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3 What Are Your Pronouns? 4 Our Journey Toward Cultural Humility

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6

7 **Abstract:** Speech-language pathologists (SLPs) are likely to interact with members of the
8 LGBTQ+ community as clients, co-workers, and caregivers; however, SLPs may not be fully
9 prepared to work effectively with this diverse population due to lack of exposure within
10 professional preparation programs. This article will focus on the impact of faculty-student
11 collaboration to increase LGBTQ+ inclusivity in the classroom and curriculum. Reflections of
12 interactions between students and faculty in a professional preparation program in
13 speech-language pathology are used to highlight how the misuse of pronouns can create a sense
14 of invisibility and further marginalization for some individuals. The authors provide strategies to
15 increase LGBTQ+ inclusivity in the classroom and curriculum.

16

17 **Keywords:** cultural humility, professional preparation, speech-language pathology, LGBTQ+,
18 pronouns

19

20 Background

21

22 Millennials are more likely than previous generations to openly identify as lesbian, gay,
23 bisexual, transgender, queer, or questioning, plus all other identities that may not be represented
24 (LGBTQ+) (Mahendra, 2019). More visibility of LGBTQ+ students on college campuses has
25 created an opportunity and a need for increasing inclusivity, especially in professional
26 preparation programs that historically lack diversity. The Gay and Lesbian Alliance Against
27 Defamation (GLAAD, 2017) reported that 12% of millennials identify as gender nonconforming
28 or transgender (i.e., not identifying with their assigned sex at birth). Misgendering occurs when a
29 person is intentionally or unintentionally addressed using a word, most likely a pronoun, that
30 does not align with their gender (Misgender, 2019). Misgendering someone may seem
31 unimportant or harmless, but it can cause damage to a person over time.

32

33 The purpose of the article is to share the impact of faculty-student collaboration and offer
34 strategies to improve LGBTQ+ inclusivity in the college setting. Each author will introduce
35 themselves in their own words. We will provide examples of interactions between students and
36 faculty in a professional preparation program in speech-language pathology. These examples
37 highlight the benefits of collaboration to create change. Throughout the article, information
38 regarding the LGBTQ+ community, the speech-language pathologist's (SLP's) role in working
39 with members of the LGBTQ+ community, and professional preparation in speech-language
40 pathology is provided.

41

42 Sharing our stories and reflections provides an example of our journey, including the
43 vulnerability and positivity that can develop from faculty-student collaboration to engage in
44 cultural humility. Everyone's experience is unique to that individual, and our stories all come
45 with privilege as people who are White, people who are able-bodied, and who have had access to
46 higher education. Our hope is that by hearing our experiences, readers will find a commonality

1 in their personal journey toward cultural humility.

2

3 **Who Are Speech-Language Pathologists?**

4

5 Speech-language pathologists (SLPs) are communication specialists who provide a multitude of
6 services, including prevention, assessment, diagnosis, and treatment, to individuals across the
7 lifespan who have communication disorders, differences, or disabilities (American Speech-
8 Language and Hearing Association [ASHA], 2016b). SLPs often work as part of an
9 interprofessional team providing strategies for effective communication, developing intervention
10 plans, and working directly with clients. According to ASHA (2016b, p. 5), “As the population
11 of the United States continues to become increasingly diverse, SLPs are committed to the
12 provision of culturally and linguistically appropriate services and to the consideration of
13 diversity in scientific investigations of human communication and swallowing.”

14

15 One challenge, not unique to the field of speech-language pathology, is the lack of diversity
16 within the profession. Only 3.7% of SLPs self-identified as men (ASHA, 2018). Furthermore,
17 8.0% of SLPs self-identified as a racial minority group (27.6% of the U.S. population); 1.3%
18 self-identified as multiracial (2.9% of the U.S. population); and 5.2% self-identified their
19 ethnicity as Hispanic or Latino (16.3% of the U.S. population) (ASHA, 2018). According to a
20 Gallup poll, 4.5% of all adults (over 11 million Americans) self-identified as members of the
21 LGBTQ+ community (Newport, 2018). The percentage of SLPs who identify as LGBTQ+ is
22 unknown. The cultural mismatch between SLPs and the clients they serve can lead to clinical
23 challenges that are best addressed in professional preparation programs.

24

25

25 **Introductions**

26

27 The following section provides an overview of our institution and introduces the four authors.
28 Each author has described themselves in their own words as well as their perceived role within the
29 department of communication sciences and disorders (CSD).

