

Gathering Sexual Orientation and Gender Identity Data

What is Health Equity

At UW Medicine, we believe that healthcare is a fundamental human right and everyone should have the same access and opportunities for the best possible outcomes.

Healthcare equity refers to the principle of ensuring that all individuals have access to equitable care which is fundamental to maintaining consistent quality, irrespective of personal characteristics such as gender identity, sexual orientation, race, ethnicity, language, and disabilities. Achieving true quality healthcare necessitates a commitment to equity. Healthcare equity means recognizing that these characteristics should not result in unfair and avoidable differences in health outcomes.

The principles of Health equity include: equal access to care, fair treatment, health outcomes, cultural adaptations, and addressing of social determinants of health. Healthcare equity is a fundamental principle of public health and healthcare policy, aiming to create a healthcare system that is just, fair, and accessible to all, regardless of individual differences or social circumstances. Achieving healthcare equity requires ongoing efforts to identify and eliminate barriers to equal access and treatment.

We at UWM are committed to transforming the way care is provided to eliminate inequities.

Federal and State Laws

In the 2021 legislative session, the Washington State Legislature enacted new reporting obligations (HB 1272) concerning hospital data, specifically for inpatient and observation records utilized in populating the CHARS database. As per [RCW 43.70.052\(6\)](#) and [WAC 246-455-025](#), all hospitals are mandated to collect and submit comprehensive patient self-identified demographic information, encompassing details such as gender identity, sexual orientation, race, ethnicity, language, and disabilities.

Washington is the first state in the country to require all hospitals to report this level of detailed information for patients. Early implementation focused heavily on modifying EHR systems, mapping new codes to other reporting systems and developing workflows. While much has been accomplished, we seek to continuously improve data collection, patient experience and utility of demographic data reported. Tools and resources will be added to this webpage as they become available. – Washington State Hospital Association

Why do we collect Sexual Orientation and Gender Identity (SOGI)?

Two Spirit, Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and all sexual and gender minority (2SLGBTQIA+) people experience health disparities and require care and services that specifically address their unique needs. Implementing the practice of collecting Sexual Orientation and Gender Identity (SOGI) information from all patients throughout UW Medicine and Fred Hutch Cancer Center fosters a healthcare environment where providers can deepen their understanding of individual patients. This enhanced knowledge enables healthcare professionals to deliver culturally responsive and patient-centered services. SOGI data collection also allows UW Medicine the opportunity to learn more

about our patient population, while measuring the access to care and quality of care provided to people of all sexual orientations and gender identities.

Sexual Orientation

Sexual orientation refers to an individual's enduring emotional, romantic, or sexual attraction to other people. Common orientations can include heterosexuality (attraction to the opposite gender), Lesbian or Gay (attraction to the same gender), and bisexuality (attraction to both genders). Other terms, such as pansexuality, describe attraction regardless of gender. Sexual orientation is a complex aspect of human identity, and individuals may experience their sexuality along a spectrum.

Gender Identity

Gender Identity refers to an individual's internal sense of gender (woman/man/girl/boy/nonbinary...). Gender identity does not always align with the sex assigned to them at birth. Gender identity is a personal and subjective experience of one's own gender, which can include identification as man, woman, non-binary, and/or genderqueer (a blend of both, or neither). Gender identity is distinct from sexual orientation and can encompass a range of gender expressions and roles.

Pronouns

A word to refer to someone you are talking about (she/her, they/them, he/him...) These words often align with someone's gender identity/expression. There are also less well-known pronouns, and people who use multiple pronouns (she/they, ze/zir...) It is important to use people's pronouns as intentionally and repeatedly using the wrong name and pronouns to refer to an employee who is transgender and/or nonbinary could contribute to an unlawful hostile work environment and is a violation of Title VII.

Name in Use

Name that a person uses which may be different from their legal name. Five great reasons to start using Name in Use when speaking to, or about, our patients, or speaking to other staff:

- **Demonstrates Respect for Individual Identity:** Using the term Name in Use acknowledges that the name an individual identifies with is not merely a preference but an integral part of their identity. It demonstrates respect for their self-identified name and affirms their right to be addressed accordingly.
- **Validates and Affirms:** Referring to a person by their Name in Use validates their gender identity, personal history, and lived experiences. It shows that you recognize and affirm their authentic self, fostering a sense of belonging and acceptance.
- **Minimizes Misgendering:** Using the Name in Use helps reduce the risk of misgendering individuals by ensuring that their gender identity is accurately reflected in their name. It demonstrates sensitivity and a commitment to creating an inclusive environment where individuals are seen and acknowledged for who they are.
- **Challenges Assumptions:** Emphasizing the Name in Use challenges the assumption that legal or official names are inherently more valid or important than the names individuals choose for themselves. It recognizes that individuals have agency in determining their own identities and allows them to define how they want to be addressed.

- **Cultivates Trust and Connection:** By using the Name in Use, you build trust and rapport with our patients by showing that you value their identity and respect their autonomy. This fosters a stronger connection, improves communication, and enhances the overall experience for both patients and staff.

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Frequently Asked Questions (FAQ)

Why are UW Medicine Hospitals asking me about my Sexual Orientation and Gender Identity (SOGI)

Understanding your Sexual Orientation and Gender Identity helps us provide inclusive and personalized healthcare that meets your personal health needs.

How will my SOGI data be used by UW Medicine?

You are a part of our patient population and your health matters. The gathered SOGI data is used to enhance our healthcare services, address disparities, and ensure a supportive environment for all patients.

Is providing my SOGI information mandatory, or can I decline to answer?

