

Pride in Pharmacy

Developing LGBTQ+ Inclusion
within Community Pharmacies

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PRACTICE**

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We hope that you will use this resource to guide conversation and reflection within your pharmacy about how you can best reach and support your LGBT communities.

Foreword

Welcome to Pride in Pharmacy:
Developing LGBT Inclusion within
Community Pharmacies!

Lesbian, gay, bisexual, trans, queer and questioning + (LGBTQ+) communities experience healthcare inequalities in the UK at an unacceptable rate. These inequalities include barriers to accessing healthcare, experiences of prejudice and discrimination, and poorer health outcomes.

Pharmacy staff have a crucial role to play in addressing these inequalities. As a widely accessible healthcare service, pharmacies are at the forefront of developing strong, trusting relationships between primary care and LGBTQ+ communities. Pride in Pharmacy aims to support you with just that.

Throughout this resource, you'll learn more about LGBTQ+ identities,

become more confident with using open language, and consider how you can create an inclusive pharmacy space. Pride in Pharmacy raises awareness of LGBTQ+ health inequalities, and provides practical guidance on how to respect patients' identities, values, and beliefs. You'll also find a glossary and a list of LGBTQ+ organisations that you can signpost to at the end of this guide.

Pride in Pharmacy is created by Pride in Practice, a quality assurance and social prescribing programme that strengthens and develops primary care services' relationships with their LGBT patients.

To learn more about how Pride in Practice can support your pharmacy, email us

pip@lgbt.foundation



Introduction

Pride in Practice: What Does Healthcare Look Like for LGBTQ+ Communities?

LGBTQ+ communities are disproportionately affected by inequalities in healthcare and experience worse outcomes compared to the general population.



**The Pride in Practice
Patient Experience
Survey received over
900 responses in 2021**



Introduction

How Can Community Pharmacy Help?

Community pharmacies are in a strong position to tackle these inequalities and to improve the healthcare experiences of LGBTQ+ people.

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Community pharmacies are in a strong position to tackle these inequalities and to improve the healthcare experiences of LGBTQ+ people.

The Pharmaceutical Services
Negotiating Committee (PSNC) calls
community pharmacy
'a socially inclusive healthcare service'.

99% of the UK population are within a twenty minute drive
of a pharmacy

96% are within twenty minutes of a pharmacy by walking or
public transportation.

Patients do not have to register or book an appointment to
attend a pharmacy, and many pharmacies are open long hours.

**Pharmacies are, therefore, one of the most
accessible forms of healthcare.**

87% of respondents to LGBT Foundation's 2019 Patient Experience Survey were regular users of a community pharmacy. Therefore, ***feeling confident about how to develop strong relationships with your LGBTQ+ patients is crucial.***

This resource provides information, activities, and resources to help you support LGBTQ+ communities and put responsibilities laid out by the [Equality Act 2010](#) into meaningful practice. Many of the skills we cover in this guide will also help you to provide inclusive services to other individuals and communities who experience marginalisation and health inequalities. Many of the groups who face barriers to healthcare are included within the Equality Act 2010, however others, such as Gypsy, Roma and Traveller communities, military veterans, carers, and those who are homeless and vulnerably housed, may not be listed.

The 9 protected characteristics* of the Equality Act are **age, gender reassignment* (which includes trans and non-binary people), disability, marriage and civil partnership, pregnancy and maternity, race (which includes nationality and ethnicity), religion or belief, sex (including gender), and sexual orientation.***

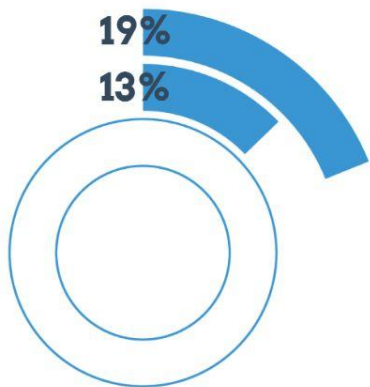
Wait...what does that mean?

All words with an asterisk* are defined in the glossary at the end of this guide.

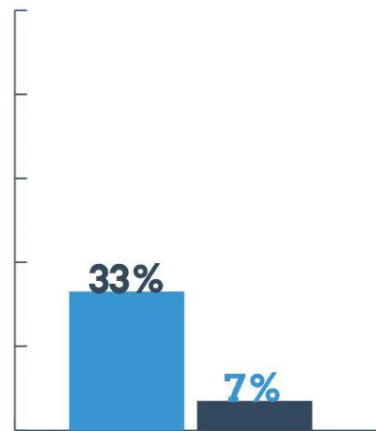
It is also important to be aware that many people may experience multiple marginalisation and may therefore have different needs. An older, Jewish man who is gay may experience barriers relating to his age, faith and sex as well as his sexual orientation. Therefore, it's important that pharmacists think about patient and customer needs in a holistic way.

This guide will focus on LGBTQ+ communities who are included within the characteristics of gender reassignment and sexual orientation, but many of the principles mentioned in this guide can be applied to other groups and communities. People who are multiply marginalised have an increased risk of facing inequalities, discrimination, and barriers to accessing healthcare.

