



**Wisconsin
Cancer
Collaborative**
REDUCING THE BURDEN TOGETHER



Cancer in the LGBTQ+ Community

Thursday, February 11, 10:00-11:30

Who We Are

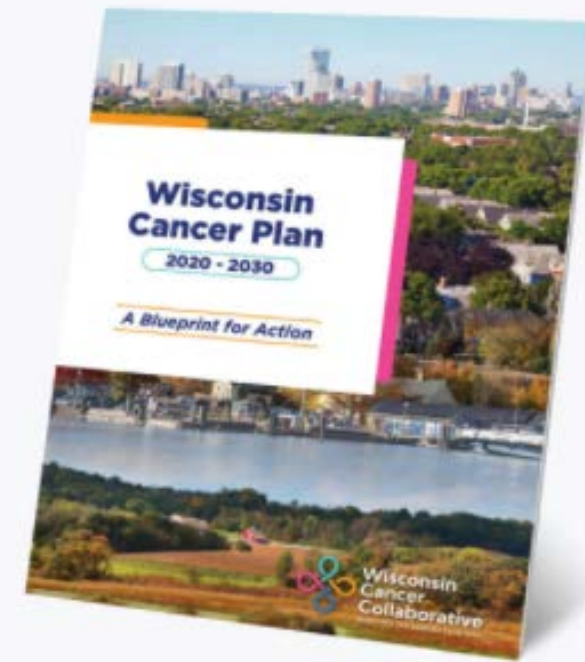
The **Wisconsin Cancer Collaborative** is a statewide coalition of **140 organizations** working together to reduce the burden of cancer **for everyone** in Wisconsin.

Join Us!



www.wicancer.org/join/

Wisconsin Cancer Plan 2020-2030



www.wicancer.org

Agenda

- **Welcome**
- **Presentation by Scout**
- **Questions**





Scout

Executive Director of the National LGBT Cancer Network



LGBTQ+ Cancer Orientation

Wisconsin Cancer Collaborative
February 11, 2021

lgbt national
cancer
network

 TOBACCO RELATED
CANCER PROJECT



**Scout, Executive Director
National LGBT Cancer Network**

One of eight CDC-funded tobacco-related cancer disparity networks.



Agenda

- Who we are
- Cancer in LGBTQ+ communities
- Overview of LGBTQ+ Terminology
- Data
- Best practices
- Action steps



lgbt national
cancer
network

 TOBACCO RELATED
CANCER PROJECT

Who we are



1

EDUCATING

the LGBT community about our increased cancer risks and the importance of screening and early detection

ADVOCATING

2

for LGBT survivors in mainstream cancer organizations, the media and research.

3

TRAINING


health care providers to offer more culturally-competent, safe and welcoming care



As one of eight disparity networks


We assess the field to ID knowledge gaps




We offer  trainings to all

We create and find knowledge pieces to disseminate



We build partnerships & connections between members 

We offer  technical assistance to members



We create and advise on media strategies





Newsletters



LGBTQ Tobacco-Related Cancer Project

Cancer Care and the LGBT Community



It was an honor when our Executive Director, Liz Margolies, was invited to speak at a public workshop, Improving Access to and Equity of Care for People with Serious Illness. This event was hosted by the National Academies of Sciences, Engineering, and Medicine's Roundtable on Quality Care for People with Serious Illness .

In her presentation, Cancer Care and the LGBT Community , Liz discussed the cancer experience of our LGBT communities, highlighting that the traditional cancer continuum is insufficient to describe our experiences, as issues of discrimination, lack of provider knowledge, and concerns about disclosure occur at every stage. She spoke about the need for data, provider education and the collection of SOGI in national cancer registries. Finally, she talked about how LGBT cancer support systems differ from those in the general population. Read her presentation [here](#) .



In April 2019, this public workshop: Improving Access to and Equity of Care for People with Serious Illness, highlighted different models of care delivery that serve various

 briefing sheet

presentation



 media

 webinar

 report / article

 info-graphic

www.cancer-network.org/news/



Online Resource Library

National LGBT Cancer Network

Home Trainings Resources Our Work News About Us Become a Member!

Resource Library

Search

Search

Filter

By Topic

- Anal Cancer
- Article
- Asexual Health
- Bisexual Health
- Breast Cancer
- Cancer Screening
- Caregiving
- Cervical Cancer
- Colorectal cancer
- Data
- E-cigarettes
- Fertility
- Gay Health
- Health Disparities
- Healthcare
- HIV/AIDS

Intersex Fact Sheet

Intersex Fact sheet created by the United Nation for LGBT Equality

Fact Sheet

LGBT Tobacco Fact Sheet

We've created an LGBT Tobacco Use fact sheet for community members, health care providers, and advocates alike. This was created with the intentions of spreading awareness and resources.

Fact Sheet

Lesbian, bisexual & queer women and cervical cancer

Canadian Cancer Society is an excellent resource for lesbian, bisexual, and queer women in need of cervical cancer screenings.

Fact Sheet

Lesbian, bisexual & queer women and breast cancer screening

Canadian Cancer Society is an excellent resource for lesbian, bisexual, and queer women in need of breast cancer screenings.

Fact Sheet

Trans men and chest cancer screening

Canadian Cancer Society is an excellent resource for Transgender men in need of chest cancer screenings.

Fact Sheet

Trans women and breast cancer screening

Canadian Cancer Society is an excellent resource for Transgender women in need of breast cancer screenings.

Fact Sheet

 briefing sheet

presentation



 media

 webinar

 report / article

 info-graphic

www.cancer-network.org/resource-library/



Join Our Network



- ❖ Training & technical assistance
- ❖ Connecting & capacity building with your local LGBTQ+ organization
- ❖ Opportunities for networking with state health departments, LGBTQ+ orgs, and more
- ❖ Tailored media & educational resources



Cancer in the LGBTQ+ Communities



Tobacco Use & LGB Communities

- 50% higher than non-queers.
- Rates of vaping are also higher.
- Most smokers begin using tobacco before age 18.
- We do not rate it as an important health issue.
- Epidemiologically it is our #1 health issue.



Tobacco Use & Transgender Communities

- 36.8% current smoking (2015 USTS).
- 50% higher smoking rates than general population.
- Nicotine use correlates with other life stressors: low income, sex work, not passing.
- Transgender people have 3.5 times higher odds of past 30-day cigar use.





Vaping & LGBTQ+ Communities

- Youth vaping has been labeled an epidemic by CDC.
- Transgender individuals have 5 times higher odds of past 30-day e-cigarette use compared to cisgender people.
- There is evidence that youth vaping leads to cigarette smoking or “dual-use”.
- Can vaping help smokers quit?



In survivors own voices

LGBT PATIENT-CENTERED OUTCOMES

Cancer survivors teach us how to improve care for all
LIZ MARGOLIES, NFN SCOUT

national
lgbt
cancer
network





In survivors own voices



If you were to give a class to healthcare workers, focused on cancer care, what would you tell them about being LGBT and being diagnosed with cancer?



The challenge



Stigma plays a prominent role in LGBT healthcare



In survivors own voices



“Although my doctor knew all about me, each encounter with new people—with blood draws, ultrasound, breast x-ray, etc.—had ... the possibility of homophobia and having to watch out for myself.”



Recommendations



Providers and healthcare management should take additional steps to become educated about the stigma-related stress many LGBT people carry into treatment & strategies to reduce such stress

- Provide cultural competency training
- Include LGBT leaders on community advisory bodies



The challenge



The local healthcare environment determines one's experience and is highly variable



In survivors own voices



“My partner did not come to the hospital because the only good hospital around was a Catholic hospital and I didn't want my treatment compromised by them finding out about my 'sinful lifestyle.'”



Recommendations



- ✓ **Healthcare institutions and offices should actively convey that LGBT-welcoming behavior is a core expectation of all staff**
- ✓ **Healthcare institutions and offices should convey a zero-tolerance environment for any discriminatory behavior on the part of staff**
- ✓ **Healthcare institutions and offices need to broadcast their LGBT-welcoming policies and training to potential and current patients**



The challenge



Disclosure is often related to perceived safety



In survivors own voices



“We never knew what to expect from health care providers at different levels and so were always bracing ourselves for some kind of difficulty or rejection.”



Recommendations



Collect evidence to see if LGBT patients feel safe coming out at your institution and use evidence to build safety



The challenge



**Respecting LGBT patients
means respecting their
support teams**



In survivors own voices



“An LGBT person might not have the same type of support system that straight people do. They may be estranged from their families of origin; they may not be out at work or to their families, which means a diagnosis like cancer can be every scarier than for a straight person.”



Recommendations



Conduct a scan to see how the office/institution conveys welcome for alternative support teams



Use findings to augment the message to staff and patients alike



The challenge



The pervasive expectation of gender conformity can be alienating



In survivors own voices



“Don't forget to give us our hormones.
Expect the unexpected. ie, don't get upset
when you go to put in a Foley and find the
person is pre-op. Treat us with dignity. USE
THE CORRECT PRONOUNS!!!!!!”



Recommendations



- ✓ **Conduct a scan to see when the office/institution presumes gender conformance in care**
- ✓ **Use findings to build welcome for all gender nonconforming patients**
- ✓ **Due to the high chance of poor care, get input on the treatment of transgender patients and make changes to augment their welcome**



The challenge



LGBT survivors need more culturally appropriate support and information



In survivors own voices



“Having a gay male support group was the best thing that happened to me.”



