



Royal College
of Nursing

The nursing care of lesbian and gay male patients or clients

Guidance for nursing staff



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The Royal College of Nursing recognises through work undertaken by its members that discrimination and prejudice towards lesbian and gay patients exists in nursing.

This statement outlines the RCN's commitment to developing and promoting good nursing practice for these clients and to support and assist any nurse who experiences difficulties in developing their practice in this area.

What are the actual and potential unmet nursing needs of lesbian and gay males?

There is now a growing body of literature exploring the health care needs and experiences of lesbians and gay males. The literature demonstrates that people in this group are exposed to many specific and additional stresses as users of the health service.

1. They have concerns that relate to homophobia or anti-lesbian and gay

feelings from doctors and health care providers in general.

2. Some lesbian and gay patients fear the consequences of being open about their sexuality but also believe they cannot always get the relevant care they need if they are not open.
3. Some people fear that they may even be physically harmed if health care practitioners are homophobic and/or that a breach of confidentiality could have negative consequences for them in relation to employment, housing, child custody or future health care.

Lesbian and gay patients report experiencing negative and hostile reactions from health care practitioners when their sexual orientation is known. It has also been found that negative reaction, or even fear of such reactions, may prevent lesbians and gay males from seeking health care when it is needed.

In addition to this, the literature suggests that lesbians and gay males have particular health needs which nurses should be aware of. The pressures of living in a

society that sometimes attributes negative stigmas and taboos to lesbian or gay males will have consequences on the physical and mental health of these individuals.¹

1. There is evidence of a much higher incidence of alcohol abuse in the lesbian and gay population which may be related to such stress.
2. There is also evidence that lesbian and gay teenagers are particularly at risk from mental and physical health problems. This is due to the lack of support they receive when trying to come to terms with their difference from accepted social norms. The high attempted suicide rate in this group is an indication of the importance which should be attached to addressing their health care needs and raising awareness of such needs with nurses and other health care professionals.
3. There are suggestions that there are many other areas, as yet unresearched, in which the health status of lesbians and gay males is prejudiced; nurses need to explore these.²

How can nurses address these concerns?

It is clear that lesbians and gay males have specific health care needs and concerns which nurses may not always address. A concerted response is required from the profession if we are to fulfil the collective and individual responsibilities implied by the *NMC Code of Professional Conduct* (2002) in relation to this client group.

In clinical practice

Nurses in clinical practice need to ensure that they never intentionally behave in a way which marginalises clients or patients. They must examine their behaviour towards clients to ensure that it cannot be considered as prejudicial, actively seek to raise awareness of the problem amongst colleagues and discourage unhelpful responses, and explore all possible ways of supporting and assisting lesbians and gay males using their service. This is particularly important for nurses working with children and young people, many of whom feel isolated and suffer from bullying and heterosexist discrimination, because of actual or presumed non-heterosexual identities. This abuse might include physical or verbal violence and ignoring their specific physical, mental

¹ McFarlane L (1998) *Diagnosis: Homophobic. The experiences of lesbians, gay men and bisexuals in mental health services*, London: PACE (Project for Advocacy, Counselling and Advice).

² Evans, David T. 'Homophobia in evidence-based practice', *Nurse Researcher*, 8(1):47-52, Autumn 2000.

and sexual health needs. Discrimination against lesbian, gay and bisexual clients or patients may also take on additional stigmas and oppression when compounded with differences such as age (young / old), parenting, abilities or health status, culture and minority ethnic identities.

In research

Nurses undertaking research need to develop studies of lesbians' and gay males' actual and perceived health care experiences and should establish how nurses can best meet the needs of their lesbian and gay patients.

In education

Nurses in education need to recognise the need for the profession to be better informed and to have more positive attitudes in these areas, and the need to design pre- and post-registration training and education strategies that recognise this.

In purchasing

Nurses in purchasing need to recognise the potential of the nursing contribution towards health gain for this client/patient group and to reflect this in the contract specifications agreed with the providers.

In management

Nurses in management need to promote good practice in this area and ensure that equal opportunities in relation to service provision are adequately addressed.

In the workplace

Nurses also need to challenge homophobia, biphobia and heterosexism in the workplace whenever they encounter it.

Advice and assistance from the RCN

The RCN will continue to support the development of robust nursing practice in this area. Any member who requires advice and assistance can contact their regional office or the RCN's Professional Nursing Department. For information and contact details, contact RCN Direct on 0845 772 6100 or visit www.rcn.org.uk.

References and further reading

Evans, David T. 'Homophobia in evidence-based practice', *Nurse Researcher*, 8(1):47-52, Autumn 2000.

McFarlane L (1998) *Diagnosis: Homophobic. The experiences of lesbians, gay men and bisexuals in mental health services*, London: PACE (Project for Advocacy, Counselling and Advice).



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