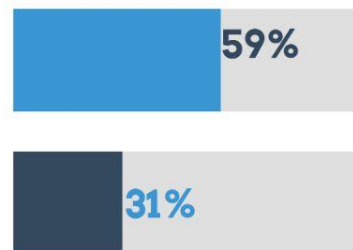
A [2018 Stonewall study](#) found that:



19% of QTIPoC LGBT people have experienced some form of unequal treatment from healthcare staff because they're LGBT, compared to 13% of LGBT people overall.



33% of LGBT people aged 65+ say they drink almost every day, compared to just 7% of LGBT people aged 18-24.



59% of disabled LGBT people felt life was not worth living at some point in the year preceding the survey, compared to 31% of LGBT people who aren't disabled.

Pride in Pharmacy is designed to help you build your confidence and knowledge around making your pharmacy as accessible to marginalised communities as possible. It equips you with the tools to question your assumptions, use open language, create an inclusive pharmacy environment, and signpost appropriately.



Embedding these practices into your pharmacy strengthens inclusive, accessible care for all of your patients – not just for those who are LGBTQ+.



Introduction

Using This Resource

Pride in Pharmacy has been designed to provide busy pharmacy staff with bite-sized learning.

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Pride in Pharmacy has been designed to provide busy pharmacy staff with bite-sized learning that can be used in two ways:

Learning and Development

The resource is split into 2 parts. Part 1: Inclusive Practice is aimed at all pharmacy staff who have contact with customers. Part 2: Clinical Knowledge is aimed primarily at pharmacists, but provides greater context for other pharmacy staff.

Each part is made up of short interactive modules that can be completed as a pharmacy team, with a colleague, or alone. Each module should take 5 to fifteen minutes to complete.

Reference Guide

Pride in Pharmacy may be also be used as a reference tool.

Please note that this resource is a very brief introduction to LGBTQ+ inclusion in pharmacy. For more detailed, individualised support, contact Pride in Practice at **pip@lgbt.foundation**. We'd love to hear from you!



1. Inclusive Practice

1.1 Noticing Our Own Assumptions

Part 1 is designed for all customer-facing pharmacy staff.

1. Inclusive Practice

Part 1 is designed for all customer-facing pharmacy staff. It contains 3 modules that will support you to:

1. Notice assumptions that can be made unconsciously
2. Become comfortable using open and inclusive language
3. Create a visibly inclusive pharmacy environment

These modules offer opportunities for discussion so they are best completed together as a pharmacy team or with another colleague. If you are working through Part 1 alone, you may wish to jot down your own notes for the discussion activities.

1.1 Noticing Our Own Assumptions

If you are less familiar with LGBTQ+ terminology, it can sometimes be a little confusing, so let's break it down.

LGBT is an acronym that stands for lesbian, gay, bisexual and trans. It's often used as an umbrella term for many different ways of describing a person's sexual orientation and trans status. A + sign is sometimes used to signal that identities in addition to lesbian, gay, bisexual and trans and also included and welcome.

You may have come across variations of the acronym such as LGBTQI or LGBTTTQIAAP. These variations arise as communities create terms to describe their identity, and then are included within the acronym.

L G B T Q Q I A A P
Lesbian Gay Bisexual Trans Queer Questioning Intersex Ally Asexual Pansexual

Each of these letters are important because they represent whole communities of individuals. However, you don't need to be able to remember them all to support your LGBTQ+ customers effectively!

The more important thing to remember is that language – in all areas of our lives – is constantly evolving. It wasn't long ago that we were just learning what 'Zoom' means! Because language changes, the best way to support your customers is to avoid making assumptions about their identities and experiences in the first place.

The first step in avoiding assumptions is to be aware of those you might be making without even realising it. For example, many people unconsciously assume that everyone is heterosexual and cisgender.* The assumption that everyone is heterosexual is known as heteronormativity* and the assumption that everyone is cisgender is known as cisnormativity.* These assumptions can mean that LGBTQ+ people have to repeatedly correct, or put up with, mistakes being made about themselves and their relationships.

“I have been asked questions about me and my ‘wife’ with the assumption that I am both married and that my partner is of the opposite gender.”

– Gay cis man, 45, Southport

The first step in avoiding assumptions is to be aware of those you might be making without even realising it. Read and discuss the following case study:

Case Study

Two masculine-presenting people enter the pharmacy with a baby, looking to buy cough medicine for the child who looks unwell. A member of pharmacy staff wants to ask some questions about the baby to make sure the medicine is suitable. To ensure they're addressing the right person, the staff member asks, "Which one of you is Dad?"

Discussion

What assumptions has the pharmacy staff member made?

You may have mentioned the following:

- That you can tell therefore whether a person would be called 'Dad' by how they look. Gender expression – that is, the way a person dresses, acts, or speaks – is not necessarily indicative of a person's gender identity.
- That only one of the adults is 'Dad'. There are many family structures, some of whom have no dads and some of whom have more than one.
- That either of the people have a parental relationship to the child. There are many types of guardianship, including other family members, foster parents, and adoptive parents who may not use the term 'Dad'.