Recommendations

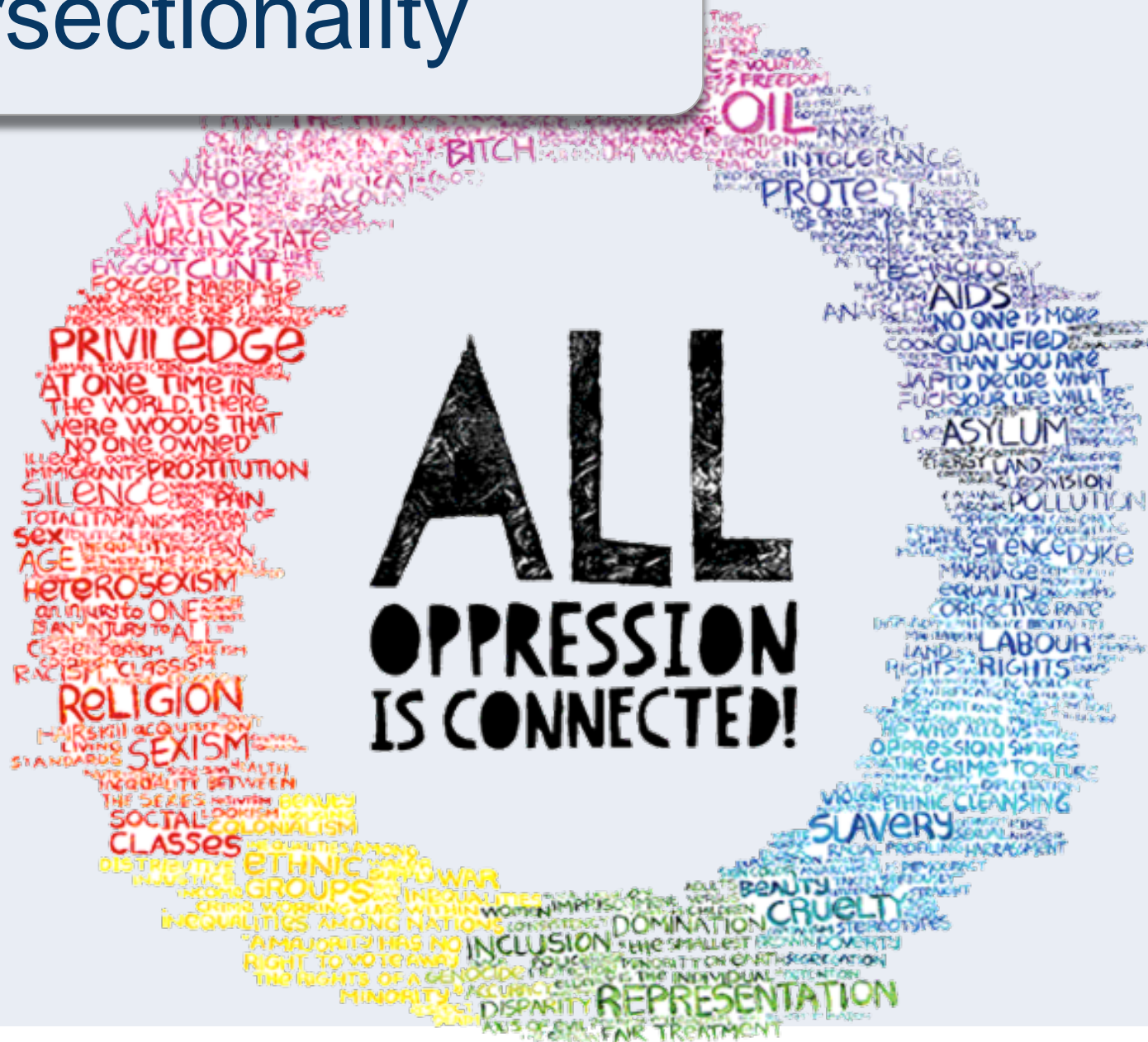


- ✓ **Collect referral lists for LGBT-welcoming providers, including local mental health providers**
- ✓ **Review all educational materials to remove heterosexist language choices: i.e. “husband” “married,” etc.**
- ✓ **Ensure providers are educated in how to speak about sex and sexuality to LGBT patients**



Intersectionality

MURAL BY JIM CHUCHU
INSPIRED BY THE POETRY OF
STACEYANN CHIM





The National LGBTQ Cancer Network
is proud to partner with the
Center for Black Equity to launch
Out: The National Cancer Survey.

Survivor stories are needed now!



Can you help spread the word to survivors?

Some of our 81
promotional partners:

Human Rights Campaign

Friends for Life Cancer Network

LGBT HealthLink

WV Cancer Coalition

Indiana Comp Cancer Program

New York University

Wisconsin Cancer Collaborative

Stanford Cancer Institute

Cure

Ulman Foundation

University of Rochester

Virginia Breast Cancer Foundation

**To be a promotional partner:
put your email in chat now
or email [info@cancer-
network.org](mailto:info@cancer-network.org).**



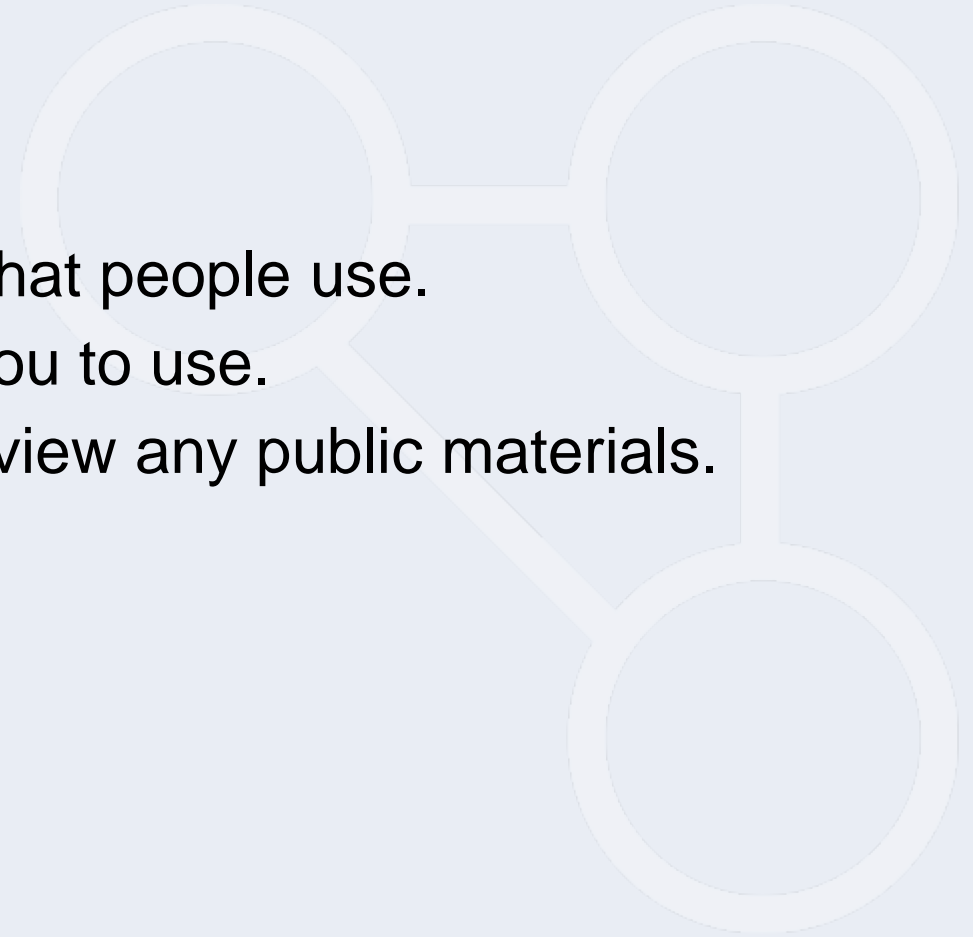


Terminology Evolution Highlights



Takeaway

1. Do not memorize all the terms.
2. Be comfortable repeating back what people use.
3. Otherwise LGBTQ+ is great for you to use.
4. And have community advisors review any public materials.





New & Better Terms



Instagram



@lgbt.whales

- 🏰 jay-pan/ace/gf 🌸 ave-mtf ★ jax-gay/gf ✨ sara-bi/pg 🌈 dyl-pan/ace ♠️ lex&jace-ace ツ connor&cody-ftm 🌞 olie&sam&rin-pan/gf 🌙 anna&eliana&ven-pan/demi ★ mags&rik&em&c&alex-pan



