



# **LGBTQ+ Health Education for Nurses**

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**PLU** | PACIFIC  
LUTHERAN  
UNIVERSITY

# Disclaimer

- None of the planners or presenters for this educational activity have relevant financial relationships to disclose with ineligible companies.
- Successful completion to earn contact hours (continuing education credit) criteria: 100% attendance and the completion of an evaluation form.
- Pacific Lutheran University Center for Continued Nursing Learning (PLU CCNL) is approved as a provider of nursing continuing professional development by the Montana Nurses Association, an accredited approver with distinction by the American Nurses Credentialing Center's Commission on Accreditation.



# PLU SON

## Guiding Principles

Pacific Lutheran University School of Nursing embraces core values of:

- Compassion and kindness
- Competence**
- Diversity, equity, and inclusion**
- Excellence
- Respect and integrity**
- Service
- Social Justice**

### *PLU Vision*

**“dedicated to improving healthcare for all by improving health equity and eliminating health disparities enacted through transformational nursing education, committed and responsive leadership, and meaningful scholarship”**

# Objectives

By the end of the activity, participants will be able to:

- ❖ Obtain a basic understanding of the complex obstacles and health disparities faced by members of the LGBTQ+ community
- ❖ Recognize and correctly utilize common LGBTQ+ terminology
- ❖ Identify strategies to improve inclusive communications with LGBTQ+ patients within the nursing profession

# Why learn about LGBTQ+ health?

- More than 5% of Washington adults are LGBTQ+
- Higher rates within younger generations
- Senate Bill 5313 on gender-affirming treatments
- Lack of provider knowledge contributes to health disparity

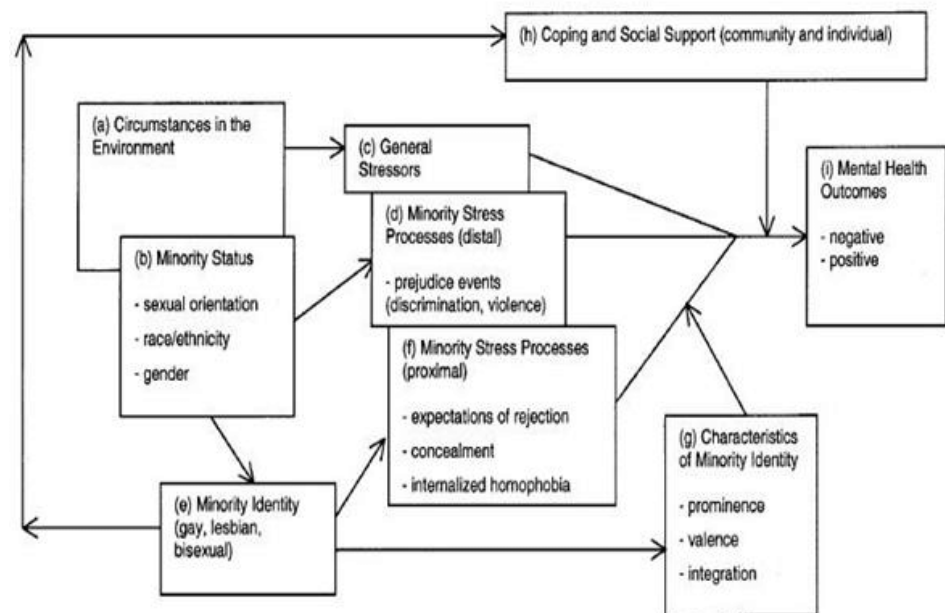


(Goldsen et al., 2020)



