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Discrimination in Healthcare: Perceptions among LGBTQ Individuals in the Metro and the Nonmetro

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Abstract

The LGBTQ communities in the nation report experiences of discrimination across many areas of life. This research explores the healthcare experiences of LGBT population in the metro and the nonmetro geographies of the nation. Data are from a national survey of adults conducted by the Kaiser Family Foundation and Washington Post during November/December 2022. The results show that the LGBT population is discriminated in healthcare; discriminative practices such as failing to treat the LGBT patient with dignity and respect are more pronounced in the nonmetro.

Introduction

LGBTQ is an acronym for “lesbian, gay, bisexual, trans, and queer” identities; see Table 1 for definitions. The LGBTQ communities in the nation report experiences of discrimination across many areas of life, from housing to healthcare². Furthermore, 51% of all LGBTQ people have experienced violence because of their gender identity³. This paper analyzes data from a national survey of adults, including trans, conducted by the Kaiser Family Foundation and Washington Post⁴. Research questions addressed include:

- 1) What proportion of population in the metro and the nonmetro identifies itself as LGBT?
- 2) Is one’s sexual orientation related to one’s childhood experiences such as happiness, homelessness, etc.?

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² <https://www.americanprogress.org/article/discrimination-experiences-among-lgbtq-people-us-2020-survey-results/>.

³ <https://www.rwjf.org/en/insights/our-research/2017/10/discrimination-in-america--experiences-and-views.html>.

⁴ <https://ropercenter.cornell.edu/ipoll/study/31120179>.

- 3) Do LGBTs rate their satisfaction in life similar to others, cisgenders?
- 4) What is the typical healthcare experience for a transgender?

- 5) Do trans individuals get treated by their doctor or other healthcare providers with respect?

Table 1: Definitions

Term	Definition
Lesbian	A woman who is emotionally, romantically or sexually attracted to other women.
Gay	A person who is emotionally, romantically or sexually attracted to members of the same gender.
Bisexual	A person emotionally, romantically or sexually attracted to more than one gender, though not necessarily simultaneously, in the same way or to the same degree.
Transgender	An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth. Being transgender does not imply any specific sexual orientation. Therefore, transgender people may identify as straight, gay, lesbian, bisexual, etc.
Queer	A term people often use to express a spectrum of identities and orientations that are counter to the mainstream. Queer is often used as a catch-all to include many people, including those who do not identify as exclusively straight and/or folks who have non-binary or gender-expansive identities.

Methodology

The survey, fielded during November / December 2022, polled 1,338 individuals, majority of them, 55%, were females. Of the 1,338 respondents, 515 were trans; the rest, n = 823, were cisgender.

Table 2 lists the salient variables used in data analysis. Measures of central

tendency, dispersion, and correlations were used to describe variables. Chi-square was used to test for independence in contingency tables and an econometric model with dummy explanatory and dependent variables was calibrated to explore the relationship among healthcare variables and LGBT identity.

Table 2: Variables and Operational Definitions

Variable	Definition
Metro	Based on resident's home zip code; 1 = Metro; 2 = Nonmetro
Q1f: life satisfaction	1 = very satisfied, 2 = somewhat satisfied, 3 = somewhat dis-satisfied; 4 = very dis-satisfied.
LGBT	1 = LGBT; 2 = Not LGBT
q4: would you describe your childhood as	1 = Very happy; 2 = Somewhat happy; 3 = Somewhat unhappy; 4 = Very unhappy
<p>Growing up as a child or teenager, did you</p> <p>q7_a: participate in youth sports q7_b: have friends you enjoyed spending time with q7_c: experience homelessness or get kicked out of your home q7_f: have alcohol or drug use problems, including addiction q7_g: experience serious mental health problems, such as depression or anxiety</p>	1 = Yes; 2 = No
<p>Thinking about your own life these days, how often, if at all, do you feel discriminated against because of your:</p> <p>q2_b: gender identity q2_c: sexual orientation</p>	1 = Frequently; 2 = Sometimes; 3 = Seldom; 4 = Never
<p>q3_a: refused health care from a health care provider or someone else working in a health care setting</p>	1 = Yes; 2 = No
<p>Thinking about your experiences getting health care, how (easy) or (difficult) is it to find:</p> <p>q8_a: a health care provider who treats you with dignity and respect q8_c: health care that you can afford q8_d: health care at a location that is easy for you to get to q8_e: a health care provider who you can get an appointment with quickly</p>	1 = Very easy; 2 = Somewhat easy; 3 = Somewhat difficult; 4 = Very difficult
<p>Q20: In general, how much do you feel the health care providers you have come into contact with know about providing health care for trans people?</p>	1 = A lot; 2 = Some; 3 = Not too much; 4 = Nothing at all
<p>Have you ever:</p> <p>Q21_b: had to teach a doctor or other health care provider about trans people so that you could get appropriate care Q21_d: had a doctor or other health care provider refuse to acknowledge your preferred gender identity and instead refer to your sex assigned at birth Q21_e: been asked unnecessary or invasive questions about your gender identity that were not related to the reason for your visit</p>	1 = Yes; 2 = No

Findings

Typical Respondent and the LGBT Population

A typical respondent is from the metro, White, female, and 45 years old with a college degree (Table 3). More than four in five LGBT individuals live in the metro (Table 4). Overall, life satisfaction for the LGBT population is lower than the general, cisgender population (Table 5).

