Improving the Experience for Sexual and Gender Diverse (LGBTQ) Populations

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AHS Diversity & Inclusion
Objectives

Participants will:

• Understand the lived and learned realities of transgender and gender diverse patients & clients
• Breaking down the myths and misunderstandings about transgender people
• Develop skills in creating safe, supportive and nurturing environment for people of a sexual or gender minority
• Develop skills in communicating with and about sexual and gender minority people in a way that is respectful and meaningful
Our People Strategy

Our People Strategy is an enabling strategy

We can achieve our goals by supporting our people to feel safe, healthy and valued

Through Our People Strategy, we are supporting you and your teams to have positive interactions, every time
Living our values. Together.

compassion
We show kindness and empathy for all in our care, and for each other.

accountability
We are honest, principled and transparent.

respect
We treat others with respect and dignity.

excellence
We strive to be our best and give our best.

safety
We place safety and quality improvement at the centre of all our decisions.
Why learn about sexual diversity?

• Many people who identify as being sexually diverse have important unmet health care needs or identify that they are not receiving good customer care.

• Alberta’s Human Rights Act protects individuals from discrimination based on sexual orientation, gender expression and gender identity.

• AHS requires all of us to respond respectfully and effectively to provide safe and welcoming places for everyone include patients, families, staff, volunteers, physicians, midwives, contractors, et.

• Increasing awareness of sexual diversity can increase the quality of care and experience we can offer to EVERYONE.
Why consider our own values?

When we are unaware of values & assumptions, they can affect our work in ways we are not even aware of.
About me …
About me …
About me ...
Renegotiating Relationships
... With My Faith
... With My Friends
... With Bureaucracy
... With My Parents

RETURN TO SENDER
Family Matters …

- LGBTQ young adults who reported high levels of family rejection during adolescents were:
  - 8.4 times more likely to report having attempted suicide
  - 5.9 times more likely to report high levels of depression
  - 3.4 times more likely to use illegal drugs, and
  - 3.4 time more likely to report having engaged in unprotected sex

- Compared with peers from families that reported no or low levels of family rejection.

Family Matters ...

• Family acceptance helps:

  • Protect against depression, suicidal behavior, and substance abuse

  • Promote self-esteem, social support, and overall health

Renegotiating Relationships
Renegotiating Relationships
Renegotiating Relationships
Social Context (Bauer 2015b)

- 13% have been fired for being trans (+ 15% more fired but not sure why)
- Though 44% of trans people have post secondary/or graduate degree, medium income is $15,000/year (Bauer, 2012)
- 20% have been physically or sexually assaulted for being trans, 34% have been verbally threatened or harassed but not assaulted
Social Context (Bauer 2015b)

- 60% have avoided public spaces for fear of harassment, 57% avoided public washrooms
- 50% have depressive symptoms consistent with clinical depression, 43% of trans people have attempted suicide (10% within past year)
Experiences in Health Care (Bauer 2015b)

- 10% of emergency room patients report having care stopped or denied because they were trans
- 25% reported being belittled or ridiculed by emergency care provider for being trans
- 20% have avoided the ED when they needed it
Experiences in Health Care (Bauer 2015b)

• Among those with family physicians 40% reported discriminatory behaviour at least once. Experiences include:
  • Refusal of care
  • Refusal to examine specific body parts
  • Being ridiculed
  • Use of demeaning language
Experiences in Health Care

- Being “outed” by using non-preferred name (“dead” name) when addressing patient, doing in front of other patients
- Health care providers refusing to use preferred name/pronouns
- Obvious ridicule or scorn from health care providers
- Stares/double takes
- Refusal of care, either on principle, or provider conveys they do not have the knowledge / skills
Experiences in Health Care

• Invasive questions
• Unnecessary physical exams
• Binary forms and other paperwork
• Binary bathrooms
• Well-intentioned “othering” (e.g. putting trans patients in private room at the end of the hall)
A person’s experience of stigma and discrimination

Less likely to access care

Negative health outcomes

Lived experience, not being LGBTQ creates the barriers
Health Outcomes

People who identify as being sexually and gender diverse may be:

• at higher risk for
  ➢ heart disease
  ➢ obesity
  ➢ mental health concerns - anxiety, depression and suicide
  ➢ substance use
  ➢ interpersonal violence
  ➢ certain cancers

• be less likely to participate in health promotion activities such as screening for cervical cancer.¹

LGBTQ* youth are at higher risk for bullying, physical abuse, suicidal behaviour, sexual abuse and risky sexual practices. ³
“I’m not sick ...

