

A large, stylized rainbow graphic composed of multiple concentric, slightly wavy bands of color. The colors transition from red at the top left, through orange, yellow, green, and blue, to purple at the bottom right. The graphic is positioned in the upper right quadrant of the cover.

LGBT Tool Kit

*Creating Lesbian, Gay, Bisexual and Trans Inclusive and
Affirming Care and Services*

Long-Term Care Homes & Services
2017

Acknowledgements

LGBT Tool Kit (2017):

Long-Term Care Homes & Services (LTCHS) thanks and extends our sincere appreciation to the residents, friends, family members and volunteers who spoke to us about their life experiences and the experiences of their loved ones.

LTCHS also thanks the home and community program management teams and staff for their genuine and candid participation in the "How to be An LGBTQ2S Ally" workshops and the many consultations held while creating this version of the Tool Kit.

LTCHS further thanks and recognizes the efforts and guidance of the LGBT Tool Kit Refresh Project Steering Committee:

- Vija Mallia – Director, Long-Term Care Homes
- Carlos Herrera – Administrator, True Davidson Acres
- Lorraine Siu – Administrator, Fudger House (Retired)
- Gina Filice – Assistant Administrator, Kipling Acres
- Andrea Okazaki – Manager, Community Programs
- Jane Simms – Manager, Program & Strategic Support
- April McClellan – LGBT Tool Kit Project Lead

In addition, LTCHS recognizes the invaluable feedback given by the following individuals who reviewed the content and format for the new Tool Kit:

- Philip Allard – Counsellor, True Davidson Acres
- Greg O’Grady – Manager, Resident Services, True Davidson Acres (Retired)
- Erin Mulcahey Abbott – Policy Planning & Project Consultant
- Jennifer Wing & Jane Arbour – Senior Communications Coordinators
- Lianne Neumann - Manager, Resident Care & Services & Volunteers

And finally, LTCHS thanks and recognizes organizations that participated as part of the community consultation, providing invaluable feedback, lived experiences and advice:

- AIDS Committee of Toronto
- Alzheimer Society of Toronto
- Canadian Association of Retired Professionals (CARP)
- Canadian Working Group on HIV and Rehabilitation
- Elder Abuse Ontario
- Family Service Toronto, David Kelley Services
- Metropolitan United Church
- Rainbow Health Ontario
- Senior Pride Network
- The 519
- York University

Table of Contents

LGBT Tool Kit	1
Acknowledgements	2
Introduction & Background	5
Preface	7
Who is this Tool Kit For?	7
How to Use This Tool Kit	8
City of Toronto	8
City Policies	9
Our Journey Continues	11
Long-Term Care Homes & Services (LTCHS)	12
Residents, Family, Friends and Allies Testimonials	12
LGBT Tool Kit Refresh Project	14
From Cultural Competency...to Diversity Competency	14
How to Use the Diversity Competency Framework?	17
Social and Cultural Competency	18
Terminology	19
Phobias	23
LGBTQ2S Older Adults Today	25
Being an Ally	28
Top Ten Tips for Being an Ally in the Workplace	29
How Do I Talk About...?	30
How to Have Challenging Conversations	31
How to Talk About Sexual Orientation	32
How to Talk About Gender Identity and Gender Expression	33
Organizational Competency	35
10 Steps to an LGBTQ2S-Inclusive and Affirming Organizations	36
Resident and Client Care & Care Planning	38
Intake and Admissions Processes	38
Long-Term Care Homes	41
Spiritual and Religious Care	41
What is Spirituality?	42
Leisure Activity Programs and Services	42
Community Engagement and Volunteering	44
Community Engagement	44
Volunteering	45

Appendices	46
Appendix 1. A Brief LGBTQ2S North American History	48
Appendix 2. Timeline of Major LGBTQ2S Human Rights Events in Canada (1969 – 2016)	50
Appendix 3. LGBTQ2S Health Promotion Initiatives and Research Projects in North America	51
Appendix 4. Relevant LGBTQ2S Health Outcomes	53
Appendix 5. 10 Steps to Creating a LGBTQ2S-inclusive Organization	54
Appendix 6. LGBTQ2S Affirming Religious and Spiritual Groups	57
Appendix 7. LGBTQ2S Activity Program Protocol - SAMPLES	59
Appendix 8. Important Events for LGBTQ2S Communities	64
Appendix 9. LGBTQ2S Toronto Community Resources	65
Appendix 10. LGBTQ2S Training Options	66
Appendix 11. LGBTQ2S Technologies, Tools and Apps	72
Endnotes	73



Introduction & Background

LGBT Tool Kit

IT WAS A LONG JOURNEY...

