PROMOTING 2SLGBTQ+ INCLUSION IN NURSING EDUCATION

REPORT

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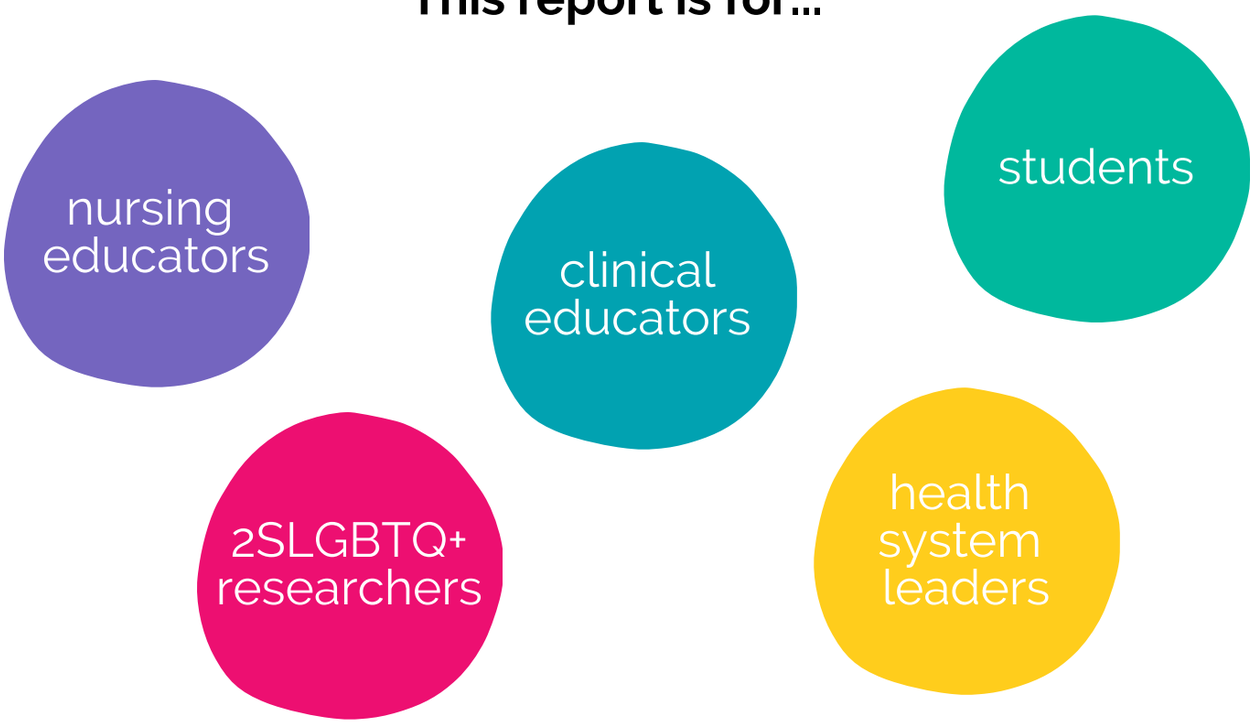
INTRODUCTION

Within nursing education, the inclusion of 2SLGBTQ+ students has emerged as an area of concern which remains largely underexplored and under-addressed. Despite the stated commitment of nursing schools across Canada to foster inclusion and social justice, 2SLGBTQ+ students enrolled in nursing programs have long-identified issues of discrimination, erasure, and cis-heteronormativity.

In an effort to shed light on this issue and assess deficits in 2SLGBTQ+ inclusion, this project was undertaken by University of Victoria fourth-year undergraduate nursing students Willow Geen and Mads Cail, as well as faculty mentor Allie Slemon, as part of a community practicum placement in the fall of 2023.

This report is for...



KEY TERMS

2SLGBTQ+ An umbrella term encompassing Two-Spirit, lesbian, gay, bisexual, trans, queer, and additional identities outside a heterosexual, cisgender experience.

Heteronormativity/Cisnormativity A societal belief which assumes a heterosexual orientation and cisgender identity (where one's gender identity aligns with their sex assigned at birth) as the normative default, resulting in the marginalization and erasure of 2SLGBTQ+ identities.

Homophobia/Transphobia Refers to prejudice, discrimination, or hostility towards individuals who identify as 2SLGBTQ+ on the basis of their sexual orientation and/or gender identity.

INTRODUCTION

This report draws upon a wide array of information sources including informal interviews with key contributors, and survey data from:

- An ongoing research study with nursing students at the University of Victoria and Camosun College (Slemon et al., 2023)
- A literature review
- A policy scan of Canadian nursing schools

This work represents a rigorous effort to consolidate and build upon what is known about the inclusion of 2SLGBTQ+ students in nursing education, and to call attention to the need for further research, advocacy, and action.