Did you notice any others?

In this example, the staff member's question carries a lot of assumptions that they may not have been aware of. Because it is phrased as question, there is pressure on the customers to share sensitive information about themselves to receive medical advice for the child.

These assumptions can be experienced as microaggressions*, a term describing remarks or behaviours that communicate bias or prejudice towards a marginalised community, whether intentional or not. Microaggressions may seem small, but their frequency makes them a source of real and prolonged harm – or minority stress* – to the people who experience them.

Discussion

How could the counter assistant rephrase their question to avoid assumptions?

Assumptions that exclude LGBT communities can be made unconsciously. It is therefore important to pay attention to, and reflect on, our own use of language.



1. Inclusive Practice

1.2 Using Open Language

Before we know how a person identifies, or what their relationships with other people are, we should use open language to avoid making assumptions.


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Before we know how a person identifies, or what their relationships with other people are, we should use open language to avoid making assumptions.

Open language involves making small changes, such as substituting gendered language for non-gendered alternatives. This can make a big difference to making sure all of your patients feel welcomed, included, and affirmed.

Non-gendered language includes:

partner	<i>rather than</i>	husband/ wife/ boyfriend/ girlfriend
child	<i>rather than</i>	son/ daughter
caregiver/ parent/ guardian	<i>rather than</i>	mum/ dad/ father/ mother
sibling	<i>rather than</i>	brother/ sister
patient/customer	<i>rather than</i>	lady/ gentleman/ man/ woman

A hand is shown holding a pink box of menstrual products. The background is a blurred pharmacy shelf with various colorful boxes. The text is overlaid on the image in a bold, dark blue font.

“[My pharmacy could improve the services offered to its LGBT patients by using] gender neutral terms - menstrual products are still labelled as “feminine hygiene” or “women’s health” and often close to baby products.”

– Lesbian cis woman, 29, Sheffield

We can't know someone's gender just by looking at them, so we should also be aware of how we use pronouns*.

Pronouns are words that stand in for someone's name. He/him/his, she/her/hers, and they/them/theirs are regularly used pronouns. Using the wrong pronouns to describe someone is a form of misgendering.* Misgendering may seem like a small mistake but – at a time of rising transphobic discrimination in the UK – it can be a source of real distress to trans, non-binary, and gender nonconforming people.

Asking people which pronouns they use and then using them is a simple way of respecting your patients' identities and signalling that your pharmacy is a safe and inclusive space. Until you know which pronouns someone uses, use open language that avoids assumptions about their identity, for example, by referring to a customer as 'they/them', 'the patient', or 'the customer'.

If you have never asked for someone's pronouns before, it can take some time to get used to. Here are some ways to open the conversation:

- Start with your own pronouns. This gives the patient space to share theirs, e.g. "Hello, my name is Alex and my pronouns are he/him. How can I help you?"
- Wear a badge stating your pronouns. The Pharmacists' Defence Association (PDA) [LGBT+ Network](#) provide pronoun badges for free to PDA members.
- Just ask, 'What pronouns do you use?'

Activity

Let's practice using people's preferred pronouns! In a group of three or more, take turns to move around the group introducing yourself and then correctly using the pronouns of those who went before you.

For example, the first person may say: "My name is Alex and my pronouns are he/him." The next person would then say: "My name is Natasha and my pronouns are she/her. He is Alex." The next person will continue: "My name is Amir and my pronouns are he/him. She is Natasha. He is Alex," and so on.

Once you know how someone refers to themselves and those around them, you can use that language too. For example, there is no need to keep saying 'Parent' if a patient has let you know their child calls them 'Mum'. Similarly, if a trans person has told you that she uses she/her pronouns, you don't need to keep referring to her as they/them.

We talked in Module 1.1 about the fact that language is constantly changing. Therefore, occasionally a patient may describe themselves using a term you have not heard before. If this happens, you can either ask, 'What does that term mean to you?' or you can look it up later using an online resource like [Stonewall's List of LGBTQ+ Terms](#).

The most important thing to remember is that **every individual is the expert of their own identity, and every identity deserves to be respected.**

If you make a mistake – as we all do from time to time – just:

1. **Apologise or acknowledge your mistake**
2. **Correct yourself, or thank the person who corrected you**
3. **Move on**
4. **And try to get it right next time**

“[I]f I go in to collect my partner’s testosterone, [my pharmacy] assume they are a cis man and use ‘he’ pronouns. My partner is non-binary trans. masc. Then I have the choice of either outing my partner in the middle of a shop with other people around, or allowing them to be misgendered.”

– Queer cis woman, 43, Greater Manchester

Discussion

Read the quote above. What can the pharmacy staff in this situation do differently to alleviate the stress and anxiety this customer is experiencing?

The person in this example suggested: “The whole thing could be avoided if the staff just used ‘they’ for everyone and didn’t make assumptions.”