30

31 **Our Institution**

32

33 Nazareth College is a coeducational and religiously independent institution located in upstate
34 New York with 2,300 undergraduate and 700 graduate students. Programs include education,
35 health and human services, business and leadership, and the liberal arts.

36

37 **Anna, student**

38

39 I am a junior in the CSD department and have been in this program since freshman year. My
40 pronouns are they, them, theirs. This college was my first and only choice and I am thankful to
41 be where I am today. For a few years now, I have been an active participant within different
42 groups, functions, and classes at Nazareth in which I am learning a lot about myself and the
43 world around me. Coming into the program I did not have the knowledge that I have today about
44 diversity and inclusion or even how important they are. I am a much different person today than
45 I was coming into the program, and the more I learn, the more I am able to see how diversity and

1 inclusion in the CSD department could improve.

2

3 I have not been harassed or discriminated against when I am at school, but that does not negate
4 the fact that I feel very uncomfortable when I am here. I feel a great sense of otherness that I felt
5 all throughout middle and high school, coming from a small rural area. Before college, I knew I
6 was different from my peers, but I did not have the knowledge or the language to figure out why.
7 Today I am able to point out specific actions, conscious or not, that foster an environment where
8 I feel different from most everyone around me because of my sexual orientation and gender
9 identity—things such as the lack of gender inclusive language, the lack of visible diversity (or
10 talked-about diversity), and the lack of knowledge within the department (educators and students
11 alike).

12

13 **Erin, student**

14

15 I am an undergraduate transfer student majoring in CSD at Nazareth College. I identify within
16 the LGBTQ+ community. I am a cisgender woman and my pronouns are she, her, hers. Let me
17 start off by saying that my experiences within the CSD department have generally been very
18 positive. As someone from the state of North Carolina, a state famously known for its
19 anti-LGBT law House Bill 2, and who has a background full of negative experiences due to my
20 identity, interacting within the CSD program at Nazareth College was a major step up. There
21 isn't any blatant discrimination around every corner, and I could speak confidently about my
22 partner of three years around my peers and professors without looks of discomfort or concern for
23 my soul in response. For me, this toleration for my identity was exhilarating but didn't last long
24 as I realized that, although I was accepted, I was alone. Almost everyone else in the room had
25 identified themselves, intentionally or not, as the same four things: White, straight, cisgender,
26 and born in New York. Of course, as I would soon learn, these traits were not unusual for this
27 private college's student population. Additionally, most came from a middle- to upper-class
28 socioeconomic status, again very different from me. As I continued my coursework within this
29 program, I found myself feeling that in order to be included in the conversation of my peers, I
30 had to conform to the social constructs and heteronormative atmosphere that was already
31 strongly established within this program. I saw a very friendly and supportive community within
32 this program and was very excited to see this engagement between professors and students but
33 had difficulty, as I still do, feeling like I belong.

34

35 **Susan, professor**

36

37 I have been teaching and practicing as a speech-language pathologist for over 30 years. My role
38 is a clinical associate professor in the department of CSD. I teach pre-clinical and clinical
39 courses and provide clinical education to students in a variety of community settings. My
40 pronouns are she, her, hers.

41

42 I think of my own road of cultural humility. I adopted ideas I adamantly called the truth, only to
43 find out that those ideas were simply my perception of truth at that time. Each one of these
44 lessons has opened my eyes to how many misidentified perceptions I own. My current strategy is
45 to step back, reflect, and sense that the moment at hand may be one of those times when my

1 beliefs are misconstrued. To accept there are different *rights* and there are no *wrongs*. To see that
2 something I have done for a long time may be ready for a change and to be open to listening,
3 truly listening to what is going on around me. If I hear my mind making a judgment or statement
4 that I say is *truth*, I choose to stop, step back, observe, and listen. I focus on this in myself, with
5 the hope that I will be a model for my students.

6
7 **Dawn, professor**

8
9 I am an associate professor in the CSD department at Nazareth College. I am the graduate
10 program director for the speech-language pathology master's program, and I have been a
11 practicing speech-language pathologist for 15 years. As a clinician and researcher, I specialize in
12 supporting individuals on the autism spectrum. My pronouns are she, her, and hers.