I’m transgender!”
Sex & Gender
Terms to Know

Sex
The legal identifier assigned at birth depending on what genitals the child is born with

Gender
social and cultural expectations of roles and presentation
Sexual Orientation

- Describes an individual's enduring physical, romantic and/or emotional attraction to another person.

- **Gender identity and sexual orientation are not the same.** Transgender people may be straight, lesbian, gay, or bisexual. For example, a person who transitions from male to female and is attracted solely to men would identify as a straight woman.
Transgender

- An umbrella term for people whose gender identity and/or gender expression differs from what is typically associated with the sex they were assigned at birth.

- People under the transgender umbrella may describe themselves using one or more of a wide variety of terms – including *transgender*. 
Terms to Know

Gender Identity

• One's internal, deeply held sense of one's gender.

• For transgender people, their own internal gender identity does not match the sex they were assigned at birth.

• Most people have a gender identity of man or woman (or boy or girl). For some people, their gender identity does not fit neatly into one of those two choices.

• Unlike gender expression gender identity is not visible to others.
Gender Expression

- External manifestations of gender, expressed through one's name, pronouns, clothing, haircut, behavior, voice, or body characteristics. Society identifies these cues as masculine and feminine, although what is considered masculine and feminine changes over time and varies by culture.

- Typically, transgender people seek to make their gender expression align with their gender identity, rather than the sex they were assigned at birth.
Some ways to show respect

• being aware of body language, facial expression and tone of voice.
• expressing a willingness to learn about individual needs.
• listening to what patients and families are saying.
• acknowledging and apologizing for mistakes or slip-ups.
Some ways to show respect

- Confidentiality
- Promote open conversation; reinforce confidentiality
- Specify what information will be kept in a patient/employee’s record and who has access to it (e.g., Fear of outing)
- Disclosure of one’s sexuality or gender identity should be the right of the client
- Ask yourself, ‘why is the patient/client here today?’ Deal with the issue, not the identity
What can we do?

Use inclusive language:

<table>
<thead>
<tr>
<th>Instead of:</th>
<th>Use:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Husband or wife</td>
<td>spouse</td>
</tr>
<tr>
<td>Boyfriend or girlfriend</td>
<td>partner</td>
</tr>
<tr>
<td>Mother or father</td>
<td>parent</td>
</tr>
<tr>
<td>He or she</td>
<td>They or preferred pronoun*</td>
</tr>
<tr>
<td>Male Nurse</td>
<td>Nurse</td>
</tr>
<tr>
<td>Female Doctor</td>
<td>Physician or Doctor</td>
</tr>
<tr>
<td>Manpower</td>
<td>Workforce or Personnel</td>
</tr>
<tr>
<td>Chairman</td>
<td>Chair or Chairperson</td>
</tr>
</tbody>
</table>
What can we do?

Use inclusive language:

• Gender neutral pronouns may include Ze, Per, Ne, Ve
• Reflect back the language/pronoun the patient uses
• Use open ended questions

(Only use Mr., Ms., Mrs., Sir, Madam etc if client has said they prefer it.)
What can we do?

INTENTION

IMPACT
What can AHS do?

Create safe and inclusive environments:

• Gender-neutral bathrooms and family bathrooms
• Images that are diverse and inclusive
• Queer literature in waiting areas
• Inclusive forms, questionnaires and processes
• Patient Registration / Clinical Information System
What can AHS do?

Guide to Creating Safe and Welcoming Places for Sexual & Gender Diverse (LGBTQ) People
What can AHS do?

Transgender Guidelines
What can AHS do?
What can AHS do?

“Help create safe places where people of all sexual orientations, gender identities, gender expressions, races, religious beliefs, abilities, colour and other personal characteristics should feel safe, welcome and valued.”

diversityandinclusion@ahs.ca
What can AHS do?
What can AHS do?

At AHS, our mission is to provide a patient-focused, quality health system that is accessible and sustainable for all Albertans.

All individuals – whether they are a healthcare provider, physician, volunteer, family member or patient – are protected from discrimination at AHS.

Our goal is to create a safe and welcoming healthcare environment for sexual and gender minority (LGBTQ) people.

We provide this safe environment by ensuring that how we work together with patients, clients, families and each other is guided by our core values – compassion, accountability, respect, excellence and safety.

AHS’ Patient First Strategy works to promote respect, enhance communications, support a team-based...
Let’s have a conversation ...

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