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## HEALING ARTS

### *Materia Medica*

# A Gay Couple Meets Their Mormon Doctor

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"I'm originally from Utah," my new patient Sam says. He is seated in the exam room next to his husband, Tom.

Sam and Tom recently moved to my state, and for the first time both members of a same-sex couple are seeing me as their physician. I pause. Though we aren't in Utah, I am a practicing member of Utah's majority religious group, the Church of Jesus Christ of Latter-day Saints, frequently referred to as Mormons.

Aware that my church's positions against same-sex marriage are likely known to Sam and Tom, I say, "I went to college in Utah, at Brigham Young University."

Sam's eyes light up with curiosity. "Ah," he laughs. "I think my parents wanted all of us to go to BYU, but none of us did."

Tom puts a hand on Sam's shoulder and smiles.

"Boy, people are sure nice to us when we visit Sam's family in Utah," Tom says.

Sam wryly says, "Nice, yes, and so terribly unkind."

I scramble to compress years of personal struggle, confusion, and frustration into a response. How do I handle this potential landmine in our first visit? The conflict within my faith community over homosexuality is complex. A series of responses come to my mind.

I contemplate a defensive reaction. *Are you saying you think Mormons are unkind?* After all, he's talking obliquely about my people. Most of the people I know at church are kind. Still, it's difficult to deny that a gay man's experience growing up with Mormons would likely be quite different from mine. The church's public opposition to recognition for gay couples such as Sam and Tom is a prominent part of its public image. After the Supreme Court decision in 2015 legalizing same-sex marriage, church leadership updated church policies to exclude same-sex couples and their children from membership. Sam may be like other gay and lesbian Mormons I know who became disaffected because they feel unwanted or uncomfortable in the church. I don't want Sam to have to defend his position to me.

I might take a different approach: *Sam, I just want you to know that I consider myself an ally of the LGBTQ (lesbian, gay, bisexual, transgender, and queer [and/or questioning]) community.* I try to regularly

express love and affirmation to LGBTQ friends, family members, and co-workers. As a citizen, I support LGBTQ rights. When my church added its exclusion policy against same-sex couples, I spoke out to my church leaders about how unfair the policy is to gay and lesbian members. *Sam, I might say, I realize that this is an exciting and challenging time for LGBTQ people.* But something about this sounds insincere and patronizing.

*Sam, in full disclosure, I should just make you aware that I am a practicing Mormon.* He has almost certainly already deduced that I am Mormon. It wouldn't be nice to mislead him about my status with the church. I, like everyone, am a product of my culture and its biases. I would never consciously provide inferior care to Sam and Tom, but it's possible that my biases would lead me to make different decisions with them.

Maybe I could emphasize a different aspect of our shared humanity. *Sam, I've also had people be unkind to me.* Ironically, my most prominent experience came from my experience as a 19-year-old missionary for my church. In my life prior to this and since, I have had little personal experience with facing other's prejudices and scorn. While dressed in my missionary suit and name tag, I was regularly the object of suspicion and sometimes hostility of complete strangers. On one occasion a woman spat in my face. On balance, I think that these difficult missionary experiences have motivated me to be kinder to people who are different from me. It occurs to me, though, that it would be wrong to compare my situation to Sam's.

*Sam, I just want you to know that I have made an effort over the years to provide compassionate, culturally sensitive care for LGBTQ patients,* I might say. I have sought to learn about LGBTQ health and consciously counter whatever unconscious biases I have toward the LGBTQ community. I have strived to demonstrate sensitivity and respect when I counsel my LGBTQ patients on topics relating to sexuality: such as safe sex practices, relationship difficulties, and concerns about erectile function. In doing so, I hope I have honored these individuals' confidence in me as a physician.

None of these responses are right for the circumstance. I remind myself that this conversation is not about me. Sam and Tom are here

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to establish care and have their own concerns for me, their doctor. My job is to show attentiveness and respect. How do I acknowledge the complexity of Sam's comment and let the visit be about their health?

I take a breath and look at Sam, nodding. "I think I know what you mean." I meet Sam's eyes and hold his gaze for a moment to emphasize the importance of what he said. His expression relaxes into a natural smile. I look at Tom, then back to Sam. "I'm really glad you're both here today."

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