LGBTQ+ Terminology

Ask Me





Sexual Orientation Yes & No

Yes

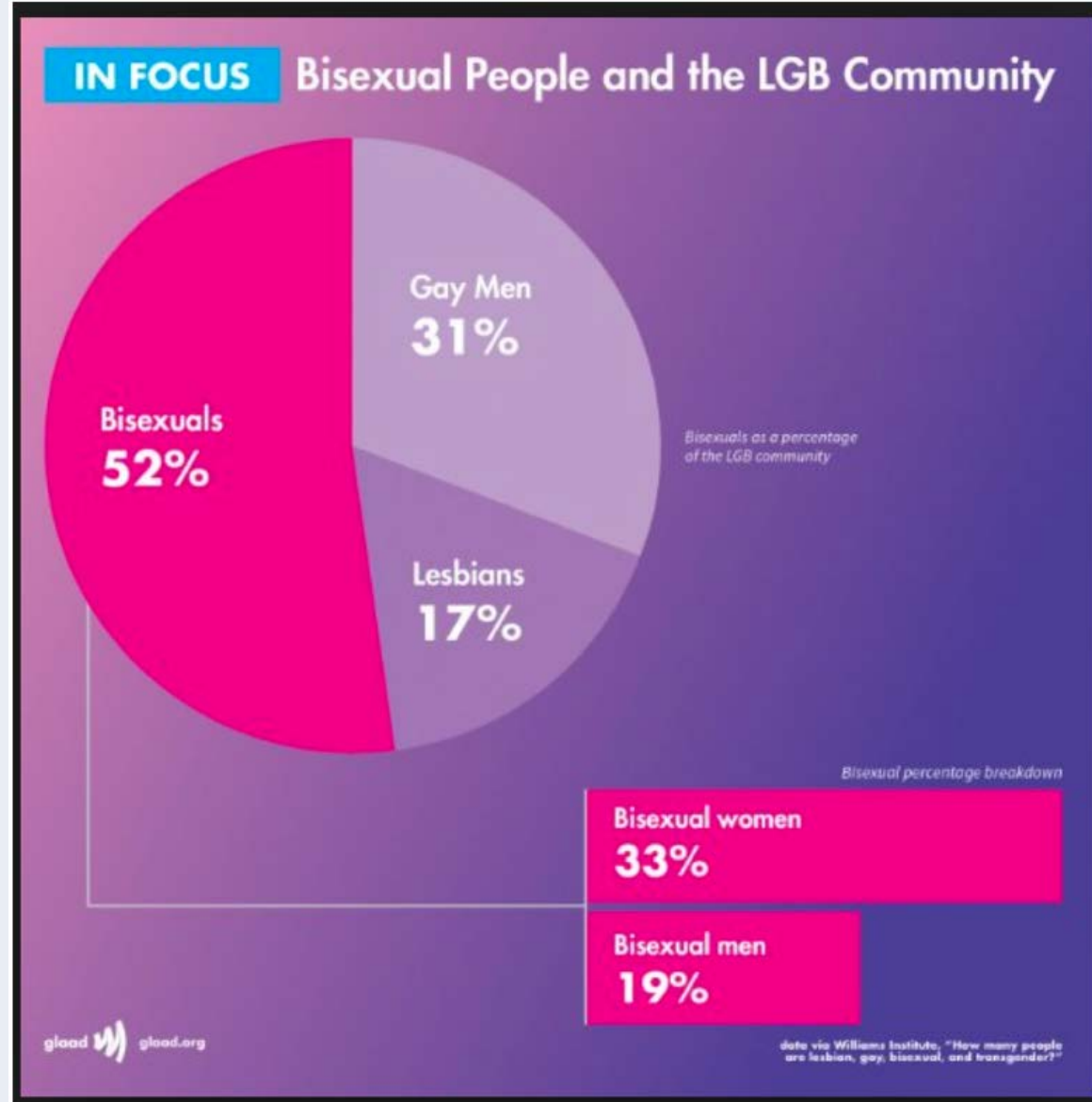
- lesbian
- gay
- bisexual
- bi or bi plus
- pansexual
- asexual (ace)
- ace spectrum
- aro
- two spirit
- queer

No(tes)

- homosexuals
- please do not forget bi erasure
- please do not forget pan is a subset of bi



Bi moment





Gender Identity Yes & No

Yes

- transgender
- trans
- trans man
- trans woman
- transgender person
- cis
- enby
- nonbinary
- genderqueer & queer

No(tes)

- transgenders
- transgendered
- transman
- transwoman
- transgenderism
- tranny (quite inflammatory)
- please do not say straight is the opposite of LGBT
- two spirit



Gender Identity Yes & No

Yes

- transgender
- trans
- transman
- transwoman
- transgender person
- cis
- enby
- nonbinary
- genderqueer & queer

No(tes)

- transgenders
- transgendered
- transman
- transwoman
- transgenderism
- tranny (quite inflammatory)
- please do not say straight is the opposite of LGBT
- two spirit



In a closely related vein

Yes

- intersex
- differences/disorders in sexual development (DSD)

No(tes)

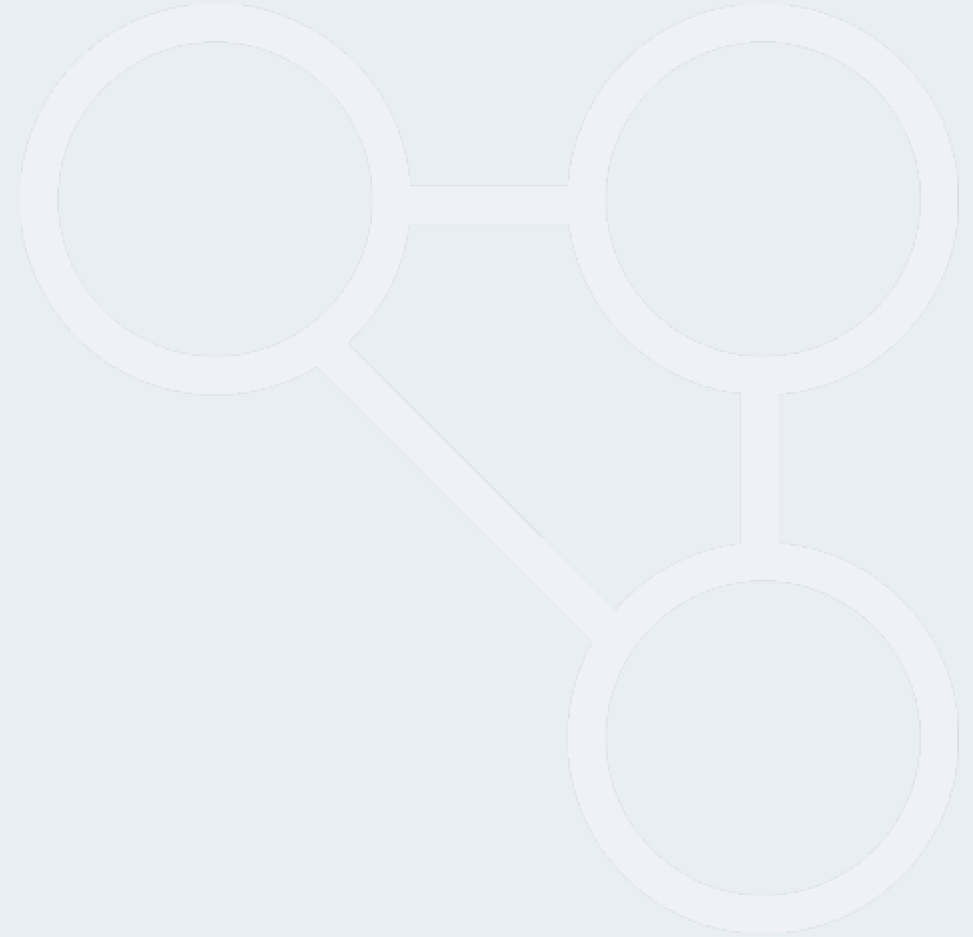
- hermaphrodites
- be sensitive that intersex can sometimes be attached to LGBTQ but if so please address the distinct issues



Groupings?

Yes

- LGBT
- LGBTQ
- LGBTQ+
- LGBTQI
- queer
- SOGI
- SGM (often federal)





Groupings?

Yes

- LGBT
- LGBTQ
- LGBTQ+
- LGBTQI
- queer
- SOGI (usually re: data)
- SGM (often federal)

As in

- You have this one, right?
- Adding queer
- Reigning in the alphabet mafia
- Plus intersex!
- What a lovely umbrella
- Sexual orientation gender identity
- Sexual and gender minority



Pronouns

Notes

- Increasing use of gender neutral pronouns
- Need to get more comfortable with them? Practice.
- Unsure which to use? Ask.
- Flub it? Thank the individual for their correction quickly and move on.
- The power of an email tagline and zoom name
- Say “my pronouns are...” not “my preferred pronouns...”



Pronouns



Joshua Hudson

Pronouns: He/Him; They/Them ([What does this mean?](#))

Assistant Health and Human Services Director

Bay Mills Health Center

Bay Mills Indian Community

P: (906)248-5527

baymillshealthcenter.com



<https://www.glsen.org/sites/default/files/GLSEN%20Pronouns%20Resource.pdf>



What's wrong with this picture?





Caught me without my pronouns on!





Whew, better!



Scout (he/him)





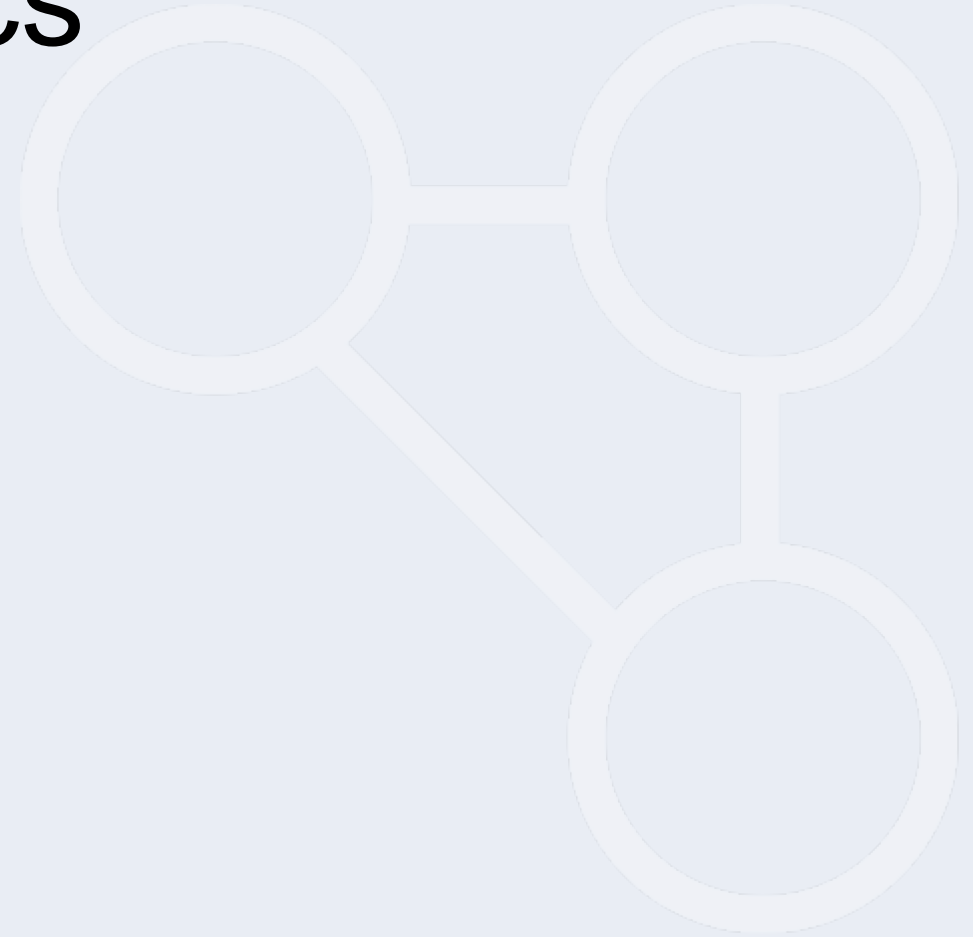
Help me create my next slidedeck!