"When we started putting up rainbow flags and posters they disappeared and some families felt that we were trying to move out the straight residents and bring in gays and lesbians."

Now we have LGBT children bringing their straight parents here, and a staff member who came out after 30 years on the job.

Another staff member felt that working in an LGBT-positive environment helped him to deal positively with his own son coming out as gay."

~ Long-Term Care Homes & Services Manager



Introduction and Background

Preface

In 2004, Long-Term Care Homes & Services (LTCHS) was one of the first long-term care providers in North America to support a long-term care home as Lesbian, Gay, Bisexual, and Trans (LGBT) friendly, and in 2008, to release a comprehensive *LGBT Tool Kit: For Creating Lesbian, Gay, Bisexual and Transgendered Culturally Competent Care at Toronto Long-Term Care Homes & Services*.

Since then many governments and healthcare organizations across the world have recognized that Lesbian, Gay, Bisexual, Trans, Queer and Two-Spirit (LGBTQ2S) persons have faced unique challenges to getting the health care they need. Some challenges are due to the persistence of social stigma; exclusion from health policies, practices and data collection; the complex dynamics around the visibility of LGBTQ2S persons; and service providers' lack of knowledge around their health care needs.

In the past 10 years, there has been a global shift towards equal human rights for LGBTQ2S people and validation of their relationships, including the legalization of same-gender marriage, legal recognition of diverse gender identities, gender expression and constitutional protections in many countries. At the same time, some jurisdictions are moving in the opposite direction.

Since LTCHS released the original *LGBT Tool Kit*, significant work has occurred in health care in Canada, the United States, United Kingdom and Australia to determine how to be welcoming, inclusive and affirming of LGBTQ2S people.

As LTCHS moves forward on the journey in expanding and sustaining long-term care environments and community program services that are welcoming, inclusive and affirming, this revised *LGBT Tool Kit* strives to:

- share what LTCHS has learned about delivering inclusive and culturally competent care in long-term care homes and community-based programs for LGBTQ2S persons, as well as promoting best practices from across Europe, Australia and North America
- provide a framework that reflects the attitudes, skills and knowledge for evolving and expanding welcoming, inclusive and affirming health care and service provision
- provide resources that support knowledge for staff, clients, residents, volunteers and family members.

Who is this Tool Kit For?

This Tool Kit is primarily written for the City of Toronto LTCHS. Much of the content and design is based on the needs expressed by service providers and users within the division.

The LGBT Tool Kit can also serve as a resource for other municipalities, long-term care homes, providers of community programs, and LGBTQ2S health advocacy and education organizations.

How to Use This Tool Kit

This Tool Kit is meant to:

- support LGBTQ2S-inclusive initiatives or programs in long-term care homes or community-based programs
- be a resource for management and staff
- be a self-reflection tool for individuals wishing to know more about LGBTQ2S people.

The first two sections, *Introduction and Background* and *Our Journey Continues* provide the context for this Tool Kit and set the stage for the following sections: *Achieving Social and Cultural Competency* and *Achieving Organizational Competency* which are related to how welcoming, inclusive and affirming environments can be created and supported by individuals and organizations.

** LTCHS has adopted the more inclusive initialism of LGBTQ2S (Lesbian, Gay, Bisexual, Trans, Queer and Two-Spirit) in this Tool Kit and in keeping with the City of Toronto's Positive Space Toronto initiative. The LGBTQ2S initialism will be used to represent work started in 2015. For historical references (including the original Tool Kit) and other sources, the initialism used at that time or by that source will be maintained. We acknowledge that these terms are context-sensitive and continually evolving.*

City of Toronto

Toronto is a diverse multicultural city that is home to one of North America's largest populations of LGBTQ2S persons. Toronto is well-known for its extensive Pride Celebrationsⁱ every summer, including the Dyke March, Trans March and Pride Parade, which draw up to a million visitors each year, and in 2014, Toronto hosted World Pride.

