

Gender and sexuality

(April 2019)

Rationale

Gender-and/or sexuality related issues may include sexual function, navigating sexual relationships, sexual orientation, gender identity, gender expression, access to care, and other issues. Physicians should be sensitive to gender and/or sexuality as part of any patient encounter, whether patients explicitly express concerns in this regard. Physicians should put patients at ease to facilitate discussion.

Various Populations

(List not exhaustive)

- Children and adolescents
- Adults
- Elderly patients
- Patients living with disabilities
- Heterosexual
- Lesbian, gay, bisexual, and/or queer
- Cisgender
- Transgender, two-spirit, and/or nonbinary

Key Objectives

Given a patient with gender- and/or sexuality related issues, the candidate will provide respectful care and offer appropriate support and management measures, regardless of patient sexual orientation and gender identity. Physicians should strive to approach discussions about gender and/or sexuality in an unbiased and nonjudgmental way, with respect for patients' wishes and values.

Enabling Objectives

Given a patient with gender- and/or sexuality related issues, the candidate will

- list and interpret critical clinical findings, including those derived from an appropriate history, including cultural factors, and a physical examination to
 - a. determine social and physical sexual development and behaviour, as well as sexual orientation and gender identity;
 - b. identify risk factors for related physical or mental health issues;
 - c. differentiate between diversity within sexual practices and expression and experiences of sexually-related illnesses or disorders;
 - d. detect individuals who have experienced sexual abuse or assault;
- construct an effective initial management plan, including
 - a. ensuring the management plan aligns with the patient's goals and desires;
 - b. recognition and reassurance that no intervention may be required;
 - c. pharmacotherapy where appropriate (e.g., oral contraceptives, hormonal therapy, immunization);
 - d. counselling and educating of patients;
 - e. determining whether the patient requires specialized care (e.g., psychologist, sexual therapist);
 - f. engaging community and family support, where appropriate.