Data, data, data!



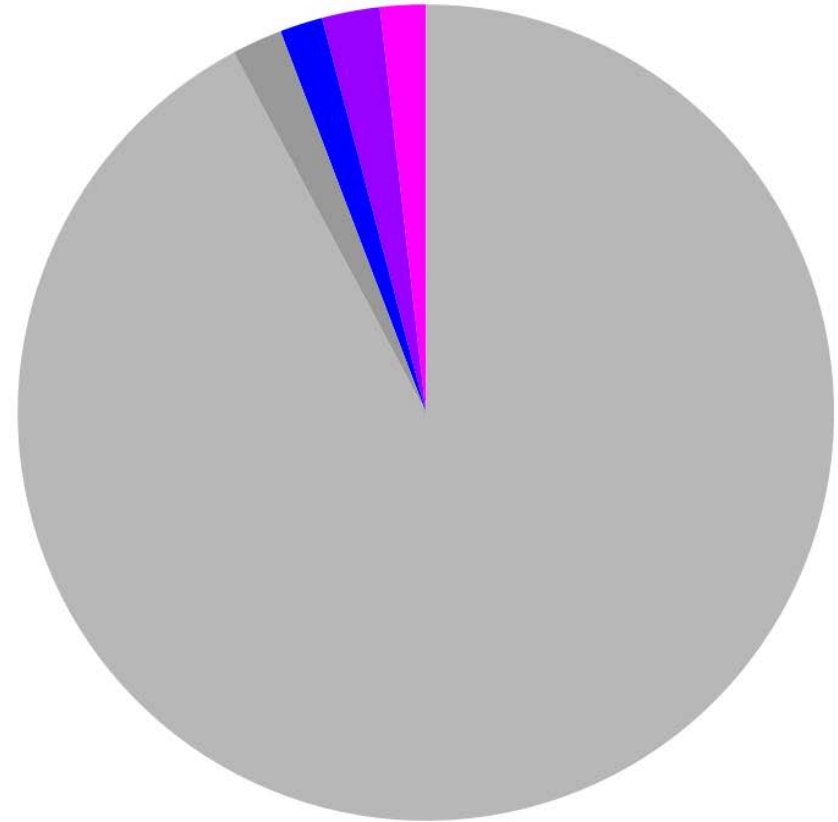
Shifting demographics





2017 BRFSS

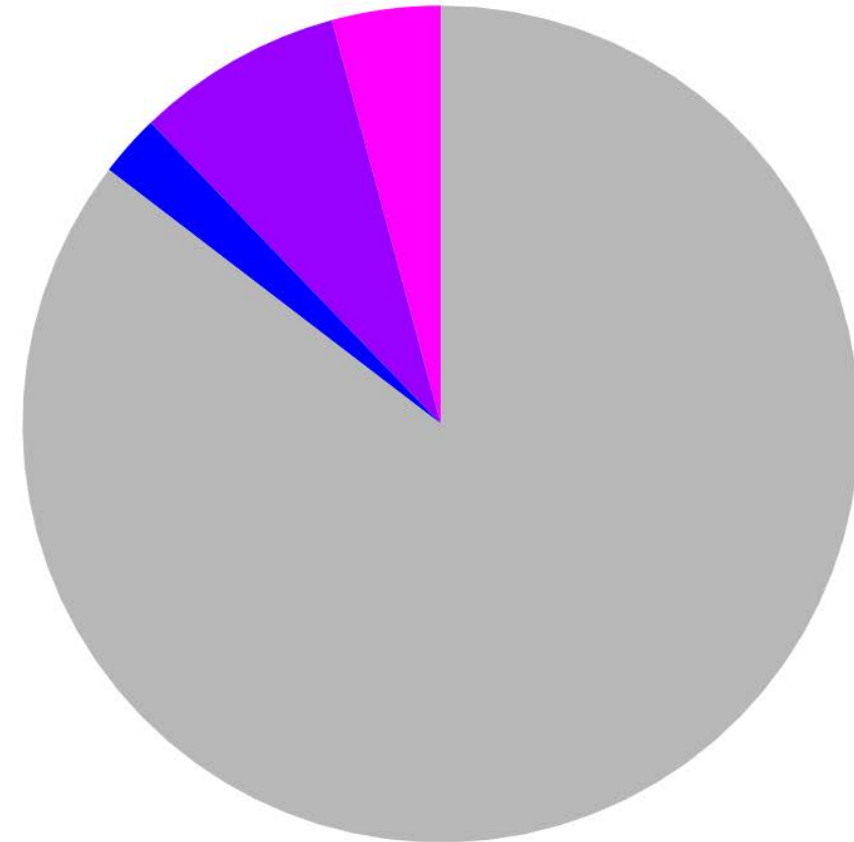
- Heterosexual
- Refused
- Gay/Les
- Bisexual
- Don't Know





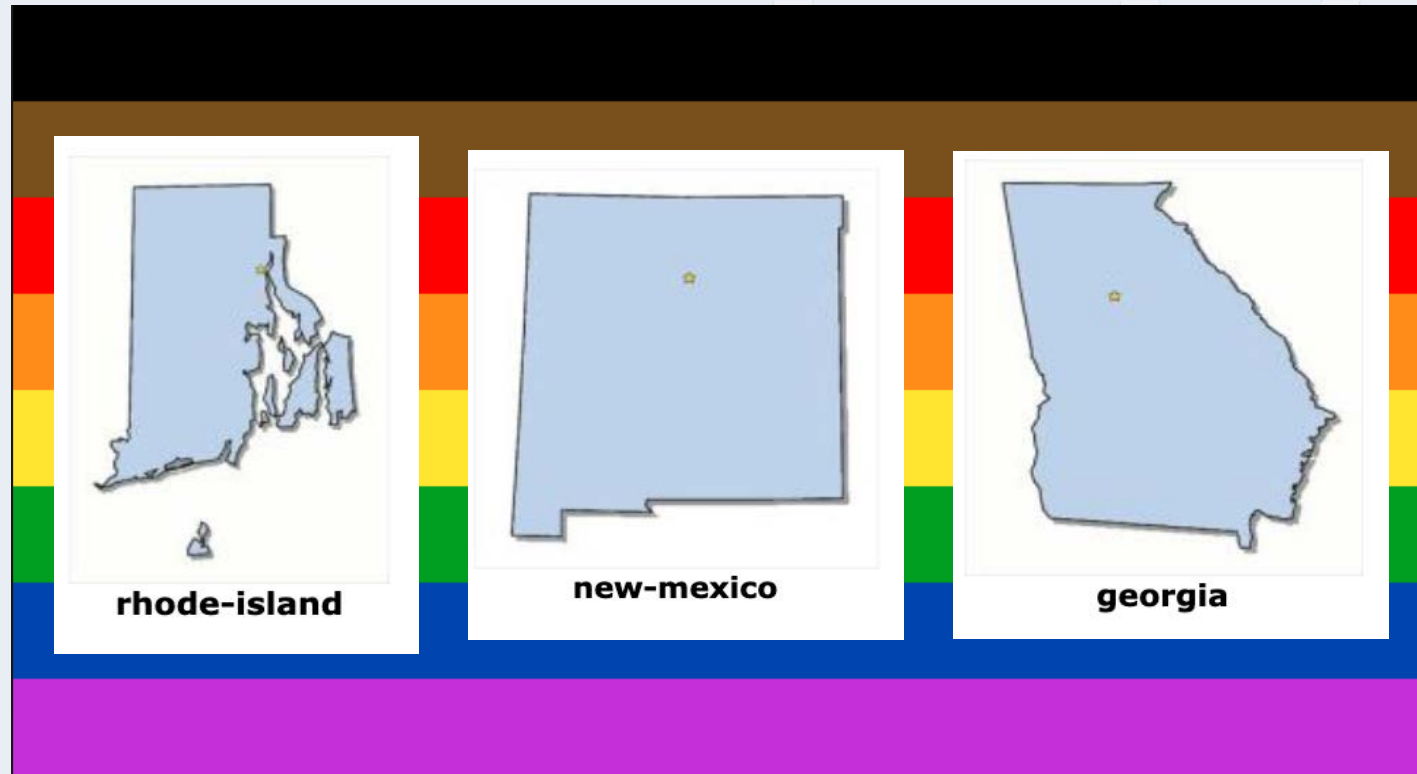
2017 YRBS

- Heterosexual
- Gay/Les
- Bisexual
- Don't Know





Shifting demographics - 14.7M





BIPOC* demographics say...



24%

of general pop are racial/ethnic minorities.

42%

of LGBTQ+ population are racial/ethnic minorities.

*Black, Indigenous, and People of Color



What about Wisconsin?

Est.

