

Role of nursing professionals in making hospital stay effective and less stressful for Lesbian, Gay, Bisexual and Transgender patients: A brief overview

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Abstract

Health is a prime importance of every human being. Nursing personnel are the care providers who take oath to provide care to all irrespective of sex, caste, creed and religion, though the present scenario depicts some discrimination regarding care towards LGBT due to lack of knowledge, experience, and readiness. Diversity among LGBT population makes their health needs unique in each and every aspect of their life and that leads to high rate of admission in the hospital. LGBT clients' discriminatory experiences place them at risk of alcohol abuse, depression, suicide, self-harm, violence, substance abuse and HIV. Prejudice and stigmatization against LGBT people among nursing personnel may reduce accessibility towards comprehensive health care. Nurses are the key person in health care setting who can advocate the patients need and give care accordingly. The readiness and positive attitude towards LGBT patients can make hospital stay effective. Scarcity in research studies make an obstacle to provide evidence based strategies for giving effective care readily available for this population. In this paper we discuss the common barriers that the nursing personnel face while dealing with LGBT patients as well as the difficulties LGBT population face. Emphasis will be on the role of nursing personnel in making hospital stay less stressful for LGBT individuals.

Keywords: LGBT, nursing personnel, challenges, hospital stay

Introduction

Health care is the right of every individual irrespective of their sexual orientation. Discrimination, stigmatisation, isolation compel the LGBT population towards poor health seeking behaviour. Knowledge and positive sensible attitude need to build of health care professionals. Respectful dealing is the only necessary tool for improving health condition of the LGBT population.

On 6th September 2018, consensual gay sex was legalised by India's Supreme Court.

It is very difficult to estimate total population of LGBT as most surveys don't ask sexual orientation and gender identity.

Though healthcare field is still not as inclusive as it needs to be, some progress has been made in making care for LGBT patients more welcoming and accessible (clinical professor of nursing in the College of Nursing and Health Professions at Drexel University in Philadelphia).

Nurses can advocate the LGBT patients and may inspire change. (Zuzelo)

Best practices such as making changes in medical records and hospital paperwork about sexual orientation and gender identity helps in equality. According to Zozelo, the most important thing for nurses to remember that not to have any preoccupied ideas about their patients. Nurses Knowledge about the unique healthcare issues faced by LGBT patients can ensure quality health care.

Researchers commonly mentioned that LGBT individuals face health disparities due to societal stigma, discrimination, and violation of their civil and human rights. These societal attitudes against LGBT population lead to high exposures to mental disorders, substance abuse, and suicide. Experiences of violence and victimization are very common for LGBT individuals, and have long-term effects on the individual and the community. Personal, family, and social acceptance of sexual orientation and gender identity affects the mental health and personal safety and also secured the lives of LGBT population.

There is more need of research to understand health disparities among LGBT community, for that we need to increase the number of nationally-approved representation regarding health-related surveys that collect information on sexual orientation and gender identity (SOGI).

Data estimates that 10 to 20 percent of mental health professionals nationwide still attempt to convert their clients (clinical psychologist Lata Hemchand, PhD).

LGBT health disparities

Nursing professionals must be aware of LGBT health need for two reasons: First, there is a long history of LGBT discrimination in health care that affects health-seeking behaviour and access to care. Until 1973, homosexuality was listed as a disorder in the Diagnostic and Statistical Manual of Mental Disorders (DSM). Transgender status was included as “gender identity disorder” in the DSM up until 2013, when it was replaced by the more patient-centered term gender dysphoria. The discrimination, stigma, and internalized homo and transphobia experienced by LGBT individuals in their day to day lives; it leads to mental health problems and other unfavourable health outcomes. For many LGBT individuals, the minority stress they experience on the basis of sexual orientation and gender identity intersects with inequalities associated with race, ethnicity, and social class.

To address these disparities, Healthy People 2020 recommends:

- Data collection to gain information about what LGBT patients have experienced in previous healthcare encounters
- Increased LGBT education for future healthcare providers
- Higher rates of depression, anxiety
- Higher rates of violence victimization
- Continuing work in the area of anti-bullying and harassment policies and enforcement
- Increased support in the form of social services to help decrease homelessness, suicide, and lack of exposure to healthcare
- Continuing work in HIV research and education and prevention of all STIs.

Importance of health of the LGBT population

Reducing LGBT health disparities and increasing efforts to promote LGBT health are important to ensure that LGBT population can lead long, healthy lives respectfully.