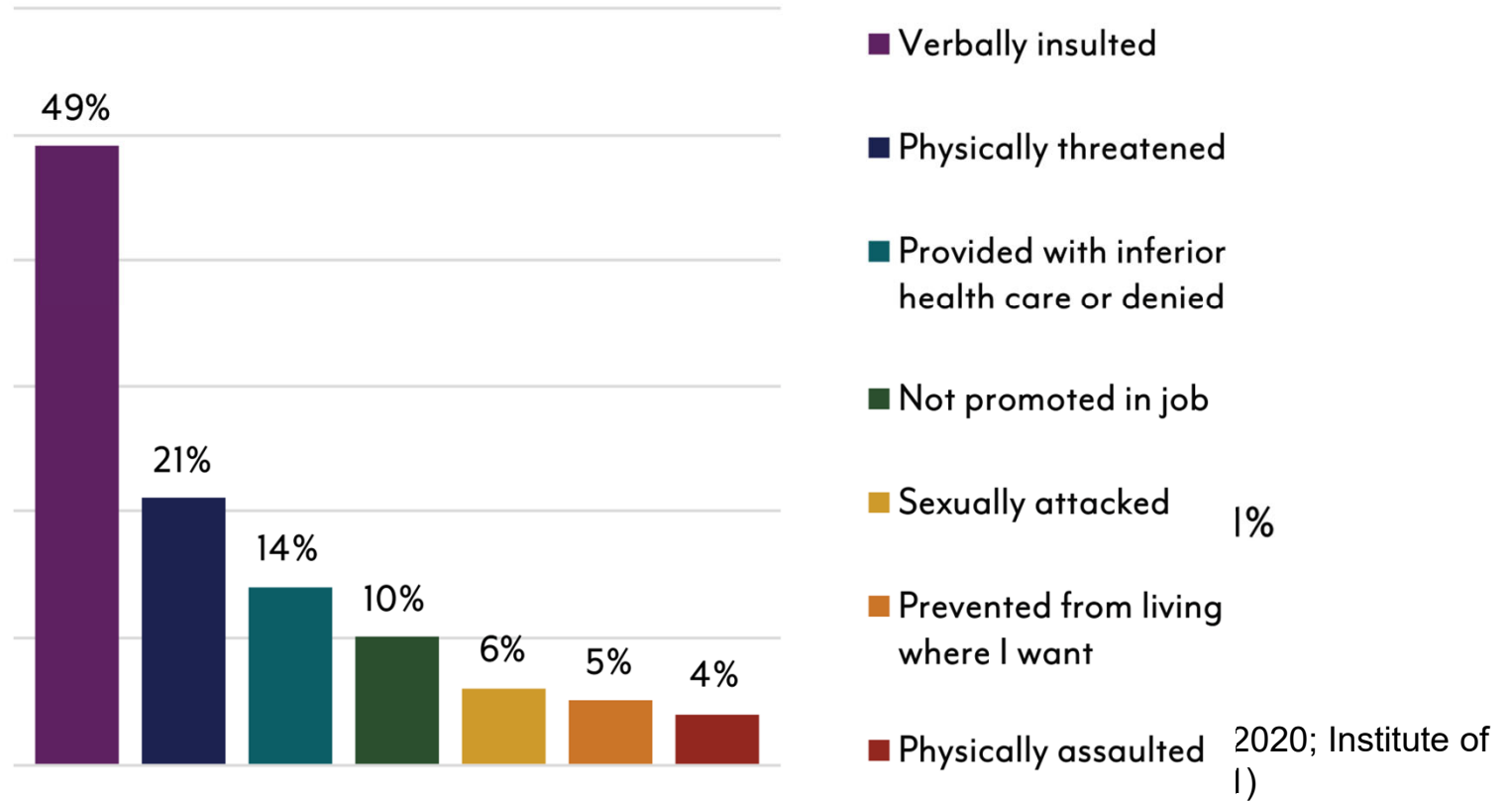
# Meyer's Minority Stress

- Prejudice and discrimination produce negative social conditions
- Chronic states of stress result in poor health outcomes
- Distal-proximal distinction



(Meyer, 2003)

## RATES OF DISCRIMINATION AND VICTIMIZATION IN THE PAST YEAR AMONG LGBTQ+ PARTICIPANTS



# Need for Knowledge

- Nearly half of LGBTQ+ individuals in Washington State noted distrust in doctors or lack of LGBTQ+ friendly services as a reason for avoiding medical care
- Disrespect, stereotypes, prejudice
- Limited LGBTQ+ health education within nursing and medical schools (*2.23 h BSN, 5 hours MD*)
- WHO, US Healthy People 2020, Institute of Medicine, Joint Commission, and United States Department of Health and Human Services

(Obedin-Maliver et al, 2011)