Table 3: Typical Respondent

Variable	Central Tendency
Place of residence	Metro ; Mode = 80%
Sex	Female ; Mode = 55%
Race	White ; Mode = 79%
Age	45 years ; Median
Education	College ; Mode = 42%
Income	\$40,000 - \$89,999 ; Mode = 37%
N	Ranges from 307 - 1337

Table 4: Place of Residence, LGBT Individuals

LGBT	Place of Residence		
	Suburb	Urban	Rural
Not LGBT	62%	49%	67%
LGBT	38%	51%	33%
N	624 (47%)	543 (41%)	156 (12%)

Note: $\chi^2 = 27.8$, $p < .05$; $\phi = .145$.

Table 5: Life Satisfaction, LGBT vs General Population

Life Satisfaction	LGBT	
	No	Yes
Very Satisfied	32%	18%
Somewhat Satisfied	45%	47%
Somewhat Dissatisfied	19%	26%
Very Dissatisfied	4%	9%
N	759	578

Note: $\chi^2 = 44.35$, $p < .05$; $\phi = .18$.

Correlates of LGBT Identity

Logistic model was used to model the correlates of LGBT identity. Five predictors were used in the analysis: childhood happiness, q4 in Table 2, discrimination experiences based on gender identity and sexual orientation, questions 2_b and 2_c in Table 2, and the categorical variables “metro” and “homelessness”.

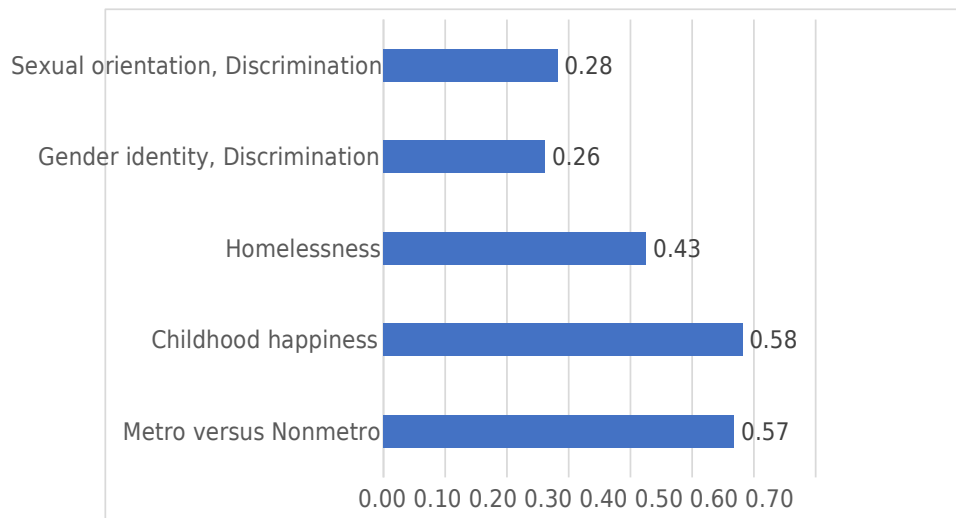
Table 6 lists the parameter estimates. All variables, except “homelessness”, were statistically significant at the conventional $p < .05$ level. An unhappy childhood, metro living, and discrimination experiences are the correlates of LGBT identity. The e^b column shows the odds ratio for a unit increase of the corresponding variable. The odds, when converted to probabilities, indicate that the likelihood of one taking on the LGBT identity given that one lives in the metro is .57. Discrimination experiences and unhappy childhood are also salient predictors of LGBT membership (Figure 1).

Table 6: Maximum Likelihood Estimates of Parameters

Parameter		DF	Estimate	Standard Error	Wald Chi-Square	Pr > ChiSq	Exp(Est)
Intercept		1	5.3454	0.6183	74.7396	<.0001	209.634
metro	1	1	0.2753	0.1293	4.5319	0.0333	1.317
q4		1	0.3297	0.1140	8.3671	0.0038	1.390
q7_c	0	1	-0.3003	0.1572	3.6502	0.0561	0.741
q2_b		1	-1.0370	0.1332	60.5941	<.0001	0.355
q2_c		1	-0.9335	0.1455	41.1584	<.0001	0.393

Odds Ratio Estimates			
Effect	Point Estimate	95% Wald Confidence Limits	
metro 1 vs 2	1.734	1.045	2.879
q4	1.390	1.112	1.739
q7_c 0 vs 1	0.548	0.296	1.016
q2_b	0.355	0.273	0.460
q2_c	0.393	0.296	0.523

Figure 1: Probability Estimates, Predictors of LGBT Identity



Healthcare Experiences of LGBT Individuals

Sixteen percent of LGBTs have been refused healthcare from a healthcare setting, for example, physician's office; more LGBT individuals shop for healthcare because one in four of them do not have a personal healthcare provider that they feel comfortable consulting with. In fact, more LGBT individuals than

cisgender find it difficult to find healthcare providers who treat LGBT individuals with dignity and respect, 38% of the LGBTs compared to 23% for the general population. Table 7 shows that a large proportion of LGBT individuals find it difficult to get healthcare appointments at easy-to-access locations.