With the aim of promoting equity and making schools of nursing safer spaces for 2SLGBTQ+ students, this report will discuss the experiences of 2SLGBTQ+ students across contexts, review current initiatives taking place within nursing programs, and propose an evidence-informed agenda to better facilitate 2SLGBTQ+ inclusion. This effort is undertaken to not only directly address discrimination faced by 2SLGBTQ+ nursing students and uphold our institutions' commitment to equity and inclusion, but also in recognition of the pivotal role that practicing 2SLGBTQ+ nurses can play in reducing discrimination and improving health outcomes for members of their community (Dobson, 2022).

Thus, by advancing 2SLGBTQ+ inclusion in nursing education, we also aim to promote recruitment and retention of 2SLGBTQ+ nursing professionals to cultivate a more inclusive and equitable healthcare environment.

"We want students to come from different diverse backgrounds, we want students who are gender expansive... because we know that if you have a nurse that looks like you, your outcomes are going to be better."

– BSN Student, Research Participant

EXPERIENCES OF 2SLGBTQ+ STUDENTS

DISCRIMINATION ACROSS CONTEXTS

CLASSROOM

Evidence demonstrates that discrimination against 2SLGBTQ+ nursing students manifests in the academic and classroom setting, hindering students' academic experience, safety, and overall well-being (Canadian Centre for Gender and Sexual Diversity, 2019). A physical barrier faced by students is the limited accessibility of gender-neutral washrooms on the University of Victoria campus, particularly in the Human and Social Development building where the school of nursing offices are housed. The absence of gender-neutral facilities in such spaces was identified through informal conversations and the research study as a barrier to inclusion of Trans, Two-Spirit, and non-binary nursing students, as requiring students to exit their classroom buildings to access gender-inclusive washrooms reinforces cisnormativity and amplifies experiences of marginalization. Research corroborates that providing more gender-neutral facilities can promote a sense of belonging while alleviating stressors associated with using non-inclusive washrooms (Woodford et al., 2017).

In a Canadian study on gender-neutral washrooms on university campuses, 49% of trans and non-binary students reported avoiding using a washroom out of fear of harassment or being 'outed'. 48% reported having past negative experiences in a binary gendered washroom.

Laidlaw, 2020

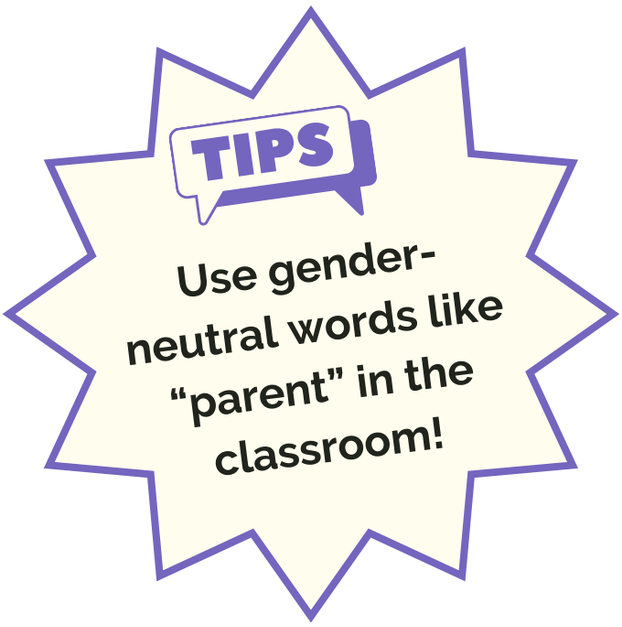
link to article

EXPERIENCES OF 2SLGBTQ+ STUDENTS

In addition to physical barriers, students encounter instances of cisnormativity and othering within the classroom environment from both instructors and peers. Reports from students and faculty within informal interviews indicated instances of students and instructors making harmful jokes and remarks about lab classroom manikins which are configured with non-cisnormative anatomy, perpetuating discriminatory attitudes and demonstrating a lack of positive representation of Trans+ bodies and gender diversity in lab classroom settings. Such instances have additionally been reported in the nursing education literature, suggesting that such experiences may unfortunately be widespread within classroom and lab settings (Singer, 2013).