Lesbians are less likely to get services for prevention of cancer as some individuals may choose hormonal therapy with or without sex reassignment surgery. A person on estrogen therapy for transitioning to female, for example, may be reluctant to discuss cardiac issues (a potential risk) for fear of withdrawing hormonal therapy; lesbians and bisexual women are more likely to gain weight or become obese; and gay men are at higher risk of HIV/AIDS and other sexually transmitted diseases. There are many benefits of addressing health concerns and reducing disparities include:

- Reductions in disease transmission and progression
- Increased mental and physical well-being
- Reduced health care costs
- Increased life expectancy

Social determinants affecting the health of LGBT population largely relate to maltreatment and discrimination. Examples include:

- Legal discrimination in access to health insurance, employment, housing, marriage, adoption, and retirement benefits
- Lack of laws protecting against bullying in schools
- Lack of social programs targeted to and/or appropriate for LGBT youth, adults, and elders
- Shortage of health care providers who are knowledgeable, culturally competent and having empathy in LGBT health

LGBT health requires alarming attention from health care system and nursing professionals to reduce disparities like:

- LGBT youth are 2 to 3 times more likely to commit suicide.
- LGBT youth are more likely to be homeless.
- Geriatric LGBT individuals experience additional barriers to health because of separation and a lack of social support and culturally sensitive and competent providers.
- LGBT populations have the highest rates of tobacco, alcohol, and other drug addiction.

Continuing Issues in LGBT Health

A number of issues will need to continue to be evaluated and addressed over the coming decade, including:

- Nationally representative data on LGBT Americans
- Prevention of violence and homicide toward the LGB community, and especially the transgender population
- Resiliency in LGBT communities
- LGBT parenting issues throughout the life course
- Exploration of sexual/gender identity among youth
- Need for a LGBT population wellness model

- Recognition of health needs among LGBT population.

Changing attitudes

Changing attitudes of each and every individual is a key priority to avoid disparity.

Such interventions need to happen at every level such as at schools, corporations and other venues by providing training on sexual orientation and gender identity.

Just like other areas, in the area of nursing curriculum has also very little exposure and information about health issues of LGBT populations. Lack of research is very eminent in the field of nursing especially in graduation and post-graduation level. So, lack of knowledge and exposure is the most commonly identifiable barrier of nursing teachers. Heterosexists are very much prominent in nursing procedures and practices. Lack of skill make this population invisible to health care system (Lim, Johnson, & Eliason, in press), (Eliason, DeJoseph, & Dibble, 2010), (Sirota, 2013), and (Morrison & Dinkel, 2012; Rondahl, 2011).

LGBT Health across the Life

LGBT individuals often have to confront social ostracism and family rejection. In severe cases, family rejection may take the form of expelling the child from the home; this has contributed to a higher burden of homelessness among LGBT youth. However, it is important to note that many LGBT youth, as well as adults, show remarkable resilience to life challenges. Research has shown that family acceptance of LGBT adolescents and young adults lead to greater self-esteem, social support, and better health outcomes, as well as protection against substance abuse, depression, and suicidal ideation.

The physical environment that contributes to healthy LGBT individuals includes:

- Safe schools, neighbourhoods, and housing
- Access to recreational facilities and activities
- Availability of safe meeting places
- **Access to health services**

LGBT invisibility

To improve health care qualities of LGBT patients and their families the important step is visibility of LGBT population within general population. More welcoming, safe, and inclusive environment in the hospital can make LGBT population feel more comfortable and acceptable in the health care facilities. To establish above mentioned LGBT friendly

environment health care system of India need to built the Health Care Equality Index (HEI), as a joint program of the Human Rights Campaign and several LGBT advocacy programmes with the help of LGBT self - help group, youth volunteers, social workers, several NGOs. In these groups an interested, skilled, empathetic nursing personnel can actively participate and acquaint more skill, knowledge and develop positive attitude towards LGBT population to give effective care during their health needs.

Creating an Inclusive Environment

Inclusive and respectful

To create a centre of excellence, organizations should ensure that all employees attend annual LGBT cultural sensitivity training. This training is vital so that each employee is aware of clearly defined, inclusive expectations and interventions for LGBT patients and their families. All employees should embrace a full-acceptance approach to providing care for the LGBT patient, family, and community. Full acceptance means that we respond with open and welcoming verbal and nonverbal behaviours during the entire patient care experience to foster trust and acceptance, resulting in more effective care.

Healthcare facilities should instruct nurses on how to sensitively inquire about a patient's sexual orientation and gender identity to enhance patient-provider interactions. Many LGBT patients have experienced bias, neglect, and unfounded hostility from healthcare providers based solely on their sexual orientation or gender identity that may make them postpone seeking medical care for both acute and chronic conditions. During initial interaction with patients, ask whom they would like to be included in their care plan, such as a spouse or partner, and if they wish to exclude anyone, such as in the case of biological family members who aren't supportive of the patient. Include both parents of minor children in the care plan unless there's a legal document that prohibits the notification of the other parent. Encourage same-sex parents to participate in all aspects of their minor children's care.

