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Understanding equitable and compassionate practices with lesbian, gay, bisexual, and queer + women in rural birthing care

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Statement of the Problem: Recent changes to cultural competency programs have assisted in educating nurses on the limitation of their knowledge and sense of privilege. Yet, challenges remain in understanding how to equitably and compassionately work across difference in rural birthing contexts with LGBQ+ women, where the standard(s) for treatment have been historically grounded in a socio-cultural privileging of heterosexuality. The purpose of the study was to understand the storied experiences of women who self-identified as lesbian, gay, bisexual, and/or queer during birth in the context of rural care.

Methodology & Theoretical Orientation: A phenomenological methodology guided the interviews with 14 LGBQ+ women; feminist and queer underpinnings were woven throughout the theoretical framework to better understand how and why LGBQ+ women continue to disrupt birthing spaces historically and institutionally grounded in heteronormativity. Findings indicate the majority of women experienced discriminatory practices independent of their partner upon entering the birthing space. Participants accompanied by cis-gender male partners were automatically assumed to be heterosexual and little space was made available outside the hetero-norm for an alternate trajectory. For those participants who were accompanied by female partners their narratives suggested the discriminatory power of language during birth.

Conclusion & Significance: Findings from the study may offer nurses new possibilities for re-evaluating health care spaces, where compassion is inherent in new models of care and strategies for perinatal provider practices and policies are not perpetuated in the institutional birthing assumption that often dictates a framework of one size fits all.

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