Informal stakeholder interviews further revealed students' experiences of discrimination involving classroom instructors, including instances of educators questioning the rights of 2SLGBTQ+ individuals, criticizing inclusivity efforts, and perpetuating harmful stereotypes about Trans+ individuals. In such instances, the fear of further discrimination and the potential for 'outing' oneself were identified as significant deterrents for 2SLGBTQ+ students to speak out against such discrimination.

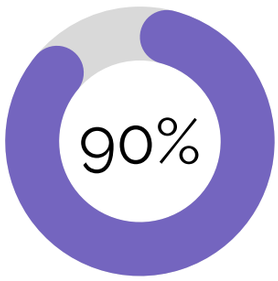
What assumptions might we make when we see and talk about manikins?



This fear can be compounded by the use of unnecessarily gendered language in classroom settings, such as the exclusive use of terms like "pregnant woman" instead of "pregnant person" and referring to procedures such as urethral catheterization using gendered rather than anatomy-specific language. Such practices further reinforce cisnormativity within nursing classrooms and contribute to an exclusionary environment for 2SLGBTQ+ students.

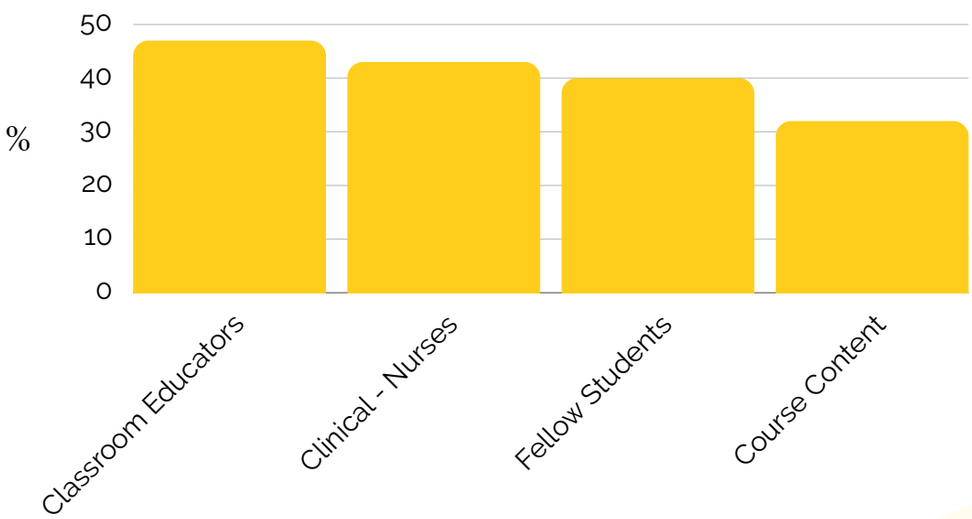
EXPERIENCES OF 2SLGBTQ+ STUDENTS

Indeed, results from the 2023 research study on students' experiences of discrimination at Camosun College and University of Victoria schools of nursing highlight the alarming prevalence of anti-2SLGBTQ+ discrimination (Slemon et al., 2024). Notably, the findings showed that nearly all 2SLGBTQ+ students reported experiencing discrimination within the nursing program in one or more forms.



of 2SLGBTQ+ students reported discrimination in nursing education

Contexts of Discrimination among 2SLGBTQ+ Students



As seen in this chart, among 2SLGBTQ+ students, the most common nursing education context for discrimination was in the classroom.

Reporting particular forms of discrimination, 65% of 2SLGBTQ+ respondents reported feeling unable to reveal aspects of their identity due to fear of stigma, discrimination, or poor treatment at least once during the program. Additionally, 54% reported hearing incorrect, misinformed, and/or harmful comments about themselves or people like them.

Two out of every three non-binary students reported experiencing homophobia, transphobia, and/or cisnormativity in the classroom.

These results underscore the urgent need for a more inclusive and supportive learning environment, where 2SLGBTQ+ students are supported by their administration, faculty, and peers in identifying, reporting, and mitigating discrimination.

EXPERIENCES OF 2SLGBTQ+ STUDENTS

The prevalence of discrimination may be perpetuated and further exacerbated by the lack of comprehensive 2SLGBTQ+ curriculum content within nursing education. Informal interviews and a literature search identified a lack of educational materials and educator resources which address the unique needs and perspectives of 2SLGBTQ+ individuals.

This is corroborated by a US study which found that baccalaureate nursing programs spend an average of only 2.12 hours covering 2SLGBTQ+ content throughout the duration of a four-year program (Sherman et al., 2021).