221,236

LGBTQ+

people in

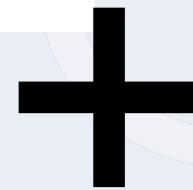
Wisconsin



Green Bay is 91

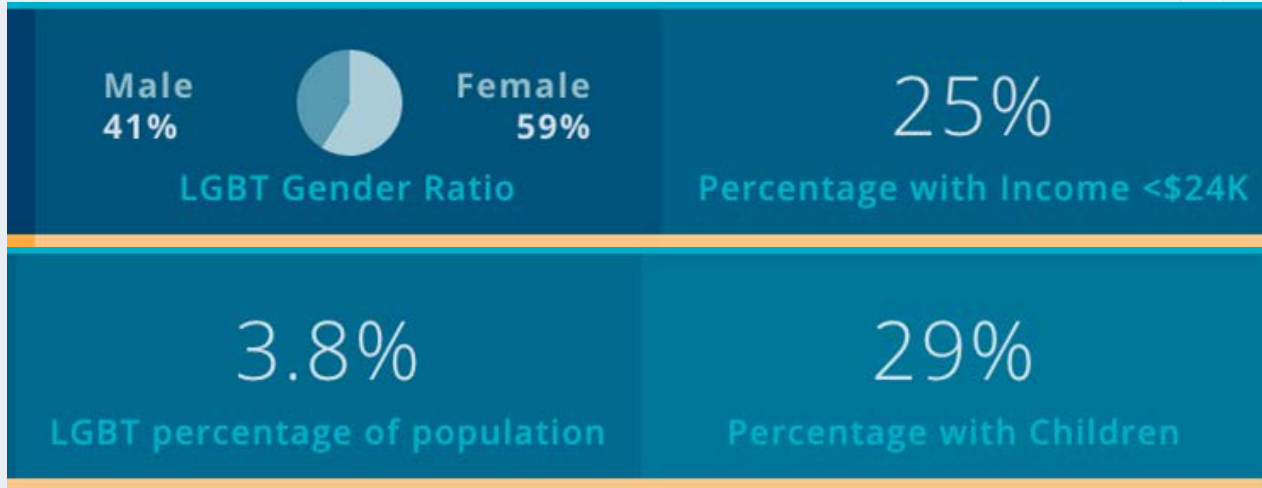


Green Bay is 9th happiest city in America

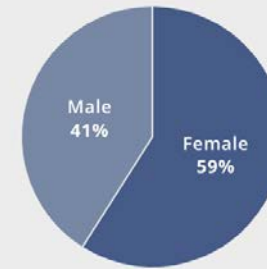




What about Wisconsin?



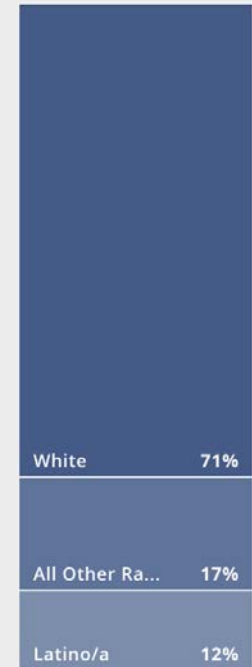
Characteristics of LGBT People: Wisconsin x



GENDER



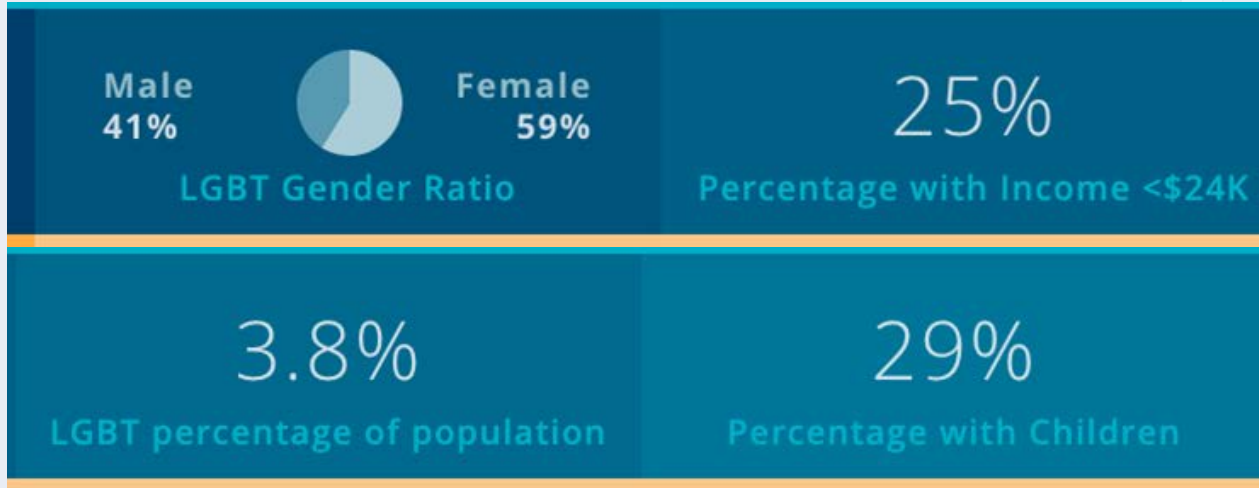
% RAISING CHILDREN



RACE/ETHNICITY



What about Wisconsin?



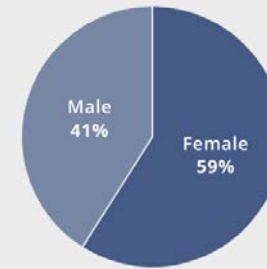
29%

Of LGBTQ+ WI folx are racial/ethnic minorities

13%

Of all WI folx are racial/ethnic minorities

Characteristics of LGBT People: Wisconsin x



GENDER



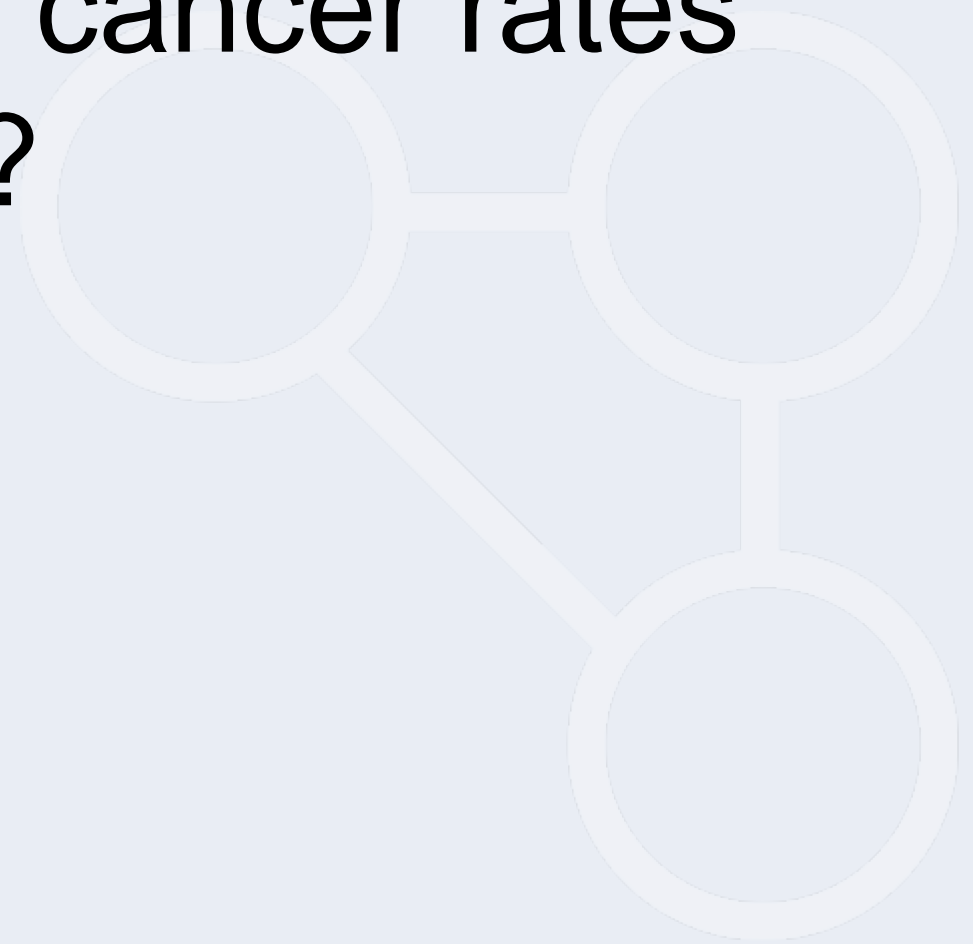
% RAISING CHILDREN



RACE/ETHNICITY



How do LGBTQ lung cancer rates compare with others?





How do LGBTQ lung cancer rates compare with others?

Who knows



Best & Promising Practices

This list was originally compiled by over 30 LGBTQ public health professionals in 2007; it has been updated and undergone expert review several times since. These practices have formed the basis for our technical assistance for years. They also are the backbone of our own program evaluation; we are successful as a project if we spur better performance on these measures.

