Making Your Clinic Welcoming to LGBTQ Patients

What People See

Because many LGBTQ people have experienced rejection and stigmatization due to their gender identity or sexual orientation, they are often sensitive to subtle signs in the environment that can be read as indications of whether they will be welcomed or not. Making a few simple adjustments to the space in which you practice can communicate to your LGBTQ patients that you welcome them and want them to feel comfortable.

Photographs

If you have photos of families on your walls, make an effort to include photos that portray same-sex couples and single parent families. This immediately tells LGBTQ individuals that you recognize a range of family types. Just as an African American patient might feel more comfortable in a place where she sees photos representing racial diversity, an LGBTQ individual is more likely to feel welcome in a place that demonstrates recognition of sexual and gender diversity.

Books and Magazines

When you choose magazines or books to place in your waiting room, consider including one or more titles that target an LGBTQ audience or deal with LGBTQ themes. Even if an individual has no interest in reading a gay magazine, seeing them in the waiting room will communicate an interest in serving LGBTQ patients. Pediatricians might consider having a book about a child with two mommies or two daddies as this will indicate to LGBTQ parents that they are welcome and can safely share information about their families. See “Resources” section for suggested reading materials.

Posters and Brochures

When choosing posters about medical issues or fliers and brochures to keep in your office for patients, consider including one or more that target the LGBTQ population or issues of particular relevance to this community. In our focus groups with community members, several people mentioned that seeing a poster about HIV or a brochure on lesbians and breast cancer was a sure sign that they could be comfortable at a practice.

Gender Neutral Bathrooms

If you have single-stall bathrooms, consider marking them as gender neutral, or just labeling them “rest room,” rather than having one that is designated for men and one for women. This will make it more comfortable for patients who identify as transgender or gender queer and who might be uncomfortable if forced to choose a room based on gender identity.

Your Intake and Medical History Forms

The way you treat gender, sexuality and relationships on the forms patients are asked to complete is extremely important. The easier it is for LGBTQ patients to complete the forms with answers that truly reflect who they are, the better they will feel and the more likely they will be to provide complete and accurate information. Intake forms that allow people to easily share information about their sexual orientation and gender identity will facilitate effective and respectful communication between your patients and members of your staff.
Gender
When asking about gender, many forms offer only two options: male and female. There are many people for whom neither of these options is comfortable or accurate. Individuals who identify as transgender, gender queer, gender variant (for definitions of these terms, please see our language section), etc. may find that neither of these options really applies. Some transgender individuals may choose the gender with which they currently identify, without indicating that this does not correspond to the sex they were assigned at birth.

The Center for Excellence in Transgender Health recommends a two-part question to get accurate information about gender. The first asks about the patient’s current gender identity and the second asks what sex was assigned to the patient at birth. These questions might look like the following:

1. What is your current gender identity? (Check ALL that apply)
   - □ Male
   - □ Female
   - □ Transgender Male/Transman/FTM
   - □ Transgender Female/Transwoman/MTF
   - □ Gender Queer
   - □ Additional category (please specify): ________________________________
   - □ Decline to answer

2. What sex were you assigned at birth? (Check one)
   - □ Male
   - □ Female
   - □ Other
   - □ Decline to answer

Pronouns
The Center for Excellence suggests that these two questions be followed by a question about the pronouns the patient prefers. In the transgender and gender queer community, this is considered a basic question and including it on your intake form will not only make it clear to your LGBTQ patients that you want to be sensitive to their identity issues, but may also avoid an awkward moment when you use a pronoun to refer to a patient and the patient feels a need to correct you. Here is an example of what this question might look like:

1. What pronouns do you prefer that we use when talking about you? (check all that apply)
   - □ She/her/hers
   - □ He/him/his
   - □ They/them/their
   - □ Other: Please specify: ________________________________

When you ask this question, you may sometimes receive an unexpected answer. Try not to show your surprise or respond in a way that could make your patient think that you disapprove of or are
uncomfortable with the answer. If you need more information, feel free to continue questioning in a neutral, non-judgmental fashion.

**Sexual Orientation:**
Many medical intake forms do not ask about sexual orientation. If your forms do not, you may want to consider adding a question like the one below alongside other demographic information. While it may take a little more time for patients to complete the form, it will send a clear message to LGBTQ patients that you acknowledge their existence and want to serve them well. It will also help you know how to frame questions about the patient’s relationships and sexual behavior. If you already ask about sexual orientation, we suggest you offer at least the options shown below, in order to assure that all individuals can find a response that fits them.

Do you identify as: (check all that apply)

- ☐ Straight
- ☐ Gay
- ☐ Lesbian
- ☐ Bisexual
- ☐ Other: _____________________

**Sexual Behavior**
Since identity does not define behavior, we also suggest you include a question about sexual behavior in your intake form. While the responses to this question may not tell you everything you need to know about a patient’s sexual activity, combined with questions about relationship status, it can provide some basic information and point you in the right direction for further exploration. Including such a question provides a clear communication to all your patients that you want this information and that they can feel safe sharing details of their sexual life with you. This can be helpful not only with patients who identify as LGBTQ, but for all patients who engage in behaviors they might not otherwise share comfortably because of fear of stigma or judgment.

