SUGGESTIONS FOR IMPROVED CARE OF LGBTQIQA PEOPLE
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Role of Hospice Clinical Staff
Be Knowledgeable.

Be Welcoming.

Be Affirming and Open.

Be an Advocate.

Be Welcoming
Create an LGBTQIQA Friendly Environment.

Have visible non-discrimination policy that includes gender identity.

Show photos of LGBT people in Marketing Materials.

Use inclusive terminology for services.

Start where the patient/family are and let them define their needs and language preferences.

Ask about preferred name/pronouns and use these appropriately.

Be Affirming
Take a Strengths-Based Approach.

Promote LGBTQIQA creativity, resilience, and pride.

Celebrate the positive and courageous steps the patient/family have already taken throughout their lives.

Affirm the struggles of stigmatization and the impact of transphobia, homophobia, and biphobia.

Assess your own bias, practice self-awareness.
Afraid to say the wrong thing. . .
Own the mistake.

Apologize.
Move forward.
Don’t make it about you.

Dos and Don’ts
Don’t ask about genitals or surgery. If you wouldn’t ask a Cisgender person, don’t ask it!

Don’t ask personal/invasive questions that are not relevant.

DO assume that there are LGBT staff, patients, and families in your Hospice.

Don’t assume that you can identify LGBT adults. There is no one way to look or be LGBT.

Do remember a client’s sexual orientation and gender identity are only two aspects of their overall identity and life experiences.

“The only dependable test for gender is the truth of a person’s life, the lives we live each day. Surely the best judge of a person’s gender is not a degrading, questionable examination. The best judge of a person’s gender is what lies within her, or his, heart. How do we test for the gender of the heart, then?”

Jennifer Finney Boylan

“I did then what I knew how to do. Now that I know better, I do better.”
Maya Angelou