We understand that providing SOGI information is personal and like all demographic data it is voluntary.

What if I need to change or update my SOGI data?

You can always update your SOGI data through MyChart or during your visit with our healthcare providers.

Will UW Medicine ensure that my SOGI data is confidential?

Yes, your SOGI data is maintained in your personal medical records.

How does collecting SOGI data contribute to healthcare disparities and outcomes?

SOGI data allows researchers and healthcare providers to see how health outcomes differ among LGBTQ+ communities compared to the general population. This data can reveal areas where LGBTQ+ individuals face higher risks for certain health issues, like mental health, or specific cancers.

Will my healthcare provider treat me differently based on my SOGI information?

No, your healthcare provider is committed to providing equitable care to all patients, regardless of their Sexual Orientation or Gender Identity.

Are these questions a part of a larger effort to promote 2SLGBTQ+ inclusivity at UW Medicine?

Yes, collecting SOGI data is part of our commitment to fostering a more inclusive and welcoming healthcare environment for all individuals.

How does collecting SOGI data align with patient-centered care at UW Medicine?

Patient-centered care involves understanding and respecting individual differences. SOGI data helps us provide care that is sensitive to your unique circumstances.

How does collecting SOGI data inform health screens?

Patient care and health screenings can be directly influenced by a patient's reported gender identity or sexual orientation:

Preventive Health Screenings

Example for Sexual Orientation:

- Anal Cancer Screening: Men who have sex with men (MSM) are at higher risk for anal cancer due to the higher prevalence of HPV. Knowing a patient's sexual orientation can prompt healthcare providers to recommend anal cancer screenings and HPV vaccinations that might not be considered otherwise.
- Hepatitis Vaccination and Screening: MSM are at a higher risk for Hepatitis A and B. Knowing a patient's sexual orientation can lead healthcare providers to recommend vaccination and regular screening for these conditions, which might not be routine for the general population.

Example for Gender Identity:

- Breast and Cervical Cancer Screening: Transgender men (assigned female at birth) who have not undergone mastectomy still need routine breast cancer screenings. Similarly, transgender men with a cervix need regular cervical cancer screenings. Without knowing a patient's gender identity and corresponding anatomy, these critical screenings might be overlooked.
- Prostate Cancer Screening for Transgender Women: Transgender women (assigned male at birth) who have undergone feminizing hormone therapy still have a prostate and are at risk for prostate cancer. Knowing the patient's gender identity helps ensure they receive appropriate prostate cancer screening.

Mental Health Services

Example for Sexual Orientation and Gender Identity:

- Mental Health Screening: LGBTQ+ individuals are at a higher risk for mental health issues such as depression, anxiety, and suicidal ideation. Acknowledging a patient's SOGI can lead to more vigilant mental health screenings and early interventions, ensuring that patients receive the necessary support and counseling.
- Trauma-Informed Care: LGBTQ+ individuals, particularly transgender people, may have higher incidences of trauma due to discrimination and violence. Recognizing a patient's SOGI can lead to referrals to trauma-informed care specialists who understand the unique experiences and needs of LGBTQ+ individuals.

Substance Abuse Counseling

Example for Sexual Orientation:

- Substance Use Counseling: Studies have shown higher rates of substance use among LGBTQ+ individuals. Recognizing a patient's sexual orientation can prompt healthcare providers to screen more thoroughly for substance use issues and offer tailored counseling and support services.
- Smoking Cessation Programs: LGBTQ+ individuals have higher rates of tobacco use compared to their heterosexual counterparts. Knowing a patient's sexual orientation can prompt healthcare providers to offer tailored smoking cessation programs that address the specific stressors and social factors influencing tobacco use in the LGBTQ+ community.

Hormone Therapy and Cardiovascular Risk

Example for Gender Identity:

- Cardiovascular Monitoring for Transgender Patients: Transgender individuals undergoing hormone therapy may have an increased risk for cardiovascular diseases. Knowing a patient's gender identity and hormone therapy status allows providers to monitor cardiovascular health more closely and adjust treatments to mitigate these risks.
- Bone Density Monitoring for Transgender Patients: Transgender individuals, particularly those on hormone therapy, may be at risk for decreased bone density. Knowing a patient's gender identity and hormone therapy status can prompt regular bone density scans and preventive measures such as calcium and vitamin D supplementation or other treatments.

Sexually Transmitted Infections (STIs)

Example for Sexual Orientation and Gender Identity:

- Targeted STI Screenings: Certain populations, such as MSM and transgender women, have higher rates of STIs, including HIV. Knowing a patient's sexual practices and gender identity can lead to more frequent and targeted screenings, early detection, and treatment, thereby improving health outcomes and reducing transmission rates.
- Pre-Exposure Prophylaxis (PrEP) for HIV Prevention: LGBTQ+ individuals, especially MSM and transgender women, have a higher risk of contracting HIV. Knowing a patient's sexual orientation and practices can lead healthcare providers to recommend PrEP, a daily medication that significantly reduces the risk of HIV infection.

Counseling for Gender-Affirming Care

Example for Gender Identity:

- Gender-Affirming Care: For transgender patients, understanding their gender identity can lead to appropriate referrals for gender-affirming surgeries, hormone therapy, and mental health support. This holistic approach is essential for the patient's overall well-being and can significantly impact their quality of life.
- Voice Therapy for Transgender Individuals: For transgender patients, voice therapy can be an important part of their transition. Knowing a patient's gender identity can lead to appropriate referrals for voice training and therapy to help align their voice with their gender identity.