

# Honouring sexual orientation and gender identity

## Q: What can I do to make LGBTQ clients feel at home in our health-care centre?

**A:** RNs understand that sexuality is part of who we are and how we experience the world. We know that developing cultural competence allows us to provide quality care to all of our clients. When we create welcoming health-care environments, we are removing barriers and inviting clients to return for care.

Between two per cent and 10 per cent of Canadians self-identify as lesbian, gay, bisexual, transgender or queer/questioning. LGBTQ clients represent a range of sexual orientations and gender identities.

*Sexual orientation* is a person's experience of affection and attraction. We now understand that attraction is not always binary (male or female); it can be a fluid experience of having feelings for any number of individuals.

*Gender identity* is a person's internal sense of gender, being male, female, both or neither. That sense may be of the sex the person was assigned at birth (*cisgender*) or not (*transgender*). Some people prefer to describe themselves as *gender nonconforming*, which means they reject typical gender norms. Others describe themselves as *gender fluid*, meaning they move between feeling male and female.

A wide variety of terms are in use to describe sexual orientation and gender identity. While it may be helpful to understand the terms, they should never be used to label others. Language evolves over time. If a client uses a term you are not familiar with, ask for help in understanding it.

People identifying as being sexually or gender diverse may be at higher risk for heart attack, obesity, anxiety, depression, suicide, sexually transmitted infections, unintended pregnancy and substance abuse. They may be less likely to participate in health promotion activities such as gender-related screenings (for cervical, breast or prostate cancer, for example). Those who have experienced stigma or discrimination when accessing health care may be less likely to seek care in the future and may have poorer health outcomes because of it. According to the Gay and Lesbian Medical Association, approximately 45 per cent of gay, lesbian and bisexual people have not shared information about their sexual orientation with their health-care providers.

### MODELLING INCLUSIVE LANGUAGE

Your personal values and assumptions can influence your practice in ways you may not be aware of. Consider getting training to learn more about LGBTQ health. I recommend

visiting the Rainbow Health Ontario website as a place to start.

Heterosexist and gender binary assumptions that are embedded in our language and systems can unintentionally exclude LGBTQ clients. For example, many of the standard health-care forms in use force clients to identify themselves as either male or female. Model using inclusive language as a way to counter assumptions and stereotypes.

Ask what your client wants to be called. When a preferred name is given, use it and remember to communicate this preference to others. Transgender clients may prefer a traditional pronoun (he/she) or a gender neutral pronoun such as *they*, *per* or *ze*. When clients disclose information about their sexual orientation or gender identity, reassure them that information is kept confidential. Do not assume a client is out or has shared this information with anyone else.

## Understanding terms

**Ally:** a person who advocates for human, civil and sexual rights for sexual minorities and who challenges discrimination and heterosexism

**Gay:** a person who has emotional or sexual attraction to people of the same sex or gender. The term is often used to describe a male identified person who has romantic or sexual attraction to males.

**Lesbian:** a female identified person who has emotional or sexual attraction to females

**Pansexual:** a person who has emotional or sexual attraction to people of any sex or gender identity. The term *bisexual* has been used to describe a person who has emotional or sexual attraction to males and females.

**Queer:** a reclaimed term used by some people who identify as a sexual minority and also used as a positive collective term to describe communities and social movements

**Questioning:** a person who is unsure of, or is exploring, their sexual orientation or gender identity

**Trans, transgender, trans-identified or transsexual:** a person whose gender identity does not conform to society's expectations of the biological sex assigned at birth



Use gender-neutral words to refer to a client's relationships with others: *spouse/partner* instead of *husband/wife* and *boyfriend/girlfriend*, and *parent* instead of *mother/father*.

Using inclusive language and adopting the terms the client prefers demonstrate respect. But acknowledging an error, apologizing and then moving on demonstrates respect as well. Clients appreciate sincere intentions, supported by your body language, facial expression and tone of voice, and will help you understand who they are.

Don't underestimate the influence of physical settings on a client's health-care experience. Make sure your program or service demonstrates that it welcomes LGBTQ clients. Do the images on your posters and brochures reflect sexually and gender diverse individuals and families? Are all-gender bathrooms available? You might consider displaying the rainbow flag, a sign of welcome and inclusiveness. ■

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