STARTER GUIDE

LGBTQ+ Youth-Friendly Services

BARRIERS for LGBTQ+ youth accessing health care

LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer or Questioning) individuals are more likely to have had negative experiences with health care systems, affecting their likelihood of seeking services. There are several practices that can help us deliver the most respectful care and improve patient experience.

STRATEGIES to creating LGBTQ+ friendly spaces

HEALTH CENTER ENVIRONMENT AND FORMS

Post LGBTQ+ affirming visual cues (posters, stickers, buttons, rainbow lanyards, gender-inclusive bathroom signage, etc.)

- A first, simple step to creating a welcoming environment for LGBTQ+ youth is posting visual cues.
- Check out resources available for purchase from GLSEN and Redbubble, or the free resources from the National Association of School Psychologists and The Welcoming Project.

Stock and display health education materials (posters, handouts, brochures, etc.) that reflect LGBTQ+ youth and attend to their needs

- Education materials that address LGBTQ+ youth’s health needs are both useful in their educational value and because their representation indicates that the health of LGBTQ+ youth matters.
- Check out the resources available from Advocates from Youth and Fenway Health.
- Check out stock images available for free such as the Gender Spectrum Collection and the Show Us Collection.

Post/share information about local and national resources that support LGBTQ+ youth

- Be knowledgeable about referrals and resources (i.e., mental health care) to support LGBTQ+ youth.
  - Check out AHI’s Youth Friendly Referrals Guide that highlights effective and youth-friendly referral systems.
- Check out some national organizations that support LGBTQ+ youth:
  - National Coalition of LGBT Health
  - GLMA: Health Professionals Advancing LGBTQ Equality
  - The Fenway Institute from Fenway Health

Have an inclusive intake form to collect each patient’s name listed on their insurance, chosen name, sex assigned at birth, gender identity, pronouns, and sexual orientation

- Forms should allow fields for recording gender or sex assigned at birth, pronouns, and gender identity (the gender that the individual identifies with). Gender identity options should include more than the binary options of man or woman. The National LGBT Health Education Center’s guide, Ready, Set, Go! Guidelines and Tips for Collecting Patient Data on Sexual Orientation and Gender Identity, is a thorough and easy-to-use guide.

Provide easily accessible, gender-inclusive restrooms with clearly-marked signage

- Convert one stall restrooms that have gender-binary (men/women) signage to gender-inclusive signage.
- Here are some options for signs you can order:
  - ADA All-gender Sign with Braille
  - All-gender Sign with Braille Bilingual Spanish
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- **ADA All-gender Sign with Braille and Baby-changer icon**
  - Make sure that all-gender restrooms are convenient and accessible. Accessible restrooms are easily visible from the waiting room and easily manageable for anyone to enter and exit.
  - Be sure to facilitate a conversation with staff about the need for inclusive restrooms to better support the needs of the LGBTQ+ and other communities (families with young children, caregivers, etc.)

Post and distribute information about the health center’s confidentiality policy, including which services minors can consent to without parent/caregiver involvement

- Reassure LGBTQ+ youth which aspects of their health information, including their gender identity and/or sexual orientation, are confidential. If you offer legally protected services for adolescents, develop and post a confidentiality policy that is aligned with state laws.
- Ensure that all staff at the center be aware of these policies.

**AFFIRMING BEHAVIORS**

Convey a nonjudgmental tone through your body language and words

- As much as possible, be aware of any bias you may have about LGBTQ+ youth. Unconscious bias can be displayed through both nonverbal and verbal communication.
- Familiarize yourself with both appropriate and defamatory terms related to sexual orientation and gender identity.

Do not make assumptions about a patient’s gender identity, sexual orientation, or health behaviors.

- A person’s gender identity, gender expression, or sexual orientation does not mean they engage in particular behaviors. Similarly, someone’s behaviors do not indicate their gender identity or sexual orientation.
- Also, don’t assume the gender of a person’s partner(s).
- The only time it is appropriate to ask about someone’s anatomy or sexual behaviors is when it is medically relevant.

Avoid gendered language (sir/ma’am, young man/young lady)

- Use neutral terms when needed, drop the gender reference when possible, or use a person’s name when uncertain. Check out non-gendered language resources:
  - Teen Vogue’s How to Use Gender-Neutral Words
  - Gender Inclusive Guidelines from the University of Pittsburgh
  - Gender Queeries
  - Gender Inclusive Language from the University of North Carolina at Chapel Hill
- Much of the vocabulary we use is gendered, but acknowledging and changing these gendered terms to more neutral terms can avoid hurting feelings. Using the wrong gender to address someone is called “misgendering,” which can be cause embarrassment or pain for the patient or confusion among staff members. This can be challenging for people who have learned that using terms like “sir” and “ma’am” are signs of respect, but it can go a long way in helping a transgender individual feel affirmed.