Welcoming, including and affirming LGBTQ2S persons goes beyond hosting festivals and celebrations. In addition to the creation of this Tool Kit, the City is currently undertaking several initiatives, including:

- the Positive Space Toronto initiative which empowers City employees to receive training and volunteer as Positive Space Ambassadors and Champions to be allies for LGBTQ2S persons
- opening of the YMCA Sprott House, the first of two shelters to provide housing support services for LGBTQ2S youthⁱⁱ in January 2016
- a strategic direction to provide "Inclusive Support for All Families" as part of Children's Services 2015-2019 Strategic Planⁱⁱⁱ, "including LGBTQ-led families & families of trans or gender independent children"

- approval of a new sport and recreation facility, expected in 2018, that will welcome all Torontonians with a focus on inclusive programming for LGBTQ2S persons.^{[iv](#)}

City Policies

The City of Toronto has several policies which uphold its legal obligation to provide equitable access to employment and services free from discrimination for all Torontonians. The policies are also meant to create an environment of understanding, dignity and mutual respect.

These policies apply to all City divisions, including LTCHS and its employees, contractors, vendors, agencies, service recipients, residents, clients, volunteers and visitors.

- **City of Toronto Human Rights and Anti-Harassment Policy^{[v](#)}**
 - Members of the public are expected to not discriminate against City employees and other service users, just as City employees are expected to treat members of the public and other employees with dignity and respect, free from discrimination.
 - Harassment includes “improper comment or conduct that a person knows or ought to know would be unwelcome, offensive, embarrassing or hurtful,” for example, negatively referring to someone's race, sexual orientation, age, religion, disability, gender identity or gender expression.
 - Discriminatory actions may include refusing to work with or receive care and service from City staff based on their perceived sexual orientation, gender identity, gender expression, race, religion, or other personal characteristics.
- **City of Toronto Human Resources Hate Activity Policy^{[vi](#)}**
 - Hate-motivated behaviours are defined as harassment, intimidation, violence, verbal slurs, vandalism of property, and public messages that scorn or denigrate a group that is based on bias, prejudice or hatred of a specific group, may be considered hate crimes.
 - In 2015, the Toronto Police Service noted that of those hate crimes reported, LGBTQ2S people were the most likely to experience physical assault. ^{[vii](#)}
- **Guidelines for Accommodating Gender Identity and Gender Expression^{[viii](#)}**
 - The creation of inclusive spaces, policies, practices and services which affirm a person's gender identity and expression is required as part of the City's legal “duty to accommodate” under the Ontario Human Rights code. Failure to do so may be considered discriminatory.



Equity Lens: An Equity Impact Assessment Tool

Through the Equity, Diversity and Human Rights Office, the City of Toronto's Equity Lens was updated in October 2016. It is available as a tool for staff to ensure that practices, policies, programs, tools, budgets, resources, services and decisions are accessible and result in equitable outcomes for everyone.

"We need to know that the broader culture is not as accepting as people think, stigma and bias still exist, and bias can happen in both directions. Staff can also be discriminated against. We need to know how to support staff, resident and clients who are challenged by LGBTQ2S identities" ~ LTCHS staff





Our Journey Continues

LGBT Tool Kit

Our Journey Continues

The purpose of the *Our Journey Continues* section is to share what Long-Term Care Homes & Services (LTCHS) has heard and learned about 'LGBTQ2S-welcoming' long-term care homes and community-based programs since 2008, and to share the approach taken in the *LGBT Tool Kit Refresh Project* to create this Tool Kit.

Long-Term Care Homes & Services (LTCHS)

Long-Term Care Homes & Services (LTCHS) provides a variety of long-term health care services for residents of the City-operated long-term care homes and for vulnerable individuals who reside in the community. The scope of services provided includes:

- ten long-term care homes, providing permanent, convalescent, and short-stay admissions
- community support programs, including adult day programs, supportive housing services, and homemaking services.

Residents, Family, Friends and Allies Testimonials

Testimonials from residents, family*, friends and allies have been recorded to illustrate that the effects of making a long-term care home inclusive of LGBTQ2S residents extends far beyond the individual resident, to encompass staff and their own families, partners and friends, and to the larger community. These have been gathered over the years since the release of the original Tool Kit in 2008.

