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local news

Health matters

A new task force formed to promote lesbian health has a lot of fresh ideas and wants more—from you

by Inga Sorensen

ou've probably heard the dire predictions by now: one in eight women may experience breast cancer in her lifetime, and lesbians may be at increased risk for getting the disease; risk for breast cancer is increased by not having children; lesbians of color may be at higher risk at an earlier age; risk for breast cancer is increased by smoking; women's risk for breast or cervical cancer increases with age.

Unsettling realities indeed. But did you also know that when breast and cervical cancer is found at the earliest stages, the cure rate approaches 100 percent? Or that there are free health screenings available to many women? Or that there is a way for lesbians interested in taking an active role in their personal—and community's health to do just that?

"It's all true," says Carolyn Johnston, coordinator of the Breast and Cervical Cancer Partnership, a program administered by the Multnomah County Health Department in partnership with the Oregon

Breast and Cervical Cancer Coalition, Susan G. Komen Foundation, American Cancer Society, Oregon Health Division, National Black Leadership Initiative on Cancer, and numerous community health care agencies.

Funding for the program is provided by the federal Centers for Disease Control and the Susan G. Komen Foundation.

According to Johnston, an effort is underway to establish an ongoing lesbian health task force,

now informally known as Lesbian Health Matters, whose intent is to promote lesbian health and make the health care establishment more accessible to lesbians. Lewis attributes the apparent lack of education among lesbians to denial, as well as the fact that many health programs simply don't specifically target the lesbian population.

And many of the "experts" remain woefully insensitive or uninformed about lesbian health concerns.

"When I went to get a second opinion, I was told to go to this doctor at [Oregon Health Sciences University]. He was considered among the best," Lewis recounts, adding that the physician presented the standard biased questions about birth control.

"When I told him I didn't use it and I was a lesbian, that's all he wanted to talk about—me being a lesbian, that is," she says. "I said, 'Listen, I'm not here because I'm a lesbian, I'm here because I have breast cancer."

"Many times lesbians are uncomfortable, and rightly so, about receiving heath care because of the way they are treated," says Johnston. "There is a lot of provider education that has to occur."

Johnston says her program is currently surveying several providers regarding issues of diversity, and hopes to develop a list of lesbian-friendly clinics and providers.

"One of the first things we need to do is develop criteria of what makes for a 'lesbianfriendly' provider, because it may mean different things to different people," she says.

Johnston also says she'd like to see the task force develop and

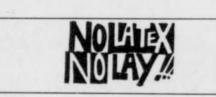
distribute relevant materials, as well as sponsor a mammography van at lesbian events, and launch a telephone hot line, perhaps via the Lesbian Community Project, which provides lesbian health



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"I don't think lesbian health issues have been addressed much here. That's why I think it's important this is being done," says Johnston. "Someone said to me, 'We don't have an [Oregon Citizens Alliance] initiative this year. Maybe we can now do something positive and proactive like focus on lesbian health.' That sounded right on target to me."

According to the National Gay and Lesbian Task Force Policy Institute, there is epidemiological evidence which suggests that lesbians may have a higher incidence of breast cancer than heterosexual women. This is based, says the institute, on a confluence of risk factors that appear in the limited research available to be more common among lesbians—including a higher incidence of nulliparity (not having borne children), bearing a first child after the age of 30, and increased alcohol consumption.

Research further suggests that lesbians may be at risk for delayed diagnosis and treatment for any number of reasons, including a decreased likelihood of receiving routine cancer screenings and checkups caused by a lack of health insurance coverage or prior negative experiences with doctors and other providers.

Or it may come down to the fact that many lesbians don't realize they are at risk.

"I think many women in the lesbian community are undereducated about health issues," says April Lewis, 44, an out lesbian who also works with the Multnomah County Health Department.

In September 1995, Lewis was diagnosed with breast cancer.

"I was shocked. It came out of the blue," says Lewis. "I had totally been in the dark about the risks." information and referrals.

(According to Johnston, the Breast and Cervical Cancer Partnership program is helping LCP apply for a grant which, if obtained, will help pay for lesbian outreach and breast cancer education materials.)

She also wants to make women aware that they may be eligible for a free health check exam if they are over 40, low income, or have limited or no insurance. The exam includes a Pap test and pelvic exam, clinical breast exam, mammogram, and height, weight and blood pressure check.

The department says the checks are vital because as a woman gets older, her risk for breast and cervical cancer increases. Seventy-five percent of all breast cancers occur in women older than 50. The majority of breast cancers occur in women without any family history of the disease.

In the meantime, both Johnston and Lewis encourage lesbians to become involved in setting the goals and direction of the lesbian health task force.

"This effort can be whatever women want it to be," says Johnston. "This is for them."

Lewis adds, "Lesbians have proven that they can take care of others. It's time for us to do the same for ourselves and each other."

The Lesbian Health Matters task force will meet Jan. 28 from 6:30 to 8:30 pm at the Morrison Building, 2115 SE Morrison St., in Portland. For more information about the meeting or free health checks, call Betty Graham at 248-3674, ext. 28266. Also, the Lesbian Community Project sponsors a women's cancer-survivor support group. For more information, call 223-0071.

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