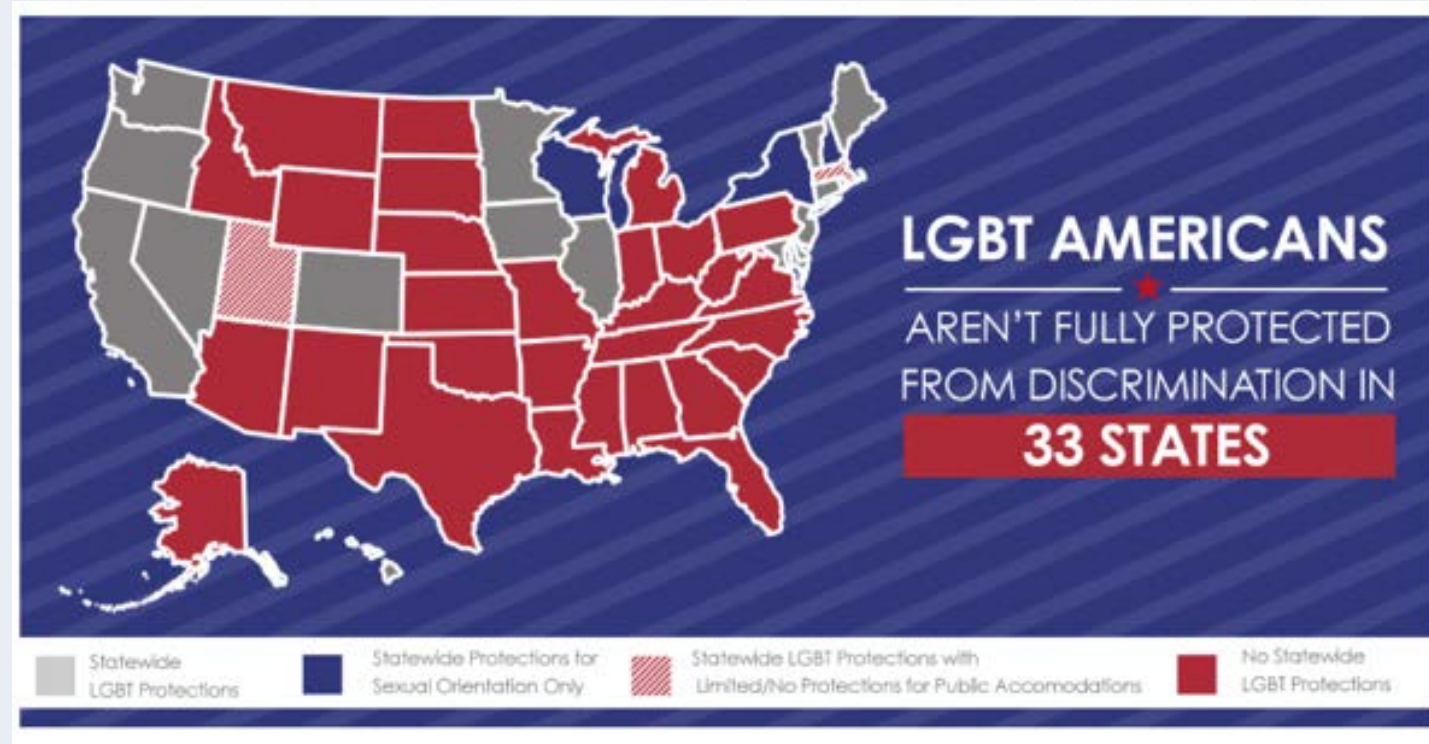
- 1 Promote LGBTQ professional safety and leadership in public health.**
The first resource for LGBTQ expertise is your own staff. Are LGBTQ staff valued? Have you formed an internal advisory group to assist with agency engagement?
- 2 Include LGBTQ community members in policy planning steps.**
The second resource for LGBTQ expertise is local community leadership. Do you routinely make sure we are represented on advisory bodies and review groups? Do you ask the same of grantees?
- 3 Monitor impact of tobacco/cancer on LGBTQ populations.**
In the past two years, 35 states have included LGBTQ measures on their Behavioral Risk Factor Surveillance Survey; including these measures as key demographic variables is becoming routine. Have you asked your state BRFSS to collect these data? Have you fielded community surveys? Do you ask grantees to report LGBTQ measures in program data? Do you urge clinicians to collect these data in health records?
- 4 Establish cultural competency standards for agency and agency-funded programs.**
Do LGBTQ persons know that your program is welcoming? How would we find this out? If it is not clear, we can presume a program is not welcoming.
- 5 Fund community-based programs.**
Local community-based organizations are the best experts in behavior change in this population; funding these organizations directly consistently achieves the greatest level of community engagement.
- 6 Routinely integrate LGBTQ tailored materials into larger campaigns.**
Do your full population campaigns routinely integrate LGBTQ-welcoming materials and practices? Do you ask grantees to do the same?
- 7 Disseminate findings and lessons learned.**
Google "Hawai'i LGBTQ data" to find an excellent example of a state disseminating findings from their own data collection. Be sure to disseminate lessons learned as well; ask us how we can write up a case study of lessons learned and put it on our resource library. Your lessons help others move faster.

Best & Promising Practices



1

Promote LGBT professional leadership and safety in your organization and the arena.





1

Promote LGBT professional leadership and safety in your organization and the arena.

Strategy: Promote nondiscrimination

69% of employers discriminated against the trans man with history at a trans organization.





1

Promote LGBT professional leadership and safety in your organization and the arena.



Join an ERG

All employees are invited and encouraged to participate in diversity activities and events. Click on an ERG name to learn more and Inclusion (ODI) at 646-605-8280 to learn more. Additionally, if you are interested in starting an ERG, please e-mail the ODI at diversity@mountsinai.org.

Ability

- [Black Leaders Advocating for Change and Inclusion \(BLAC\)](#)
- [Asian Resource Network \(ARN\)](#)
- [Faculty of Color Network \(FCoN\)](#)
- [Heritage of Latino Alliance \(HOLA\)](#)
- [Islamic Community of Mount Sinai \(ICMS\)](#)
- [Lesbian, Gay, Bisexual and Transgender Network \(LGBT\)](#)
- [Military/Veterans](#)
- [Women in Science and Medicine \(WiSM\)](#)

Diversity and Inclusion

[Education and Training](#)

[Employee Resource Groups](#)

[Site Diversity Councils](#)

[Celebrating Black History](#)

[Celebrating LGBT Pride](#)

[Celebrating Hispanic-Latino Heritage](#)

[People with Disabilities](#)





1

Promote LGBT professional leadership and safety in your organization and the arena.

Fixing the Flawed Approach to Diversity

EXHIBIT 3 | Rankings of the Most Effective Programs

Intervention	LGBTQ
Antidiscrimination policies	1
Participation in external events and rankings (such as Pride events)	2
Appropriate health care that is transgender inclusive and covers same-sex partners	3
Formal training to mitigate biases and increase cultural competency	4
☆ Bias-free day-to-day experience ¹	5
Blind screening	6
☆ Structural interventions (such as gender-neutral restrooms, nonbinary gender choices on forms)	7

Source: BCG Global Diversity Survey 2018.

¹For example, when management staffs teams and chooses participants who will attend meetings.

²Such as hard metrics for decision making; diverse panels.



1

Promote LGBT professional leadership and safety in your organization and the arena.



http://www.nytimes.com/2015/11/08/style/transgender-restroom-all-gender.html?_r=0



2

Include LGBTQ+ community members in advisory groups.



<http://us.cochrane.org/serving-advisory-panel>



2

Include LGBTQ+ community members in advisory groups.



Policy Issue Brief: Reducing Disparities in Cancer Care for Sexual and Gender Minority Individuals



8

RESEARCH, PATIENT CARE, PRESS RELEASES | JANUARY 16, 2019

Survey Questions Cancer Doctors' Awareness of LGBTQ Issues



2

Include LGBTQ+ community members in advisory groups.

ASCO[®] AMERICAN SOCIETY OF
CLINICAL ONCOLOGY

Policy Issue Brief: Reducing Disparities in Cancer Care for Sexual and Gender Minority Individuals

8

RESEARCH, PATIENT CARE, PRESS RELEASES | JANUARY 16, 2019

Survey Questions Cancer Doctors' Awareness of LGBTQ Issues

ASCO convenes LGBTQ Task Force



3

Collect LGBTQ+ data.

2019: 50% of states ask SGM

2020: 100% of states ask SGM.



Enhanced LGBT Measure As Tested

Across your lifetime, do you consider yourself to be gay, lesbian, bisexual, and/or transgender?

- No
- Yes

[If No continue. If Yes, probe with the following question.]

[If callers show concern about this question, feel free to add the following sentence:] *"LGBT people smoke at higher rates than others; we ask this to ensure we're serving all people equally."*

Thanks, indicate *all* of the following which apply to you:

- Bisexual,
- Gay or
- [for a woman] Lesbian,
- Queer,
- Transgender or gender variant and assigned male at birth,
- Transgender or gender variant and assigned female at birth.

*All square brackets indicate instructions to survey administrators, this is not information that is to be read aloud.



3

Collect LGBTQ+ data.

- 9 different hospitals merged
- No one was on same EHR
- Created advisory group
- Merged onto Epic
- Customized fields
- Patient feedback loop
- Trained all staff, incl. ongoing turnover training
- Considered all ancillary points: face sheets, wristbands, etc.
- Only comp cancer center we know of. Go live date: December 1.
- Possible toolkit forthcoming.





How to start collecting EHR?

We have a full webinar archived on this, if you sign up on the sheet I will send you a copy.



Thundermist forms look like?

Thundermist! HEALTH CENTER		Patient Registration Form	
Name: Last: _____ First: _____ Middle: _____		Preferred Name: _____	
Street Address: _____		City: _____ State: _____ ZIP: _____	
Mailing Address (if different) Street: _____		City: _____ State: _____ Zip: _____	
Home Phone: (____) _____	Date of Birth: _____	Pronouns: she/her, he/him, they/them, ze/zer, other _____	Social Security #: _____
Cell Phone: (____) _____	Month/Day/Year _____/_____/_____		
Work Phone: (____) _____			

Answering these questions is optional for patients under the age of 18.		
What was your sex assigned at birth? <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other _____	Sexual Orientation Do you think of yourself as: <input type="checkbox"/> Straight (Heterosexual) <input type="checkbox"/> Lesbian or Gay <input type="checkbox"/> Bisexual <input type="checkbox"/> Queer <input type="checkbox"/> Something else _____ <input type="checkbox"/> Don't Know	What is your current gender identity? <input type="checkbox"/> Man <input type="checkbox"/> Woman <input type="checkbox"/> Transgender Man (female to male) <input type="checkbox"/> Transgender Woman (male to female) <input type="checkbox"/> Gender Queer/Non-Binary <input type="checkbox"/> Something else _____



4

Establish cultural competency standards for programs.





4

Establish cultural competency standards for programs.

