Policy Manual

Subject: Sexual and Gender Expression, Diversity and Inclusion

Section: ADM-Resident Related

Number: ADM-a-72

Approved: Chief Operating Officer O May 2021

POLICY

CapitalCare is committed to providing a safe, inclusive and respectful environment for residents¹, staff, students, volunteers and visitors. CapitalCare also recognizes intimacy and sexual expression as essential components of healthy living. Residents, staff and visitors have freedom of sexual and gender expression, which means that residents with diverse abilities, sexual orientations, gender identities, and gender expressions will have opportunities and supports to meet their sexuality and intimacy needs as part of a normalized life experience.

Residents will be supported to access sexual health information and will be assisted with creating private opportunities for intimacy and/or sexual expression as needed.

Staff will provide non-judgmental, supportive care with sensitivity and respect for residents' cultural, religious, and personal beliefs and values. Privacy and confidentiality will be upheld.

If concerns about a resident's sexual expressions are identified, the healthcare team will collaborate with the individuals involved while maintaining their privacy and confidentiality. Staff will seek to understand residents' needs and work together with the resident to find supportive strategies to include in the resident's care plan. Staff will intervene in situations where consent to participate in a sexual activity is lacking or if the sexual expression causes harm.

The purpose of this policy is to provide guidelines to support the creation of welcoming, caring, respectful, and safe environments that foster diversity and nurture a sense of belonging and a positive sense of self.

Terminology:

Note: Terminology is fluid and what is considered appropriate tends to change over time. Moreover, people within a group may prefer different terms to describe themselves.

¹ Resident refers to a Resident, Elder, Patient, Participant and Client

Consent = The voluntary agreement to engage in an activity, such as sexual contact. Requires knowledge of relevant information, including risks and benefits; understanding of the impacts; and must be voluntary, without undue influence or coercion.

Gender expression = External and public presentation of a person's gender expressed through their name, pronouns, clothing, haircut, behaviour, voice, or body characteristics.

Gender identity = A person's internal, deeply held sense of their gender; it is not visible to others. Note that some people may not identify with a gender.

- **Cisgender** = Gender identity matches cultural expectations of sex assigned at birth.
- **Transgender** = Gender identity and/or expression differs from what is typically associated with sex assigned at birth.
- Nonbinary = People who experience their gender identity and/or gender expression as outside of the male-female gender binary. Many other words for identities outside the traditional categories of man and woman may be used, such as genderfluid, genderqueer, demigender, or agender. These identities, while similar, are not necessarily interchangeable.

Inclusive language = means not using words or expressions that exclude or discriminate against certain groups of people. It also means not making assumptions, e.g., when asking about a resident's marital status, don't assume the resident is heterosexual by asking about their husband or wife. Instead, use a genderless term. Examples:

Instead of:	Use:
Husband or wife	Spouse
Boyfriend or girlfriend	Partner
Mother or father	Parent
He/she	They (or another pronoun)

Intimacy = The experience of being closely connected, understood and loved. Includes sharing of personal thoughts and feelings as well as handholding, hugging, kissing and more private forms of expression such as sexual touching, masturbation or intercourse.

LGBTQ / LGBTQ* / LGBTQ2S+ = Acronym for: lesbian, gay, bisexual, transgender, queer/questioning, and two-spirit. Sometimes "*" or "+" is used at the end to represent the many diverse sexual orientations and gender identities that are part of this community.

Sexual orientation = Describes a person's emotional and/or sexual attraction to others. For many, their sexual orientation can be fluid and may change over time. Sexual orientation may, or may not reflect sexual behaviours.

PROCEDURE

Living CapitalCare Values means that we are meeting our residents' Core Needs.

Let Me Be Me (Core Need)

Sexuality is an integral part of the lives of all people and is a normal part of the lives of people living in care facilities. Sexuality and intimacy is a basic need that does not diminish with age or health conditions.

- Support residents to express their gender as they so choose:
 - Refer to residents using their chosen names (not their legal name, if it differs) and preferred pronouns.
 - Support residents' freedom of gender expression by having them direct their clothing and grooming choices (e.g. hairstyle, makeup, attire).
 - Residents, staff and visitors will be supported to use facilities (such as washrooms and change rooms) that align with their own sense of gender.

Staff will live CapitalCare's values in the following ways:

Be Yourself, Practice Self-Awareness

Personal history and personal values define the lens in which you see any resident situation. Therefore, know your lens and know how they may unconsciously shape your judgement.

Reflect on your personal values, beliefs, assumptions and unconscious bias. Recognize
when a bias might impact your interactions, relationships, or the care you provide, and
report challenges to a Manager.

Be Present, Practice Acceptance

People have the right to make choices that may not align with their caregivers' personal values.

- Accept the resident's needs without influence of your own personal values and beliefs.
- Use non-judgemental and inclusive language to make it clear that you want to provide the best possible person-centred care. This can help the person to feel safe expressing their gender identity, sexual orientation, and sexual/intimacy needs.

Put People First, See the Person

All persons are treated with respect, regardless of their age, sex, race or ethnic origin, disability, cognitive level, marital or family status, beliefs, sexual orientation, gender identity and expression, or socioeconomic status.

- Never assume:
 - That you know someone's gender identity or sexual orientation based on the way they look.
 - That all people from a group have the same story, needs, goals, or desire the same supports. For example, not all trans people undergo (or wish to undergo) medically supportive treatments to align their bodies with their gender identity.

