

Straight Talk About Gays in the Workplace—Creating an Inclusive Productive Environment for Everyone in Your Organisation, Third Edition

Liz Winfield

Haworth Press (2005)

ISBN 1 56023 547 0

As the Australian community debates the merits or otherwise of gay marriage, many gay and lesbian people still face, at best, unpleasant workplaces and, at worst, dangerous workplaces with subsequent deleterious impacts on people's health, well being and social functioning. This is despite specific anti-discrimination and equal opportunity laws being enacted throughout Australia that technically afford people protection against unlawful workplace practices.

So is it because individuals and organisations are malevolent or is it because employers believe they are out of their depth and require guidance in shaping more inclusive workplaces? Is a person's sexual or gender orientation even relevant in the workplace? Should gay, lesbian, bisexual, transgender, queer and intersex (GLBTQI) have special rights and protections anyway?

Liz Winfield's book 'Straight Talk About Gays in the Workplace' is a very welcome addition to the burgeoning literature and research on the subject of working and creating diverse workplaces. Written in a reader-friendly, narrative style with flashes of humour, this text is very relevant to employers in Australia and New Zealand. The only frustrating element of the text is that statutes and national policies mentioned are North American and therefore unfamiliar to most people. However, the message is clear and valuable for Australian audiences. These issues were identified by Julia Irwan in her excellent study in 1999 entitled 'The Pink Ceiling is Too Low—Workplace Experiences of Lesbians, Gay Men and Transgender People' (University of Sydney).

Irwan's research explored the workplace experiences of 900 gay men, lesbians and transgender people in NSW and Victoria. Nearly 60% had experienced harassment or prejudicial treatment on the basis of their homosexuality or gender identity. The behaviour reported by participants included sexual and physical assault, verbal harassment and abuse, destruction of property, ridicule, belittling and homophobic jokes. It spanned all occupations, industries and types and sizes of the employing organisation but was more likely to occur in male-dominated occupations and industries.

The study showed that GLBTQI individuals experienced increased stress, depression, illness, loss of confidence, increased substance use and attempted suicide. Workplace performance suffered because of increased leave due to stress related illness, people not wanting to be at work and being constantly on guard. The impact on the workplace was that it created a culture of hostility and being unsafe.

As well as providing elegant explanations as to why GLBTQI people must be able to celebrate their sexual or gender orientation in the workplace, Liz Winfield also provides a historical perspective, practical advice on the sensitive use of language and frameworks for policy development and training programs for workplaces. She also provides tips on how the physical environment can be enhanced and how the informal culture of organisations can be changed including reacting to anti-gay humour or people engaged in verbal discrimination. In addition to the specific sexual orientation issues covered, there is a comprehensive guide to gender issues and detailed information for workplaces where an individual may be transitioning between gender identities.

Research has shown that specific formal policies on sexuality rather than general policies and specific training regarding sexuality rather than general diversity training are more effective. Although policies and training are important, of interest is that the best indicator of an inclusive workforce is whether same-sex-attracted partners are welcomed at work parties. There is also evidence that Directors, Executives and Managers must set the tone in creating an accepting and inclusive organisation.

Liz Winfield emphasises these findings but adds that many organisations are fearful of being seen to be too inclusive of GLBTQI people in their workforce, erroneously believing that customers and colleagues will be 'put-off'. In actual fact, the reverse is true and companies that embrace, encourage and respect diversity among their staff are held in higher esteem by customers and other stakeholders.

Furthermore, Richard Florida, an urban studies theorist, has written a number of books including the 'Rise of the Creative Class in 2002', which charted the democratic shifts in flourishing US cities compared to poverty stricken cities. Florida contends that prosperous development is contingent upon the 3 'Ts'—Technology, Talent and Tolerance. Cities that score highly on basic indicators of diversity including sexual diversity are socially, economically and technologically better off than cities that do not embrace diversity. Massachusetts, the first state to legalise gay marriage, ranks first on both the creativity and high tech index. San Francisco and Seattle are also up there. States that have already or are trying to restrict gay rights tend to rank at the bottom of these indexes as well as economic indexes.

So how does it work? A community that welcomes gay people also welcomes other kinds of people, including

entrepreneurs and technologically savvy whiz kids, attracted to high tech industries where there are high levels of venture capital and investment. Artists and musicians also shift to these cities, attracted by vibrant community lifestyles, acceptance of people who exhibit creativity and thinking ‘outside the box’ and financial support for the arts.

In other words, not only do organisations and workplaces risk legal sanctions if they discriminate on the basis of people’s sexuality or gender identity, they also face being

unprofitable! Liz Winfield shows that workplaces have to be more than just tolerant. They need to be truly accepting of the GLBTQI people where diversity is non-negotiable, embedded in the structure of the organisation and applying to staff and their partners alike.

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The Vulva and Vagina Manual

Graeme Dennerstein, James Scurry, John Brenan, David Allen and Maria-Grazia Marin
Gynederm Publishing Pty Ltd (2005)
299 pp, including index
ISBN 0 646 44531 6

This manual is a comprehensive and user-friendly text written for the clinician interested in the diagnosis and clinical management of disorders of the female lower genital tract. It covers nearly 300 disorders of both the vulva and vagina, including benign and malignant conditions. Included are 301 photographs equally divided between clinical and histopathological images to facilitate interpretation of clinical findings and pathology results.

The text combines the expertise of five co-authors specialising in the management of vulvo-vaginal disorders—a Gynaecologist, a Pathologist, a Dermatologist, a Gynaecological Oncologist and a Psychologist. This combination of disciplines brings a better and more comprehensive understanding of diagnosis and management of both common and rare conditions.

The manual can be divided into two parts—the first six chapters provide scientific and clinical background information written from the perspective of each of the five different authors plus a chapter on basic anatomy, histology and microbiology. The second section, chapters 7–15, lists the disorders according to their classification, e.g. normal variations, developmental abnormalities, infections and so on. This section lends itself to be used as an easy reference for diagnosis and clinical management.

The authors describe the classification of disorders as the ‘backbone’ of the book. There are 275 disorders listed in the text, from labial adhesions in infancy to chlamydial oculogenital infection and genital melanocytic macule. The list is printed in the back cover, with colour coding of sections to match chapters. There is also a list of disorders according to modes of presentation. These two lists are extensively cross-referenced, making this a good text for the clinical setting.

The first five chapters written by each author from their own perspective makes interesting reading, including tips on punch biopsy and a discussion on the association of behaviour and chronic vulvar diseases. Chapter 6 provides a quick lesson on embryology, anatomy, histology and microbiology. The second section is particularly useful in the clinical setting, using symptoms or pathology results to refer to diagnosis and management. The excellent photographs compliment the text and facilitate diagnosis. I would recommend this user-friendly text to any clinician wanting to learn more about disorders of the vulva.

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