an emergency, LGBT patients may not have had time to gather documents, such as domestic partner licenses, powers of attorney, or adoption decrees.

- Affirm and support LGBT families regardless of the recognition of same-sex marriage and/or adoption by LGBT people in your state.
- Encourage LGBT patients to be prepared for emergencies, as with other patients, and to have ready access to important documents when they need them.
- Train staff to acknowledge and use the preferred name and gender identification of transgender people.
 - Frontline staff should be trained to avoid using pronouns or terms like "sir" or "ma'am" when greeting patients and to politely ask if unsure about patient's preferred name.
- Talk with emergency shelter providers in advance about their policies and practices concerning sheltering same-sex families and transgender individuals.
 - Inappropriate housing placement may result in harassment or potential danger for an LGBT person, couple or family.
 - If assisting people in finding shelter, communicate with LGBT individuals, especially transgender people, about what type of emergency housing they are comfortable with.
- Make sure that people who are on medications, such as those living with HIV/AIDS and transgender individuals who use hormones, have enough doses to carry them through possible displacement and that they are prepared for possible epidemics.
 - Provide backup prescriptions if possible in case of displacement (patients should always have 10-14 days of medication on hand).
 - Work with HIV-infected patients in advance to discuss any other special considerations during an emergency, such as an influenza outbreak.
- Recognize that hate crimes and other acts of anti-LGBT violence can have a traumatic effect on the entire LGBT community, creating the need for emergency mental health services and support.
 - Health centers should be aware of events affecting LGBT populations and should be prepared to offer additional services.

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The National LGBT Health Education CenterThe Fenway Institute1340 Boylston Street, 8th FloorBoston, MA 02215Tel 617.927.6354Email Igbthealtheducation@fenwayhealth.orgWeb Igbthealtheducation.org

Sources:

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