**Family is used throughout the Tool Kit and is meant to be inclusive of chosen family which is a group of individuals who deliberately choose one another to play significant roles in each other's lives. One definition of chosen family is a group of people to whom you are emotionally close and consider 'family' even though you are not biologically or legally related.*[ix](#)

"I was extremely lucky to get into True Davidson Acres, because it is LGBT welcoming. The first time I saw the celebrations at the home in honour of Pride, I was shocked because I'd never seen it in an institution. It was then that 'I came out again'." ~ Past resident

"In the three years I've been here, I've been more open than I ever was in my life, I feel comfortable and safe here. It doesn't matter here if you're 'different' — I guess you could use the word...life got better when I moved in." ~ Resident

"You have to keep at it, we have come a long way but there is still some ways to go. You really need a champion and management support, everyone has to be on board and it is a team effort. You also need to involve the residents and families in all LGBT events." ~ LTCHS Manager

"One of our elderly gay male residents had a partner who visited him regularly at the home. Staff and management knew both of the men well and spent time chatting on each of the partner's visits. The partner was himself quite elderly and frail and the staff noticed that he may be in need of long-term care himself. Our staff discussed the option of long-term care with the partner and assisted him through the process. To both men's delight, we were able to arrange for them to live together in the same home, where they were able to spend their final years together." ~ LTCHS Manager

"Now we have LGBT children bringing their straight parents here because the children and their partners will feel welcome and their parents won't be discriminated against because their children are LGBT. We have a staff member who came out after 30 years on the job because they felt so comfortable here. Another staff member felt that working in an LGBT-positive environment helped him to deal positively with his own son coming out as gay." ~ LTCHS Manager

LGBT Tool Kit Refresh Project



As LTCHS began the journey to refresh the LGBT Tool Kit, the project Steering Committee recognized that LTCHS had gained experience and expertise in creating inclusive and welcoming long-term care homes for LGBTQ2S residents and families. Whereas the first LGBT Tool Kit project in 2006 focused on outside expertise, it was decided to first engage inside the organization and revitalize LGBTQ2S conversations at all levels (staff, management, residents, clients, volunteers and family members). The approach taken was to move

from *"Checking the Pulse of the Home,"* to *"Checking the Pulse of the Organization."*

Once those successes, challenges and further opportunities in delivering LGBTQ2S-inclusive care and services were understood, and the needs of LTCHS stakeholders were heard, LTCHS would be better able to share information regarding what we've learned and what the organization felt it needed to be an ally to LGBTQ2S residents, clients, staff, volunteers, family and friends.