You may also have discussed:

- Asking the customer what pronouns their partner uses
- Mirroring the customer’s language
- If you are unfamiliar with the term ‘non-binary trans. masc’, asking the customer for clarity or looking it up online

Did you think of anything else?

Conclusion: For some LGBTQ+ people, experiencing assumptions about their relationships and/or gender is a cause of stress, anxiety, and discomfort. It may prevent people from seeking information or advice from health professionals when they need it. Using open language that avoids assumptions and mirroring the language people use to describe themselves is a simple way to help your LGBTQ+ customers feel safe, comfortable, and included.



1. Inclusive Practice

1.3 Creating a Visibly Inclusive Space

A visibly inclusive space is a pharmacy environment that lets your LGBT patients know that they are safe to share their identity as soon as they step in the door.

1.3 Creating a Visibly Inclusive Space

Many LGBTQ+ people are hesitant to share their sexual orientation or trans status with healthcare professionals for fear of discrimination. This can negatively impact LGBTQ+ patients' healthcare when they do not receive advice or treatment that takes into account their identities and experiences.

A visibly inclusive space is a pharmacy environment that lets your LGBTQ+ patients know that they are safe as soon as they enter.

Our 2021 Patient Experience Survey asked respondents about their pharmacy's visible inclusivity with the question, 'Does your pharmacy display LGBT literature and posters or a Pride in Practice award?'

Over 90% of those who responded said no.



"I'd definitely prefer it if [my pharmacy displayed LGBT literature and posters or a Pride in Practice award], and if there were another pharmacy near me that did I'd probably switch to them."

– Bisexual person, 34, Greater Manchester



Activity

Walk into the public-facing area of your pharmacy and look around. What can you see that would let LGBTQ+ customers know your pharmacy is a safe space to share their identity?

There are lots of small ways that you can create a visibly inclusive pharmacy space. You could:

- Display posters or leaflets for LGBT Foundation or other local LGBT services and support groups
- Wear pronoun badges
- Use rainbow lanyards
- Create displays recognising and celebrating LGBT events, e.g. Pride



All primary care services who complete the Pride in Practice assessment receive a physical plaque and a digital award to display in the pharmacy and online. This shows patients that you have worked with LGBT Foundation to develop your pharmacy's understanding of LGBT identities, experiences, and needs.

“Any form of visibility would let me know that I was able to ask questions that may relate to my orientation and that I was in a safe space.”

– Lesbian cis woman, 30, Sheffield

Discussion:

Mind map ideas to improve your pharmacy's visible inclusion of LGBTQ+ communities. You could consider your physical pharmacy space and – if you have a website and/or social media – online.

Activity

Turn the ideas you have mind-mapped into an achievable action plan for making your pharmacy more visibly LGBT inclusive. Use the table below as a template.

What?	Who?	How?	When?
Display an LGBT poster	Alex	Ask LGBT Foundation for a poster or some leaflets	By the end of the month
...

Conclusion: Small changes to your pharmacy's physical and digital environments can make a big difference to LGBTQ+ customers. Making sure that your pharmacy is a visibly inclusive environment helps LGBTQ+ customers to feel safe sharing their identities. This helps you to provide appropriate, person-centred care.



2. Clinical Knowledge

2.1 Reflecting on Public Health Campaigns

This part is designed to support pharmacists, pharmacy technicians, and pharmacy owners with taking an inclusive approach to promoting health campaigns and screenings, and advising and prescribing to LGBT patients.

2. Clinical Knowledge

Part 2 is designed to support pharmacists, pharmacy technicians, and pharmacy owners with advising, prescribing, and promoting health campaigns in an inclusive way.

It contains 3 modules that will support you to:


1. Consider LGBT people in public health campaigns
2. Promote screenings in an inclusive way
3. Support your trans patients

These modules offer opportunities for discussion so they are best completed groups or 2 or more people. If you are working through this section alone, you may wish to jot down your own notes for the discussion activities.

2.1 Reflecting on Public Health Campaigns

All pharmacies in the UK promote public health campaigns each year, with topics and campaign materials provided by NHS England and NHS Improvement (NHSE&I) and the Pharmaceutical Services Negotiating Committee (PSNC).

Previous campaigns have included cervical screening, diabetes, and smoking cessation – all healthcare issues that disproportionately affect LGBT people. In fact, the National Adviser for LGBT Health, Dr Michael Brady, writes, ["With almost every measure we look at LGBT communities fare worse than others."](#) Despite this, information or campaign materials created for LGBTQ+ audiences are rare.



“[My pharmacy could improve the services offered to its LGBT patients by displaying] literature, perhaps around contraception/safer sex/PrEP etc. tailored to LGBT patients.”

– Queer cis man, 34, Greater Manchester

Pharmacies can help by proactively seeking data about LGBT people for upcoming health campaigns. This data can be used to create your own materials to reach and support your LGBT patients.

Discussion

Your pharmacy is going to be promoting a national public health campaign around alcohol awareness. You look at the provided campaign materials and notice that there is no LGBTQ+ representation or inclusion. Why could it be important to create a poster or leaflet about alcohol awareness aimed LGBTQ+ people?