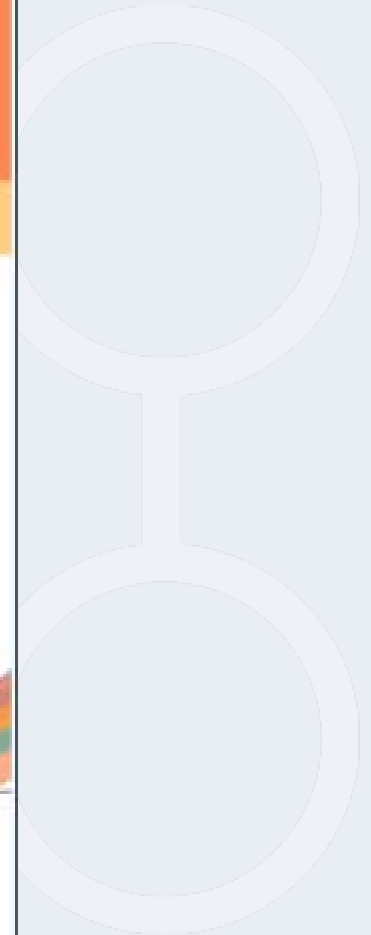
We believe **you can do it**
because we know **you are strong.**

Call the
LGBTQ-friendly
Michigan Tobacco Quit Line at
1-800-784-8669
for help quitting.

Affirmations
People Building Community

For more information
on quitting tobacco, check out our website!
www.goaffirmations.org/quit

290 W. Nine Mile
Ferndale, MI 48220
(248) 398-7105





5

Fund community based programs to promote health equity.

LGBT+ Cancer Support Group

WELCOMING ALL LGBT+ SURVIVORS AND LOVED ONES



2nd Tuesday of every month from 5:30 - 7 pm

Beginning March 12th

People with diverse sexual orientations and gender identities often experience a disproportionate burden from cancer. That's why the Cancer Support Community and Bradbury-Sullivan LGBT Community Center is proud to offer a free, professionally-facilitated support group for LGBT+ folks with cancer in their lives. The LGBT+ Cancer Support Group is an affirming, empowering space to connect with other patients, survivors, and loved ones who truly understand. We hope you'll join us!

Register by calling the Cancer Support Community at 610-861-7555
or emailing info@cancersupportglv.org

Located at Bradbury-Sullivan LGBT Community Center
522 West Maple Street, Allentown, PA 1810148105
www.bradburysullivancenter.org

Parking available at the Community Parking Garage, 13 South 6th Street.

So that no one faces cancer alone.





5


Fund community based programs to promote health equity.





6

Routinely integrate LGBTQ+ tailored materials into existing wellness campaigns.



Cancer in the LGBTQ Communities

In addition to higher risks:

LGBTQ tobacco use rates are:

40%
higher than others.

There are bigger barriers to care:

60%
of oncologists don't feel they know enough to treat LGB people.

80%
of oncologists don't feel they know enough to treat trans people.

national
lgbt cancer network

TOBACCO RELATED
CANCER PROJECT



Queer Cancer/Health Post Cards



Drinking alcohol may ease the pain of queer rejection for a while...

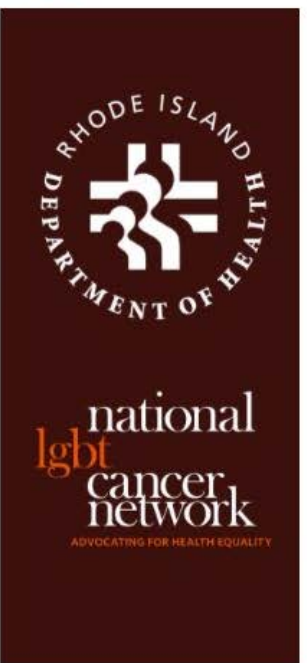
but research shows clear patterns between heavy drinking and multiple types of cancer.

Rates of binge drinking are 44% higher among LGBTQ populations than others.*

We have to take care of ourselves and each other.

If you are concerned about a friend's drinking you can help them to stop. If you think you might be drinking too much talk to your primary care provider. If you do not have a primary care provider, visit <https://cancer-network.org/ri-resources/> to find resources in your area.

*Source: BRFSS 2014-2017, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health





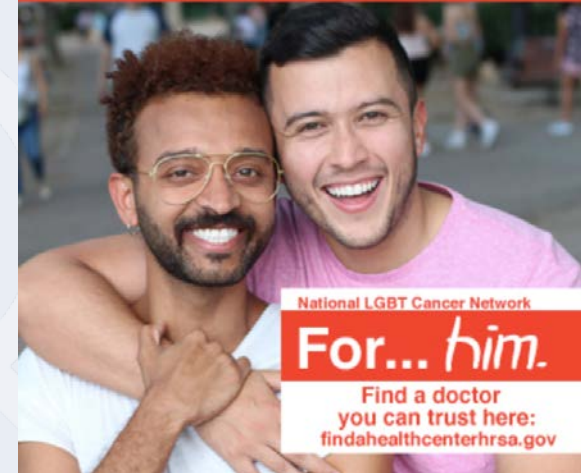
6

Routinely integrate LGBTQ+ tailored materials into existing wellness campaigns.

Why get screened for cancer?



Why get screened for cancer?



Why get screened for cancer?



Why get screened for cancer?





6

Routinely integrate LGBTQ+ tailored materials into existing wellness campaigns.

¿Por qué me hago pruebas de detección de cáncer?



National LGBT Cancer Network
Por... ella.
Encuentra a un(a) doctor(a) de confianza aquí:
findahealthcenterhrs.gov

¿Por qué me hago pruebas de detección de cáncer?



National LGBT Cancer Network
Por... el.
Encuentra a un(a) doctor(a) de confianza aquí:
findahealthcenterhrs.gov

¿Por qué me hago pruebas de detección de cáncer?



National LGBT Cancer Network
Por... nosotros.
Encuentra a un(a) doctor(a) de confianza aquí:
findahealthcenterhrs.gov

¿Por qué me hago pruebas de detección de cáncer?



National LGBT Cancer Network
Por... mi.
Encuentra a un(a) doctor(a) de confianza aquí:
findahealthcenterhrs.gov



Queer Tips



OUT PROUD SMOKE FREE

"I replaced my addiction with meditation and deep breathing. I learned to drink more water, take long walks, and rest."
-Kyoung

For free help to quit smoking, call 1-800-QUIT-NOW
#Queer #CDCTips

lgbt national cancer network
TOBACCO RELATED CANCER PROJECT



OUT PROUD SMOKE FREE

"I used smoking as a 're-set button'; now I 're-set' by taking walks! So worth it." -D

For free help to quit smoking, call 1-800-QUIT-NOW
#Lesbian #CDCTips

lgbt national cancer network
TOBACCO RELATED CANCER PROJECT



OUT PROUD SMOKE FREE

"We quit together after watching a parent die of cancer. We didn't want to go through that with each other."
-Krista & Corrine

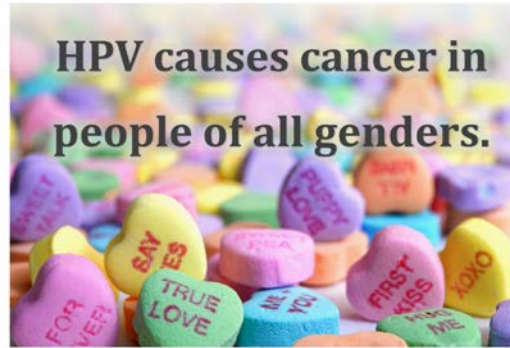
For free help to quit smoking, call 1-800-QUIT-NOW
#Queer #CDCTips

lgbt national cancer network
TOBACCO RELATED CANCER PROJECT



6

Routinely integrate LGBTQ+ tailored materials into existing wellness campaigns.



HPV causes cancer in people of all genders.

The HPV vaccine is recommended through age 26 for those who did not get it when they were younger.

Talk to a health care provider about getting the HPV vaccine.

HPV causes cancer in people of all genders.

The HPV vaccine is recommended through age 26 for those who did not get it when they were younger.



Talk to a health care provider about getting the HPV vaccine.



Nearly all people regardless of gender will get HPV.

The HPV vaccine is recommended through age 26 for those who did not get it when they were younger.

Talk to a health care provider about getting the HPV vaccine.



**Alaska
Cancer
Partnership**



7

Disseminate findings and lessons learned.





7

Disseminate findings and lessons learned.



Youth Risk Behavior Survey



The YRBS is the strongest assessment tool that Outright has to track harmful behaviors and some positive behaviors among Vermont queer youth and their heterosexual peers. It is important to note that until 2005, students were not able to identify their sexual orientation on the survey (all that was asked was same-sex behavior). In that same year, questions about bullying were introduced. As of the 2017 survey, high school students were invited to share a yes/no answer to a question about whether they identified as trans.



7

Disseminate findings and lessons learned.



Health Disparities Faced by Transgender Youth

Results from the 2017 Vermont High School YRBS

July 2019

Everyone has a gender identity. For transgender people this identity does not align with the sex they were assigned at birth. Gender identity is not the same as sexual orientation which refers to one's attraction to others. While many transgender youth thrive during adolescence, stigma, discrimination, and other factors put them at risk for negative experiences and behaviors.^{1,2}



In 2017, 1.3% of Vermont high school students identified themselves as transgender.

Another 1.6% said they were not sure if they are transgender.

Both transgender youth and youth who are not sure about their gender identity face similar health risks and experience similar health disparities. These risks exceed those experienced by lesbian, gay, and bisexual youth. This brief focuses on the risks faced by youth who identified themselves as transgender.

