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Often sexual and gender minorities face discrimination in healthcare. With June being Pride Month, it's an excellent time to bring awareness that quality care and understanding is available.

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Welcome, everyone to Mayo Clinic Q&A. I’m Dr. Halena Gazelka. June is Pride Month, celebrated annually to honor the 1969 Stonewall riots, and the impact that lesbian, gay, bisexual, transgender, gender queer and gender nonconforming individuals have had on history. It’s also an excellent time to raise awareness about the challenges that sexual and gender minorities face in accessing health care and cancer preventative services, and how that can result in disparities in both cancer risk and treatment. Joining us to discuss this today is Dr. Jewel Kling. Dr. Kling is the chair of the Division of Women’s Health in the Department of Internal Medicine at the Mayo Clinic in Arizona. She’s also the prior Chair of the LGBTI Mayo Employees Resource Group. So, she knows a lot about the topic. Thanks for being here today, Jewel,

Thank you so much for inviting me, and thank you for covering such an important topic.

Well, I am so glad to have you here today because I love to learn something new. And I have a feeling I’m going to learn some new things today, because this is a topic that I hadn’t really thought about, disparities in cancer prevention and treatment for instance. Tell us a little bit about what kind of barriers that LGBTQ individuals might face?

Yeah, it’s an excellent question. And I’m glad that we have the time to talk about it. I think one thing to point out initially, though, is the acronym, the lesbian, gay, bisexual, transgender, and queer is a large umbrella, and represents a lot of different identities. And so, we’re going to talk just kind of broadly about disparities, so of each of those populations are unique, and so have different kind of challenges that face, you know, each person or each group, but with that in mind, there are disparities that are seen in the LGBT community. Importantly, though, many of those disparities are rooted in stigma and discrimination that have really historically been an issue for this population. So, I think what really illustrates how something like stigma and discrimination could lead to a health disparity would be something like depression, smoking or being overweight. So, we do see that lesbian women and bisexual women may tend to be more overweight than heterosexual women. And we think that that’s likely rooted in some of that issue around
discrimination. Now, we know being overweight can be a risk factor for certain cancers, including breast cancer. And so, it makes sense how those things can line up when we’re talking about cancer.

Dr. Halena Gazelka 03:34
That is interesting. Are there specific cancers that might have a higher incidence in the LGBTQ group, for instance?

Dr. Jewel Kling 03:42
Yeah, there are some that have been reported. Now granted, the research in this area is extremely limited, especially when we talk about transgender and gender diverse people. But like I was saying earlier, there is some research that shows that lesbian and bisexual women may be at a higher risk for breast cancer than heterosexual women. Another example are men who have sex with men, particularly those that are HIV positive, that are at increased risk for anal cancer. Now, what gets tricky and like the conversation we’re having today about raising awareness, but also hopefully, leading to improved screening is that there’s no guidelines recommending routine anal cancer screening for this population of men. So really, it falls to us in the medical community to talk about that and figure out how we best serve this group that is facing a higher burden of anal cancer.

Dr. Halena Gazelka 04:36
Isn’t that really interesting Jewel. I remember when I was in medical school at the University of Minnesota, being taught to take a sexual history. And honestly, like, there were some who would say, Well, I’m not going to be in a specialty where that really matters, so, do I need to really ask people that. Well, obviously, to know your patients is important, but also to be able to consider screening exams, etc. It’s obviously important information.

Dr. Jewel Kling 05:04
Yeah, absolutely. And you bring up a good point, you know, people don’t think it relates to them. I mean, I’m talking about health care practitioners, and unfortunately, historically, in the past, we’ve been one of those barriers to LGBTQ people getting good care, because they’ve been concerned about facing discrimination, or they faced flat out discrimination. But when we look at numbers, you know, specifically talking about like transgender people, the percentage when you calculate it for the general population, comes out to about 1.4 million transgender self-identified people in the US. Now there’s about 1.2 million
type one diabetics in the US. And so, you know, most of us know of a type one diabetic or friends or whatnot. So, then you start thinking, okay, this is a population that I need to be able to, you know, take care of.

Dr. Halena Gazelka 05:59
Oh, absolutely. That makes perfect sense. Is there anything that LGBTQ individuals can do to reduce the risk of certain cancers?

Dr. Jewel Kling 06:09
Yeah, I think, really the same thing we share with all of our patients when it comes to cancer reduction or prevention is healthy lifestyle habits. So, regular exercise like 150 to 300 minutes per week, healthy diets, such as the Mediterranean style diet, not smoking, and minimizing alcohol or avoiding alcohol. Now, acknowledging that some of those may be challenging if you’re facing social stigma, and all of the things that come along with that. So, seeking support from resources or from family members, if that’s an option are important. And then hopefully, finding a practitioner, like a doctor, a nurse practitioner that embraces and is inclusive for their gender identity or their sexual orientation.

