



Inclusive Care for LGBTQ People with Diabetes

Watch Your Language! Terms to Avoid³

- **A transgender, or the transgenders:** Preferred language is to use a person-centered approach that avoids terms like “diabetics” or “transgenders”
- **“Transgendered”:** Implies something that was done to the person from outside rather than an identity that originates from a person
- **“Biologically male/female”, “genetically male/female”, “born a man/woman”:** Use instead “assigned male/female at birth” as that acknowledges that the biological sex may or may not align with how a person feels, how they identify or what’s going on with a person’s body (for example, with intersex).
- **“Tranny”, “shemale”, using “he/she” as one word rather than a preferred pronoun, “it” (applied to a person):** These terms are considered defamatory and you should never use them

Members of the lesbian, gay, bisexual, transgender and queer (LGBTQ) community have unique health disparities and worse health outcomes than their heterosexual counterparts, which has clinical relevance in the delivery of diabetes care and education.¹ Diabetes care and education specialists are in a pivotal position to help this medically-underserved and vulnerable population get the best possible care.

Definitions²

Gender Identity: One’s internal sense of being male or female, neither of these, both, or another – female/woman/girl, male/man/boy, other gender(s) (e.g. 58 gender options for Facebook users).

Gender Expression: The physical expression of one’s gender identity through clothing, hairstyle, voice, body shape, etc. - feminine, masculine, other.

Sex Assigned at Birth: The assignment and classification of people as male, female, intersex or another sex based on a combination of anatomy, hormones and chromosomes – female, male, other/intersex.

Sexual Orientation: Sexually attracted to men, women, other gender(s).

Romantic/Emotional Orientation: Romantically attracted to men, women, other gender(s)

Transgender: An umbrella term for people whose gender identity and/or gender expression differs from what is typically associated with the sex they were assigned at birth.

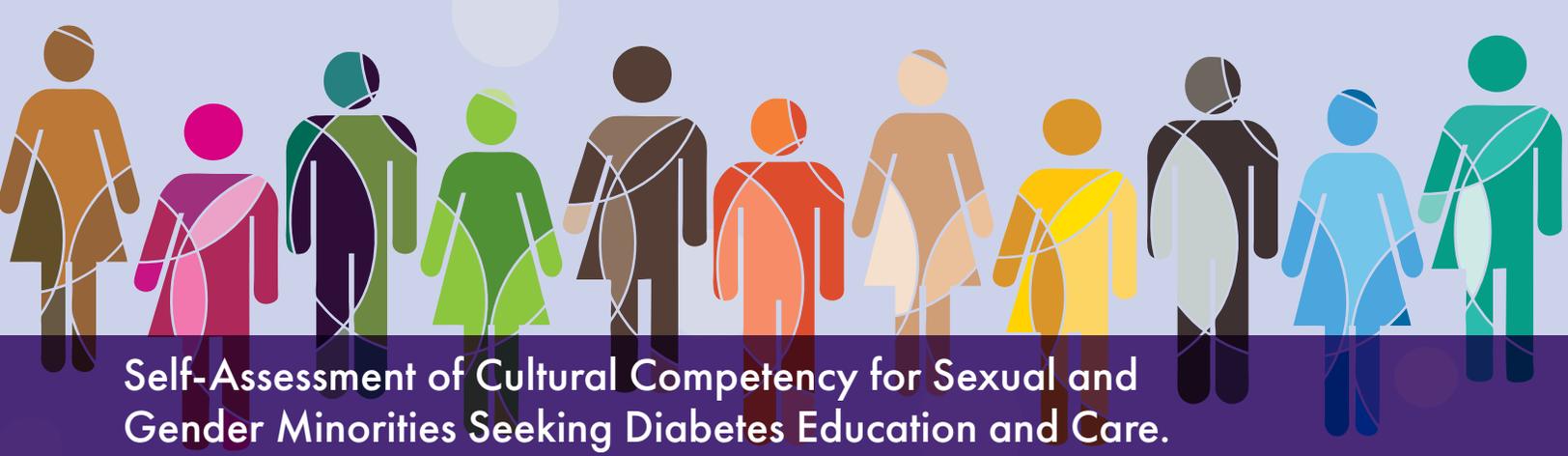
Cisgender: A term used to describe people who are not transgender, i.e., who identify with the gender assigned at birth. “Cis-” is a Latin prefix meaning “on the same side as,” and is therefore an antonym of “trans-.”

Gender non-conforming: A term used to describe some people whose gender expression is different from conventional expectations of masculinity and femininity.

Nonbinary, genderqueer: Terms used by some people who experience their gender identity and/or gender expression as falling outside the categories of man and woman.

LGBTQQIA+: Lesbian, gay, bisexual, transgender, queer, questioning, intersex and asexual people. The “plus” symbol has an expansive meaning and stands for love, acceptance and the embracing of all to ensure everyone feels welcome and no one is excluded.

Queer: A word that describes sexual and gender identities other than straight and cisgender. LGBT people may all identify with the word queer.



Self-Assessment of Cultural Competency for Sexual and Gender Minorities Seeking Diabetes Education and Care.

Answer the following questions for you and your practice to understand opportunities for improvement:

1. Do your intake forms normalize LGBTQ status by asking for sexual orientation, gender identification and "relationship status," (not "marital status")?
2. Do you let transgender individuals self-identify?
3. Do you use each person's current name and pronoun and do you apologize if you use the wrong name or pronoun and say you'll get it right next time?
4. Do you have a welcoming LGBTQ environment by displaying easily recognizable LGBTQ-related images, signs, etc. in the waiting area (like LGBTQ magazines or a rainbow flag sticker displayed)?
5. Are nondiscrimination policies posted that also include sexual orientation and gender identity?
6. Does your facility have gender neutral restrooms?
7. Do you ask about access to bathrooms at work or school in your assessment?
8. Do you use "spouse" and "significant other" and "married" for everyone, rather than "husband" or "wife"? Do you always include significant others?
9. Do you show respect for family structures and roles within LGBTQ culture regardless of your personal beliefs?
10. Do you use "parent/guardian" instead of "mother/father"?
11. Do you have at least one of the clinician resources available from the resource list below?
 - ✓ The Fenway Guide to LGBT Health
 - ✓ The Amer. Med. Association's Physician Resources for an LGBTQ-inclusive Practice
 - ✓ The National Academies Institute of Medicine (US). The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding
 - ✓ The Joint Commission: Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community
12. Do you prevent staff members from coming to "take a look" at transgender people with diabetes?
13. Do you room transgender people with diabetes by their current, not birth gender?
14. Do you refrain from using harsh language, getting physically rough with an LGBTQ individual or making LGBTQ individuals wait longer than other people with diabetes?
15. Do you know how many LGBTQ individuals are in your practice because you ask the question and collect the data?
16. Do you celebrate LGBTQ holidays along with other ones (e.g., Pride Month, Bisexuality Day, National Coming Out Day, Transgender Day of Remembrance)?

References:

1. Garnero, T. L. (2010) Providing Culturally Sensitive Care for LGBT with Diabetes. *Diabetes Spectrum*, 23(3): 178-182.
2. The Gender Unicorn. (n.d.). Retrieved from <http://www.transstudent.org/gender/>
3. Williams, A., Garnero T., Conor Murphy, T., Beach, L.B. (2019, September). Inclusive Care for LGBTQ+ People with Diabetes: a panel discussion. AADE19, Houston, Texas.