You may have discussed:

- That LGBTQ+ people have higher rates of alcohol consumption
- The association between high rates of alcohol consumption and poor mental health, which is higher among LGBTQ+ communities
- The prevalence of alcohol within LGBTQ+ social spaces
- The desire of some LGBTQ+ people to access LGBTQ+ specific recovery services

Did you think of any others?

Case study

The following animation shares the story of a 42-year-old non-binary person who spoke with LGBT Foundation about how alcohol has affected their life and relationships.

* Read by a voice actor to protect privacy*

As you listen, you may consider what this story tells us about the importance of LGBT-specific recovery services. You could also think about how your pharmacy signposts to local LGBT organisations and support services.

WE'RE HERE IF YOU NEED US

0345 3 30 30 30



Activity

Choose an upcoming public health campaign and create a brief plan of how your pharmacy will include LGBT people in its promotion. You could consider:

- Researching how your chosen topic affects LGBT people. In addition to industry journals and government bodies, LGBT organisations such as LGBT Foundation, Stonewall, and TransActual publish research about LGBT health
- Creating a poster that addresses LGBT patients
- Familiarising staff with LGBT support services you can signpost to

Conclusion: LGBT people face a wide range of healthcare inequalities. Your pharmacy can play a part in addressing them by actively and visibly including LGBT-specific messaging when promoting public health campaigns.



2. Clinical Knowledge

2.2 Raising Awareness of Screenings

Pharmacies also play a vital role in raising awareness of potentially life-saving cancer and HIV screenings.

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Pharmacies also play a vital role in raising awareness of potentially life-saving cancer and HIV screenings.

Cancer

LGBT Foundation's [Hidden Figures](#) reports that some LGBT people, particularly trans people, are routinely denied access to preventative health screenings. This, in addition to other barriers accessing healthcare services, can mean that prevention, diagnosis and treatment of potential health problems is less likely, and that late diagnosis of serious conditions is more common.

In addition, LGBT communities experience a higher prevalence of risk-factors linked to the development of long-term health conditions, including higher levels of smoking and alcohol consumption, which can be exacerbated by minority stress. All of these have been linked to the development of long-term health conditions such as diabetes and cancer.

“[My pharmacy could improve the services offered to its LGBT patients by providing] literature on local support services, particularly screening and mental health support.”

– Pansexual cis woman, 39, Bradford



LGBT Health Inequalities in the UK (2020)

Discussion

Reflecting on video you just watched, mind map ways you can more effectively share information about cancer screening services with LGBTQ+ communities. You may wish to consider:

- Ways to bust myths about who screening is for
- How you can find and promote LGBTQ+ inclusive self-help and support services
- How you will navigate patient consultations to recognise concerns that LGBTQ+ people may have around screening

HIV

HIV disproportionately affects LGBT people including men who have sex with men (MSM) and trans women. Other at-risk groups include intravenous drug users and black African people. [Hidden Figures](#) reports that awareness work around regular testing, and access to preventative medication such as PrEP is having a positive impact on lowering the HIV prevalence rate in the UK. The number of new HIV diagnoses reported among gay and bisexual men decreased by 71% between 2012 and 2018.

Discussion

Do you feel able to advise or signpost a patient who would like to access:

- Local HIV testing services?
- PrEP or PEP?
- HIV support groups?

If you have identified any gaps in your pharmacy team's knowledge, take this opportunity to create a quick reference sheet that contains this information.

Being aware of how LGBTQ+ health inequalities can be effectively included when you participate in public health campaigns and screening promotions supports the [public health](#) objectives of the [Community Pharmacy Contractual Framework \(CPCF\)](#).

Conclusion: As accessible healthcare hubs, community pharmacies are in a strong position to advise patients about accessing local screening services. Bear in mind that some LGBTQ+ people may have less knowledge and confidence around accessing appropriate screening services. Understanding these issues and having a good knowledge of local support services can help you to navigate interactions about screening with LGBTQ+ patients.



2. Clinical Knowledge

2.3 Supporting Your Trans Patients

In this section we will focus on two areas of specific importance: updating patient records and dispensing hormone prescriptions.

2.3 Supporting Your Trans Patients

Trans and non-binary people are much more likely to face difficulties accessing healthcare than other LGBTQ+ people.

Our 2021 Patient Experience Survey found reports of trans and non-binary respondents being ignored, laughed at, and misgendered after disclosing their gender identity or trans status to a healthcare professional.

All of the content covered in this guide so far will help you to support your trans patients, but in this section we will focus on two areas of specific importance: updating patient records and dispensing hormone prescriptions.

Updating Patient Records

For some trans and non-binary people, the name and/or title on their NHS record and prescription may not reflect their identity. This means that some patients are referred to by a name they no longer use, or by a title that does not match their gender when collecting their prescriptions.

This can be particularly difficult for patients who attend pharmacies that call out their name in front of other customers once their prescription is ready to collect.

