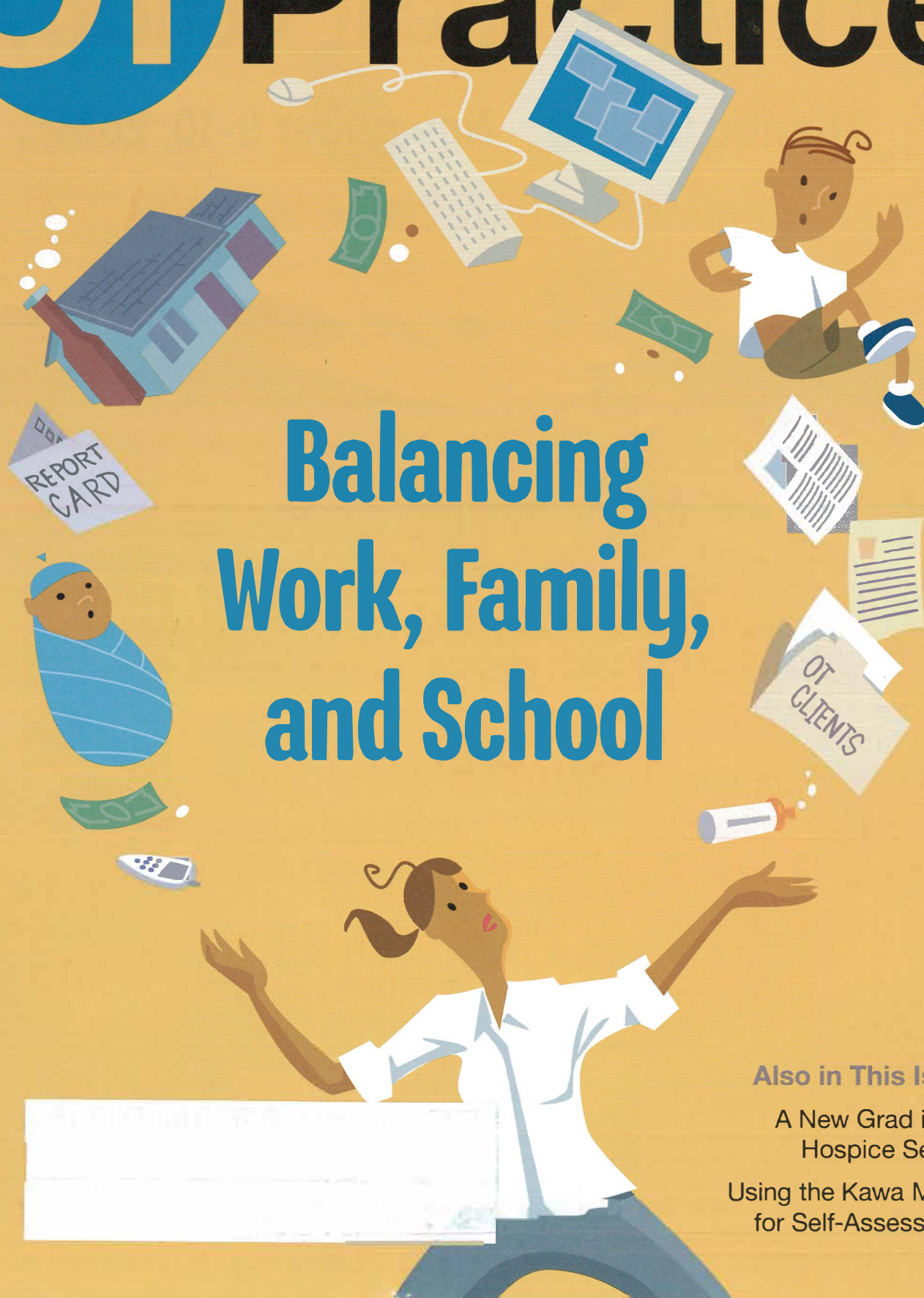


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OT Practice[®]

Balancing Work, Family, and School



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Addressing LGBTQ+ Issues With Occupational Therapy Clients

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Occupational therapy's scope of practice intersects with numerous concerns of lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ+) communities. This population faces disproportionately high rates of disability, eating disorders, substance abuse, mental illness, suicidal ideation, sexually transmitted infections, and other serious health concerns (Fenway Institute, 2013; Pandjiris & Kosciwicz, 2017). Additionally, LGBTQ+ individuals are less likely than others to have access to quality health care. The barriers to accessing health care services include financial problems because of employment discrimination (Grant et al., 2011), lack of health insurance, and a

widespread lack of cultural competence education among health care providers. Many LGBTQ+ individuals have reported negative interactions because of cultural insensitivity among clinicians. Many avoid seeking necessary health care services for fear of receiving inadequate or insensitive care, which exacerbates the health disparities they often face (Fenway Institute, 2013). LGBTQ+ patients also frequently find themselves educating health care practitioners on their medical needs because of a lack of provider education on LGBTQ+ health issues (Shimkin, 2015).