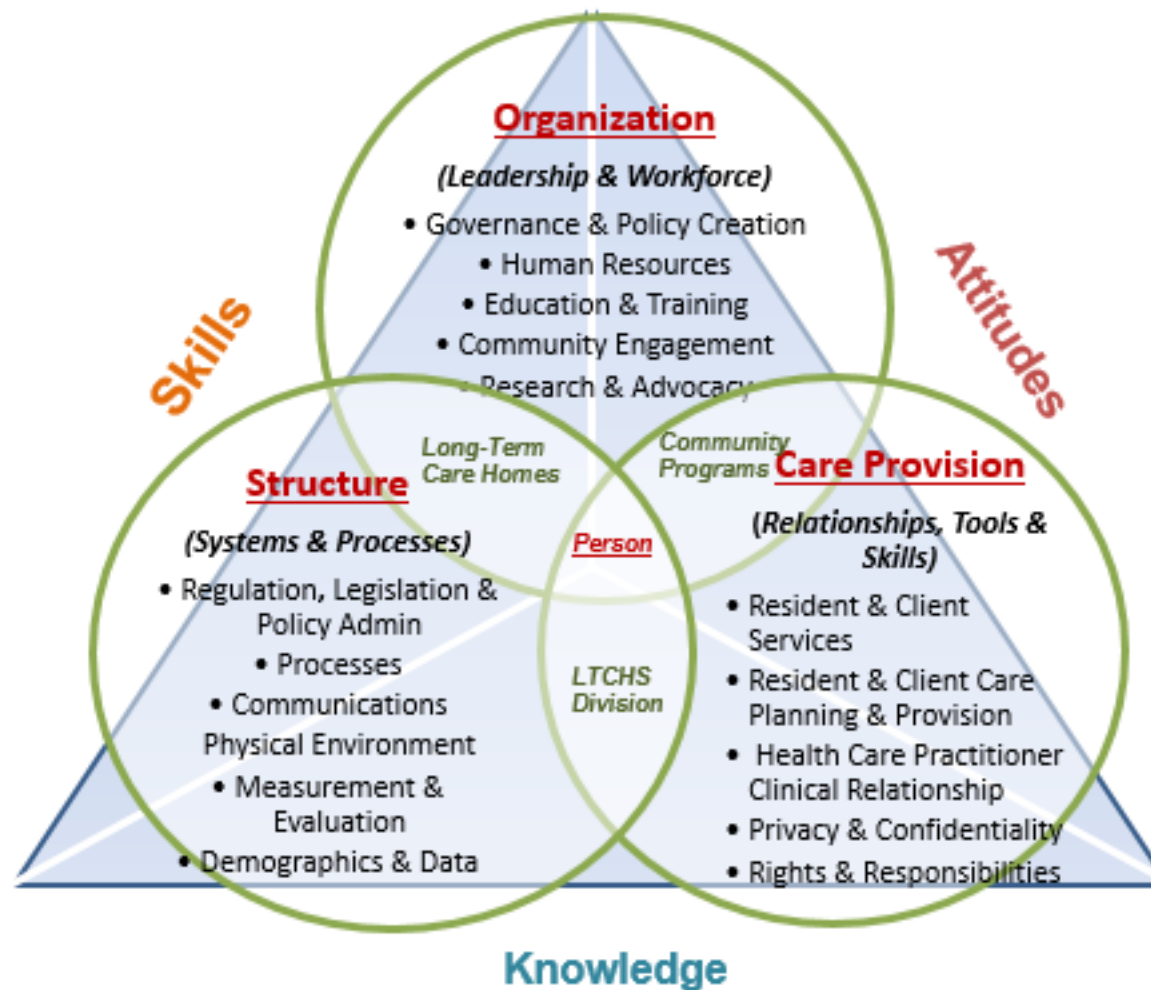
From Cultural Competency...to Diversity Competency

The LGBT Tool Kit (2008) defines 'LGBT cultural competency' as a "set of congruent behaviors, attitudes and policies that enables the system to work effectively with diverse populations and to provide care and services in a sensitive, meaningful and knowledgeable manner" (p.9).

Competency can relate to both an individual and organization. From an individual (personal) perspective, competency is about having the attitudes, skills and knowledge to understand and respectfully interact with diverse people or groups who are different from yourself and in a way that does not demean their personhood. For LTCHS, competency means that the division has structures, processes and systems to support its employees to provide competent care and services to diverse groups.

During the Tool Kit refresh, a new framework was developed to support this work and increase relevancy to all of LTCHS, including Community Programs. This framework expands upon and includes additional areas that have been identified through consultation and research, and addresses the needs heard from LTCHS stakeholders and participants.

Diversity Competency Framework – Long-Term Care Homes & Services



The framework contains two core and overlapping components.

1. Basic Competency Framework – Attitudes, Skills and Knowledge (ASK)

Training and education were consistently high priorities heard from all participants. To support this priority need, the framework includes a basic learning and development model used in education called the "ASK" model, which is derived from educational psychologist Dr. Benjamin Bloom's "Bloom's Taxonomy."

Attitudes: What do we believe?

Skills: What do we need to do?

Knowledge: What do we need to know?

These attitudes, skills and knowledge apply to the individual person, departments or work units and the division overall.

2. Healthcare Organizational Competency Framework

The question of "how to expand and sustain an LGBTQ2S inclusiveness initiative" across LTCHS, in different teams/departments, and in different long-term care homes and communities with shifting demographics, was also heard as another priority need.

The second part of the framework is meant to support inclusive operational and systemic processes in an organization that delivers long-term care. The Organization, Structure, and Care and Service Provision circles overlap and cannot be separated from the basic Attitudes, Skills and Knowledge for being LGBTQ2S socially and culturally competent.

The three 'circles' were adapted from recent cultural competence work in health care equity from a race and ethnicity perspective as proposed by Betancourt, J.R. et al.^x The LGBTQ2S and LTCHS-specific content of the three 'circles' was created to represent:

- the needs expressed by LTCHS
- expertise offered through community engagement
- the needs of LGBTQ2S residents and clients
- adaptation of the original LGBT Tool Kit recommendations
- research into current best practices for LGBTQ2S social and cultural competence, including research from the Agency For Healthcare Research & Quality,^{xi} identifying 'LGBTQI' people as a 'gap' in most health care-based cultural competence efforts.