Changing your gender marker on your NHS records is a personal decision. A person can change their name and gender marker on their NHS records by asking for this to be done at their GP practice. However, some people may not be aware of this, or may have other reasons for not changing their records. For example, they may be living with a partner or family who are unsupportive or where receiving mail that indicates they are trans could place them at risk of harm.

LGBT Foundation has produced guidance for healthcare services to inclusively record trans status and gender identity, however the NHS has not yet made this monitoring compulsory. This means that some patients – particularly those who are non-binary – may not have had the option to accurately register their gender identity with their GP.

A patient changing their gender marker is assigned a new NHS number and a GP must transfer over the relevant notes from their previous record to this new one. This means it can take time for a change of name and gender marker to properly come through on the system.

If a patient notifies you that the name and title they use in their daily lives does not match the details automatically generated for their prescription, try to find ways to remember the information they share with you. If you can, create an alert on their record with the patient's updated details. Next time the patient comes into the pharmacy you will be able to use their preferred name, title, and pronouns.

“I don’t really think it’s necessary for them to call out your title as well as your name [...] if there was a box where you could state how you want your name to be read out, that would be great. This would also work well for those who haven’t legally changed their name, and so don’t want their name shouted out in front of the public [...] it can feel really embarrassing getting that called out and thinking ‘oh no, everyone here knows I’m trans now’.”

– Bisexual non-binary person, 29, Sheffield

Dispensing Hormone Prescriptions

Some trans patients who collect hormone prescriptions from their pharmacy report being asked why they are taking hormones. Others have been denied their prescription altogether.

If you want to ask a patient why they have been prescribed a medication, consider whether it is necessary. Inappropriate curiosity from a healthcare professional is a negative experience frequently reported by LGBTQ+ people.

If you do need to ask why the prescription has been issued in order to advise the patient appropriately, consider how they can be made more comfortable. Can you explain to the patient why you are asking? Do you have a private consultation room or a quieter area of the pharmacy you could use when asking them to share personal or confidential information?

“[The pharmacy] assistant told me they don’t serve my kind (trans people) there and laughed at my HRT prescription.”

– Pansexual trans woman, 49, Leicester

You should make sure you are following the General Pharmaceutical Council’s standards and guidance for pharmacy professionals and pharmacies when supplying all medicines, including hormone prescriptions. The [guidance on religion, personal values and beliefs](#), the [guidance for pharmacist prescribers](#) and the [guidance on providing pharmacy services at a distance, including on the internet](#), may all be relevant depending on the individual context. If you have any other concerns, you can also contact the Pride in Practice team at pip@lgbt.foundation and we can signpost you to further support.

Case Study

A patient in their late 30s is in your pharmacy during a very busy lunchtime rush to collect a prescription for testosterone. You notice that the patient's name on the prescription is 'Miss H. Smith' but the person who is collecting the prescription is masculine-presenting. The patient is going to have to wait in the pharmacy for their prescription. When it is ready, you will need to call the patient's name to notify them. Discuss how you can make sure that the patient leaves with all the information they need, having had a positive experience at the pharmacy.

You may have suggested:

- When the patient first requests the prescription, ask if it is for them. They may be collecting it on someone else's behalf
 - If it is for them, let the patient know you will need to call them when it is ready and ask if the name on the prescription is the one that they would like you to use. Avoid questions like, 'Is this your birth name?' or 'Is this your real name?' Instead, ask, 'Is this the name you would like me to use?'
 - If you don't get an opportunity to confirm the patient's correct title or name, consider calling them just by their surname instead or making eye contact to call them over.
 - If you need to ask any personal questions to prescribe appropriately, ask whether they would like to speak in a more discreet space, e.g. a consultation room. Let the patient know what questions you have and explain why you need to know.
- Be empathetic about the fact that trans and non-binary people often face intrusive or hostile questioning from the public. Treat this as an opportunity to build trust with a patient and develop a positive longer term relationship with them which will ultimately improve their health and wellbeing.

Conclusion: Recognising how day-to-day interactions can create barriers and difficulties for your trans and non-binary patients can help you to provide the best care you can. Consider how you can keep patient records that prevent patients having to 'come out' over and over again. Offer discretion when you need personal information from a patient. Finally, use online resources or contact Pride in Practice to answer any questions you have about prescribing hormones.



Further Information and Support

Further Information and Support

For Pharmacy Staff

Pride in Practice

This resource is just a brief introduction to the wide range of LGBTQ+ inclusion measures [Pride in Practice](#) can support your pharmacy with. Pride in Practice offers a range of training options and the opportunity to earn an accredited Pride in Practice award endorsed by the Royal Pharmaceutical Society. You can contact Pride in Practice at pip@lgbt.foundation. You can also sign up to our monthly newsletter [here](#).

Pharmacists' Defence Association

The [Pharmacists' Defence Association \(PDA\)](#) have an [LGBTQ+ Network](#), providing a forum for LGBTQ+ pharmacists and allies to address issues of special relevance to LGBTQ+ pharmacists. The network also provide [free pronoun badges](#)

and [flyers](#) for all PDA members!