13
14 When working with students, my goal in the classroom is always to spark their curiosity and
15 encourage questioning of what they believe to be true. I frequently ask my students to recognize
16 and own their unique history and experiences that will travel with them into any clinical
17 encounter as a professional SLP. For example, how will their own experiences as a child inform
18 the choices they believe parents should make? How will the clinician react when they are
19 confronted with a parent or caregiver making a decision that is not consistent with their own
20 values and beliefs? To support the development of cultural humility, I expect my students to
21 reflect, discuss, and reflect some more. The number of reflections I have assigned, read, and
22 critiqued over the years is likely in the thousands. As an instructor, I challenge my students to
23 dig deeper, confront their own stereotypes, and reconsider perceptions of the world they believe
24 to be true. As I have taught my students about self-reflection, I myself have grown as a reflective
25 practitioner. Recently, I was again reminded by two students that our journey of learning is
26 never done; there is always growth to be had in the area of creating an inclusive environment.

27
28 **Stories from the Classroom**

29
30 The following section will provide an overview of pronoun usage, followed by an illustrative
31 example of a faculty-student interaction in a college classroom. The faculty-student interaction
32 highlights the benefits of vulnerability on behalf of the faculty member and student in creating
33 change toward inclusivity.

34
35 **Pronouns**

36
37 Gender inclusive pronouns are applicable to everybody. A pronoun by definition is “a word that
38 is used instead of a noun or noun phrase” (Pronoun, 2019). Quite often pronouns are used to
39 describe people. The binary pronouns are “she/her/hers” and “he/him/his.” However, there are
40 more pronouns used than the binary pronouns. Many folks also use “they/them/theirs” or
41 “ze/hir/hirs.” Some may choose to use no pronouns, but just be referred to by name, and others
42 may choose to use a combination of pronouns or all of them. There is no one set of pronouns that
43 fits all. Everyone's pronouns can vary, and it is impossible to discern what pronouns a person
44 uses without asking them. It is crucial to know why pronouns are important to an individual, as
45 well as how to correctly use them. Although using more than the binary pronouns or using new

1 pronouns for a person may seem daunting, it is a vital step to support and include members of
2 the LGBTQ+ community.

3

4 Traditional use of pronouns semantically makes this alternate use of pronouns more challenging
5 from a language perspective because “they” *most often* refers to a plural group and not only one
6 person. The new usage of “they” as a singular pronoun could seem grammatically incorrect to
7 some, although many people already use it in daily conversation when the gender is unknown
8 (e.g., “Someone left their coat in my office. I wonder if they will come back to get it?”).

9 Language is dynamic and the way we use pronouns is simply part of an ongoing evolution.

10 Professionals must learn to adapt to these changes for the well-being of clients and coworkers.

11

12

Faculty-Student Reflection

13

14 Susan, professor

15

16 As SLPs we assess children’s speech and language and teach them to make changes to
17 effectively communicate. Little ones with language delays often have trouble learning what
18 pronoun(s) to use in their conversation. In an introductory clinical methods class, our goal was to
19 develop activities to match client objectives. I was using the following example: *Client will*
20 *appropriately use the pronouns she/her*. As I said “appropriately use the pronouns” aloud, I
21 paused. On our campus, many students and faculty had begun introducing themselves with their
22 pronouns. Admittedly, I did not understand the differences, and as an SLP, the use of some
23 pronouns seemed grammatically incorrect to me. However, my lack of knowledge and
24 understanding did not change that it felt wrong teaching that *she is wearing her coat* refers to a
25 girl and *he is wearing his coat* refers to a boy. So I paused again and reflected out loud, “Wait, I
26 know there is a change going on in the use of pronouns, so perhaps teaching that ‘she’ refers to
27 girls and ‘he’ refers to boys isn’t right. Or is it? I don’t know that answer. I’m not sure what to
28 do?” As a professor, it can be daunting to admit that you don’t know, especially on the spot and
29 in front of the class. A student was kind enough to raise their hand and offer to explain what the
30 different pronouns meant, if I was interested in listening. I was definitely interested in listening!

31

32 I left class exhilarated that day. It is not often I show my vulnerability in front of the class and
33 the outcome felt successful for all. With so many thoughts spinning in my head, I absorbed very
34 little information on the use of gender inclusive pronouns. My biggest takeaway was that I took
35 a chance to be the learner in my classroom and it was a safe and positive experience. A new area
36 of learning had opened up.