# What can nurses do?

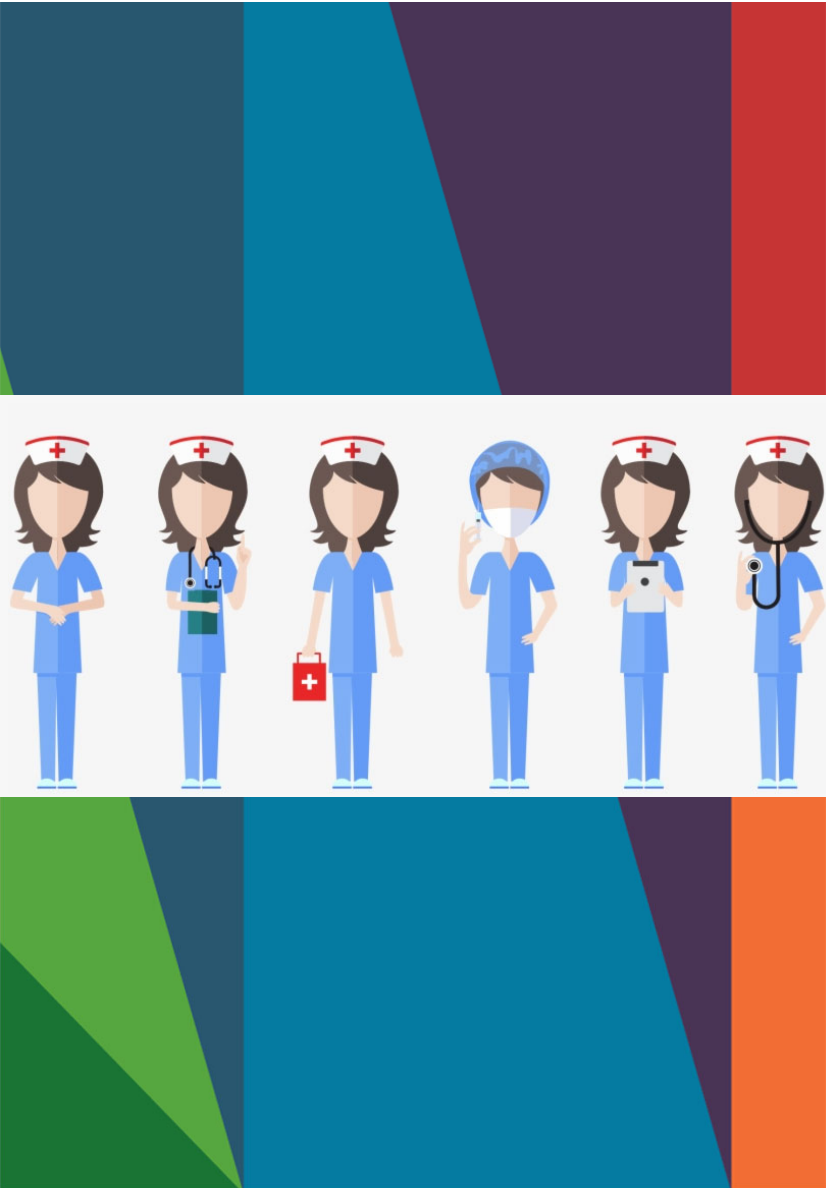
- Understand health risks
- Conduct MH/substance use/ ACE screenings
- Respect pronouns/ use gender-affirming language
- Compassionate listening without assumptions
- Promote wellness and resilience
- Provide health literacy education
- Advocate for curriculum changes and policy changes
- **Continue to learn**



# What areas of nursing does this apply?

**All!**

- School nursing
- Med-surg
- PACU/OR
- Emergency
- Clinic
- Advanced practice settings