Centre for Pharmacy Postgraduate Education

The [Centre for Pharmacy Postgraduate Education \(CPPE\)](#) offer a range of in-person and e-learning opportunities to develop your inclusive practice. Current online modules that can be completed in your own time include [Transgender Healthcare – Consulting with Dignity and Respect](#) and [Health Inequalities](#).

Royal Pharmaceutical Society

The [Royal Pharmaceutical Society \(RPS\)](#) recently produced a resource about [Recognising LGBTQIA+ Microaggressions](#). This is part of a series of macroaggressions guides that also includes [Race](#), [Disability](#),

and [Gender](#). Pharmacy professionals wanting to do more to develop equality, diversity, and inclusion in the profession can sign the [RPS Inclusion and Wellbeing Pledge](#) and join the [Action in Belonging, Culture, and Diversity \(ABCD\) Group](#) which meets on Zoom every two months.

LGBT Foundation Reports

[Hidden Figures: LGBT Health Inequalities in the UK](#) (2018) is a report assessing LGBTQ+ health inequalities across different life stages. The report highlights how multiple health inequalities across a lifespan can impact sequentially and can lead to significantly worse health outcomes.

[Hidden Figures: The Impact of the Covid-19 Pandemic on LGBT Communities In the United Kingdom](#) In the United Kingdom (2020) uncovered some of the profound effects the pandemic has had on the lives of LGBT people in a wide range of areas including access to healthcare and support

Our [10 Professionals from 10 Boroughs](#) series shares the perspectives of a range of primary care professionals, including pharmacists in [Manchester](#) and [Trafford](#), on the importance of LGBT inclusion to their work

[If We're Not Counted, We Don't Count](#) (2021) is an information and best practice guide for primary care professionals about monitoring service users' sexual orientation and trans status

For LGBT Patients

[Signposting](#) is an essential service under the [NHS Community Pharmacy Contractual Framework](#) (CPCF).

Signposting aims to minimise the inappropriate use of NHS services by directing or referring patients to appropriate health and social care providers and support groups. To help you signpost with confidence, here's a handy list of some key LGBTQ+ organisations:

LGBT Foundation

[LGBT Foundation](#) is a national charity delivering advice, support and information services to lesbian, gay, bisexual and trans communities. With a history dating back to 1975, they campaign for a fair and equal society where all LGBTQ+ people can achieve their full potential.

Through their services they reduce isolation amongst LGBTQ+ communities, help people feel more

confident and in control of their lives and enable people to flourish.

Together with LGBTQ+ communities and their supporters, LGBT Foundation are working to secure a safe, healthy and equal future for all LGBTQ+ people.

Other LGBT Organisations

[African Rainbow Family](#) support LGBTIQ people of African Heritage and wider Black and Asian Minority Ethnic groups.

[akt](#) supports lgbtq+ young people aged 16-25 in the UK who are facing or experiencing homelessness or living in a hostile environment.

[GALOP](#) support LGBT+ people who have experienced abuse and violence.

[Hidayah](#) supports LGBTQI+ Muslims.

[Keshet](#) supports LGBTQ Jewish people and their families.

[LGBT Consortium](#) supports LGBTQ groups and organisations. Their members directory can be filtered to find organisations by the type of work they do and/or the communities they work with.

[Live Through This](#) is an advocacy and support charity for LGBTQI+ people affected by cancer.

[Mermaids](#) work with gender diverse kids, young people, and their families.

[The Proud Trust](#) supports LGBT+ young people.

[Stonewall](#) provide information and support to LGBT people and their allies. [What's In My Area?](#) can be used to find LGBT services and community groups local to you. Their List of [List of LGBTQ+ Terms](#) is a useful tool for understanding new language as you encounter it.

[Terrence Higgins Trust](#) is an HIV and sexual health charity.

[The UK Lesbian and Gay Immigration Group](#) supports LGBTQI+ people through the asylum and immigration process.

Services the LGBT foundation offer



Community Leaders
Programme
Pride in Practice
LGBT Cancer Programme
Training and Consultancy
Research, Police and
Campaigns
Guides and Resources
Online Events Directory



Befriending and Social
Support
Women's, Men's, and Trans
Programmes
Substance Misuse
Programme
Talking Therapies
One-to-One, Email and
Helpline support
Social Support Groups
Trans Advocacy Service



Village Angels and Village
Haven
Safer Sex Advice and Sexual
Health Testing
Free Condoms and Lube
Domestic Abuse Support
Hate Crime Reporting and
Support
Legal and Police Advice
Surgeries

*Glossary

Agender

Agender is defined as not having a gender.

Ally

An ally is a person who is not part of a particular marginalised community but who supports their cause

Asexual

Asexual is a sexual orientation. Asexuality describes the lack of sexual attraction to others, or low or absent interest in or desire for sexual activity. Asexual people may or may not experience romantic attraction.

Biphobia

Biphobia describes prejudice or discrimination towards bisexual people based on their sexual orientation.

Bisexual

Bisexual is a sexual orientation. It describes an attraction to people of more than one gender.

