

Equality

Position statement

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About PSA

PSA is the only Australian Government-recognised peak national professional pharmacy organisation representing all of Australia's 36,000 pharmacists working in all sectors and across all locations.

PSA is committed to supporting pharmacists in helping Australians to access quality, safe, equitable, efficient and effective healthcare. PSA believes the expertise of pharmacists can be better utilised to address the health care needs of all Australians.

PSA works to identify, unlock and advance opportunities for pharmacists to realise their full potential, to be appropriately recognised and fairly remunerated.

PSA has a strong and engaged membership base that provides high-quality health care and are the custodians for safe and effective medicine use for the Australian community.

PSA leads and supports innovative and evidence-based healthcare service delivery by pharmacists. PSA provides high-quality practitioner development and practice support to pharmacists and is the custodian of the *Professional Practice Standards for Pharmacists* and guidelines to ensure quality and integrity in the practice of pharmacy.

Summary of PSA Position

1. PSA strongly advocates for equitable access to inclusive, appropriate and discrimination-free health care by all lesbian, gay, bisexual, transgender, queer, intersex, asexual, and all other people of a diverse gender or orientation (LGBTQIA+).
2. PSA advocates for and is committed to the inclusion of LGBTQIA+ health education in all pharmacy programs in Australia, and the development and delivery of education and professional standards to support pharmacists to provide equitable health care to LGBTQIA+ communities.
3. PSA calls on governing bodies to make changes to healthcare systems to facilitate safe, inclusive and appropriate health care.
4. PSA expects pharmacists to provide respectful, inviting, non-discriminatory, evidence-based care to LGBTQIA+ people in accordance with its Code of Ethics.
5. PSA encourages pharmacists to provide appropriate care to people who are a part of LGBTQIA+ communities through the use of respectful and inclusive language.

1. Equitable access to health care

PSA strongly advocates for equitable access to inclusive, appropriate and discrimination-free health care and strongly advocates for equality for all lesbian, gay, bisexual, transgender, queer, intersex, asexual, and all other people of a diverse gender or orientation (LGBTQIA+). PSA recognises that genders, bodies, sex characteristics and sexualities are diverse.

People of diverse gender, sexual orientation, and relationship type represent more than 1 in 10 Australians.¹ Despite being resilient and adaptable, LGBTQIA+ communities still experience disproportionately worse health outcomes in a number of areas, with significant physical and mental health inequalities occurring.

PSA acknowledges the significant barriers and challenges LGBTQIA+ people face in accessing safe, inclusive and appropriate health care. PSA also recognises that stigma and discrimination by healthcare practitioners towards LGBTQIA+ communities accessing care create further barriers to healthcare engagement. Moving forward, PSA strives to ensure all pharmacists are educated on providing inclusive, equitable and culturally responsive health care to these communities.

2. Education and standards for pharmacists

PSA recognises that LGBTQIA+ communities have experienced stigma while accessing health care. PSA is committed to the development and delivery of education and professional standards to support pharmacists to continually improve their practice so they can better provide equitable health care to LGBTQIA+ communities. Further, PSA strongly advocates for the inclusion of LGBTQIA+ health education as part of all pharmacy programs in Australia.

There are significant challenges experienced by LGBTQIA+ communities, with members facing stereotypes, negative attitudes, and unintentional harm when accessing health care, which have been reported to cause delays or avoidance in accessing health care.² LGBTQIA+ communities have unique healthcare needs that are not addressed in pharmacy, and education to close this gap is urgently needed.

PSA strongly advocates for the inclusion of LGBTQIA+ specific health education related to the diverse needs of these varying communities to be included in all pharmacy programs in Australia as a step towards remedying the health inequity

and inequality experienced. The *Resilient individuals: sexual orientation, gender identity and intersex rights* report of the Australian Human Rights Commission found that there was a lack of understanding of the needs of LGBTQIA+ communities in the provision of education, which requires remedy.² This lack of understanding can be particularly harmful for the intersex community, where unnecessary surgical procedures and medical interventions are undertaken as a way to 'normalise' the appearance of intersex bodies.² The report also found that education and training of healthcare workers were crucial to deliver 'appropriate' and 'best practice' health care for people who are gender diverse.²

3. System changes to facilitate safe and inclusive health care

PSA supports health care that is free of discrimination and stigma, and recognises the deleterious effects of judgment and stigma in health care. PSA calls on governing bodies to make changes to facilitate inclusive health care, such as ensuring pronouns and chosen names can be included in healthcare systems, and that there is recognition of partners or family of choice as legally authorised decision makers in relation to health care.

