



## Risk Control

# Transgender Patients: Toward Gender-Affirming Care

Bill C-16 an Act to amend the Canadian Human Rights act and Criminal Code received royal assent on June 17, 2017. The bill adds prohibitions against discrimination on the basis of gender identity and gender expression to the Canadian Human Rights Act, amends the criminal code to extend protections against hate speech and allows judges to take into consideration when sentencing whether a crime was motivated by hatred of the victim's gender identity or expression.

Despite these protections, there is evidence of continuing bias against transgender patients. Canadian research has identified that transgender (trans) individuals are medically underserved in both primary and specialist care settings. Numerous barriers include: lack of provider knowledge about trans issues; denial of care; and/or refusal to approve hormone therapy and/or gender affirming surgeries<sup>1</sup>. Individual encountering emergency care reported they encountered verbal harassment or denial of care.

An unwelcoming or humiliating atmosphere represents a threat not only to the well-being of transgender patients but also to nurses, who are vulnerable to sanctions arising from discriminatory acts. This bulletin is designed to help nurses eliminate prejudice and insensitivity toward transgender patients from their practice, and moving toward greater inclusiveness and accommodation. At a moment when transgender rights issues are frequently in the news, nurses must focus on enhancing their communication practices and cultural awareness to maximize patient satisfaction and provide respectful healthcare.

## Training

Nurses who have had little exposure to transgender individuals may lack awareness of the special physical and emotional needs of this patient population. Cultural competency training focuses on developing a common core of knowledge and understanding

that allows practitioners to serve transgender patients in a sensitive and respectful manner. The following organizations provide educational resources in this area:

- Callen-Lorde Community Health Center, [Transgender Health Training](#).
- Center of Excellence for Transgender Health, [Transgender Health Learning Center](#).
- National LGBT Health Education Center, [Webinars & Video Training](#).

All nurses should be aware that the following behaviors and practices are discriminatory and stigmatize a transgender individual:

- Use of improper patient names and/or personal pronouns.
- Inappropriate questions and/or exams.
- Laughter, taunting and mockery, as well as use of slurs, even in a "humorous" context.
- Disrespectful treatment such as making certain patients wait longer than necessary for care or ignoring their questions or requests.
- Breaches of confidentiality in the registration, examination and billing processes.
- Failure to comply with the standard of care relating to gender transition.

<sup>1</sup> BMC Health Services Research, Rachel Giblon and Greta R. Bauer 17:283

## Glossary of Basic Gender-related Terms

<b>Gender Dysphoria</b>	Gender roles and/or gender expression that do not match social and cultural expectations; gender non-conforming; gender variant.
<b>Gender Expression</b>	How one outwardly shows gender; including through name and pronoun choice, style of dress, voice modulation.
<b>Gender Identity</b>	Internal and psychological sense of oneself as a woman, a man, both, in between, or neither.
<b>Gender Non-conforming</b>	This term refers to people who do not confirm to society's expectations for their gender roles or gender expression. Another term used for this is 'gender-variant'.
<b>Genderqueer</b>	This term refers to people who do not confirm to society's expectations for their gender roles or gender expression.
<b>Trans (Transgender, Transsexual)</b>	Trans is an umbrella term that describes a wide range of people whose gender and/or gender expression differ from their assigned sex and/or the societal and cultural expectations of their assigned sex.
<b>Transition</b>	Refers to the process during which trans people may change their gender expression and/or bodies to reflect their gender, including changes in physical appearance (hairstyle, clothing), behaviour (mannerisms, voice, gender roles), identification (name, pronoun, legal details), and/or medical interventions (hormone therapy, gender-affirming surgery).

Source: Transgender Health Information Program, Glossary. British Columbia, Provincial Health Services Authority, 2018.

## Education

Use of accurate, appropriate and respectful terminology regarding gender status is critical to being welcoming and courteous to any individual. The definitions (above) help clarify some important gender-related concepts and should be reviewed by all nurses.

Upon entering the healthcare system, transgender patients sometimes fail to receive quality care due to a scarcity of professionals with proper training in relevant medical and behavioral issues, including gender transition services, hormonal therapy and gender-affirming surgery. To remedy this situation, nurses should consider filling the gaps in their own knowledge about transgender-affirming care using the following standard resources:

- Center of Excellence for Transgender Health, "[Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People](#)," second edition, 2016. Deutsch, M., editor.
- The World Professional Association for Transgender Health, "[Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People](#)," seventh version, 2011.
- The BC Trans Health website – <http://transhealth.phsa.ca/for-service-providers-2/resources> – also has resources about caring for trans individuals.

## Patient Protection and Accommodation

**Privacy.** Identifiable information about a patient's transgender status or transition-related services constitutes protected health information under privacy legislation. To avoid potential violations, refrain from asking patients about transgender status, sex assigned at birth or transition-related procedures, unless the query is directly related to patient care. If the information is deemed medically necessary, nurses should explain to patients why it is relevant to their care and assure them that it will be treated in a confidential manner. In addition, nurses should inform transgender patients that they have the right to refuse examination or observation by healthcare personnel who are not directly involved in their care.

**Addressing patients.** Once a patient has provided a preferred name, nurses must use that name and the patient-designated pronoun in all interactions. Failure to do so may constitute harassment. Nurses should also avoid asking probing questions or making inappropriate statements about patients' bodies and/or surgical status – e.g., "*What is between your legs?*" or "*You have a male anatomy, so I will refer to you by your male name.*" Finally, terms such as *she-male*, *he-she*, *it*, *tranny*, "*real*" woman or "*real*" man are offensive and should never be used.

Adapted from CNA's '**Transgender Patients: Toward a More Inclusive Environment of Care**'

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