# LGBTQ+ Experiences



# How do sexual orientation and gender identity differ?



**Gender Identity:**  
Own inner sense of your  
gender

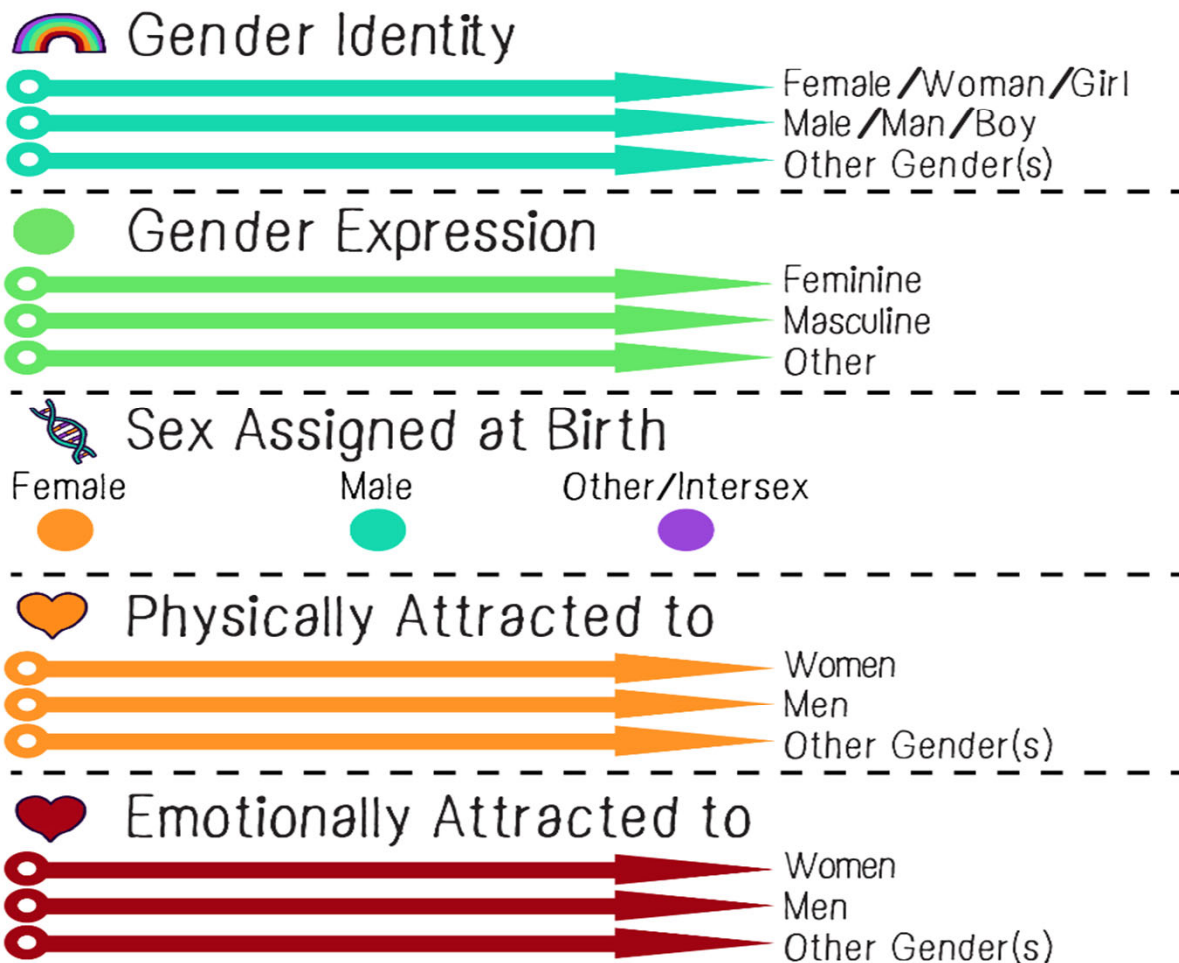
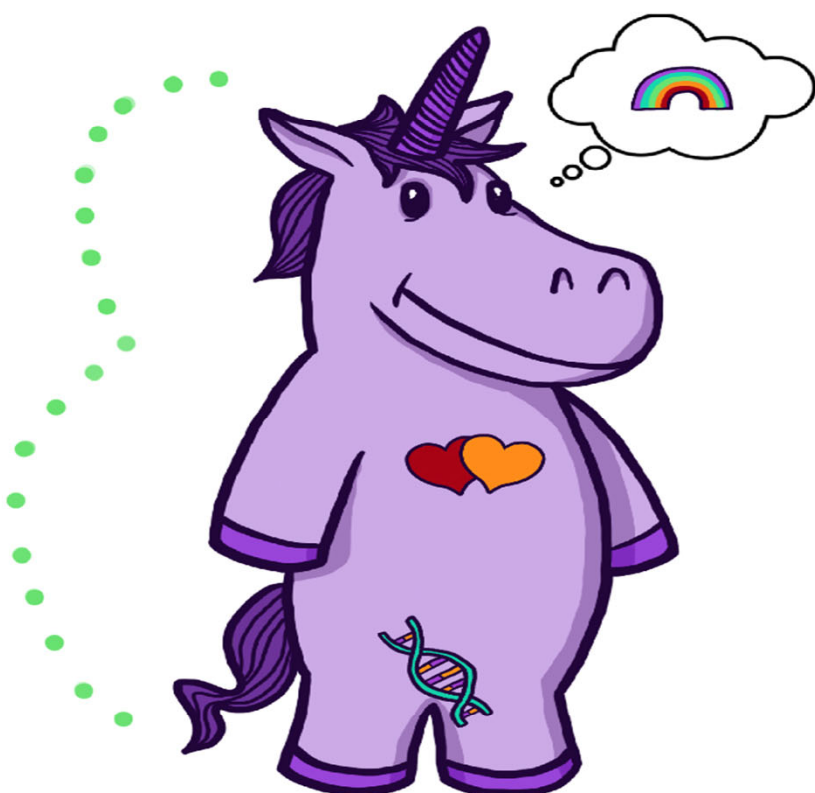


