

Working together for your health

Tips on Providing Safer and More Welcoming Continuing Care for LGBTQ2S+ Clients

Purpose

This resource will help to enhance your awareness, confidence, knowledge, and skills in creating safer and more welcoming care for lesbian, gay, bisexual, transgender, queer and two-spirit (LGBTQ2S+) clients.

This resource was developed in consultation with the Alberta Health Services (AHS) LGBTQ2S+ Task Group comprised of AHS sexual and gender identity and expression experts, AHS/non-AHS clinical professionals and community volunteers.

Did you know that you have an integral role in creating a healthcare environment for LGBTQ2S+ clients that is affirmative, inclusive and respectful? By incorporating the following care tips in your daily practices, you will enhance the well-being of LGBTQ2S+ clients by caring for them with sensitivity and understanding.

What you may not know

Many older LGBTQ2S+ clients have experienced poor treatment in their lifetimes. Many grew up in a time when identifying as LGBTQ2S+ was considered a criminal offence or a mental health condition. Many suffered social isolation, family rejection, abuse, job loss or even imprisonment. Some hid their true identity to ensure their safety. Over the years, advocacy for LGBTQ2S+ rights has realized decriminalization, inclusion in the Canadian Human Rights Act and extended benefits, pension and income tax for same-sex couples.

Some LGBTQ2S+ clients have experienced stigma and discrimination when trying to access healthcare services. These experiences can create a fear of the healthcare system and a reluctance to access care resulting in avoiding medical check-ups, routine screening, and testing. LGBTQ2S+ clients may be at greater risk for undetected cancers, diabetes, cardiovascular disease, HIV, depression, and anxiety.

It's important that you understand the background of LGBTQ2S+ seniors so when they are accessing continuing care services, they feel safe and welcome to live their life as they choose and do not feel they need to hide their true identity. They will know they will be treated with respect.



Lesbian, Gay, Bisexual, Transgender, Queer and Two-Spirit (LGBTQ2S+) continuing care clients



Getting started: Tips

Being open

Don't be afraid to make a mistake. Some of this content and suggestions may be new for you. If you say the wrong thing, forgive yourself and apologize. You are learning and will know better next time.

Displaying inclusive resources

Ensure your waiting room or entrance is welcoming for people who identify as LGBTQ2S+ (e.g., clients, family, visitors and staff) by having inclusive materials such as posters, brochures or rainbow symbols.

Addressing a client

When you meet a client for the first time, introduce yourself: *"Hi, my name is Lisa, I will be your nurse. What is your name? What name do you go by?"* You may not always know if a client identifies as LGBTQ2S+, so it's important you ask this of every client. Regardless of the legal name or name on the chart, always use the name the client goes by.

Pronouns

You also need to ask the client about the pronouns they go by, such as he/him, she/her or they/them. Ask them: "*Am I using the pronoun you go by?*" When you use the client's preferred name and pronouns, you are telling them "*I respect you and care about you. You are welcome here.*"

Reviewing forms

All forms should be updated to include inclusive language. For example, instead of using the term married, replace it with partner/spouse. Also, instead of asking about a client's mother or father, use parent or guardian.

It's considered best practice to not limit an individual's choice to one's gender identity. For example, if your forms only offered "male, female, transgender or other" as options, a transgender woman may only select female as this is the gender to which she identifies. However, if you allowed the individual to "select all that apply" they may choose to select female and transgender. For more information on how to create inclusive forms,



please refer to the Sexual Orientation, Gender Identity & Gender Expression (SOGIE) Toolkit under the category: "Inclusive Communication."

Another option is to ask the client an open-ended question such as *"How do you identify your gender?"* Or, ask the client to write it down on the form.

When we make assumptions about people's relationships or gender identities, we are telling them that anyone who does not fit prescribed categories is "abnormal," "different" or just not part of the "normal human experience."

Respecting confidential information

When someone discloses their sexual orientation, gender identity or gender expression to you, they have shared something very personal. When you share information about an individual's sexual orientation, gender identity or gender expression that is not known by others (e.g., other clients, family members and visitors), this is commonly referred to as "outing." "Outing" someone is not only disrespectful; in many cases, it could put the person at significant risk of discrimination, harassment, and violence. In most situations, the care team and you need to know this confidential information about your clients to provide client-centered care.