2.12

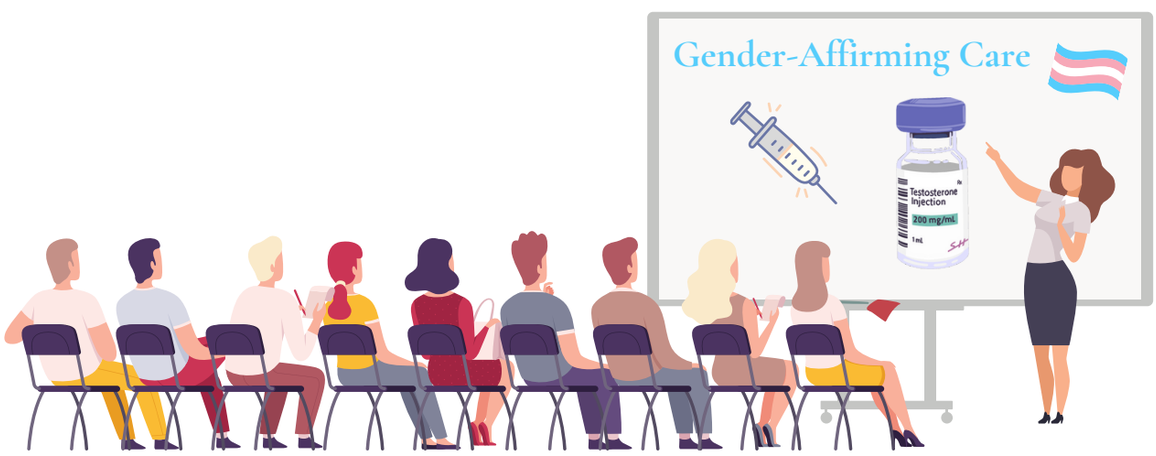
...is the average number of instruction hours on 2SLGBTQ+ content across an entire undergraduate nursing program.

How does your program compare?

"It is very clear that the LGBTQ community is an afterthought in nursing education"

– BSN Student, Research Participant

Addressing this gap through implementing learning materials that are created or informed by members of the 2SLGBTQ+ community will be crucial to fostering an inclusive learning environment that values sexual and gender diversity and prioritizes equity for 2SLGBTQ+ students.



EXPERIENCES OF 2SLGBTQ+ STUDENTS

DISCRIMINATION ACROSS CONTEXTS

CLINICAL

In the clinical setting, students are placed in the vulnerable position of being a learner in a new environment where power imbalances can present barriers to speaking up. 2SLGBTQ+ students involved in informal conversations and the research study reported experiencing instances of discrimination including misgendering, individuals' unwillingness to recognize pronouns other than he/him or she/her, and hearing nurses make negative comments about Trans+ individuals. This contributes to an unsafe practicum environment, leading 2SLGBTQ+ students to refrain from disclosing or embodying their identities in the clinical setting to avoid marginalization or mistreatment.

In cases where students do disclose their identities, several specifically reported experiencing misgendering in their clinical practice settings. Whereas learning and using a person's correct pronouns can be a meaningful form of identity affirmation and help create a sense of safety, intentional or unintentional misgendering does demonstrable harm to the wellbeing of 2SLGBTQ+ students (Jacobsen et al., 2023). Students describe being misgendered even while wearing a pin that displays their pronouns, and in certain cases have encountered an unwillingness from their instructors, preceptors, or unit staff to use non-cisnormative pronouns (i.e. he/him or she/her). Additionally, despite students' efforts, it was noted that very few nursing staff correct themselves when using incorrect pronouns, further perpetuating such misgendering.

TIPS

AVOID MISGENDERING BY...

- Checking pronouns on name tags, class lists, and email signatures
- Politely asking "what pronouns can I use for you?"
- Practice using they/them pronouns in conversations
- Gently informing and correcting colleagues
- If you do use an incorrect pronoun, calmly correct and move on

EXPERIENCES OF 2SLGBTQ+ STUDENTS

Furthermore, informal interviews revealed 2SLGBTQ+ students' experiences of **transphobic interactions with patients in the clinical setting**. In some cases this included direct hostility towards the student based on their gender presentation, pronouns, or identity disclosure, while other instances involved students hearing patients make derogatory remarks about the 2SLGBTQ+ community while patients remained unaware of their identity. Despite feeling unsafe with patients who engage in these discriminatory behaviours, **students reported feeling that they had no recourse** and believed they were obligated to conceal their identity when possible to continue caring for such patients. While the University of Victoria does, for example, maintain Discrimination and Harassment and Response to At-Risk Behaviour policies, it can be challenging for students to locate and interpret, leading to lack of clarity about what nursing students should do when they experience discrimination within the clinical setting. Clinical instructors and faculty have consequently voiced concerns about the safety and ethics of placing students in clinical practice environments where they have been subjected to homophobic and transphobic discrimination.