37

38 Anna, student

39

40 As someone who does not use binary pronouns, I often get misgendered. I use they/them/theirs
41 pronouns but many people, even some who know my pronouns, still use binary pronouns when
42 talking to me and/or referring to me. Each time I am misgendered, I experience instant feelings
43 of hurt, invalidation, and disrespect. Being misgendered is almost always either an accident or an
44 unknown mistake, and I try not to take offense to it. For me, like many others, pronouns are
45 quite personal and are very much connected to my identity. I identify as non-binary because I do

1 not feel like a woman and I do not necessarily feel like a man either. My gender exists out of the
2 binary. I use they/them/theirs pronouns because those pronouns feel comfortable to me. I feel
3 like those words accurately describe who I am and when my pronouns are not used I feel like I
4 am not seen. I feel as if my identity is devalued. Being misgendered also causes me to feel
5 gender dysphoria and this is something I am learning to cope with. On the flip side, when my
6 pronouns are used correctly and without hesitation I feel validated, respected, accepted, and a
7 sense of gender euphoria. Being misgendered can feel the same as me telling the world “I am
8 non-binary,” and everyone who misgenders me responding with “No, you are a girl.” This is a
9 struggle that many gender expansive individuals experience. It takes immense bravery and
10 strength for one to live as their authentic self. To be open and honest with the world about one’s
11 identity just to be constantly reminded that you are viewed as someone you are not is harmful.
12 Using a person’s pronouns as they wish is crucial to respecting them and their identity.
13

14 When I read the prompt on the worksheet—*client will appropriately use pronouns she/her*—I
15 wondered how it would be taught and how it would look in therapy. When discussing what these
16 activities might look like, I heard my professor inquire about how to use pronouns without
17 stereotyping genders. When this question arose, I was ready to contribute, since this was a topic
18 I felt knowledgeable about. I raised my hand and explained how there is no way to tell what
19 anyone’s gender is based on their appearance, which turned into a discussion on gender inclusive
20 pronouns: they, them, theirs. My professor was wondering how these pronouns would work,
21 because they are used in our language to represent more than one person, and how to navigate
22 that grammatical conflict. The class was then able to have a discussion about gender inclusive
23 pronouns in the context of a therapy setting. Having the openness to have this discussion was
24 really empowering, and I’m thankful that my professor and peers were receptive to the idea and
25 approached the situation with true curiosity. I am excited to continue having these discussions
26 within my time here and throughout my career.
27

28 **Program Level LGBTQ+ Inclusion**

29

30 This section begins with a description of the role of SLPs in working with individuals from the
31 LGBTQ+ community as well as an overview of professional preparation in speech-language
32 pathology. Then, we share an example of how program level changes can occur through
33 faculty-student collaboration. Finally, we provide a description of an in-service Anna and Erin
34 presented for CSD faculty on strategies to promote inclusivity of the LGBTQ+ community in the
35 classroom.
36

37 **Speech-Language Pathologists and the LGBTQ+ Community**

38

39 It is highly probable that SLPs will encounter LGBTQ+ individuals, either as colleagues, clients,
40 or caregivers of their clients (Taylor et al., 2018). In particular, SLPs often play an important
41 role in supporting transgender clients with voice and communication therapy so that the way
42 they speak and communicate more closely aligns with their gender expression. Therapy goals for
43 this population may include pitch, resonance, intonation, rate of speech, volume, and nonverbal
44 aspects (ASHA, 2019b). In the context of a therapeutic relationship, SLPs have the unique
45 opportunity to support the development of an individual’s authentic voice. ASHA does not have

1 any specific position papers or clinical guidelines related to transgender voice and
2 communication (Pickering, 2015); therefore, professional preparation programs are charged with
3 developing curriculum material in this area.

4

5 **Professional Preparation in Speech-Language Pathology**

6

7 Professional preparation programs for SLPs must ensure that students have preparation in both
8 depth and breadth across several knowledge and skill outcomes, including the ability to
9 “communicate effectively, recognizing the needs, values, preferred mode of communication, and
10 cultural/linguistic background of the individual(s) receiving services, family, caregivers, and
11 relevant others” (ASHA, 2019a). Programs must ensure that supervised clinical experiences
12 represent clients across the lifespan and from culturally/linguistically diverse backgrounds, as
13 well as with individuals with various types and severities of communication and/or related
14 disorders, differences, and disabilities. Furthermore, the profession’s Code of Ethics (ASHA,
15 2016a) directly addresses the need to provide culturally and linguistically competent services
16 and research. In adhering to the rules outlined in the Code of Ethics, SLPs must remain aware of
17 the impact of culture during interactions with clients, colleagues, families, and students. Due to
18 the nature of the profession, gaining cultural understanding of individuals with communication
19 disabilities is inherently addressed in curriculum and frequently encountered in clinical
20 experiences. In contrast, cultural understanding regarding race, ethnicity, gender, and sexual
21 orientation must be more intentionally taught (Hancock & Haskin, 2015).