Please describe your sexual activity during the last year (check all that apply):

- ☐ I was in a monogamous relationship with a man. (I had sex with one man only)
- ☐ I was in a monogamous relationship with a woman. (I had sex with only one woman)
- ☐ I had multiple male partners.
- ☐ I had multiple female partners.
- ☐ I had both male and female partners.
- ☐ I did not have any sexual partners.
- ☐ Other: _____________________

**Primary Relationships**
Finally, most patient intake forms ask about relationships, but many limit the possible responses in a way that makes it hard for some people to respond appropriately. The options listed below work for most people. Again, the response to this question may lead you to further inquiry.

Please describe your current relationship status (check all that apply):

☐ Single
☐ Married
☐ In a civil union
☐ In a domestic partnership, living together
☐ Partnered, not living together
☐ Divorced
☐ Widowed
☐ In a committed relationship
☐ Other: ____________________

<add internal link: comprehensive intake forms>

**Resources for Intake and Medical History Forms**

*Fenway Health*

Fenway Health is part of the Fenway Institute. Fenway has many years of experience serving LGBTQ patients and people living with HIV/AIDS. Their home page has many resources, including a client registration forms.


*Center for Excellence in Transgender Health, University of California, San Francisco*

This Center has a wealth of information including their perspective on obtaining helpful information on the patient intake form.

http://transhealth.ucsf.edu/tcoe?page=protocol-intake

**Patient Non-Discrimination Policy**

Most medical practices have some form of patient non-discrimination policy. If you do not currently have one at your practice, we suggest you adopt an inclusive policy. If you do have one, check the policy to insure that it includes gender identity and sexual orientation as protected categories.

Here is an example of an inclusive policy:

*Equal care will be provided to all patients, regardless of age, race, ethnicity, physical ability or attributes, religion, sexual orientation, gender identity or gender expression.*

Make a point of sharing this policy with patients at their initial office visit and explain to them the procedure they would use to report behavior inconsistent with the policy. This makes it clear that your practice wants LGBTQ patients (and all patients) to feel comfortable and expects them to be treated with respect and courtesy. Including your non-discrimination policy in promotional literature and advertising for your practice will let prospective patients know that you want them to feel comfortable and welcome.
How People Are Treated

Greetings
The first contact patients have with staff and how they are greeted at your practice can make a strong impression. If they feel seen and welcomed, they are more likely to relax and to provide accurate information about themselves and their lives.

Use Preferred Name
When patients come to the front desk to check in, it is important to pay attention to the cues they provide. If a patient says something like “Hi, I’m Y. I’m here to see Dr. X,” the receptionist can see immediately if the name the patient uses is the same or different from the name on the schedule. Either way, we encourage you to make it standard policy for the receptionist to ask the patient if the name on the file is the name s/he prefers to be called. This not only provides an opportunity for transgender patients who have not yet legally changed their names to provide the name they now use, but also allows all patients to indicate if they prefer to be called by something other than their full, legal name. It is also important to train front line staff to understand that sometimes they may be surprised by the name assigned to an individual. For instance, they may come across a patient who appears female and has a “man’s” name or they may meet a patient whose gender is not immediately clear to them. The better prepared they are, the more likely it is that they can receive such patients without expressing surprise or judgment in a way that makes the patient uncomfortable.

Friends and Partners
When patients bring someone with them to an appointment, it is important to show respect for both the accompanying person and the relationship the patient has with that person. Allowing the patient to define relationships and determine the role others play in the interaction demonstrates respect for the patient’s identity and relationships and can avoid awkward and uncomfortable situations. Rather than assuming that you know what the relationship is based on external factors, we suggest you and your staff ask the patient. It is easy enough to ask, “Who have you brought with you today?” which allows the patient to tell you about the person and their relationship. You can then ask whether the patient wants the other person to remain in the waiting room or accompany the patient into the exam room.
LGBTQ Welcoming Environment Checklist

Below is a list of eight environmental changes your clinic can make to communicate that it is welcoming to LGBTQ patients. Use this checklist to assess your clinic’s environment. For each element listed below, mark the box indicating whether the element is in place, in process, needs attention or isn’t relevant/appropriate to your clinic.

1. A rainbow or another equality symbol indicating that LGBTQ patients are welcome is posted on the door.
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate

2. Photos of LGBTQ people and families are posted along with photos of other families.
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate

3. Posters or other artwork focusing on LGBTQ people or issues of concern to this population are posted.
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate

4. LGBTQ friendly brochures are included with patient education information.
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate

5. At least one publication designed for LGBTQ readers is included with periodicals for patients to read in the waiting room.
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate

6. Books about LGBTQ families are included with children’s books in the waiting room.
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate

7. Single-stall bathrooms are marked as gender neutral (unisex).
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate

8. A patient non-discrimination policy that includes sexual orientation and gender identity is posted in the waiting room.
   - In place
   - In process
   - Needs attention
   - Not relevant/appropriate