

More Than a Flag: 2S-LGBTQ+ Inclusion in Palliative Care Settings



Evan McCraney (he/him)
Seniors Program Coordinator
Gilbert Centre

in partnership with New Horizons for 2S-LGBTQ+ Older Adults

evanm@gilbertcentre.ca



Who are 2S-LGBTQ+ Older Adults?

- Acronym and Identities
- Trans 101, pronouns
- What does this population bring to the care setting?
- Identity and culture



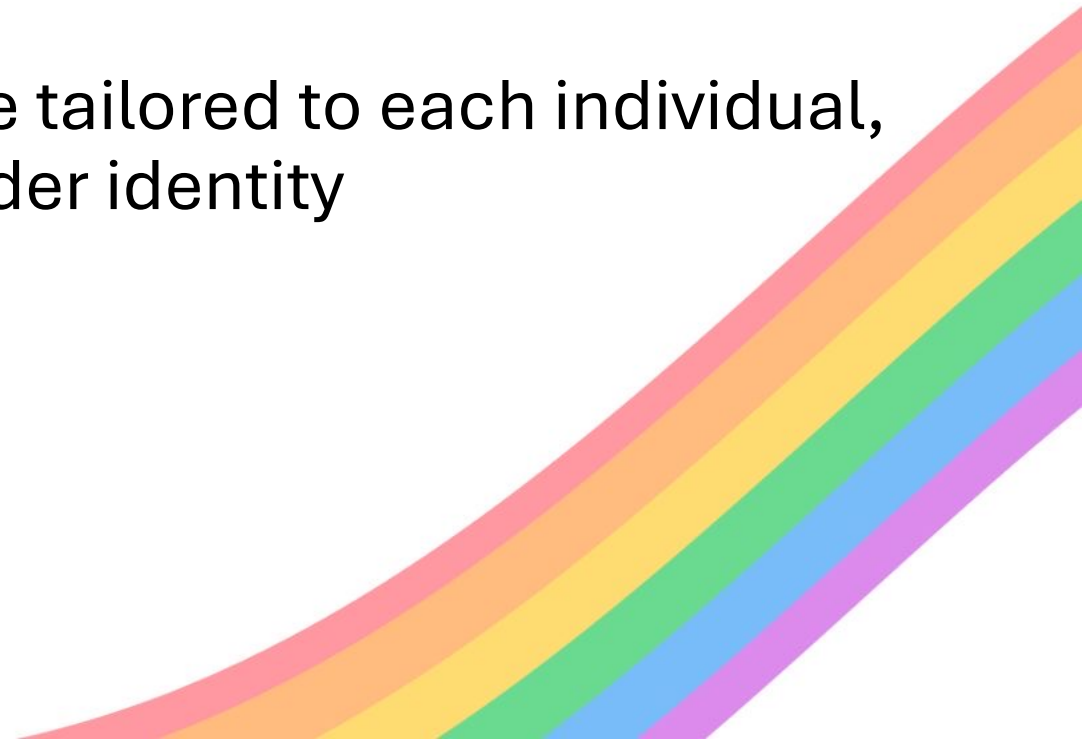
Historical, Social and Political Context

- Population has been pathologized by DSM
- Canada's LGBT Purge
- Criminalization of identity
- AIDS
- Current sociopolitical climate and the recent rise of hate



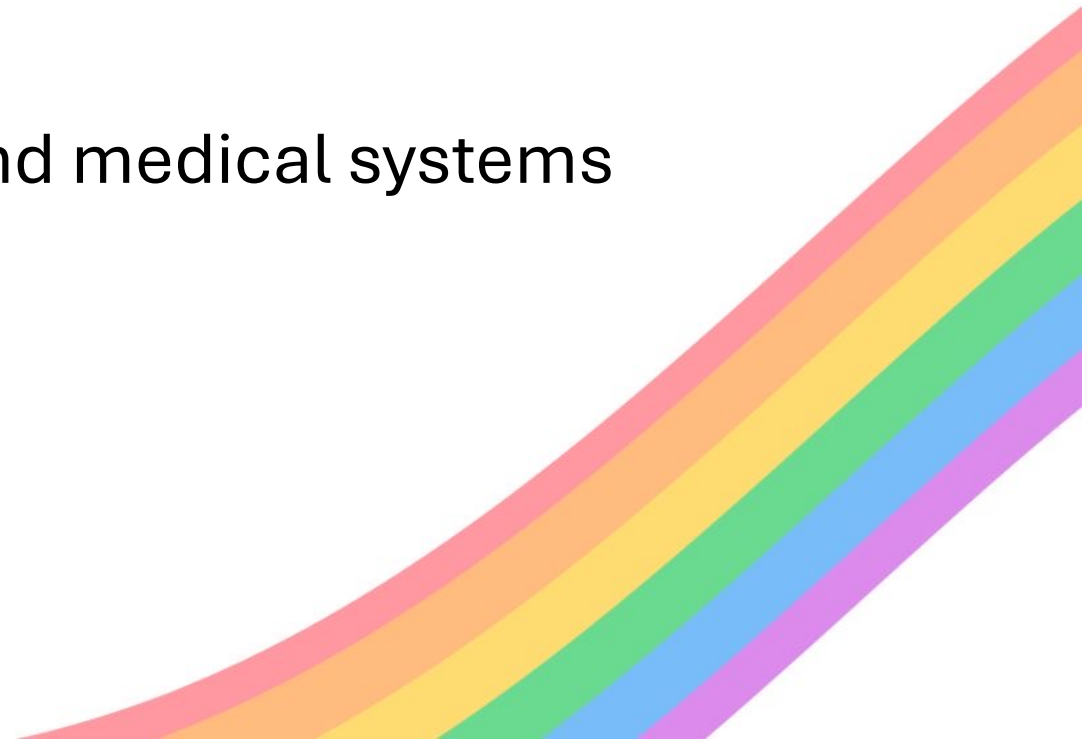
How is care currently approached?

- Currently there is a lack of knowledge about gender-affirming care
- Refusal to acknowledge 2S-LGBTQ+ older people as still having some sexual needs, though likely less so in a palliative care setting
- “We’re all the same” – care needs to be tailored to each individual, regardless of sexual orientation or gender identity



Barriers to care for 2S-LGBTQ+ patients

- Medical trauma
- Social trauma
- Religious trauma
- Intersectionality of identities
- Overall mistrust of service providers and medical systems



Barriers faced by caregivers/professionals

- Personal bias/Unconscious bias
- Lack of experience working with 2S-LGBTQ+ populations
- Lack of knowledge – Where to start? What information is reliable? What other resources could be helpful?
- The need to have a single care model applied to all



Moving forward: Allyship and next steps

- Acknowledge the need for many to have “chosen family” involved in the process
 - “Nothing about us without us” – involve our communities in your planning, policy making, boards, etc.
 - Normalize using inclusive language on intake forms, signage, pronouns on staff name tags, provide gender neutral or single stall washroom access
 - Provide training for ALL staff
 - Utilize existing resources, peer support, etc.
 - Allow for cultural practices (eg smudging, pride celebrations)
- 