



## GPs at the Deep End

### Pioneer Scheme Day-release programme

Wednesday 15<sup>th</sup> November 2017

Horselethill Road, Glasgow

## LGBTQ+ Health Inequalities

With Dr Thom O'Neill, Paediatrician and Stonewall Ambassador

### Barriers to Healthcare

- LGBT people of any age group prefer to attend acute (A&E) services rather than GP surgery
- 54% would prefer not to see their registered GP due to concerns about how they would be perceived and treated
- Patients will sometimes attend the acute services multiple times with the same issue and prefer anonymous interaction with healthcare professionals
- Trans patients in particular have issues with gaining correct diagnosis for problems especially if it is unclear where they are in the transition process, leading to potential missed diagnoses
- Trans patients also have concerns with regards to record keeping – i.e. if medical records have them with incorrect name and gender
- Lesbian and bisexual girls also have an increased risk of being obese and developing binge eating/over eating behaviour
- LGBT youth have higher rates of anxiety and depression than their peers and experience higher rates of bullying both at school and at home

### Improving Healthcare

Thom has worked with rural GPs in Arran and other areas to try and improve how rural health services could be made more accessible for lesbian, gay, bisexual and transgender young people. The addition of posters in waiting rooms has helped to increase patient attendance and allow patients to feel comfortable enough to disclose problems. Evidence has shown that even subtle visual clues can make people feel comfortable enough to disclose issues they would otherwise not have done.

Posters can be seen at: <http://ruralgp.scot/lgbtq-plus/>

Programmes are in place with different LGBT groups to try and improve knowledge among healthcare professionals

- Stonewall Scotland
  - o Have champion programme
  - o Can run workplace days to increase awareness
  - o <http://www.stonewallscotland.org.uk/>
- LGBT Youth Scotland
  - o Have charter which can be signed up to
  - o Good sign post for young people
  - o Provide youth clubs for LGBT youth
    - Youth groups have been found to be most protective factor to avoid self harm and suicide
    - Youths prefer to attend these services rather than NHS at time of crisis
  - o <https://www.lgbtyouth.org.uk/>
- GIRES
  - o Gender Identity Research and Education Society
  - o Provide online learning modules for GPs in conjunction with RCGP
  - o Run youth camps
  - o <https://www.gires.org.uk/>
- Mermaids
  - o Support and workshops for families
  - o <http://www.mermaidsuk.org.uk/>

When taking a sexual history from a young patient, studies have shown that they would prefer to be asked gender neutral questions rather than specific questions which will allow them to answer and disclose more if they feel comfortable – i.e. ‘are you seeing anyone?’ or ‘do you have a partner?’ rather than ‘do you have a boyfriend/girlfriend?’

### **Transgender Youth**

Previously all trans patients under 18 needed to attend the Tavistock in London for treatment and review. There has been a recent change to the Sandyford guidelines and they now see all ages for gender identity services. The current waiting list is about 9-10months.

- Pre-puberty
  - o No treatment
  - o Psychology input only
- In puberty – needs to be Tanner stage 2  
([http://www.childgrowthfoundation.org/CMS/FILES/Puberty\\_and\\_the\\_Tanner\\_Stages.pdf](http://www.childgrowthfoundation.org/CMS/FILES/Puberty_and_the_Tanner_Stages.pdf))
  - o Can start hormone blockers
  - o Same medication as used for precious puberty
  - o Are reversible
  - o Shown to relieve a lot of distress symptoms
  - o Distress is normally around secondary sexual characteristics rather than anatomy and hormone blockers help with this
- Over 16s
  - o If found to be competent to consent then can start cross-sex hormones
- Over 18s

- Have access to gender reassignment surgery but this is normally done later if the person chooses to progress to this stage
- Long waiting list and at present only one person in UK is providing service in Brighton

### **What can we do as GPs to support patients waiting to be seen at gender identity clinic?**

- Inform there is long waiting list
- Try and avoid using pill to control distress from periods as can alter endocrinology tests
- Sandyford professional helpline can provide advice
- HEADSS assessment – psychological interview for adolescents
- Signpost to Youth Clubs
- Regular reviews and catch-ups
- Contacting the school with patients permission
- Engaging with parents
- Signpost to YouTube personalities who have documented their own transition e.g. Alex Bertie

### **Same-Sex Parents**

- If two mums
  - If one partner has given birth she has automatic parental rights
  - If in relationship prior to the child being born then both mums have parental rights
  - If relationship develops after child is born then need to go through legal process to obtain parental rights
- If two dads
  - If in relationship together when child is adopted then both have parental rights
  - If new partner then legal process for parental rights

### **Mental Health Problems in Older Children and Adolescents**

Mental health problems in child and adolescents are increasingly common and current estimates suggest that 1 in 10 children aged between 5-16yrs suffer from a diagnosable mental health disorder. There has been an increase in self harm in this age group also with admissions for self harm rising by 68% in past 10 years. As this problem is worse in LGBTQ+ youth groups we felt this module was a good tie in to the morning session about LGBTQ+ health inequalities.

The main learning points we gained from the session are as follows:

- Use of SCOFF in diagnosing eating disorders
- Online resources for children with mental health problems
  - Young Minds
  - Connect-ED
- Normal vs abnormal teenage behaviour in diagnosing mental health problems
- Use of E-KIS in mental health presentation
- Rise of cyber-bullying
  - How to recognise this
  - Resources for parents and children
  - Reporting of cyber-bullying