The centre of excellence model is also inclusive of the healthcare environment. Organizations should have gender-neutral bathrooms available that provide a safe space for no binary and transgender individuals. Common areas should include LGBT-themed posters, artwork, pamphlets, and magazines to indicate a commitment to serving the LGBT community. When healthcare facilities create an environment that promotes a culture of acceptance, it ensures

that the holistic needs of both young and older LGBT patients, their families, and their community are understood and respected, which promotes optimal wellness.

Disparities in care or passive acceptance shouldn't be tolerated by any healthcare team member. Passive acceptance is when one responds to a situation with quiet indifference; this may be perceived as unsupportive and foster distrust between the patient and healthcare provider. If any misconduct happen like - a team member of care givers/ nursing professionals is exhibiting passive acceptance towards patients, create an open dialogue with him or her, involving administrative team members to prevent recurrence.

Intake to discharge

The centre of excellence model extends throughout the entire patient experience, from intake assessment to discharge. The following are helpful strategies that can be incorporated into the care plan for LGBT patients.

- **Intake assessment.** During the intake assessment, ask the patient in a confidential setting: “What's your birth name?” and “What name would you like to be addressed by during your hospital stay?” This conveys sensitivity to patients who may wish to be identified by a name that reflects their gender identity. Limit in history taking to those questions that are relevant to the present visit or problem. Make sure that all of the patient's medications are documented, including hormone replacement therapy (HRT); it's vital that HRT medications are considered equally as important as other medications.
- **Admission.** Utilize a two-step method for collecting gender identity data during the admission process, inquiring about patients' present gender identity and then their sex assigned at birth. The two-step method has been found to be more effective than a single question querying gender/sex with choices of “male,” “female,” and “transgender.”

Convey to LGBT patients a prior intimation to use their birth name if it varies from the name by which they wish to be identified; otherwise using a patient's birth name may cause distress if they aren't prepared and also convey the feeling of understanding of their difficulty and support their present gender identity.

- **Treatment.** Married same-sex couples now have the same legal rights and benefits as married heterosexual couples, and are recognized on official documents such as birth and

death certificates. Encourage LGBT patients' families to participate in the care plan. Actively support the patient's family unit to be present for all care discussions. This inclusion and participation of the family unit is vital to the health and wellness of the patient.

- **Discharge.** When transferring an LGBT patient, ensure that the receiving nurse or facility is aware of the patient's and family's specific needs. To gain an understanding of unique needs, respectful communication and establishing a trusting rapport with the patient and family are key roles of nursing professional.

A safe space

Take an active role in ensuring that all LGBT patients and their families are provided healthcare services in a safe, welcoming, and culturally appropriate environment. Increased awareness and cultural sensitivity among health care settings as well as nursing professionals can change adverse response to foster trust among this patient population.

Comfort Level

One study suggests in this aspect that, when asked to nursing professionals how much feel comfortable during working with LGBT patients, maximum number of the key informants stated that they were comfortable providing such care, whereas 12% stated they personally were not comfortable providing care. Another 17% did not answer or, were not sure how to answer the question.

Actually many of nursing professionals think they are not prepared enough to handle the diversity of health concerns and issues that arise from this population. Nurses are accustomed to address a spouse of a different sex, but not of the same sex.

They may be more comfortable with gay or lesbian patients but when taking care about transgender, bisexual they're not that much of comfortable. There's a climate of homophobia that's still in the environment.

From the above mentioned examples this is clearly depicted that since nursing training period if exposure to LGBT population can be provided with theoretical knowledge under accurate and effective supervision then these sorts of uncomfortable feelings reduced gradually and one can accept a patient as he or she is irrespective of sexual orientation.

Implications/Recommendations

Nursing curriculum still contain lack of information about LGBT health topics (Lim et al., in press), so it is not surprising that practicing nurses are still not culturally sensitive to the health needs of LGBT patients. LGBT health care education needs to begin in nursing schools and programs, but research shows that nursing educators are not yet well prepared to educate LGBT health issues (Sirota, 2013). Therefore, nursing practices and procedures are still heterosexist (Morrison & Dinkel, 2012; Rondahl, 2011). That is why, many registered practicing nurses may be unaware that some patients even some co-workers are LGBT, or they hold the belief that there are no differences in patient care for LGBT versus heterosexual patients. To move the field of care forward,

