Supportive Strategies for Creating an Inclusive Environment

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Purpose:
Nurses are the most trusted profession, yet we are not immune to implicit biases. This fact places our students and patients at risk for adverse outcomes. Recognizing and acknowledging one's own implicit bias is a vital step in ensuring inclusive and compassionate care for all people. One study found that 41.8% of LGBT+ respondents reported discrimination at a clinic or hospital setting (Shires & Jaffee, 2015). Black women are five times more likely to die of a pregnancy related condition in the United States (Petersen et al, 2019). In the United Kingdom, 34% of Trans adults have attempted suicide (Blair, 2016). Health care providers can have a positive influence to promote and establish the changes that will reduce discrimination and increase inclusivity. The concept of implicit bias will be explored and defined. Evidence based strategies for creating an inclusive and supportive environment for students, coworkers and patients will be shared during this interactive presentation.

Methods:
A review of current literature and personal interviews were conducted to ascertain strategies for creating an inclusive environment. Implementation of evidence-based strategies to create an inclusive environment for our students, colleagues and patients will be presented.

Results:
An interactive implicit bias exercise will be conducted to aid in defining implicit bias with the audience. Data will be shared to establish the importance of an inclusive environment. Evidence based strategies for creating an inclusive environment will be disseminated and discussed. Strategies include recommendations for creating a healthy and welcoming environment, additions to electronic health record data collections, use of pronouns, nondiscrimination policies, education topics for staff, definition of terms, unique health challenges, how to promote inclusivity, best practices for patient communication and education. Resources for further learning and self-discovery will be shared.

Conclusion:
At the conclusion of this educational offering, the learner will have an increased recognition of implicit bias. The learner will be able to identify at least two strategies for inclusive nursing care in the clinical and academic settings.

Title:
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Keywords:
LGBT+, implicit bias and inclusive care

Abstract Summary:
Nurses are the most trusted profession, yet we are not immune to implicit biases which put our students and patients at risk for adverse outcomes. This presentation will inform how to implement evidence-based strategies to create an inclusive environment for our students, colleagues, and patients.

References:
- Blair K. (2016). Caring for gender variant young people. Journal of family health, 26(6), 14–18.
- Cahill, S., Singal, R., Grasso, C., King, D., Mayer, K., Baker, K., & Makadon, H. (2014). Do Ask, Do Tell: High Levels of Acceptability by Patients of Routine Collection of Sexual Orientation and Gender Identity Data in Four Diverse American Community Health Centers. PLoS ONE, 9(9). doi:10.1371/journal.pone.0107104
- Callahan, E. J., Hazarian, S., Yarborough, M., & Sánchez, J. P. (2014). Eliminating LGBTIQQ Health Disparities:The Associated Roles of Electronic Health Records and Institutional Culture. Hastings Center Report, 44(S4). doi:10.1002/hast.371
- Haas, A. P., Lane, A. D., Blosnich, J. R., Butcher, B. A., & Mortali, M. G. (2019). Collecting Sexual Orientation and Gender Identity Information at Death. American Journal of Public Health, 109(2), 255-259. doi:10.2105/ajph.2018.304829
- Improved Patient Engagement for LGBT Populations: Addressing Factors Related to Sexual Orientation/Gender Identity for Effective Health Information Management. (n.d.). Retrieved from https://bok.ahima.org/doc?oid=302067#.XyIDcShKiUk
- Petersen EE, Davis NL, Goodman D, et al.(2019) Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. MMWR Morb Mortal Wkly Rep 2019; 68:762–765. DOI: http://dx.doi.org/10.15585/mmwr.mm6835a3external icon.
- Redfern, J. S., & Sinclair, B. (2014). Improving health care encounters and communication with transgender patients. Journal of Communication in Healthcare, 7(1), 25-40. doi:10.1179/1753807614y.0000000045
- Samuels, E., Choo, E., Tape, C., Garber, N., & Bowman, S. (2015). 160 "Sometimes You Get to Feel Like the Freak Show": Transgender and Gender-Non-Conforming Patient Experiences and Barriers to Emergency Care. Annals of Emergency Medicine, 66(4). doi:10.1016/j.annemergmed.2015.07.192
- Schabath, M. B., Curci, M. B., Kanetsky, P. A., Vadaparampil, S. T., Simmons, V. N., Sanchez, J. A., . . . Quinn, G. P. (2017). Ask and Tell: The Importance of the Collection of Sexual Orientation and Gender Identity Data to Improve the Quality of Cancer Care for Sexual and Gender Minorities. Journal of Oncology Practice, 13(8), 542-546. doi:10.1200/jop.2017.024281
- Shires, D. A., & Jaffee, K. (2015). Factors Associated with Health Care Discrimination Experiences among a National Sample of Female-to-Male Transgender Individuals. Health & Social Work, 40(2), 134-141. doi:10.1093/hsw/hlv025

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Author Summary: Dr. Carrie Lamb has worked in multiple diverse healthcare and academic settings. She is passionate about creating inclusive and welcoming work cultures and is an advocate for inclusive patient care.