To summarize, the framework's key components are:

- Attitudes, Skills and Knowledge at both the individual and organizational level
- Organization - Consider what actions need to be taken to create leadership opportunities, prepare the workforce and increase the visibility of LGBTQ2S persons, programs and initiatives throughout the organization
- Structure - Evaluate systems and processes for barriers and risks to LGBTQ2S inclusion, affirmation and safe visibility
- Care and Service Provision - Evaluate personnel competence, systems and processes for barriers to meeting the specific care and /or service needs that LGBTQ2S residents and clients may have.

How to Use the Diversity Competency Framework?

This new framework was used to help frame the LGBT Tool Kit refresh.

The ASK Model

The ASK model can be considered when designing educational materials, training, workshops or online education to be delivered as part of an LGBTQ2S inclusiveness initiative. It can also be used to evaluate the current attitudes, skills and knowledge in the organization through surveys, interviews or conversations.

The ASK model was used in the LGBT Tool Kit Refresh project to develop several workshops that also included an educational component.

The ASK model can also be used to evaluate systems, processes, policies and programs by checking for the presence of the required attitudes, skills, and knowledge at a systemic level.





Social and Cultural Competency

LGBT Tool Kit

Social and Cultural Competency

LGBTQ2S persons will have both similar and unique needs when it comes to receiving appropriate, competent care and services. This section outlines relevant terminology, some information on LGBTQ2S older adults today and tips on being an ally. Having an understanding of these will support basic attitudes, skills and knowledge that individuals need to be socially and culturally competent with LGBTQ2S persons.

Terminology

Terminology is fluid, and what is considered appropriate tends to evolve over time. Moreover, people within a group may prefer different terms to describe themselves.^{xii} Unless otherwise referenced, the following terminology is used through the City of Toronto's Positive Space Toronto initiative.

Sex

The medical classification of people as male, female, or intersex, usually assigned at birth by a medical practitioner, based on the appearance of a person's anatomy. Sex characteristics include chromosomes, hormones, secondary sex characteristics and other aspects of the body.

An intersex person is someone born with biological and / or physical characteristics that are not easily categorized by medical practitioners as male or female. Intersex people are often assigned as either male or female at birth; some identify with their assigned sex, while others do not.

Sexual Orientation

Sexual orientation encompasses the range of human sexuality from gay and lesbian to bisexual and heterosexual orientations, including intimate emotional and romantic attachments and relationships. It refers to who an individual is attracted to and is separate and independent from a person's gender identity or gender expression.

Some Terms Associated with Sexual Orientation

Appropriate Term	Description	Considerations
Lesbian	A woman who is emotionally, physically, spiritually and / or sexually attracted to women.	Some women who are attracted to women may also use the term gay or queer.

Some Terms Associated with Sexual Orientation

Appropriate Term	Description	Considerations
Gay	A person who is emotionally, physically, spiritually and / or sexually attracted to people of the same gender.	Some lesbian, gay or bisexual people may or may not choose to use the term gay or queer to identify themselves
Bisexual	A person who is emotionally, physically, spiritually and / or sexually attracted to people of more than one gender.	
Heterosexual	A person who is emotionally, physically, spiritually and / or sexually attracted to people of the opposite gender.	

Gender Identity

Gender identity refers to the gender that a person identifies with or how they perceive themselves, which may be different from their birth-assigned sex. Gender identity is linked to a person's sense of self, and the sense of being a male, female, both or neither. Some people's gender identity is neither masculine nor feminine and for others, their gender is fluid rather than fixed on any point along the gender spectrum. A person's gender identity is separate from their sexual orientation.