A. School of nursing can-

- Use the Health Equality Index to assess the LGBT issues in the college/ school of nursing
- Incorporate culturally competent, patient-centered training in nursing education curriculum
- Utilize case studies, assignments, readings, on-line training modules and other already existing educational materials from Gay and Lesbian Medical Association (GLMA) for health care professionals and advancing equality. Lavender Health (www.lavenderhealth.org) provide links to Web sites and on-line films on LGBT topics (e.g. the Family Acceptance Project; PFLAG- Parents and Friends of Lesbian and Gay)
- Organize expert intellectuals to take class for open discussions about pattern of communication and LGBT health issues in general or in relation to specific nursing specialties
- Invite panel discussions of LGBT patients sharing their health care experiences
- Organize interactive sessions in providing LGBT competent care in clinical simulation courses
- Offer an LGBT health certificate to create nursing expertise
- Explicit discussions in clinical settings about dealing with discomfort situation during working with patients who are different from that nursing professional in some way. Health care institutions also have a major role to play in meeting new government standards of welcoming an inclusive health care for all. Health care organizations can
- Provide annual updates and ongoing training as new policies and legislative mandates are passed. If institutions are unable to develop these trainings, several continuing education opportunities are now available (e.g., Eliason et al., 2009 offers 21 hours of CE; Lim, Brown, & Kim's, 2014 article in AJN offers 2.6 hours of CE).

B. Health care system (for nursing professionals) can-

- Include LGBT health training during new employee orientation
- Provision of active recruitment and hire openly LGBT employees
- Whenever possible LGBT issues are included to encourage diversity initiatives
- Review and update policies, procedures, and written forms to be inclusive.
- Add the terms gender identity, gender expression, and sexual orientation to employee-non discrimination policies and emphasize colleagues' correct names and pronouns.
- Ensure that personnel records contain the chosen names and pronouns for employees and their families, so that all communication is addressed accordingly.
- Develop a policy that allows employees to use rest rooms based on their gender identity. If possible, also provide single restroom that does not specify a gender.
- Universally apply dress codes to all genders (i.e., do not specify certain codes for women or for men) or according to their gender identity.
- Ensure that anti-bullying policies include bullying based on gender identity, gender expression, and sexual orientation.
- Prepare guidelines that support the successful and consistent administrative handling of an employee's gender affirmation. Effective guidelines include: a communication plan for notifying colleagues about pronouns, names, and other relevant information. The organization should also have a system for changing gender, pronouns, and names on employee's personal record file.
- Educate nursing professionals (especially supervisors) on the new or revised policies, explaining the rationale behind them.
- Provision of several options for reporting violations of policies, and develop a clear protocol for addressing against violations.
- Check for accountability – Are the policies being enforced? Do employees believe with confidence that their supervisors or leaders will do anything against violations?
- Expand the meaning of Family and in Medical Leave policy include anyone related by blood or affinity towards relationship with the employee is equivalent to a family relationship.
- Ensure that employee health insurance plans cover transgender care, such as hormone therapy and surgeries. It may be necessary to negotiate with the insurer to remove exclusionary statements and add gender-affirming care.
- Encourage the creation of LGBT employee affinity groups.
- LGBT health training can be incorporated into the regular process of health care system, into the annual diversity and inclusion training. Although the training should focus

on patient care and communication, nursing professionals can be reminded that the lessons also apply to interactions with colleagues.

Recommended training topics may include:

- Basic LGBT terminology and concepts.
- LGBT health disparities and issues to address
- Communicating with cultural humility, including using correct names and pronouns.
- Preventing and addressing implicit bias.

The recommended check list for LGBT proficient and inclusive workplace:

	Yes	Partial/In Process	No
Doctors are given access to and time for training in LGBT health competencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nursing professionals are given access to and time for training in LGBT health competencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LGBT competencies are incorporated into diversity and inclusion training for all health care professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee nondiscrimination policies include gender identity, gender expression, and sexual orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees can use restrooms based on their gender identity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dress codes are not gender specific	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dress codes allow employees to dress according to their gender identity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anti-bullying policies include gender identity, gender expression, and sexual orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clear protocols for reporting and addressing policy violations have been established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guidelines on employee gender affirmation have been established and disseminated to supervisors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personnel records include employees' chosen names and pronouns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All staff receive annual training on LGBTQ-inclusive policies and guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisors demonstrate that they know and understand LGBT-inclusive policies and guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Health insurance plans cover transgender care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family and Medical Leave policy includes anyone related by blood or affinity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LGBT is incorporated into diversity and inclusion training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LGBT employee affinity/resource groups are encouraged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Events celebrating LGBTQ community and culture are honored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conclusion

Professionally, nurses will be benefitted from enhancing knowledge, ongoing development, and exposure in area of LGBT health care needs. Financial reward, certification also enhances and strengthens nursing professionals' career development as well as advancement potential, improving interest of nursing professionals towards LGBT population.

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