22

23 Although SLPs will undoubtedly work with members of the LGBTQ+ community as
24 professionals, students majoring in helping professions have been found to have high levels of
25 transphobia and also reported a lack of exposure to transgender content within their programs
26 (Acker, 2017). In addition, biases in members of the speech-language pathology community
27 towards members of the LGBTQ+ community have been documented (Kelly & Robinson,
28 2011). ASHA has emphasized primarily racial and ethnic minority topics such as dialectical
29 diversity, bilingualism, and multilingualism. In recent years, an increased emphasis on other
30 dimensions of diversity such as deaf culture, socioeconomic diversity, cultural literacy, health
31 disparities, and social justice have gained more attention (Mahendra, 2019). Information about
32 the LGBTQ+ community continues to be less readily available.

33

34 Stockman (2008) found that most professional preparation programs have infused
35 multicultural/multilingual instruction within existing courses with little to no emphasis on
36 LGBTQ+ topics. This is also the case in our program. Potential reasons for the limited coverage
37 of LGBTQ+ topics within the curricula include the challenge of including multiple topics in a
38 limited timeframe, lack of agreement among faculty on what is important to include, or simply
39 lack of knowledge regarding this population on the part of instructors (Mahendra, 2019).
40 Explicit instruction in issues relating to LGBTQ+ individuals and exposure to individuals from
41 the LGBTQ+ community has been found to increase awareness and positivity (Hancock &
42 Haskin, 2015; Mahendra, 2019).

43

44 Within our own professional preparation program, consistent with trends in the SLP profession,
45 3% of our undergraduate students identify as men and 11% identify as part of a racial or ethnic

1 minority group. Over the past two years, our department has engaged in creating a new strategic
2 plan. Within this plan, we embrace a framework of cultural humility through intentional and
3 embedded opportunities for critical self-reflection, self-critique, lifelong learning, and a
4 commitment to advocacy and institutional change (Hook et al., 2013). By working actively with
5 our college's Vice President for Diversity and Inclusion, we are developing strategies and
6 supports for faculty to embed evidence of diversity within the curriculum.

7
8 Our graduate program offers specializations in autism spectrum disorder, deafness, and
9 bilingualism. Additionally, we have clinical outreach programs working with individuals
10 impacted by homelessness and economic disparities, and those who have arrived in the United
11 States as refugees. Faculty include readings that examine cultural variables connected to course
12 topics. In addition, when selecting textbooks and other sources, diversity is considered in the
13 selection process (e.g., representation of authors, scholars, and perspectives of individuals from
14 diverse backgrounds). Although our curriculum has several strengths in the inclusion of cultural
15 and linguistic diversity, our recent work has highlighted significant gaps related to LGBTQ+
16 inclusivity or working with the LGBTQ+ population as practitioners.

Faculty-Student Reflection

Erin and Anna, students

21
22 We first approached a professor that we both trusted, knew well, and felt validated by because
23 topics related to the LGBTQ+ population and community were arising in our classes. Professors
24 had questions about pronoun usage, singular *they*, and gendered language. Although we were
25 happy to answer questions and have these discussions in class, there may not always be a
26 knowledgeable individual who is willing to speak up. We also saw a lack of LGBTQ+ education
27 among our peers (e.g. not knowing the difference between sex and gender). We discussed
28 wanting to start the conversation of inclusion within our department. With her support, we then
29 contacted and met with department administrators to see how receptive they were to the idea,
30 and how they wanted to move forward. Our hope with approaching the heads of the department
31 was to bring to their attention that there was a problem and that we could help them solve it. We
32 wanted to educate our professors on this topic so they would be knowledgeable should the topic
33 arise again in their classes. We also wanted to begin a culture change within the department.

34
35 When we approached our department administrators about this topic, one of the first questions
36 we were asked was if something bad had happened to us; if there was a specific situation or
37 experience we had that was overtly negative. Being met with this level of concern and support
38 was incredibly comforting. With each encounter, we were met with genuine concern and copious
39 amounts of support.