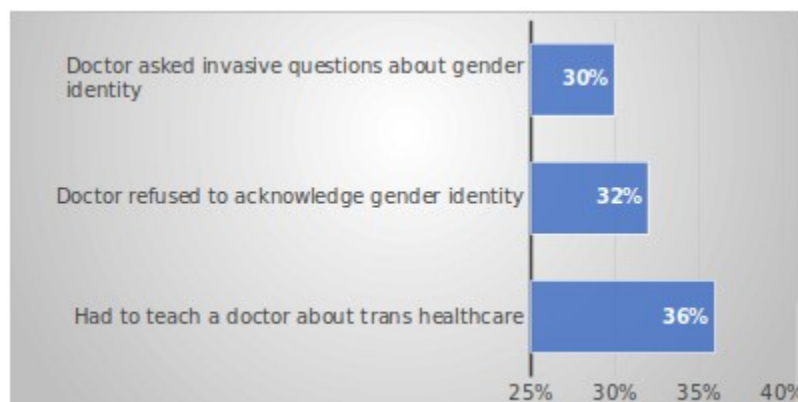
Table 7: Experiences with Healthcare, LGBT versus the General Population

Difficult to find a healthcare...	LGBT	Others	χ^2 p
provider who treats you with respect	38% (n=577)	23% (n=758)	89.57; <.05
that you can afford	45% (n=577)	34% (n=759)	26.23; <.05
location that is easy to get to	34% (n=577)	20% (n=759)	55.47; <.05
Appointment quickly	52% (n=577)	36% (n=759)	48.39; <.05

More than one in three trans individuals report that they had to teach a doctor or other healthcare provider about appropriate care for trans people. Furthermore, more than 30% of trans individuals had to endure not only invasive

questions about gender identity, but also had the doctor / healthcare provider refuse to acknowledge trans individuals preferred identity (Figure 2).

Figure 2: Experiences with Healthcare, Transgender Population



Note: Response numbers range from 510 to 511.

Table 8 shows metro-nonmetro differences in perceptions about healthcare encounters by trans people. Overall, the trans population in the nonmetro faces more discrimination than their metro counterparts. For example, although 31%

of the nonmetro trans population have health insurance for gender-affirming treatment, compared to 26% of the trans population in the metro, more in the nonmetro have been refused such treatment (Table 8).

Table 8: Perceptions about Healthcare Experiences: Trans Population in the Metro and the Nonmetro

Variable	Metro	Nonmetro
Q21_b: Had to teach a doctor about trans people	21% (n=227)	35% (n=49)
Q21_d: Doctor refused to acknowledge preferred gender identity	22% (n=227)	44% (n=49)
Q21_e: Have been asked invasive questions unrelated to the visit	22% (n=204)	36% (n=44)
Q41_b: Doctor refused to provide gender-affirming treatment	13% (n=204)	25% (n=44)
Q41: Health insurance covers gender-affirming treatments	26% (n=186)	31% (n=42)

Summary and Conclusion

This paper explores the healthcare experiences of LGBT population in the metro and the nonmetro geographies of the nation. Data are from a national survey of adults conducted by the Kaiser Family Foundation and Washington Post during November and December, 2022.

Research questions and related findings are given below:

- 1) What proportion of population in the metro and the nonmetro identifies itself as LGBT?
Four in five LGBT individuals live in the metro.

- 2) Is one's sexual orientation related to one's childhood experiences such as happiness, homelessness, etc.?

An unhappy childhood is a predictor of being an LGBT individual, the correlation between the variables is 0.58.

- 3) Do LGBTs rate their satisfaction in life similar to others, cisgenders?

No; more than one in three LGBT individuals are dis-satisfied with their life, overall.

about the barriers to equity in healthcare for the LGBT population.

- 4) What is the typical healthcare experience for a transgender?

More than one in three trans individuals indicate that they had to teach a doctor or other healthcare provider about appropriate care for trans people.

- 5) Do trans individuals get treated by their doctor or other healthcare providers with respect?

No, more than 30% of trans individuals had to endure invasive questions about gender identity unrelated to the healthcare visit.

The results show that LGBT population is discriminated in healthcare; discriminative practices such as failing to treat the LGBT patient with dignity and respect are more pronounced among the nonmetro healthcare professionals. It could be that healthcare professionals do not fully understand the relationship between the resources they command, for example, medical knowledge, and the tactics, for example, breast cancer screening, they could pursue to treat a trans person, a condition described as “causal ambiguity” in strategic management⁵. The general point is that more research is needed to learn

⁵ White, C. (2017). *Strategic management*. Bloomsbury Publishing.