Physicians Need to Better Document Sexual Orientation and Gender Identity

By recording such details, clinicians can aid in improving LGBTQIA+ health disparities, argues a researcher.

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Health care providers do a very poor job of documenting the sexual orientation and gender identity (SOGI) of lesbian, gay, bisexual, transgender, queer, intersex and asexual (LGBTQIA+) people, despite recommendations that they note such matters as well as sexual behavior in each patient's medical file.

According to an editorial in the American Journal of Public Health by Carl Streed Jr., MD, MPH, assistant professor of medicine at Boston University School of Medicine, most electronic health records (EHR) do not have expanded data fields to facilitate documentation of all aspects of sexual orientation and gender identity. Furthermore, EHR platforms do not uniformly capture such information.

Notwithstanding the fact that health care providers often express that they are uncomfortable asking about sexual orientation and gender identity, patients by and large report that they are comfortable being asked about these factors.

"SOGI is an important dimension of individual self-perception and behavior and has profound effects on health, whether a patient identifies as an LGBTQIA+, cisgender (non-transgender) or a heterosexual person," Streed writes.

By recording data on SOGI in medical charts, physicians can help address the health disparities that affect LGBTQIA+ people, Streed continues.

"Patient-provider discussions about SOGI can facilitate a more accurate assessment of self-reported health and behaviors," he writes. "Additionally, if clinicians do not know their patients' SOGI status and sexual behavior, important therapeutic and preventive services may be ignored, including HIV screening, appropriate referrals for behavioral health care and support services that incorporate patients' specific needs."

Such documentation can also aid research to devise efforts to reduce such health disparities.

“Gathering SOGI structured data in clinical settings via EHRs will help clinicians, researchers, health care system administrators and policymakers better understand LGBTQIA+ health regarding disparities in insurance coverage, access to care, diagnosis and treatment of health conditions,” the editorial states. “As LGBTQIA+ persons are at increased risk for worse COVID-19 outcomes, SOGI data collection in EHRs would further elucidate public health disparities and identify opportunities for interventions.”

Streed would like to see federal policies that mandate, incentivize and enforce the collection of data on sexual orientation and gender identity.

To read an abstract of the letter, click here.

To read a press release about the study, click here.

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