Violence

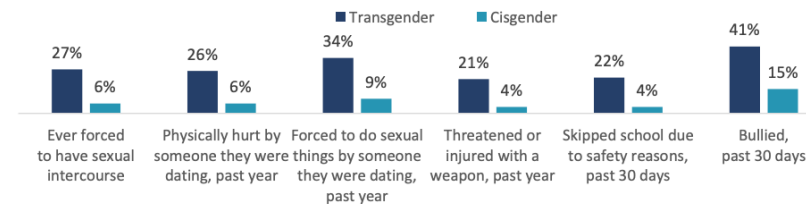
Transgender youth are more likely to experience physical, emotional, and sexual violence compared to cisgender students. In Vermont, transgender students were five times as likely to have been threatened or injured with a weapon on school property or skip school because they felt unsafe compared to their cisgender peers. They are also four times as likely to have experienced physical or sexual dating violence or been forced to have sexual intercourse when they did not want to. Two in five transgender students reported being bullied during the previous month, nearly three times that of their cisgender peers.

KEY DEFINITIONS

- The terms transgender and cisgender are not indicative of sexual orientation, hormonal makeup, physical anatomy, or gender expression – how one is perceived in daily life.
- **Sexual Orientation:** A persons enduring physical, romantic, emotional, and/or other form of attraction to others.
- **Gender Identity:** One's internal sense of being male, female, neither of these, both, or other gender(s).
- **Transgender/Trans:** An umbrella adjective for people whose gender identity differs from the sex they were assigned at birth.
- **Cisgender/Cis:** An adjective that means "identifies as their sex assigned at birth."

Source: [Outright Vermont](#)

Physical, Emotional, and Sexual Violence



¹ CDC (2017) Sexual Minority Youth in [Youth Risk Behavior Survey: Data Summary & Trends Report 2007-2017](#).

² Outright Vermont. [Education and Outreach](#). Accessed June 2019.



Action Steps

1. Share that survey!
2. Foster LGBTQ+ employee leadership.
3. Get advisors.
4. Check and fix how we see you.



Thank you.

For more information contact us at info@cancer-network.org.

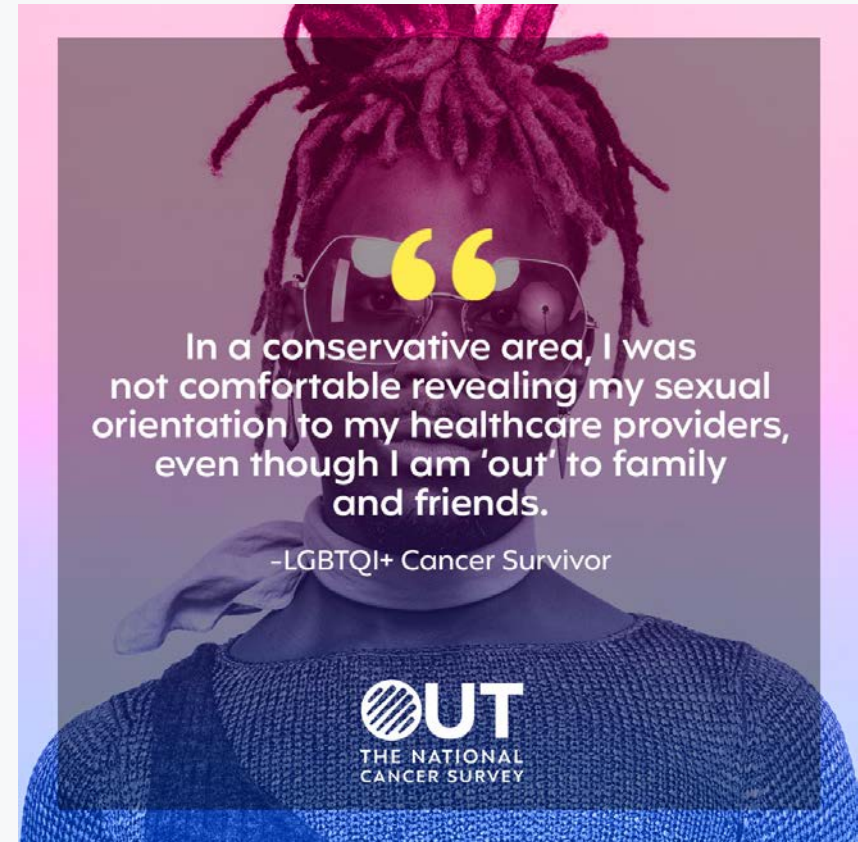
Questions? Comments?

Please take our poll! Will pop up on your screens shortly.

OUT: The National Cancer Survey

[Out: The National Cancer Survey](#) is a national survey specifically for LGBTQ+ cancer survivors.

[Share the survey](#) with LGBTQ+ cancer survivors to help inform cancer care for the estimated 81,000 LGBTQ+ people who are diagnosed with cancer every year.



March Networking Webinar - Registration Open!

“Colorectal Cancer Awareness & COVID-19”

March is Colorectal Cancer Awareness Month! Join our March webinar to learn more about colorectal cancer screening, related health disparities, and the impacts of COVID-19.

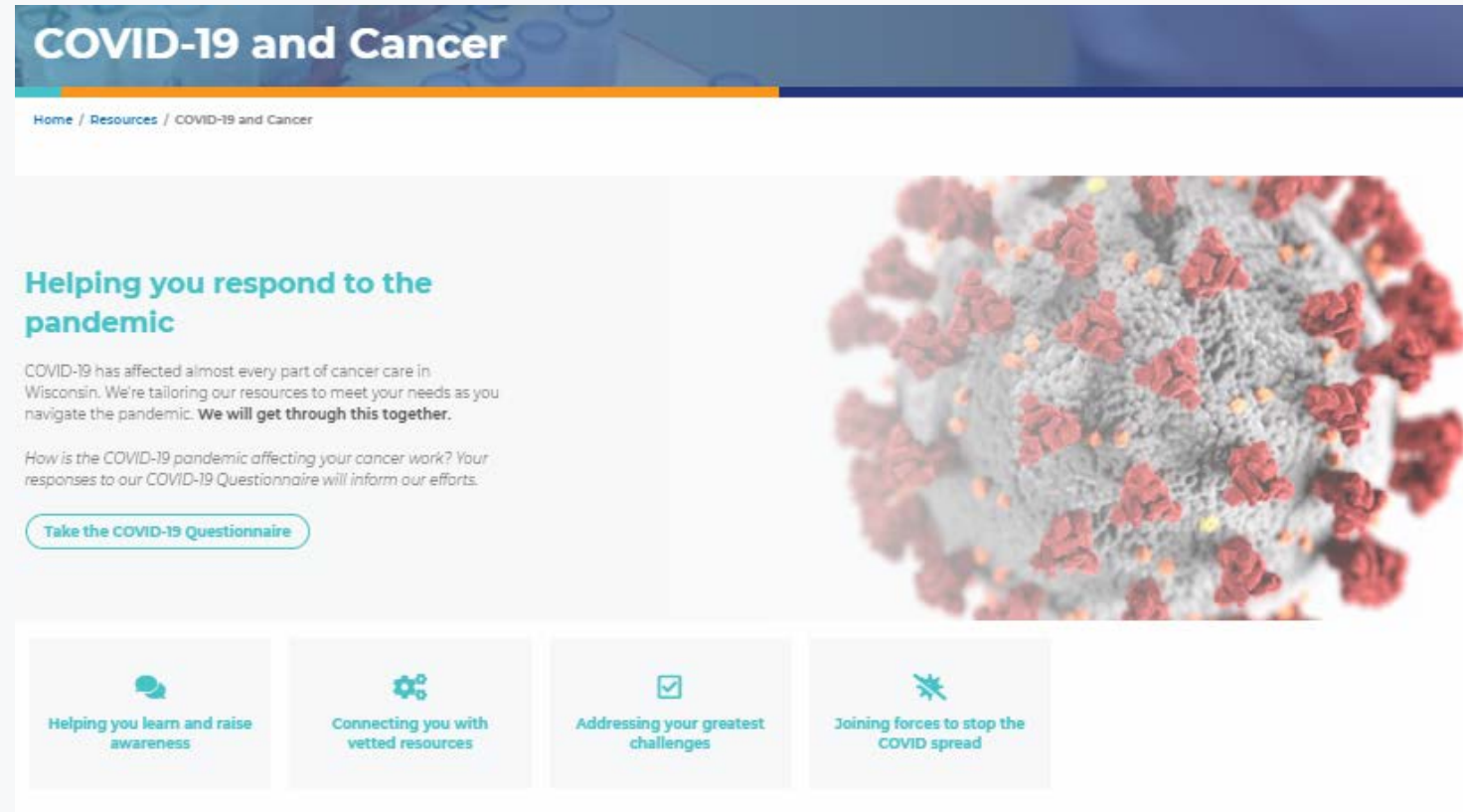
Guest speaker details coming soon.

Register here: <https://wicancer.org/events/webinars/>



Check out our COVID-19 & Cancer Resource Page

- Social media toolkits
- Links to research articles
- Past COVID-19 webinars
- Tips for local governments & businesses
- Fact sheets



The screenshot shows the 'COVID-19 and Cancer' resource page. At the top, there's a blue header with the title 'COVID-19 and Cancer' and a breadcrumb trail 'Home / Resources / COVID-19 and Cancer'. Below the header, there's a large image of a coronavirus particle. To the left of the image, the text reads: 'Helping you respond to the pandemic'. Below this, it says: 'COVID-19 has affected almost every part of cancer care in Wisconsin. We're tailoring our resources to meet your needs as you navigate the pandemic. **We will get through this together.**' There's a link: 'How is the COVID-19 pandemic affecting your cancer work? Your responses to our COVID-19 Questionnaire will inform our efforts.' Below that is a button: 'Take the COVID-19 Questionnaire'. At the bottom, there are four icons with text: 'Helping you learn and raise awareness', 'Connecting you with vetted resources', 'Addressing your greatest challenges', and 'Joining forces to stop the COVID spread'.

Thank you!

Thank you for joining!
Stay well!