40
41 We want to help create a culture that is more inclusive and welcoming of those who may be
42 different by educating the professors and having that knowledge trickle down to the students.
43 Although this is extra work and we are not getting paid for the work we are doing, we are
44 thankful for this opportunity for our voices to be heard and hope that we can help make a
45 difference for queer students who come after us. We would not label this work as a burden

1 because that feels harsh. We will say, though, constantly educating and defending our identities
2 and community can be exhausting. Nonetheless, we look forward to continuing this education
3 and advocacy work as it is something that is never done.

4

5 **Dawn, professor**

6

7 When two students approached the faculty asking if they could teach us how to be better at our
8 inclusion of students from the LGBTQ+ community, my first reaction was one of concern. Many
9 questions popped into my head between when they asked and when we met, including these: Did
10 something happen? Was there an incident? Was there discrimination? Do they feel unsafe? In all
11 honesty, my heart raced thinking about what may have happened to students within our
12 community. After meeting with the students, they assured us that there was not a single incident
13 that prompted them reaching out. They felt safe and supported by our faculty and believed we
14 were trying our best. This was the good news. Although the students felt safe and supported in
15 the general sense, they pointed out that we still had some growing to do in order to promote full
16 inclusion and acceptance for members of the LGBTQ+ community. The best news was that our
17 students were open, willing, and excited to be part of making the change happen.

18

19 After the initial conversation with our students, I was inspired to engage in critical
20 self-reflection. I realized that we have only just begun our journey toward a more inclusive
21 department. I have since thought about all the courses within our department and wondered what
22 we are doing as a faculty to include and show acceptance, specifically for students who identify
23 with the LGBTQ+ community. Personally, before this encounter, I believed wholeheartedly that
24 our department was safe and welcoming, yet I realize there is still much room for growth. My
25 hope for our program is that the faculty can approach this learning from the place of humility
26 and openness that we expect of our students. Modeling humility for our students is one of the
27 most influential things we can do.

28

29 **In-Service on LGBTQ+ Inclusivity**

30

31 As a result of student advocacy and open dialogue between faculty and students within the
32 department, Anna and Erin presented an in-service to the CSD department faculty about
33 LGBTQ+ inclusivity during one of our bi-weekly faculty meetings. Before the presentation, a
34 survey was sent to assess faculty knowledge and perception of the LGBTQ+ community. The
35 student presenters defined terms, gave examples of gender inclusive language to use in the
36 classroom, facilitated discussions, and provided handouts for future reference. As a result of the
37 in-service, faculty indicated they were appreciative of the openness and confidence of the
38 presenters. Faculty gained strategies to support LGBTQ+ students in their classroom and were
39 made aware of practices being used that were unintentionally harmful. They were excited to
40 institute these changes in the classroom and create a more open environment for members of the
41 LGBTQ+ community. A follow up in-service was requested to dive deeper into topics of
42 LGBTQ+ inclusivity and continue our work within the CSD department.

43

44

45

Conclusion and Strategies to Increase LGBTQ+ Inclusivity

We have realized the impact that gaps in professional preparation in the area of LGBTQ+ inclusivity can have on future SLPs. SLPs will likely interact with members of the LGBTQ+ community, and it is imperative that they are adequately prepared regarding issues that may surround this diverse group, most specifically those who are transgender. Increasing inclusivity within professional preparation programs is critical as learners are at the beginning of their professional career and developing self-identity (Renn, 2017). Collaborating with members of the LGBTQ+ community, including students, will be most effective. It is through this interaction and collaboration that barriers will be broken, leading toward increased positivity and comfort for all.

The following are strategies our faculty and students have found effective to increase LGBTQ+ inclusivity:

1. *Introduce yourself with pronouns.* Faculty can introduce themselves with their pronouns, which will provide the opportunity for others to do the same (Kelly & Robinson, 2011). Department faculty can also include their pronouns in email signatures.
2. *Ask “What are your pronouns?”* If you do not know what pronoun a person uses, it is not rude or intrusive to simply ask the person, “What are your pronouns?” If you do not have confirmation that a person uses certain pronouns and you don’t feel comfortable asking, it is best to use they/them/theirs pronouns when referring to them.
3. *Avoid misgendering.* Taylor et al. (2018) urged that SLPs should avoid assigning pronouns based on physical appearance. For transgender and gender-nonconforming individuals, misgendering is experienced when the wrong pronoun is used, and this can be viewed as a microaggression. If you are struggling to properly use someone’s pronouns, try talking slower, allowing more time for processing. When meeting someone new, try to remember people’s pronouns along with their name. Another trick to remembering someone’s pronouns is when you write down their contact information, include their pronouns next to their name. If you do misgender someone, the correct response is to simply and quickly apologize, use the correct pronoun, then continue on with the conversation.
4. *Greet groups using gender inclusive language.* Avoid addressing groups with terms such as “you guys” or “ladies and gentlemen.” Instead, try “everyone,” “y’all,” “colleagues,” or “friends.” This takes practice, so be open when you make a mistake and use a gendered term. Consider letting the audience know that the use of gender inclusive language is something you are working on and asking for their help in reminding you if you use a gendered term.
5. *Identify gender inclusive restrooms.* When meeting as a class for the first time or greeting people within your building, share where gender inclusive and accessible restrooms are located.
6. *Review forms, documents, and policies for gender inclusive language* (Kelly & Robinson, 2011). Items to review may include clinical intake, case history, course

1 syllabi, or any other documents that may unintentionally include gender biased
2 language. Within documents such as clinical intake there should be separate
3 questions for “sex assigned at birth” and “gender” since they are different. As
4 professionals, it is important to know both of these things. There should also be a
5 place for the client (including children) to write in their pronouns.

- 6 7. *Update dress code.* Critically review policies and practices surrounding
7 expectations of professional dress in clinical settings. Images, examples, and the
8 models provided for professional dress may unintentionally exclude and confuse
9 students regarding the expectations for professional dress. Provide the opportunity
10 for students to have an open dialogue and question dress norms.
- 11 8. *Embed experiential opportunities regarding LGBTQ+ content in course*
12 *curriculum.* This may include class lectures with introductory/informational
13 material, guest speakers who identify with the LGBTQ+ community, experiential
14 learning activities, reflection, and open/safe discussions surrounding any
15 discomfort with the topic and sense of conflict with religious beliefs (Acker, 2017;
16 Mahendra, 2019).
- 17 9. *Encourage interprofessional initiatives.* Continued development of
18 interprofessional education related to this topic is needed (Mahendra, 2019).
19 Health related disciplines such as social work, speech-language pathology, and
20 audiology must advance in preparing students to work with the LGBTQ+
21 community through additional investigations and initiatives (Acker, 2017;
22 Mahendra, 2019).
- 23 10. *Champion for more research.* Research should focus on overcoming obstacles and
24 developing strategies for inclusion of LGBTQ+ students in professional
25 preparation programs. Although there is research on the preparation of SLPs to
26 work with the LGBTQ+ community, there is very little in the area of supporting
27 SLP students who may be members of the LGBTQ+ community. More work in
28 this important area needs to be done.

29 30 **Closing Reflections**

31 32 **Dawn and Susan, professors**

33
34 In closing, we realize we are novices on this topic. The process of working on this article has
35 truly opened our eyes to how much more we have to learn. Perhaps we have unknowingly made
36 missteps in the way we have used and defined terms. We continue to practice vulnerability
37 which temporarily places us in a space that feels unsafe, yet it can actually be a space of strength
38 and learning. We encourage our colleagues in academia to be vulnerable, model cultural
39 humility, and seek opportunities to learn from their students.

40 41 **Anna and Erin, students**

42
43 Being invited to contribute to this article was an amazing opportunity for our voices to be heard
44 and to continue the conversation among fellow speech language pathologists. There is little to no
45 research on LGBTQ+ individuals especially with a speech therapy focus. We are hopeful that

1 this article and continuing to talk about the importance of LGBTQ+ education and advocacy in
2 healthcare and speech-language pathology will improve as we move forward.

