



# Writing LGBTQ+ Inclusive Case Studies

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Clinical


Academic

Personal





Before we  
start



Do you have a case study that  
you want to edit?

OR

Do you want to start from  
scratch?



## Step 1: What do you want your case study to achieve?

- Do you want to use it to teach about a specific health need some LGBTQ+ have?
- Do you want to include some more representation of LGBTQ+ people in your teaching?
- Do you want to teach about the influence of marginalisation on people?
- Do you want just a bit more variety in your case study library?

Pick 1-2 aims for your case study & share them in the chat





# Representation

## Passive representation

- Patient character has an identity characteristic unrelated to their care needs

Emma attends the GP Nurse's clinic for a blood test with her wife Sue

Alice/Allistair presents at A&E with signs of mania. They believe she should be there but has attended to appease husband Lewis.

Alice/Allistair's name and pronouns depend on the patient volunteer

## Active representation

- Patient character has an identity characteristic that influences their care needs

While in the blood test appointment, the Practice Nurse identifies that Emma missed her last cervical screening and invites her to arrange a new appointment. Emma says "I don't need a smear test because lesbians can't get HPV so there's no point checking for something I don't have"

## Step2: Build the case study from a clinical perspective

- What tasks do you want the students to complete?

For example: history taking, care planning, deliver an intervention from the care plan

- What is the primary diagnosis?
- Do they have any comorbidities?
- What level of acuity do they have?
- How well are they managing this with the current care plan?
- Are there any complexities to meeting their health needs?





## Step3: Review the specific health needs of our patient's population

- Which LGBTQ+ identity (or identities) does your character have?
- If, using multiple, are all identities clinically relevant?
- What are some key specific health needs of people with that identity?



### **Recommended Resources:**

Transgender Health: A practitioner's guide by Dr Ben Vincent

Winter et al. (2016) Transgender People: health at the margins of society. The Lancet 388, pp.390-400

Stonewall's LGBT In Britain - Health report

The RaRE Report on LGBT Mental Health

Riggs et al. (2020) Men, trans/masculine and non-binary people negotiating conception. International Journal of Transgender Health. 22(1-2) pp. 6-17



## Building our character from Steps 2&3

- **Goal:** teaching students about self-harm risks for trans people
- **Class topic/ clinical skill focus:**
- **Field of practice:** nursing (mental health focus)
- **Primary symptom(s):** restrictive eating, distress at body image
- **Acuity and duration:**
- **Current care plan success:**
- **Complexities for meeting health needs:**
- **Gender identity:** transgender man
- **Sexuality:**

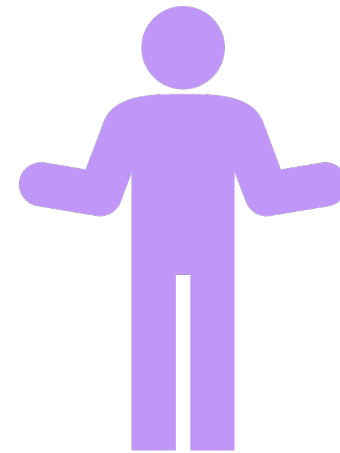






## Step4: Rounding out the character

- Name
- Age
- Ethnicity
- Education and health literacy
- Housing circumstances (stability, other occupants & condition)
- Key relationships (with who & quality)
- Other health needs
- Employment (stability, job role, finances)
- Religion and spirituality
- Physical activity
- Caring responsibilities
- Key stressors





## Step5: Consider a red herring (optional)

- Effective with experienced students
- While an LGBTQ+ identity may influence someone's health needs, it may also be irrelevant in the development of that need
- Depression as an example
- "Trans broken arm syndrome"



# Our case study



(Name) is a (age) year old (ethnicity) transgender man. He has been referred to the (service relating to need and acuity) due to concerns around restrictive eating and distress with his body image. This started around (duration) with him seeking to lose weight to reduce the appearance of his hips and breasts. However, this restrictive behaviour escalated around (duration) following (exacerbating factor/stressor). In the past (duration since escalation), (Name) reports losing (weight change appropriate to duration, size and acuity concern). He describes this as beneficial as it has reduced some dysphoria, though he shows some insight into the possible impact of the dramatic weight loss on his physical health. He does not want to restore his weight as he anticipates this will cause an increase in dysphoria which significantly affects his mood, self-esteem and ability to socialise confidently. As well as the presenting issue, (Name) also has a diagnosis of (co-morbidity) which is (well/poorly/adequately) managed.

(Name) works in (job role), and lives in (housing) with (other occupants). He has a very positive relationship with (key people) but struggles around (difficult relationships). He spends his time (social/ physical activity/ caring responsibilities/ education/ hobbies/ spirituality).



Final step: Make  
it happen!

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