The main aim of ILGA Portugal’s “Equality in Health” project was to collect empirical data on the challenges and barriers that lesbian, gay, bisexual and trans (LGBT) people encounter in accessing adequate and competent health care.

The project was funded by ILGA-Europe in the ambit of its Human Rights Violations Documentation Fund. It was conducted during the year 2014 and the data collection was carried out between June and November. Six hundred and twenty-nine people (600 LGB and 29 trans) participated in the project by completing self-report questionnaires. Interviews were also held with a group of health professionals.

MAINS CONCLUSIONS

Being a lesbian, gay, bisexual and trans (LGBT) cannot in itself constitute a barrier to access to health. However, the project's results are unequivocal in showing that LGBT people face various difficulties in accessing adequate and competent health care.

The invisibility of LGB people and the silence about their identities and behaviours are the rule in health contexts. **Around 70% of health professionals always assume that the patient is heterosexual or has sexual behaviours exclusively with those of different sex.** More: when formulating questions related to sexuality and conjugality, only 17% of the professionals include the possibility of the patient being LGB.

There is silence and invisibility around LGB people in health care. The responsibility to fight that invisibility tends to be exclusively on the side of the patients, despite the hesitation in
coming-out - related with the expectation of discrimination and stigmatization. Sixty-six percent of the participants refer that the anticipation of a less adequate treatment interferes with the willingness to mention in medical appointments their sexual orientation or behaviours. Around 30% of the participants have never spoke with any health professional about their sexual orientation. 37% have already omitted that information in clinical situations in which it would be important for the professional to know it. In nearly half of the situations the GP is not aware of the sexual orientation and sexual behaviours of LGB patients. And 25% of LGB people with children hide from the paediatrician their family structure.

Despite the systematic silence revealed by these data, 17% of LGB people have already been subjected to discrimination in health services, including: comments made by the professional that were felt like an insult; discomfort in physical contact with the patient after she/he come out as LGB to the professional; barriers in blood donation by gay or bisexual men; or difficulties in accompanying same-sex partners in consultations or internment. 11% of the participants who are or have been in mental health services/psychotherapy indicated that the professional suggested to them that homosexuality can be “cured”.

The invisibility, combined with real or expected discrimination, results in inferior access to health care and services: LGB people avoid or hesitate (and, in some cases, cease) to resort to health professionals and services. Around 40% of LGB people seek for prior information concerning health professionals and services, in order to minimize the risk of discrimination. And 32% think “twice” before going to a health service.

The data collected by the project also show that the barriers – already identified in the past – in the access to health by trans people are still a reality, including: non-compliance with international guidelines (Standards of Care); need for the Portuguese Medical Association’s approval to access to specific treatments; or general lack of knowledge on available practices and resources in the Portuguese National Health System.

The data are clear: LGBT people face significant barriers and challenges in accessing adequate and competent health care. It is fundamental the implementation of public policies to ensure that health contexts are safe contexts, in which the silence and discrimination on the grounds of sexual orientation and gender identity are unacceptable. Also in health, equality must be the rule.