Discrimination and Harassment policy *Response to At-Risk Behaviour Policy*

"I don't know how safe it is for people to go into practicums … Does the school have a responsibility to ensure that practicum settings of any kind that students would be sent into … would be a safe space for them?"

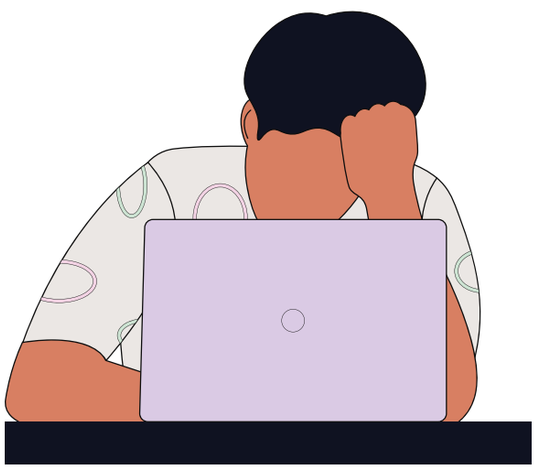
– Educator, BSN Program

In addition to these forms of interpersonal discrimination, physical barriers also present obstacles to inclusion of 2SLGBTQ+ students in the clinical setting. As discussed above in the classroom context, **a lack of gender neutral washrooms and changing areas within clinical practice environments constitutes a structural form of cisnormativity** whereby Trans and non-binary students are unable to access safe, private spaces that align with their gender identities. This is especially pertinent in acute care contexts, where infection control protocols necessitate that students change in and out of scrubs when arriving at or leaving the hospital. Trans+ students have described feeling uncomfortable using either the 'male' or 'female' designated changing rooms within health facilities, but often have no alternative to entering such spaces that invalidate their identities or may jeopardize their safety in order to change and store their belongings.

ADMINISTRATIVE

Forms of institutional discrimination on the administrative level were also highlighted by students and faculty. Contributors within informal interviews identified continual use of binary language in the context of ongoing program data collection (e.g. surveys, forms, formal research, etc.), identifying how this erases Trans and non-binary identities and indicating a need for more inclusive language.

Further, stakeholders have noted the need for more inclusive imaging and language that represents the 2SLGBTQ+ community on the School of Nursing website, within nursing student handbooks, in promotional materials, and in physical spaces such as bulletin boards to promote accessibility to and visibility within the nursing program.



In an article titled "Data for queer lives", authors Ruberg and Ruelos (2020) suggest the following approach for collecting data on gender identity:

1. What is your gender?
   - Woman
   - Man
   - Non-binary

2. Do you identify as transgender?
   - Yes
   - No
   - Prefer not to answer

link to article

TIPS

Engage with 2SLGBTQ+ students to ensure language is inclusive across administrative forms, documents/policies, and promotional materials.

EXPERIENCES OF 2SLGBTQ+ STUDENTS

Additionally, concerns were raised about how admissions forms should be made more inclusive for gender diverse students. By adapting such forms to provide a space for students' preferred name and pronouns on university records, surveys, and forms, the university can help promote 2SLGBTQ+ students' sense of belonging and academic achievement by eliminating stressors related to identity erasure (Woodford et al., 2017).

The University of British Columbia has created a Trans & Non-Binary Student Guide that offers information and resources, including navigating student information systems, on-campus housing, bathrooms, and other aspects of campus life.

Do trans and non-binary students in your program know where to find information about these topics?

Concerns have also been raised by stakeholders regarding administrative practices surrounding graduation. Currently, University of Victoria students are unable to receive a degree with their preferred name unless it is reflected on their government identification documents. While there exist legal implications to issuing a degree under a student's preferred rather than legal name, some stakeholders have suggested offering an option of including both names on the parchment or providing separate parchments for students to have a parchment with their preferred name to display or use for job applications.

Nursing educators are in a powerful position to advocate for more inclusive administrative practices within nursing programs and across their institution.

EXPERIENCES OF 2SLGBTQ+ STUDENTS

SEEKING COMMUNITY

As a population that faces marginalization and discrimination both within and outside of the university context, it is important to consider ways 2SLGBTQ+ students can foster a sense of community. To this end, informal stakeholder interviews included questions about the potential establishment of a 2SLGBTQ+ nursing student group, for which there was considerable support. However, opinions varied regarding whether this group should exclusively cater to students – providing a safe space for community building – or whether it should also include faculty members to facilitate advocacy efforts and address student concerns effectively. This underscores the nuanced nature of fostering inclusivity within educational institutions, and the importance of seeking further stakeholder input.