It is imperative that all health care is provided without stigma or judgement. However, it has been demonstrated that LGBTQIA+ communities regularly face stigma and discrimination. One recent study reported that, during the preceding 12 months, 57% of people in LGBTQIA+ communities had experienced discrimination due to their sexual orientation, and almost 80% of these participants had experienced discrimination due to gender diversity.³

PSA recognises that the experience of stigma and judgement relating to health care can lead to negative health outcomes, both physical and mental. One study found that approximately 50% of people who were a part of LGBTQIA+ communities felt uncomfortable disclosing their sexual orientation or gender identity in a healthcare setting.⁴ The failure of a healthcare professional to provide a safe and comfortable environment and include the use of inclusive language results in less disclosure by LGBTQIA+ people seeking care, which then leads to negative health outcomes and health effects. Research shows that the self-rated physical health for people in LGBTQIA+ communities is lower than that of people who are not a part of these communities, with higher rates of smoking and alcohol use. Rates of poor mental health are higher in LGBTQIA+ populations. In

one study, almost 75% of the participants reported considering suicide in their life, with over 40% of the participants considering suicide in the last 12 months. Further, over 57% of the participants had experienced high or very high levels of psychological distress in the last 4 weeks.³

It is imperative that changes are made through informed policy-making, considered design and implementation of systems, and education of health professionals and the public to facilitate safe, inclusive and appropriate health care for all LGBTQIA+ people. Changes should address the unconscious bias associated with health care² such as systems lacking options to include pronouns or titles which do not conform to the gender binary of he/she or Mr/Mrs/Miss, or chosen names (regardless of legal status) where a birth name has not yet been legally changed. Further, questions such as 'what was your assigned/biological gender at birth?' and 'what gender do you identify as?' should be normalised and included as part of regular information gathering. Other changes include the removal of barriers in recognising a person's partner or family of choice for support, or the preferred or legally appropriate person to approach for decision making during a healthcare crisis. Research shows there is a lack of knowledge amongst health practitioners in relation to 'legally authorised decision makers' for patients who are part of LGBTQIA+ communities, leading to patients' healthcare wishes being disregarded, with biological family members being provided with the ability to make these decisions over partners, chosen family members or friends.⁵ PSA is committed to ensuring equality is achieved through the removal of structural and legislative discrimination, leading to improved outcomes for people in LGBTQIA+ communities.

4. Pharmacists to provide respectful and non-discriminatory care

PSA expects pharmacists to provide respectful, inviting, non-discriminatory, evidence-based care to LGBTQIA+ people in accordance with its Code of Ethics. This expectation exists regardless of an individual member's personal or religious belief.

PSA is proud to support people from all backgrounds and beliefs in an inclusive environment and is aware that there is significant overlap in Australia's healthcare system and religion, with religious institutions involved in hospitals, clinics, mental health services and aged care.² Despite this overlap, PSA strongly asserts that under no circumstances should any personal

or religious beliefs interfere with patient care in any way.

PSA's Code of Ethics states that a 'pharmacist makes the health and wellbeing of the patient their first priority', and that a pharmacist 'works to ensure their duty of care is not compromised by other interests and manages potential conflicts in the interests of the patient'.⁶ Further, that a pharmacist 'recognises and respects patients' diversity, cultural knowledge and skills, gender, beliefs, values, characteristics and lived experience, and does not discriminate on any grounds'.⁶ Stigma and discrimination can have significant negative health effects and lead to people avoiding health care entirely if they do not feel respected. Pharmacists have a duty of care to patients to ensure that health care is provided in an inclusive and appropriate way for all people.

5. Use of inclusive language

PSA encourages pharmacists to provide appropriate care to people who are a part of LGBTQIA+ communities by avoiding heteronormative and cisnormative language and instead using inclusive language, which appropriately respects diversity in genders, bodies, sex characteristics and sexualities.

Research has shown that healthcare systems are 'gendered'⁷ and this often comes across in the language we use. Language is an important part of pharmacists' interactions with patients, and how we communicate can impact on how respected patients feel. Without being aware of it, we can make people feel uncomfortable and unable to openly discuss their health or life by the use of heteronormative and cisnormative language. Heteronormative language can include the use of gendered terms when referring to a person's partner, and automatically assuming they are heterosexual.² Cisnormative language can include the use of language which pathologises binary and non-binary trans people and assumes that all people identify with their gender assigned at birth.⁷ Such assumptions can create discomfort for the patient and can prevent them from disclosing their LGBTQIA+ status, their sexuality or their gender identity.

Heteronormative and cisnormative attitudes and language by health professionals have been shown to create barriers to access for people who are a part of LGBTQIA+ communities, which can result in negative effects on health.^{8,9} Due to the unique health challenges and health inequalities

experienced by these populations, it is important that patients feel comfortable disclosing this information to pharmacists so they can receive the best possible health outcomes.

PSA stresses the importance of using inclusive language, which can help to create a safe, comfortable environment for patients who are a part of LGBTQIA+ communities. Inclusive language can be described as the way we use our words to 'demonstrate our respect for how people describe their own genders, bodies and relationships' and has been shown to improve the health of our families and communities.¹⁰ Inclusive language means respecting people's genders. A gender-diverse person (trans, non-binary or gender-fluid) may present as masculine, feminine or both. It is important not to form expectations or to objectify their bodies or how they present, and to ask how they feel comfortable being addressed and what are their pronouns. The use of inclusive language is an important part of health care, and it is a pharmacist's duty to ensure this is a regular part of pharmacy practice.

Supporting evidence / references

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