Welcoming family and visitors

Continuing care is home for all clients. You can reinforce this to your LGBTQ2S+ clients and remind them that their partner, spouse, children, parents, guardian, other visitors and friends are always welcome in their new home. Ensure your clients have the opportunity to communicate who they consider to be a part of their chosen family. This welcoming style may reduce the client's fear of the healthcare system or when they transition into a new care setting.

Gender identity and sexual orientation

Did you know that some people are born with male and female body parts? These people may or may not identify as a transgender person. Some transgender people may have a mix of male and female anatomical characteristics; not all transgender people will have had gender-affirming surgery. Remember, do not make any assumptions about a person's sexual orientation, gender identity or gender expression.

When a client identifies as a transgender person, there are some considerations to keep in mind. A transgender woman may require a prostate exam. Likewise, a transgender man may require a breast and vaginal exam. It's important to provide care in a supportive, welcoming and professional way so your client feels safe.



Care planning

As for all clients, care planning and documentation will reflect the specific care activities to support your clients care needs and preferences. You should review the personal care activity summary, so you understand how to provide the best care for your client.

For example, a client who identifies as a transgender woman may wish to have the following areas documented in their care plan to ensure the care team is aware and reminded of these priorities:

- identifiers: name and she/her pronouns
- grooming: daily shaving, hair styled, apply skin care creams, red lipstick, blush
- dressing: dress or blouse
- menstruation: no menstruation
- recreation programming: nail care, women's club, baking, and community transwomen support group

All care providers should follow the same care activity routine so your client feels supported to live in their felt gender.

Intimacy

The need for intimacy does not diminish as a person ages. Clients living in a residential continuing care environment may express their need for intimacy. Your clients need to be asked about their need for intimacy, and this should be communicated to the care team. It's important that respectful processes are in place to support client privacy.

Social isolation

Any client in continuing care can experience social isolation which can lead to a higher risk of developing depression, anxiety, and suicidal thoughts. However, for clients who identify as LGBTQ2S+, these levels can be intensified. It's important to ensure your clients experience socialization. For more ideas on effective socialization and programming ideas for LGBTQ2S+ clients, Visit the ahs.ca/lgbtq2s education section.

Aging and dementia for all LGBTQ2S+ clients

As with any client living with dementia or another form of cognitive impairment, it's important that you follow the care plan and know the client's life history when assessing potential causes of responsive behaviors such as pain, hunger, thirst, social isolation, and fear. Since clients may forget you are aware of their sexual orientation, gender identity or gender expression, they may revert to feeling fearful from past experiences.

You can also reach out to the client's family members to encourage frequent visits and bringing in comforting memorabilia such as pictures and books.

If you are unsure how to support an LGBTQ2S+ client with dementia, all you need to remember is:

- Treat them with the same respect, care, and privileges as other clients.
- Remind them they are welcome to live their lives as they identify and they will receive good and equitable care.

Transgender clients and dementia

A client living with dementia or another form of cognitive impairment may have trouble remembering their sexual orientation, gender identity, and gender expression. It's important that you understand they may be reverting to an earlier part of their life and it does not mean they wish to change their sexual orientation, gender identity or gender expression.

Dressing

You can greet your client each day with "Good Morning. What would you like to wear today?" You could hold up a couple of different outfits to support the client with their decision. The chosen outfit will guide the care team how to greet and groom the client for that day.

Gender identity confusion

LGBTQ2S+ clients may also forget they had full or partial gender-affirming surgery. They may be confused as to why their anatomical body parts have changed. The care team can support their client by acknowledging they have had surgery and reassure them everything is alright.

Transgender clients and personal care

Transgender clients may feel vulnerable when participating in personal care. Having the same care providers is a patient-centered care approach that allows the care team to establish rapport and trust with your client. Before completing personal care, explain to your client what you wish to offer at that moment.

Client concerns

Some LGBTQ2S+ clients have experienced abuse and discrimination with limited available supports. Your clients may feel unsure about what to do if they have a concern. You can let them know they can share their concerns with the manager. This dialogue is an important step that allows the manager to get to know them better, understand their needs and work with them to problem-solve.

Education resources

AHS has developed a series of tip sheets to support your awareness, confidence, knowledge, and skills to create safer and more welcoming continuing care for LGBTQ2S+ clients.

Visit ahs.ca/lgbtq

Get in touch: continuingcare@ahs.ca