Use each patient’s pronouns and chosen name at all times

- Use each patient’s chosen name. Sometimes transgender people cannot afford a legal name change or are not yet old enough to legally change their name.
- Ask patients which pronoun they would like you to use. A person who identifies as a certain gender should be referred to using the pronouns they specify regardless of their appearance.
• Use the patient’s pronouns and chosen name even when they are not present (e.g., when talking to a coworker).

Note: It is never appropriate to put quotation marks around either a transgender person's chosen name or the pronoun that reflects their gender identity. Using preferred pronouns is not best practice language as youth whose gender presentation may not match their gender identity are forced to lie or to out themselves in a new and possibly unsafe environment, while those who are unsure of their gender identity are made to feel uncomfortable and forced to choose a pronoun.

If you make a mistake, offer a sincere, brief apology
• If you make a mistake, offer a sincere and brief apology. For example: “I apologize for using the wrong pronoun. I did not mean to disrespect you. What are your correct pronouns?” Dwelling on the mistake or over-apologizing may make a patient feel uncomfortable. If someone corrects you for using an incorrect name or pronoun, simply apologize and ask for their pronoun or chosen name. Making these changes can be challenging, and mistakes will be made. However, handling mistakes respectfully can exemplify that an adult can apologize, learn, and grow.

Commit to ongoing learning
• Hold regular professional development opportunities and discussions for staff and providers of all roles.
• Partner with a local LGBTQ+ center and invite youth to provide a panel presentation to talk about what they want from their health care experiences.
• Providers can strengthen their provider/patient interactions through training specific to LGBTQ+ adolescent care.

Include sexual orientation and gender identity in your non-discrimination policy
• For sample policies and statements, see HRC’s collection.
• Establish a well-defined protocol for reporting and addressing any form of discrimination.

Additional RECOMMENDATIONS

RESOURCES FOR HEALTH CARE PROFESSIONALS
• National LGBTQIA Health Education Center / LGBTQIA+ Youth Training Materials
• The Fenway Institute
• Gender Nation Glossary
• World Professional Association for Transgender Health
• Health Professionals Advancing LGBTQ+ Equality
• The Q Card Project
• The Safe Zone Project
• Human Rights Campaign
• The Center of Excellence for Transgender Health
• The Teaching Transgender Toolkit
• GLSEN
• Nurse Journal LGBTQ Care: Training and Resources

RESOURCES FOR LGBTQ+ YOUTH
• The Trevor Project: National 24-hour, toll-free, confidential suicide hotline for queer and questioning youth.
GSA Network: GSA Network is a next-generation LGBTQ+ racial and gender justice organization that empowers and trains queer, trans, and allied youth leaders to advocate, organize, and mobilize an intersectional movement for safer schools and healthier communities.


It Gets Better Project: Nonprofit organization aimed to uplift, empower, and connect LGBTQ+ youth worldwide. Contains information of over 1,100 organizations around the world that support LGBTQ+ crisis.

The Point Foundation: The nation's largest scholarship foundation for LGBTQ+ students of merit. Empowers LGBTQ youth through academic and scholastic efforts.

The Fenway Institute: A health resource guide for LGBTQ+ youth that discusses barriers/access to healthcare, health concerns for LGBTQ+ youth, and strategies for health prevention.

Ultimate Guide to Resources for LGBTQ+ Students: Guide of resources for LGBTQ+ students in higher education, including scholarships, resources, clubs, anti-bullying hotlines, and more.

GLSEN: The Gay Lesbian Straight Education Network is a national education organization with the objective of creating a safe space for LGBTQ+ youth from grades K-12.

GLAAD: The Gay and Lesbian Alliance Against Defamation (GLAAD) works through entertainment, news, and digital media to share stories from the LGBTQ+ community that accelerate acceptance.

RESOURCES FOR CAREGIVERS OF LGBTQ+ YOUTH

GenderDiversity.org: Resources for caregivers, teachers, health professionals, and youth; hosts summer camp for gender diverse youth.

COLAGE: Children of Lesbian and Gays Everywhere connects caregivers of LGBTQ+ youth through a network of support groups, community dialogue, additional printed resources, and an online blog.

