CHAPTER 3

UNDERSTANDING ATTITUDES AND ACCESS TO CARE

CHAPTER OBJECTIVES
1. Explain how historical, political, institutional, and sociocultural factors may influence attitudes about palliative care and hospice among LGBTQ people.
2. Describe barriers faced by LGBTQ individuals and their families in accessing hospice and palliative care services.

Key Terms: access to care, barriers to care, employment discrimination, financial barriers to care, institutional barriers to care, perceptual barriers to care

CHAPTER SUMMARY
An important aspect of providing LGBTQ-inclusive care is understanding why some LGBTQ people may be reluctant either to seek care in the first place or to share with you that they are lesbian, gay, bisexual, transgender, gender nonconforming, queer, or questioning. Historically, disclosing one’s status as an LGBTQ person has often come with a high price—and may still do so today. This chapter explains why, given the historical and contemporary contexts within which LGBTQ people live, it’s not surprising that some LGBTQ patients and
families are reluctant to seek care. The chapter describes three kinds of barriers to palliative care and hospice care (perceptual, financial, and institutional) and offers a two-pronged approach to addressing barriers to care.