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Addressing the unique needs of lesbian, gay, bisexual, and transgendered patients in palliative and hospice care: Developing understanding and organizational cultural competence

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There is a tremendous variance between and even within countries in terms of protections for Lesbian, Gay, Bisexual, Transgender, Transexual, Intersex, Queer, Questioning, 2-Spirited, Asexual people (LGBTTIQQ2SA). This presents challenges for healthcare providers and health systems in the provision of equitable, patient- and family-centered care at any time in the life course. However, the impact of these inequities is exacerbated in palliative and hospice care. As the world's population ages, so too does the LBGTTIQQ2SA community. There will be a greater number of aging people from this community requiring palliative and hospice care in the next two decades. This is an unprecedented time for hospice and palliative care since most LGBTTIQQ2SA have lived the majority of their lives openly and there are significant fears associated with having to "hide oneself" to be safe when they are entering one of the most vulnerable stages of their lives. There are well-documented disparities that impact access, outcomes, and utilization of, as well as experiences with health care in this population who continue to experience homophobia, open discrimination, and stigmatization. Understanding the unique needs of this group is essential to cultural competence, excellence, and equity in the provision of palliative and hospice care for all.

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