Furthermore, existing research highlights the challenges faced by 2SLGBTQ+ healthcare professionals, including student nurses, who often experience elevated levels of stress within heteronormative environments characterized by unsupportive colleagues and patients (Eliason et al., 2018). These professionals are frequently subjected to discrimination, negative remarks, and workplace gossip, exacerbating stress and a sense of isolation. Similarly, 2SLGBTQ+ post-secondary students encounter minority stress, which has been shown to detrimentally impact their academic performance (Canadian Centre for Gender and Sexual Diversity et al., 2019). These findings underscore the importance of creating supportive environments for 2SLGBTQ+ individuals to find community within educational and professional settings to mitigate the adverse effects of discrimination and marginalization on well-being and success.

What spaces exist within your nursing program for 2SLGBTQ+ students?
Within your broader institution?

CURRENT INITIATIVES

EXISTING AND PROPOSED POLICIES

Stakeholder interviews with students and faculty provided insight into current or potential policies and initiatives to enhance 2SLGBTQ+ inclusion within the Camosun/UVic BSN program. At Camosun, where students are required to wear uniform scrubs in clinical practice, a faculty member described an ongoing student-led initiative to offer a selection of non-gendered nursing scrubs at the campus bookstore, with the new vendor and design to be approved by student representatives. The college has also offered workshops about sexual orientation and gender identity (SOGI), where first year students attend a pre-prepared seminar and second-year students attend a talk about gender diverse nursing care facilitated by a Trans nurse.

As well, it was highlighted that Camosun recently conducted a mandatory faculty meeting about the 2SLGBTQ+ community from a point of care perspective, which was well-received by stakeholders who hope for such events to occur on a regular basis. Furthermore, in order to involve all students in 2SLGBTQ+ advocacy work, a potential initiative for Camosun nursing students to write letters to textbook editors highlighting outdated, harmful, or missing information has been suggested. While this has yet to be implemented, it highlights one way that 2SLGBTQ+ education and advocacy could be integrated into coursework while also actively improving learning resources for future students.

Klepper and colleagues (2023) conducted a review of LGBTQI+ content within nursing textbooks, and identified that there were considerable gaps. Many textbooks did not include any information on LGBTQI+ communities, and portrayals of this population were often focused on sexual health - perpetuating a harmful stereotype.

link to article

TIPS

- Select textbooks that integrate positive and affirming 2SLGBTQ+ content
- Supplement textbook readings with course content on 2SLGBTQ+ communities
- Engage colleagues and students in advocacy to improve 2SLGBTQ+ inclusion

CURRENT INITIATIVES

COURSE CONTENT

As previously discussed, inclusion of 2SLGBTQ+ learning materials and curriculum content can play a vital role in mitigating misinformation and discrimination. Despite existing research acknowledging the prevalence of homophobic and transphobic discrimination in the healthcare setting (Ayhan et al., 2020), there remains a notable gap wherein much of the existing literature and learning resources implicitly assume a heterogeneous, cisgender-heterosexual nursing student body. In this way, 2SLGBTQ+ individuals are often framed as an external community for nurses to care for, neglecting the experiences of 2SLGBTQ+ students and nurses within the profession. This discrepancy is highlighted by nursing student survey data revealing that 40% of 121 respondents from Camosun College and the University of Victoria identified as 2SLGBTQ+, underscoring the urgent need for targeted efforts to address inclusion within nursing education (Slemon et al., 2024). While this percentage may not be representative of the entire nursing student population, it affirms that 2SLGBTQ+ students are indeed present within our classrooms and clinical settings.

This concern was echoed by several faculty members and students across Camosun College and the University of Victoria, who have noted that 2SLGBTQ+ content including textbooks, learning outcomes, case studies, assignments, and in-class discussions or presentations are lacking in the nursing programs. For example, gender affirming care is not discussed in the BSN program, and content within the NP program is only loosely threaded through the endocrine unit and few other areas in the curriculum. Moreover, one faculty member noted that there was not any requirement for any inclusion of 2SLGBTQ+ material such as course readings, and coverage of this content was left up to the discretion of individual instructors.

CURRENT INITIATIVES

INCLUSIVITY & INTERSECTIONALITY

Concerns were also raised surrounding the misguided use of deficit discourses by nursing educators when discussing 2SLGBTQ+ topics. Instructors with good intentions use terms such as "preferred pronouns", which "insinuates that pronouns are optional rather than intrinsic" (Priddle et al., 2023; Queensland Human Rights Commission, 2021).

