



CANCERcare®

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fact sheet

COPING WITH CANCER AS AN LGBT PERSON

A cancer diagnosis has a profound effect on everyone, including the patient, caregiver, family and members of the patient's community. Sexual orientation and gender identity are two of the many factors that influence one's likelihood of being diagnosed with cancer, and how one responds to that diagnosis. CancerCare recognizes and supports gay, lesbian, bisexual and transgender people and their families, whether those families are biological or created by choice.

HEALTH DISPARITIES

According to the National LGBT Cancer Network, LGBT people face a greater chance of being diagnosed with lung, breast, cervical, anal and liver cancers than non-LGBT people. The increased chance of diagnosis can be attributed to a combination of social/economic factors and to behaviors. It is important to understand that it is not because one is gay, lesbian, bisexual or transgender that one is at increased risk of a cancer diagnosis. It's that LGBT people, as a group, are more likely to engage, or have engaged in, specific behaviors that can increase the likelihood of developing cancer.

For example, smoking is responsible for 80% of all lung cancers and increases risk for colon, esophageal and anal cancers. Various studies confirm that gay men and lesbians are more likely to smoke than men and women who do not identify as gay. If you smoke, stop. If you are unable to quit by yourself, try the American Cancer Society's free guide to quitting smoking (www.cancer.org/healthy). Other behaviors, including a high fat diet, alcohol consumption and recreational drug use, also contribute to an increased risk of developing cancer.

Other statistical evidence shows that having children after age 30, or

not having any biological children at all, is associated with increased risk of breast cancer. It therefore follows that lesbian women, who are less likely to have children than non-lesbian women, are at higher risk of breast cancer. If you are a woman, lesbian, bisexual, transgender or otherwise, older than 30 and have never had a biological child, it is important that you get regular screenings for breast cancer.

Additionally, human papillomavirus (HPV) can cause numerous cancers, including cervical cancer in women and anal cancer in men. HIV infection/AIDS also increases the risk for invasive cervical cancer, Kaposi's sarcoma and non-Hodgkin lymphoma, which are categorized as AIDS-defining cancers. Research has shown that HIV infection/AIDS also increases the risk for non-AIDS-defining cancers, including anal cancer, Hodgkins disease, melanoma, liver cancer, lung cancer, mouth and throat cancers, testicular cancer and squamous cell and basal cell skin cancers.

CARE

Identifying as an LGBT person can be a part of your life experience that makes it harder for you to feel comfortable enough to seek and get the care that you, your loved one or family member needs.

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Some of the reasons LGBT people report feeling uncomfortable asking for care might apply to you:

- Fear of discrimination or harassment
- Previous negative experiences with doctors, nurses or other health care workers
- Lack of legal assistance or financial resources or insurance coverage
- Shame
- Immigration status

When LGBT people don't have a doctor or medical provider that they can trust, they are less likely to make or keep appointments. They may not feel safe sharing information that a doctor or medical provider needs in order to provide comprehensive care. The Gay and Lesbian Medical Association (GLMA) has a searchable directory of LGBT positive medical practitioners (www.glma.org). The National LGBT Cancer Network (www.cancer-network.org) has a comprehensive list of cancer resources for the LGBT community. The National LGBT Cancer Project (www.lgbtcancer.org) also has information about coming out to your doctor as well as a directory of LGBT-positive medical providers. Making the effort to find a medical provider with whom you are comfortable can be a lot of work, but it may make a critical difference.

SUPPORT

One of the benefits of disclosing your sexual/gender identity is that you can then be honest with your oncology team about what support is or is not available to you and include those individuals in the overall plan of care. From a coping perspective, a sense of being recognized and accepted as who you are by your oncology team can enhance feelings of trust and a sense of support that are the foundation of successful communication with various members of your oncology team. Further, disclosure means that you can devote your energy to coping with your diagnosis and treatment without diverting your attention to maintaining an artificial narrative about yourself and the meaningful relationships in your life. Finding a health care team that is sensitive to, and embraces, LGBT identity allows you to utilize the full spectrum of support that is available to you. CancerCare offers supportive services that celebrate LGBT identities and relationships, free of charge, for the LGBT community affected by cancer.

RESOURCES

American Cancer Society

800-227-2345
www.cancer.org

Gay and Lesbian Medical Association (GLMA)

www.glma.org

Mautner Project - The National Lesbian Health Organization

www.mautnerproject.org

National LGBT Cancer Network

212-675-2633
www.cancer-network.org

National LGBT Cancer Project

www.lgbtcancer.org
www.malecare.org

SHARE for Women Facing Breast or Ovarian Cancers

844-275-7427
www.sharecancersupport.org

CancerCare Can Help

Founded in 1944, CancerCare is the leading national organization providing free support services and information to help people manage the emotional, practical and financial challenges of cancer. Our comprehensive services include counseling and support groups over the phone, online and in-person, educational workshops, publications and financial and co-payment assistance. All CancerCare services are provided by professional oncology social workers and world-leading cancer experts.

To learn more, visit www.cancercare.org or call **800-813-HOPE (4673)**.

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This activity is supported by AbbVie.*



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