CDC Guide: Parents Influence on the Health of LBGTQ Teens: Center for Disease Control and Prevention’s information brochure on how caregivers can promote positive health outcomes for their LGBTQ teens.

Organization that unites families, friends, and allies of LGBTQ+ youth that aims to transform the values and raising practices for LGBTQ+ youth.

Johns Hopkins: Articles and Answers: John’s Hopkins Medicine article with tips for parents of LGBTQ+ Youth and links to resources.

Planned Parenthood- Guide to Parenting LGBT Kids: Planned Parenthood’s webpage that provides important information to caregivers about addressing sexual orientation and gender identity with their children.

Centerlink: Member-based coalition developed to strengthen and sustain LGBTQ+ community centers across the country. Serves to provide direct services, education, and support to engage LGBTQ+ youth.

Human Rights Campaign-All Families: Caring for LGBTQ Children & Youth: The parenting page offers information and resources regarding adoption, child safety, foster parenting, etc.

National Center for Transgender Equality-Families: Provides a list of many media resources for caregivers and families, including articles, publications, news updates, and blogs.

TERMS AND CONCEPTS

There are many terms and identities not on this list; language around identity evolves rapidly, and the most important point to note is that when in doubt, ask the person in question (or if it is not relevant to the discussion, simply ask about their name and pronouns.) Two more expansive glossaries curated by the LGBTQ+ community can be found at Refinery29 and PFLAG.

Agender: Some agender people feel they have no gender identity, while others use agender itself as a non-binary gender identity.

Asexual: Refers to a person who experiences a lack of, or no sexual attraction to others. This is a spectrum that includes many different varieties of asexuality. More information can be found on Asexuality and Asexuality Archive.
**Attractionality:** The many ways a person can be attracted to someone, including emotional, physical, social, intellectual, and spiritual attraction.

**Bisexual:** Refers to a person who is attracted to two or more genders.

**Cisgender:** Refers to a person whose gender identity matches the gender or sex assigned at birth. Usually, a person who is not transgender or non-binary is cisgender.

**Gay:** Refers to a person who is attracted to members of the same gender and often refers to a man who is attracted to other men.

**Gender binary:** The classification of sex and gender into two distinct, opposite, and disconnected forms of male and female/masculine and feminine.

**Gender Expression:** Refers to how people externally communicate their gender identity to others through behavior, clothing, hairstyle, or voice. Gender expression is not an indication of sexual orientation.

**Gender Fluid:** People who do not identify with a fixed gender, having or expressing an unfixed gender identity.

**Gender Identity:** One’s internal sense of “being” a man or “being” a woman. Everyone has a gender identity, whether it be woman, man, trans woman, trans man, or another identity altogether.

**Intersex:** Describing a person with a less common combination of hormones, chromosomes, and anatomy used to assign sex at birth. Check out more information from interACT.

**Lesbian:** Refers to a woman who is primarily attracted to other women. This language might also refer to a person who is agender, genderqueer, or gender non-conforming, that is primarily attracted to lesbians, women, or femme-identifying people

**Non-binary (NB or ENBY):** This term refers to someone who does not identify or express their gender within the gender binary (see above). Instead, they may identify both as man and woman, as neither man nor woman, or as falling in between or outside these categories. They may also simply feel restricted by gender labels.

**Pansexual:** Refers to a person who is attracted to someone regardless of gender.

**Queer:** This term is used by some people who identify as belonging to the LGBTQ+ community. Queer can be used to describe someone’s gender, sexuality, or both. This word is still sometimes used as a hateful slur, so although many have reclaimed it, be careful with its use.

**Sex Assigned at Birth:** The assignment and classification of people as male, female, or intersex. It is often based on physical anatomy at birth and/or chromosomes. Some use the terms AFAB and AMAB (assigned female/male at birth) to describe this classification.

**Transgender:** This term is frequently used as an umbrella term to refer to all people who don’t identify with the gender or sex assigned to them at birth or with the binary gender system. Note: Not all people who identify as non-binary, gender non-conforming, gender queer, identify as transgender.

**Transition:** To change physically over time (sometimes through the use of hormones and/or surgery) from one sex to another. Not all transgender people seek medical transition. Transition includes some or all of the following cultural, legal, and medical adjustments: telling one’s family, friends, and/or co-workers; changing one’s name and/or sex legally; and including hormone therapy and/or some form of chest and/or genital alteration (though not always).

**Two-Spirit:** A Native American person who embodies masculine and feminine genders; Native Americans (and some others) who are queer or transgender may self-identify as two-spirit. Check out more information at them, and Indian Country Today.