Dr. Halena Gazelka 07:01
I think that’s a really good point to make, Jewel, because we always talk about wanting a provider that you feel comfortable with. And obviously, we hate to put the onus on a patient to be certain that their provider has certain information that providers should be attempting to get that information. Because they want to know their patients better and take better care of them, but it doesn’t always happen. So, I think finding the right provider is probably really important.

Dr. Jewel Kling 07:24
Yeah. And there’s more organizations that are trying to make that easier for patients to find out, like the gay and lesbian medical association or other, you know, organizations that want to make it obvious. So, when a patient walks into their lobby, or looks at their website, that they can see signs that hey, this organization, rather, is going to take care of me like they would anybody else.

Dr. Halena Gazelka 07:51
What information should a patient share with their provider to be certain that they get
appropriate medical care?

Dr. Jewel Kling 07:58
Well, I think that goes back to that trust, you know, question or concern that once they find a trusting provider, feeling that they can disclose everything about themselves. You know, including their health behaviors, their challenges, the things that are impacting, really those kinds of social determinants of health. But beyond that, I mean, it’s what we would ask everybody to share with us, their family history, their habits, their medical history, those type of things.

Dr. Halena Gazelka 08:33
Are there any specific cancer resources that can be helpful if LGBTQ individuals are diagnosed with cancers?

Dr. Jewel Kling 08:40
I would refer them to community resources. Many communities have really great supportive organizations. For example, there’s an organization in Phoenix called one in 10 minutes that’s for LGBTQ youth and their families. That has funds and resources and programs. So, if LGBTQ people are facing, you know a cancer diagnosis and the treatment, looking to those community resources will be helpful.

Dr. Halena Gazelka 09:12
Yeah, and finding someone who’s been through something similar to what you’re going through, can be really helpful at times as well.

Dr. Jewel Kling 09:19
Yeah, that’s what, you know, social media, there’s certainly pros and cons on both sides. But having a community of people that know what it’s like to be walking through that path can be extremely helpful.

Dr. Halena Gazelka 09:31
Jewel, at Mayo Clinic we are obviously interested and reducing disparities in health care, and ensuring that all individuals regardless of gender, race, etc, etc, that they all receive equivalent care. Jewel, tell me a little bit about what is being done to eliminate cancer
health disparities and the LGBTQ community.

**Dr. Jewel Kling 09:57**

Yeah, that’s an excellent question. And we’re actively working on providing more of an inclusive and culturally agile experience here at Mayo Clinic for our LGBTQ patients. And I think probably that’s the most important place for us to start is knowing that when a patient walks in and they look at one of our forums, or talk to one of our front desk staff, that they’re using the correct pronouns or inclusive language. So, they feel like this is an environment where they can share about their medical history and, you know, those lifestyle habits that may be influenced one way or another when we talk about cancer prevention. I think one of the important things that is being done right now at Mayo too, is the anti-racism efforts that are kind of enterprise wide. And more and more, when we look at equity and disparities, it’s important to acknowledge the intersectionality between things. And so, our LGBT patients of color face more discrimination than those not of color. So, taking those anti-racism efforts seriously, will therefore you know, improve disparities as it relates to cancer for the LGBT community as well.

**Dr. Halena Gazelka 11:19**

Oh, that’s great. I think that we are all aware that biases exist in probably every one of us in one way or another. And we certainly want to be aware of those at Mayo, it doesn’t mean that we always get it right. But we certainly want to. And so, we want to empower our patients and our future patients to share with us what you said earlier, how names are pronounced, you know, pronouns that we use, anything that’s related to them as a person that would help us to provide them with better health care.

**Dr. Jewel Kling 11:50**

Oh, you make such a great point. I’m so glad you’ve said that. Yeah, please, our future patients out there that are listening, we want to do a better job for you. So, let us know, and we’ll keep working on our and with that training and information to try and not, you know, have that be an issue.

**Dr. Halena Gazelka 12:10**

Point well made. Thank you Jewel. Thanks for being here today.
Thank you again for including this important topic.

Our thanks to Dr. Jewel Kling for being here with us today to discuss LGBTQ healthcare and cancer risks during Pride Month. We appreciate you being here too today. And I hope that you've learned something I know that I have. We wish each of you a wonderful day.

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