Deficit-Based Approaches	Strengths-Based Approaches
• Focusing on poor health outcomes among a particular population group • Suggesting that people and their identities are 'difficult', or require more nursing time, effort, etc. • Emphasizing that people's identities cause them distress or unhappiness	• Focusing on the strengths of a community, including collectivity and resilience • Learning about and sharing unique strengths of a community, such as positive health behaviours/outcomes • Emphasizing that diverse identities enhance the richness of nursing work

The current 2SLGBTQ+ content taught within the dual BSN programs was noted by stakeholders to be superficial. When discussed at all, 2SLGBTQ+ content was described as being brought up under the broad umbrella of anti-discrimination discussions rather than specifically addressed, or else relegated to discussions of mental health, substance use, and sexually transmitted infections. Concerns about this pathologizing approach to 2SLGBTQ+ representation are raised by Priddle et al., (2023), who note that such "harmful framing of curricula content suggests current teaching and learning activities reinforce negative stereotypes," (para. 29). Furthermore, content about "maternity" or perinatal care within the Camosun and University of Victoria BSN programs primarily use articles and chapters that solely acknowledge heterosexual families and cisgender patients, further marginalizing 2SLGBTQ+ nursing students within the programs.

CURRENT INITIATIVES

Possible solutions identified by stakeholders include requiring the use of inclusive language across all coursework, selecting non-cisheteronormative articles and textbooks, using learning materials produced by or with 2SLGBTQ+ individuals, including visuals that represent 2SLGBTQ+ individuals, and applying a consistent approach to 2SLGBTQ+ education that is weaved throughout the program.

Moreover, stakeholders identified that a greater focus on intersectionality should be implemented in the program, specifically relating to application in nursing practice. This could be integrated through developing case studies and modifying course learning outcomes to include content about individuals with multiple intersecting marginalized identities, encouraging students to consider how to care for patients facing various axes of discrimination.

Finally, stakeholders identified a need to teach how to identify and call out 2SLGBTQ+ discrimination. For example, a large focus of the BSN program in third year is recognizing and calling out racism, yet discriminatory comments based on sexual orientation and gender identity (which includes Two-Spirit Indigenous peoples), are not addressed.

INTERSECTIONALITY

Originally conceptualized by Black feminist scholar Kimberlé Crenshaw, intersectionality ensures we focus on the *intersection* of identities. Various forms of discrimination - such as homophobia, transphobia, racism, ableism, classism - intersect in complex ways.

As we advocate for 2SLGBTQ+ inclusion, it is crucial to examine how this intersects with antiracism, feminism, health justice, and other efforts. Resistance to discrimination draws on the strengths of both shared experiences and multiple voices.

AGENDA SETTING

PRIORITY #1: DISCRIMINATION POLICIES & REPORTING PATHWAYS

Is clear that anti-2SLGBTQ+ discrimination persists within nursing education settings. **To address this, students experiencing such discrimination require clear, accessible recourse in the form of policies, and pathways for reporting discrimination.** However, our policy scan of Canadian nursing schools revealed that institutional policies and processes related to discrimination are not often outlined in nursing student handbooks, and frequently fail to acknowledge the perpetuation of cis-heteronormativity within the nursing profession. Furthermore, the process of filling a report of discrimination is often complicated and formal, making it challenging for students to familiarize themselves with the process of reporting discrimination.

In contrast with the University of Victoria, some Canadian schools of nursing outline specific policies for one's chosen name and gender identity to support gender minority nursing students within the program (see New Brunswick University). Further, McGill University has a policy for "Reporting Mistreatment in a Clinical Setting" to help address instances of discrimination and support nursing students in their clinical environments. Importantly, both of these policies have been made readily available and accessible in their BSN program handbook. By making inclusive policies more accessible, schools can reduce unnecessary barriers so that 2SLGBTQ+ nursing students are able to utilize such policies (Canadian Centre for Gender and Sexual Diversity et al., 2019).

FOR DEVELOPING POLICIES & PATHWAYS...

- Ensure administrative support, including designating staff, committees, or working groups to oversee 2SLGBTQ+ inclusion efforts and handle discrimination reports
- Involve 2SLGBTQ+ students in developing and evaluating discrimination policies - through focus groups, advisory councils, etc.
- Rather than focus on one aspect of discrimination alone, attend to intersectionality and multiple dimensions of discrimination
- Make policies clear, visible, and accessible

AGENDA SETTING

PRIORITY #2: DISRUPTING HOMOPHOBIA AND TRANSPHOBIA ACROSS CONTEXTS

Disrupting homophobia and transphobia in nursing education requires a **comprehensive approach that addresses discriminatory attitudes and behaviours across classrooms, clinical settings, and administrative practices**. Providing ongoing training for faculty, staff, and students on 2SLGBTQ+ issues, inclusive language, and recognizing microaggressions is essential. Schools should ensure that all facilities have gender-neutral restrooms and adopt inclusive language policies that respect and affirm all gender identities.