Cisgender (or 'cis')

Cisgender is an adjective that describes people whose gender matches the gender they were given at birth. For example, a person who was assigned female at birth and who grows up to identify as female is a cisgender woman. Cisgender is sometimes shortened to 'cis'

Cisnormativity

The assumption that everyone is cis, or that cisgender is the 'normal' way of identifying.

Equality Act 2010

The Equality Act 2010 consolidated a number of existing pieces of anti-discrimination legislation under one Act. The Act legally protects people from discrimination in the workplace and in wider society on the basis of nine protected characteristics.

Gay

Gay is a sexual orientation. It is a term used by people of all genders to describe an attraction to people of the same gender.

Gender expression

Gender expression refers to the aspects of person's behaviour, mannerisms, interests, and appearance that are associated with gender in a particular cultural context, specifically with the categories of femininity or masculinity. Some people have an androgynous gender expression which means neither feminine nor masculine. A person can change their appearance to make them feel more confident but you shouldn't rely on a person's gender expression to gauge what gender they are.

Gender fluid

Gender fluid people do not have a fixed gender all of the time. Their gender may change day-to-day or they may identify with a certain gender

only in certain contexts.

Gender identity

Gender identity refers to a person's internal sense of their own gender. Everybody has a gender identity and a person's gender identity is not related to their sexual orientation.

Gender nonconforming

A gender nonconforming person is someone whose gender expression does not match the social expectations of their gender. For example, a woman who dresses in a masculine way may describe herself as gender nonconforming

Gender reassignment

Gender reassignment is a legal term within the Equality Act 2010 that describes a person whose gender identity is different from the gender they were assigned at birth. Although 'gender reassignment' can be perceived as quite medical language, the term refers to anyone who has undergone, or intended to undergo,

any kind of process to change their gender from what it was previously known as. Anyone who comes out as being trans or non-binary qualifies for protection under the ‘gender reassignment’ characteristic, as does anyone who has gained a Gender Recognition Certificate, and/or who has is intending to undergo, or has undergone, a medical or social transition.

Heteronormativity

The assumption that everyone is heterosexual, or that heterosexuality is the ‘normal’ sexual orientation.

Heterosexual

Heterosexual is a sexual orientation. It describes exclusive attraction to people of another gender.

Homophobia

Homophobia describes prejudice or discrimination towards gay and lesbian people based on their sexual orientation.

Intersex

An intersex person is someone whose physiology at birth does not match societal expectations of male or female bodies.

Lesbian

Lesbian is a sexual orientation. It describes a woman who is attracted to other women.

LGBT

LGBT stands for lesbian, gay, bisexual, transgender. You may also see LGBT+ (the + indicates that other identities are included), LGBTQ (Q for ‘queer’ or ‘questioning’), LGBTQI (I for ‘intersex’), or other variations. We use LGBT as a fully inclusive umbrella term.

Microaggressions

Microaggressions are commonplace comments that undermine already marginalised groups. Microaggressions are often

unconscious and unintentional, but because they are experienced so frequently by members of marginalised communities – such as LGBT people and people of colour – they can be a source of minority stress.

Minority stress

Minority stress is a well-researched concept that people from minority groups suffer from high levels of stress as a result of existing in a society that marginalises them. Over time, this stress negatively impacts on the health of marginalised groups, resulting in poorer health and reduced wellbeing.

Multiple marginalisation

Multiple marginalisation describes the experience of being marginalised on the basis of more than one characteristic. For example, a disabled gay man is multiply marginalised due to disablism and homophobia; a Black trans woman is marginalised due to racism and transphobia.

Non-binary

Non-binary is a gender identity. It describes somebody who is neither a man nor a woman, or who is both, or who understands their gender in a way that goes beyond identifying as either a man or woman. Non-binary is also used as an umbrella term to describe people whose gender identity does not fit neatly into the gender binary, including those who are agender and gender fluid.

Pansexual

Pansexual describes an attraction to people regardless of their gender.

Protected characteristics

The Equality Act 2010 lists nine protected characteristics which it protects people from discrimination on the grounds of. The protected characteristics as listed in the Act are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.

Queer

Queer is an umbrella term sometimes used by individuals who do not identify as cis and/or heterosexual. Queer is a reclaimed slur. Because it has historically been used as a slur, it is not advisable to describe someone else as queer unless this is how they describe themselves.

Questioning

Questioning describes those who are exploring their sexual orientation and/or gender.

Sexual orientation

Sexual orientation describes who a person is sexually and/or romantically attracted to.

Trans

Trans is an umbrella term to refer to anyone whose gender identity doesn't completely match the gender they were given at birth.

Trans Woman

A woman who is trans; someone who was assigned male at birth and whose gender is woman.

Trans Man

A man who is trans; someone who was assigned female at birth and whose gender is man.

Transphobia

Transphobia describes prejudice or discrimination towards trans people based on their trans status.

Trans status

Whether or not someone is trans. Sometimes also referred to as trans identity.



We would like to offer our warmest thanks to the following individuals for their contribution in co-developing this resource:

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