**Sexual Orientation:**  
Gender(s) of your  
sexual/romantic partners

(National LGBTQIA+ Health  
Education Center, 2020)

# The Gender Unicorn

Graphic by:  
**TSER**  
Trans Student Educational Resources



To learn more, go to:  
[www.transstudent.org/gender](http://www.transstudent.org/gender)

Design by Landyn Pan and Anna Moore



LGBTQIA



# What does LGBTQIA mean?



## LESBIAN / GAY

A person attracted towards people of the same gender

## BISEXUAL

A person who is attracted to people of the same gender and other genders



## TRANSGENDER

A person who identifies differently from their birth sex. NOT all trans people undergo surgical/hormonal transition to become what they identify as

## QUEER / QUESTIONING

Queer is used by those who are not one specific gender identity, but all the genders

A person is Questioning when they are unsure of what gender and/or sexual orientation they want to be identified as



## INTERSEX

A person who was born with biological characteristics that can make it hard to know the gender

## ASEXUAL

A person who does not feel an attraction to neither a man or woman





# Pronouns and Terminology

**Transgender man** (he/him/his): Female assigned sex at birth

**Transgender woman** (she/her/her): Male assigned sex at birth

**Cisgender:** Gender is congruent with sex assigned at birth

**Gender minority:** Gender identity different than assigned sex at birth (transgender, nonbinary, other)

**Nonbinary** (they/them/their): Outside the female-male gender binary

-Genderqueer, genderfluid, agender, pangender, gender-expansive

**Gender fluid:** Gender identity varies over time, may identify as more feminine at some times and more masculine at other times

(National LGBTQIA+ Health Education Center, 2020)



# How can I affirm gender in clinic?

- Ask for everyone's names and pronouns and consistently use these, even when speaking to someone else about the person
- Badge buddies or pins

## **Examples:**

"I would like to be respectful, how would you like to be addressed?"

"What name do you go by and what are your pronouns?"

(Eliason & Schope, 2001)



# How does this change my care recs?

- Cancer prevention for lesbian and bisexual patients
  - Cervical and breast cancer
- Preventative care based on anatomy and hormone use
  - Mammography for transmasculine patients with breast tissue and transfeminine patients who have used estrogen
- Screening for depression, tobacco/substance use, interpersonal violence, need for social service support
- Sexual history and social history considered dependent on chief complaint
  - Febrile illness, diarrheal illness, abdominal pain

(National LGBT Health Education Center, 2020)



# Tips for Sexual History Taking

- Ask questions that capture diverse sexual behaviors
- Keep your questions open and non-judgemental
- Do not act surprised by any information shared
- Don't forget the 5 P's



**Partners**



**Practices**



**Past STI Hx**



**Protection  
from STDs**



**Pregnancy Plans**

(Eliason & Schope, 2001)

# How do I ask these questions?

## **Questions about partners:**

"How many sexual partners do you have?"

"Does your primary partner have other sexual partners?"

## **Questions about protection:**

"How often do you use condoms?"