Some Terms Associated with Gender Identity

Appropriate Term	Description	Inappropriate / Invalid Term(s)
Trans	An abbreviation that includes but is not limited to, transgender, transsexual, gender non-confirming, and gender questioning persons. It is an umbrella term used to describe individuals who, to varying degrees, do not conform to what society usually defines as a man or a woman.	<ul style="list-style-type: none"> • Transgendered, transgenderism • 'a transgender' • Tranny (offensive) • Transvestite (offensive)
Trans Man	A person who was assigned female at birth but has transitioned to identify and live as a man.	<ul style="list-style-type: none"> • Born a woman / a woman • Lesbian (trans persons can be of any sexual orientation) • Drag King (this is not a trans

Some Terms Associated with Gender Identity

Appropriate Term	Description	Inappropriate / Invalid Term(s)
		<p>identity but is a performance identity where the performer typically identifies as a woman, but is performing as a man)</p> <ul style="list-style-type: none"> • Sex-change or sex reassignment surgery (offensive)
Trans Woman	A person who was assigned male at birth but has transitioned to identify and live as a woman.	<ul style="list-style-type: none"> • Born a man / a man • Gay (trans persons can be of any sexual orientation) • Shemale (offensive) • Drag Queen (this is not a trans identity but is a performance identity where the performer typically identifies as a man, but is performing as a woman) • Sex-change or sex reassignment surgery (offensive)
Transsexual	A person whose gender identity differs from their sex assigned at birth. They may or may not undergo medically supportive treatments to align their bodies with their gender identity, such as hormone therapy, sex reassignment surgery or other procedures. They may also undertake other changes to align their external attributes and appearance with their gender identity. ^{xiii} However, given this term's origin, some persons may find this term offensive.	<ul style="list-style-type: none"> • Transsexualism • Transvestitism • Any inappropriate terms found under Trans.
Transition	A host of activities that some trans people may pursue to affirm their gender identity. This may include changes to their name, sex	

Some Terms Associated with Gender Identity

Appropriate Term	Description	Inappropriate / Invalid Term(s)
	designation, dress, the use of specific pronouns and possibly medically supportive treatments such as hormone therapy, gender affirming surgery or other procedures.	
Genderqueer	<p>A term used by some individuals whose gender does not conform to a binary understanding of gender limited to the categories of man or woman, male or female.</p> <p>People who are genderqueer may express their gender anywhere along or outside of the gender spectrum.</p>	
Cisgender	A term used to describe people whose gender identity matches their birth-assigned sex.	

Gender Expression

The way individuals communicate or express their gender identity; often through behaviour and physical appearance e.g. in the way they dress, the length and style of their hair, whether they wear make-up or by emphasizing, de-emphasizing or changing their physical characteristics.

Cross-dresser

A person who, for various reasons, wears gender atypical clothing or occasionally dresses in clothing of the "opposite" gender. They may or may not self-identify as a cross-dresser.

Queer

An umbrella term or self-identification by and for people with diverse sexual orientations and gender identities. Unless a person identifies themselves to you as queer, it is best not to use this term as some people still take offence to the term considering its negative history.

Two-Spirit

A traditional Aboriginal term for an individual who has both male and female characteristics within their spirit. Two-spirit individuals have been revered in many Aboriginal cultures. Today, it is mostly used by some First Nations and Métis People to describe, from a cultural perspective, people who are known in non-Aboriginal society as either gay, lesbian, bisexual, intersex or trans.

For all persons, it is considered respectful, inclusive and affirming to always reflect the language, terminology, pronouns and personal name used by the person you may be interacting with. If you are not sure how to address someone, respectfully ask.



Self-Study:

Two-Spirit People: An excellent documentary and informative overview of Native American concepts of gender, sexuality and sexual orientation.

<https://www.youtube.com/watch?v=8JcmAoderl4>



Self-Reflection:

1. How did your understanding of gender identity compare to what you just read? Were you surprised by anything?
2. What did you agree with? Why?
3. Were you challenged by anything? Why?
4. What are two or three of the most important things you learned?
5. How is this knowledge applicable to living, working or volunteering in LTCHS?

Phobias

Prejudice, bias, power and privilege can create fear, revulsion and even hatred of LGBTQ2S persons based on misinformation and the fear of difference. Biphobia, homophobia and transphobia represent actions or inactions that people take based on these.

Biphobia

Bisexual persons can experience biphobia due to stereotypes that they are 'confused,'

'in a phase,' 'can't make up their mind' or are really just gay or lesbian. Bisexual persons have life experiences unique from lesbian and gay persons, because they may have been perceived as heterosexual if in a relationship with someone of the opposite gender, and as lesbian or gay if in a relationship with someone of the same gender.