Empower Others, *Honor the Individual Journey*

Individual freedoms must be preserved, as much as possible, in care settings.

- Use open communication to find out what residents want. Collaborate with them to find ways to enable sexual expression and/or intimacy.
 - For cognitively impaired residents, seek to understand the meaning behind their responsive behaviours and/or sexual expressions. Remember that some people may interpret the behaviours of residents with dementia as inappropriate sexual behaviour when the person is actually trying to communicate a different need.
- Act as an ally being an ally is a continuous process of self-reflection and action. To act as an ally, one can:
 - advocate for respectful and inclusive care for everyone,
 - o speak up and challenging discrimination when it is seen or heard,
 - listen without judgement to the experiences of others,
 - encourage active resident participation in all aspects of care, including planning, implementation and evaluation of care plans and services,
 - o be humble and open to new learnings. There is always more to know.

Balance Living with Safety, Respect Resident Choices

People require a safe environment for sexual activity. This includes consent to participate in the sexual activity from all persons involved. Should one or both resident's cognitive capacity come into question, a formal assessment may be required to determine their ability to give legal consent.

- Refer to <u>Attachment 1 Identifying and Managing Sexual Expressions Towards</u> Residents and/or Individuals in CapitalCare.
- Provide residents private time and space for intimacy and sexual expression when it is consensual.

Act Responsibly, Do the Right Thing

Residents have the right to privacy when it comes to sexual expressions, orientation, and gender identity.

- Maintain privacy & confidentiality when someone discloses their sexual orientation or gender identity to you, they have shared something very personal. This information is protected by health information privacy legislation and is to be kept confidential.
- Never assume a person's friends and family are aware of their sexual orientation or gender identity, and never disclose on their behalf. It is up to the person to decide who they want to share this information with.
- Respect and support the person's wishes if they do not want to disclose their sexual orientation or gender identity with other residents or staff broadly.

Grow and Learn, Expand Competence

If you are unsure of how to support a resident's sexual health or intimacy needs, there are a variety of resources available:

- Consult the interdisciplinary team. Each discipline has unique knowledge, skills, and abilities that support residents in different ways. For example:
 - Nurses (RNs, LPNs, RPNs, GNs) nurses support the development of positive, healthful sexuality by educating to achieve positive outcomes such as improved self-esteem, respect for others, non-exploitive sexual relationships and rewarding sexual relations. They can make referrals and act as a liaison with specialists and interdisciplinary team members in order to support sexual health and expression. Nurses also use assessment and critical thinking skills to support residents in addressing their sexual health needs, and create a person-centred care plans that include all aspects of holistic care.
 - Occupational Therapists (OTs) sexuality is an activity of daily living (ADL) that OTs can address as part of a holistic approach to treating the whole person.
 Consider consulting an OT to support person-centred discussions on sexuality, for assistance with cognitive and functional assessments, for training on compensatory techniques, for identification of adaptive aids, and more.
 - Pharmacists Pharmacists can support discussions regarding medication options for contraception, sexually transmitted infections, erectile dysfunction, vaginal dryness, and atrophy. Non-drug alternatives should also be explored. When risk of harm is identified, non-drug interventions and care planning must be fully optimized prior to considering treatment with medications.
 - O Physiotherapists (PTs) PTs can be consulted to address the physical restrictions and challenges that residents may have when expressing themselves within their circle of intimacy. PTs can recommend physical strategies to support resident sexual expressions, such as pain relief, touch, positioning, and adaptations to physical limitations.
 - Recreation Therapists (RecTs) Through strength-based relationships, Recreation Therapy builds trust and provides a safe outlet for discussion and self-expression; an outlet for a person to foster their sexuality and individualism in a healthy way that works best for that individual. Consider consulting a RecT for: safe discussions, referral to resources for support and education, to communicate recreation/leisure preferences, & for recommendations on creative outlets of expression and opportunities for safe practice within an inclusive recreation/leisure setting of choice for feelings of belonging and comfort.
 - Social Workers (SW) can be consulted to provide supportive counselling to residents. Social workers are able to facilitate inter-professional collaboration and person-centered conferences to plan for care as well as provide support in meeting practical needs regarding goals for privacy, intimacy, and gender expression.
- AHS Sexual Health Service, Glenrose Rehabilitation Hospital an interdisciplinary team
 that provides education and counseling to people impacted by injury, illness or disability.
 Can be consulted for assistance with assessment and treatment of sexual health
 concerns and complex sexual expressions.

See 'LINKS' section of this policy for further educational resources.

ATTACHMENTS

Attachment 1 – Identifying and Managing Sexual Expressions Towards Residents and/or Individuals in CapitalCare

Attachment 2 – AHS Sexual Health Service brochure

Attachment 3 – AHS Sexual Health Service referral form

RELATED POLICIES

ADM-a-10 Residents' Rights and Responsibilities SAF-a-10 Responsive Behaviours

LINKS

Alzheimer's Society - Conversations about Dementia, Intimacy, and Sexuality

<u>Providing Safer and More Welcoming Continuing Care for LGBTQ2S+ Clients – Education for Continuing Care Healthcare Providers</u>

Manager's Tip Sheet, Creating a Safer and Welcoming Care Environment for Sexual and Gender Diverse Clients

REFERENCES

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