References

- 3
4
5
6 Acker, G. M. (2017). Transphobia among students majoring in the helping professions. *Journal*
7 *of Homosexuality*, 64(14), 2011–2029. <https://doi.org/10.1080/00918369.2017.1293404>
8
9 American Speech-Language-Hearing Association. (2016a). *Code of ethics*.
10 <https://www.asha.org/policy/>
11
12 American Speech-Language-Hearing Association. (2016b). *Scope of practice in*
13 *speech-language pathology*. <https://www.asha.org/policy/>
14
15 American Speech-Language-Hearing Association. (2018). *ASHA summary membership and*
16 *affiliation counts, year-end 2017*. <https://www.asha.org/uploadedFiles/2017-Member-Counts.pdf>
17
18 American Speech-Language-Hearing Association. (2019a). *2020 Standards and implementation*
19 *procedures for the certificate of clinical competence in speech-language pathology*.
20 <https://www.asha.org/Certification/2020-SLP-Certification-Standards/>
21
22 American Speech-Language-Hearing Association. (2019b). *Voice and communication change*
23 *for transgender people*.
24 [https://www.asha.org/public/speech/disorders/Voice-and-Communication-Change-for-Transgen](https://www.asha.org/public/speech/disorders/Voice-and-Communication-Change-for-Transgender-People/)
25 [der-People/](https://www.asha.org/public/speech/disorders/Voice-and-Communication-Change-for-Transgender-People/)
26
27 Gay and Lesbian Alliance Against Defamation. (2017). *Accelerating acceptance: A Harris poll*
28 *survey of Americans' acceptance of LGBTQ people*.
29 https://www.glaad.org/files/aa/2017_GLAAD_Accelerating_Acceptance.pdf
30
31 Hancock, A., & Haskin, G. (2015). Speech-language pathologists' knowledge and attitudes
32 regarding lesbian, gay, bisexual, transgender, and queer (LGBTQ) populations. *American*
33 *Journal of Speech-Language Pathology*, 24(2), 206–221.
34 https://doi.org/10.1044/2015_AJSLP-14-0095
35
36 Hook, J. N., Davis, D. E., Owen, J., Worthington, E. L., & Utsey, S. O. (2013). Cultural
37 humility: Measuring openness to culturally diverse clients. *Journal of Counseling Psychology*,
38 60(3), 355–366. <https://doi.org/10.1037/a0032595>
39
40 Kelly, R., & Robinson, G. (2011). Disclosure of membership in the lesbian, gay, bisexual, and
41 transgender community by individuals with communication impairments: A preliminary
42 web-based survey. *American Journal of Speech-Language Pathology*, 20(2), 86–94.
43 [https://doi.org/10.1044/1058-0360\(2011/10-0060\)](https://doi.org/10.1044/1058-0360(2011/10-0060))
44
45 Mahendra, N. (2019). Integrating lesbian, gay, bisexual, transgender, and queer issues into the

- 1 multicultural curriculum in speech-language pathology: Instructional strategies and learner
2 perceptions. *Perspectives of the ASHA Special Interest groups*, 4(2), 384–395.
3 https://doi.org/10.1044/2019_PERS-SIG14-2018-0007
4
- 5 Misgender. (n.d.). In *Merriam-Webster.com*.
6 <https://www.merriam-webster.com/dictionary/misgendering>
7
- 8 Newport, F. (2018). *In U.S., estimate of LGBT population rises to 4.5%*. Gallup.
9 <https://news.gallup.com/poll/234863/estimate-lgbt-population-rises.aspx>
10
- 11 Pickering, J. (2015). Transgender voice and communication: Introduction and international
12 context. *Perspectives on Voice and Voice Disorders*, 25(1), 25–31.
13 <https://doi.org/10.1044/vvd25.1.25>
14
- 15 Pronoun. (n.d.). In *Merriam-Webster.com*.
16 <https://www.merriam-webster.com/dictionary/pronoun>
17
- 18 Renn, K. (2017, April 10). *LGBTQ students on campus: Issues and opportunities for higher*
19 *education leaders*. Higher Education Today. <http://www.higheredtoday.org>
20
- 21 Stockman, I., Boulton, J., & Robinson, G. (2008). Multicultural/multilingual instruction in
22 education programs: A survey of perceived faculty practices and outcomes. *American Journal of*
23 *Speech Language Pathology*, 17(3), 241–264. [https://doi.org/10.1044/1058-0360\(2008/023\)](https://doi.org/10.1044/1058-0360(2008/023))
24
- 25 Taylor, S., Barr, B. D., O’Neal-Khaw, J., Schlichtig, B., & Hawley, J. (2018). Refining your
26 queer ear: Empowering LGBTQ+ clients in speech-language pathology practice. *Perspectives of*
27 *the ASHA Special Interest Groups*, 3, 72-86. <https://doi.org/10.1044/persp3.SIG14.72>
28
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