Creating **a culture of accountability** is crucial for disrupting discriminatory behavior. Schools should establish clear consequences for homophobic and transphobic actions and recognize individuals who actively promote inclusion. Support systems, such as counseling services, peer support groups, and mentoring programs for 2SLGBTQ+ students, can offer safe spaces for sharing experiences and finding solidarity. Promoting existing 2SLGBTQ+ organizations and events encourages students to engage with the broader community and access additional support networks.

Inclusive representation in educational materials and institutional imagery is vital. Schools should review and update promotional materials, websites, and classroom resources to reflect the diversity of the nursing student body and feature 2SLGBTQ+ individuals. Hosting workshops, panel discussions, and guest lectures focusing on 2SLGBTQ+ experiences and needs in healthcare can foster open dialogues and build community among students, faculty, and staff. Encouraging conversations about these topics helps break down barriers and promotes a more inclusive environment.

AGENDA SETTING

PRIORITY #3: INCLUSION IN CURRICULUM, COURSE LEARNING OUTCOMES, COURSE MATERIALS, AND CLINICAL SETTINGS

Ensuring 2SLGBTQ+ inclusion in the nursing curriculum involves **integrating comprehensive coverage of 2SLGBTQ+ health issues and gender-affirming care throughout all courses**. Revising course learning outcomes to incorporate 2SLGBTQ+ health competencies ensures that students are equipped with the knowledge and skills to provide inclusive care. Collaborating with 2SLGBTQ+ healthcare professionals and scholars to develop and select course materials that accurately represent 2SLGBTQ+ experiences and needs is crucial for normalizing their presence in healthcare contexts.

Clinical education settings must be inclusive and supportive for 2SLGBTQ+ students. Training clinical instructors and preceptors on 2SLGBTQ+ issues and inclusive practices ensures they can support students in clinical placements. Schools should establish guidelines for inclusive clinical environments, such as using correct pronouns and addressing discriminatory behaviors by patients or staff. Involving 2SLGBTQ+ students in curriculum development through advisory committees or focus groups ensures that the curriculum remains relevant and responsive to their needs.

Incorporating intersectionality into the curriculum addresses the unique challenges faced by individuals with intersecting marginalized identities, such as those who are 2SLGBTQ+ and racialized, disabled, or economically disadvantaged. Developing case studies and learning outcomes that consider the impact of various forms of discrimination and oppression on health outcomes prepares students to provide holistic and inclusive care. Regular reviews of course content, feedback from students and faculty, and staying informed about emerging research and best practices ensure that nursing curricula remain inclusive and comprehensive.

"Having that support from someone in leadership really helps shift the lens through which we teach."

– Educator, BSN Program

CONCLUSION

In summary, integrating 2SLGBTQ+ inclusion in nursing education is essential for fostering a supportive, equitable learning environment. This report identifies three key priorities: establishing discrimination policies and reporting pathways, disrupting homophobia and transphobia across all contexts, and including 2SLGBTQ+ content in curricula, course materials, and clinical settings. Addressing these priorities is crucial for creating an inclusive environment that benefits both students and patient care.

Evidence indicates that 2SLGBTQ+ students often face discrimination and lack of support in nursing education, leading to feelings of isolation and stress. To combat this, robust discrimination policies and accessible reporting pathways must be established. Educational initiatives to train students, faculty, and staff on recognizing and preventing discrimination are vital, with 2SLGBTQ+ student involvement in policy development ensuring relevance and effectiveness.

Disrupting homophobia and transphobia requires comprehensive strategies, including ongoing training, inclusive facilities, and support systems such as counseling and peer groups. Promoting inclusive representation in educational materials and fostering open dialogues through workshops and panel discussions contribute to a culture of accountability and inclusivity. Providing social support and mentoring for diverse students significantly encourages success.

Crawford and colleagues (2023) conducted a scoping review of gender inclusive and affirming content in undergraduate nursing curriculum. They identified:

There was no evidence of policy development or changes related to gender affirming practices

No integration into exam questions or accreditation

Less than 2% of nursing faculty profiles list pronouns

Lack of meaningful integration of Two-Spirit people

All crucial next steps!

link to article

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