"How do you decide when to use condoms?"

"What is your approach to avoiding STDs?"

## **Questions about transgender surgeries:**

"Have you had any gender-affirming surgeries?"

## **Questions about practices:**

"What types of sex are you having?"

Feel free to specify "anal/rectal, oral, vaginal"

"Do you put your penis inside your partner, does your partner put their penis inside you, or both?"

"Have you been a top or bottom?"

"Are toys used on yourself or your partner?"

"Is there exposure to sperm?"





# Common Pitfalls

- Terminology changes frequently
- Something that was okay to say in the past may now be outdated and hurtful
- You may hear older LGBTQ patients use outdated terms, you can mirror the patient's terms or use updated terms

(Joint Commission, 2011)

# Wait, what did I say wrong?

- ❖ Use “gay/lesbian/queer” vs. “homosexual”
- ❖ Use “transgender man/woman/person” vs. “transgendered, tranvestite, a transgender”
- ❖ Use “sexual orientation” vs. “sexual preference” or “lifestyle”
- ❖ Use “pronouns” vs. “preferred pronouns”
- ❖ Use “chosen name” or “name you go by” vs. “preferred name”
- ❖ Use “name in official documents” vs. “real name”
- ❖ Use “gender affirming” vs. “transition” or “sex change”

(National LGBT Health  
Education Center, 2020)

# Unsure? Use inclusive terms

"How can I help you today, Ms. Smith"

"How can I help you today?"

"He is in the exam room"

"The patient is in the exam room"

"Do you have a boyfriend/girlfriend?"

"Do you have a significant other?"  
or "Are you in a relationship"



# What do I do when I make a mistake?

Apologize but do not overdo it

*"I am sorry for my mistake I did not mean to be disrespectful "*

*"I am sorry. I did not mean to respect you. I am still learning. Feel free to correct me any time I say the wrong thing"*

(Joint Commission, 2011)





## Summary

- As nurse and providers, it is our duty to advocate for our patients and provide inclusive care in an effort to reduce health disparities
- Improved knowledge, comfort, and competency is a key piece to achieving this goal

Understand & Advocate

# Resources for Clinicians

## **LGBTQIA+ Glossary of Terms for Health Care Teams** *(PDF)*

<https://www.lgbtqiahealtheducation.org/wp-content/uploads/2020/02/Glossary-2022.02.22-1.pdf>

## **Healthcare Experiences of LGBTQIA+ People Community Panel (2020)** *(Video)*

<https://www.lgbtqiahealtheducation.org/courses/healthcare-experiences-of-lgbtqia-people-community-panel-2020/>

## **Fenway Guide to Lesbian, Gay, Bisexual, and Transgender Health, 2<sup>nd</sup> Edition** *(Textbook)*

## **Top Issues Resource Kit**

<https://store.samhsa.gov/sites/default/files/d7/priv/sma12-4684.pdf>



# Resources

- Eliason, MJ & Schope, R. (2001). Does “Don’t ask don’t tell” apply to health care? Lesbian, gay, and bisexual people’s disclosure to health care providers. *Journal of the Gay and Lesbian Medical Association*, 5(4):125-34.
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- Joint Commission (2011). *Advancing effective communication, cultural competence, and patient- and family-centered care for the lesbian, gay, bisexual, and transgender (LGBT) community: a field guide*. Available from: <http://www.jointcommission.org/assets/1/18/LGBTFieldGuide.pdf>.

## Resources (continued)

- **Medina-Martínez, J., Saus-Ortega, C., Sánchez-Lorente, M. M., Sosa-Palanca, E. M., García-Martínez, P., & Mármol-López, M. I. (2021). Health Inequities in LGBT People and Nursing Interventions to Reduce Them: A Systematic Review. *International journal of environmental research and public health*, 18(22), 11801. <https://doi.org/10.3390/ijerph182211801>**
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- National LGBT Health Education Center. (2020). Affirmative Services for Transgender and Gender Diverse People—Best Practices for Frontline Health Care Staff. National LGBT Health Education Center: The Fenway Institute; <https://www.lgbtqiahealtheducation.org/publication/affirmative-services-for-transgender-and-gender-diverse-people-best-practices-for-frontline-health-care-staff/>
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