This article provides some background on LGBTQ+ clients' occupational needs.

ADLs

Self-expression through appearance can be of great importance to LGBTQ+ people, especially transgender individuals. Clothing, hair, and makeup are merely superficial and unimportant for some people; for others, appearance as a means of identity expression is paramount and should not be taken lightly.

For transgender people, dressing may include items that alter the appearance of primary or secondary sex characteristics, such as a gaff (a compressive undergarment that minimizes the appearance of the penis and testes) or a binder (a compressive undergarment that flattens the chest). Although medical necessity may dictate what clients can wear, clinicians should keep in mind that identity-confirming clothing may be extremely important for individuals who express their identity through appearance.

The safety and availability of public restrooms can have a serious effect on toileting for transgender people. The lack of safe public restrooms results in high rates of dehydration, urinary tract infections, and kidney infections for many (Herman, 2013). When working with a client with

restroom concerns, talk with them about planning trips in the community around a safe and viable toileting schedule, taking into consideration the availability of safe public restrooms.

Sex is an important topic to be able to discuss with all clients. Establishing a therapeutic relationship with clients is an important step toward effectively communicating about their sexual orientation and activity, which is why LGBTQ+ cultural competence is important for therapeutic use of self, communication, and client outcomes. After hip or knee replacement surgery, for example, a limited number of sex practices are safe for new joints; unfortunately, guides for safe sex after joint replacements are often designed for heterosexual couples only. LGBTQ+ inclusive guidelines for safe sex with a new hip or knee joint can be found at www.LGBTQ-OT.com/sex-after-hip-or-knee-replacement.

IADLs

Health management and maintenance may be affected by LGBTQ+ identities. In addition to the barriers to quality health care services cited above, some transgender individuals choose to undergo hormone therapy, which involves scheduled, self-administered hormone treatments. Hormone therapy affects metabolism and nutritional needs, yet many nutritionists lack LGBTQ+ health training (Pandjiris & Kosciwicz, 2017). You may help LGBTQ+ clients by discussing information about LGBTQ+ issues with nutritionists and encouraging them to seek further information.

Schools are also important settings for occupational therapy practitioners to help provide education about LGBTQ+ issues. In addition to navigating the complexities of public restroom safety, many transgender youth face the additional challenges of gendered school uniforms, locker rooms, and bullying in school. These issues are especially difficult for young people to face when parents and school staff are unsupportive. Occupational therapy practitioners who work in schools can help by bringing LGBTQ+ cultural competency trainings to staff and students, helping to incorporate information and understanding into curricula and classroom conversations.

What Occupational Therapy Practitioners and Educators Can Do

Many resources are available to help health care practitioners and educators improve their LGBTQ+ cultural competence. In-person cultural competency trainings (also known as diversity trainings, sensitivity trainings, or LGBTQ trainings) designed for health care settings and schools are available in many areas. Additionally, the National LGBT Health Education Center (www.lgbthealtheducation.org) offers clinicians free online interactive learning modules and webinars, as well as many other helpful resources. Practitioners and educators are encouraged to seek this education and to invite trainers to their workplace to help all staff improve their LGBTQ+ cultural competence.

Other ways to make practices and communities more LGBTQ+ friendly include the following:

Inclusive Paperwork

Paperwork that allows clients to declare a first name that may be different from their legal name, pronouns, gender identity, gender assigned at birth (physiological sex), and sexual orientation enables all clients to disclose as much or as little information about their identities as they see fit. The Fenway Institute patient forms are excellent examples of what inclusive paperwork can look like, and can be found at <https://bit.ly/2MOy9UC>.

Q Cards


If you are unable to change the paperwork used at your practice, using Q Cards is recommended. Q Cards, designed to fit in a wallet, allow clients to discretely tell health care providers about their sexual orientation, gender identity, and other important sensitive information. Practitioners can keep some in their clinics and make them available to clients. For more information, visit www.qcardproject.com.

Environmental Cues

Practitioners can help foster an inclusive atmosphere through signage and symbols in their workplaces, such as brochures on LGBTQ+ health topics; signs regarding non-discriminatory policies, including sexual orientation and gender identity; and symbols of LGBTQ+ safety, such as

a rainbow flag or a sticker that indicates all are welcome. A small sign can make a big difference in how safe your LGBTQ+ clients feel in your office.

Conclusion

One of the defining traits of occupational therapy practitioners is our commitment to respecting and treating every client as a whole person. Practitioners should recognize that identity and orientation are considerable pieces of the whole. Because sexual orientation and gender identity affect all occupations, occupational therapy practitioners who are educated on health disparities and the culture of LGBTQ+ communities are best equipped to serve these clients effectively. 

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