LGBT+ Healthcare Access in Texas: An Intersectional Approach

Undergraduate Research Fellowship 2023, by Zachary Prater with Dr. Jara Carrington

THEORETICAL FRAMEWORK: THE CONTEXT OF WESTERN MEDICINE & THE "MEDICAL GAZE"

The context of the medical gaze, as developed by medical ethnography, is crucial in understanding how healthcare is delivered. It involves the physician's role in assessing and evaluating the patient's health status. However, the medical gaze can also be a barrier to providing equitable care, as it reflects societal norms and biases that may affect the patient's experience.

SURVEY SPECIFICS, LIMITATIONS, & FULL CITATIONS

ONGOING RESEARCH

RACE AS AN IMPACT FACTOR (INTERSECTIONAL)

When we look at those who reported race as an impact factor, we see that there are disparities between different relevant racial/ethnic categories.

INSURANCE AS AN IMPACT FACTOR (INTERSECTIONAL)

The homogenous data suggests that insurance coverage is more likely to be an impact factor than sexuality or gender. When viewed intersectionally, insurance is a crucial factor.

OUTCOMES & FUTURE RESEARCH

What next?

- What are the current policies and initiatives in place to address healthcare disparities in the context of sexual and gender identity?
- How can healthcare providers be trained to provide culturally competent care?
- What role do social determinants of health play in healthcare disparities?

SURVEY LINK

ONGOING RESEARCH SURVEY LINK

SURVEY SPECIFICS, LIMITATIONS, & FULL CITATIONS

59 INDIVIDUAL RESPONDENT BREAKDOWN BY:

- GENDER: 14 MALE (CIS), 20 FEMALE (CIS), 6 TRANSGENDER, 18 NONBINARY/GENDERQUEER
- RACE: 44 WHITE/CAUCASIAN, 23 LATINO/HISPANIC, 5 BLACK/AFRICAN AMERICAN, 2 ASIAN
- SEXUALITY: 25 HOMOSEXUAL, 29 BI/PANSEXUAL, 6 ASEXUAL, 5 OTHER

IMPACT FACTORS OF LGBT+ PATIENTS (HOMOGENOUS)

"Impact factors" are herein defined as factors that significantly impact the patient's experience in the healthcare setting. 34 instances of impact were collected from 59 survey respondents.

SEX: 0% 60% 100%
GENDER: 0% 60% 100%
AGE: 0% 60% 100%
RACE: 0% 60% 100%
SEXUALITY: 0% 60% 100%
OTHER: 0% 60% 100%

While this serves as a good starting point for understanding impact factors, viewing them in this homogenous context can result in inaccurate conclusions. For example, the graph shows that only 8.5% of the respondents reported race as an impact factor. In contrast, this is true to suggest that race is not a significant impact factor based on this data would be incorrect. Similarly, insurance reported as significantly more impactful than sexuality or gender can be similarly misconstrued at face value. Intersectional analysis can help contextualize this information in order to gain a more holistic understanding of what this data actually suggests.