Homophobia

Homophobia is defined as a series of negative attitudes and behaviours that are based on an irrational disgust, hatred, fear, repulsion or discomfort towards gay and lesbian people. Almost every gay or lesbian person experiences homophobia to some degree, whether it be overt harassment, exclusion or subtle avoidance. Many gay and lesbian persons also internalize the homophobia that has been directed at them from others to some degree, which can impact self-esteem and lead to negative health outcomes.

Transphobia

One definition of transphobia is "emotional disgust, fear, anger or discomfort felt or expressed towards people who do not conform to society's gender expectations."^{xiv} Trans persons are disproportionately affected by violence and harassment compared to lesbian, gay and bisexual persons. In 2015 worldwide, a trans person was murdered every 29 hours.^{xv}

LGBTQ2S Older Adults Today

Although there is a lack of research and literature in health care on LGBTQ2S persons overall, there has been an increase in the last 10 years in attempts to elicit, listen to and record the stories and needs of LGBTQ2S persons as they age.

A 2014 report by the U.S.-based Services and Advocacy for GLBT Elders (SAGE)^{xvi} specifically surveyed GLBT persons between the ages of 45 to 75. Although there are differences between the U.S. and Canada regarding policies and healthcare provision, there are similarities in the lived experiences of LGBT people in the U.S. and Canada. Below are a few of their findings.

- LGBT older adults have profound concerns about aging, and a fear of judgment and inferior care from healthcare providers
- many LGBT people have not told their primary healthcare providers about their sexual orientation or gender identity (40% of LGBT persons aged 60 +) for fear of discrimination
- many fear discrimination in long-term care housing, and 78% are interested in LGBT-friendly housing
- LGBT older adults are more concerned about their finances as they age than non-LGBT persons (51% vs. 36%)
- LGBT older adults are concerned about needing home-based care and having to hide their identities from healthcare providers in their own homes
- 65% of trans older adults feel they will have limited access to needed healthcare
- almost 60% of LGBT older women are living with spouses or partners, while 43% of LGBT older men live with a partner or spouse
- 40% of LGBT people say their support networks have become smaller over time (versus 27% of non-LGBT people).

Many studies of LGBT experiences in health care (Brotman et al., 2015), find that many LGBT people, both younger and older, have had the following negative experiences with healthcare providers on more than one occasion: rejection, hostility, harassment, excessive curiosity, pity, condescension, refusal of treatment, avoidance of physical contact, excessive use of protective equipment and breach of confidentiality.

Across multiple studies, projects and initiatives worldwide, a consistent lack of awareness about LGBTQ2S older adults and their needs is reported from healthcare providers.

Back into the Closet?

During consultations to refresh this Tool Kit, participants spoke of the invisibility of LGBTQ2S residents and clients in health care and the still prevalent "don't ask, don't tell" dynamic.

Brotman et al. (2015) noted that in Canadian healthcare environments today, the overt discrimination from the past has been replaced by a pervasive atmosphere of silence.

At the same time, a key concern for older LGBTQ2S persons who are out, is they may have to go back into the closet if they need to move into a long-term care home or use community-based services.

Fortunately, some out LGBTQ2S seniors have publicly shared their life experiences, both positive and negative, as well as their concerns about going back into the closet as residents of long-term care. To hear the voices of LGBTQ2S elders in Toronto and the U.S., consider viewing the videos below.



Self-Study:

Learn more about the experiences and histories of LGBTQ2S older adults

LTCHS True Davidson Acres and Fudger House LGBT residents share some of their experiences, hopes and fears:

- Pink Sixty News highlights True Davidson Acres, interviews management and residents and discusses LGBTQ2S elders fears of going back into the closet.
<https://www.youtube.com/watch?v=JnSHgn5YHok&feature=youtu.be>
- Global News *Full Story: Back in the Closet* highlights the lived experiences, needs and concerns of LGBTQ2S elders in Toronto. A Fudger House resident is interviewed and he discusses his life of being a closeted gay man for 80 years, and his coming out at Fudger House.
<http://globalnews.ca/video/1698080/full-story-back-in-the-closet/>

Significant historical events in the United States and Toronto:

U.S. Stonewall Riots

- The Gay and Lesbian Senior Experience Part 1 – Before Stonewall
<https://www.youtube.com/watch?v=99dvmE4npNc>
- The Gay and Lesbian Senior Experience Part 2 – The First March
<https://www.youtube.com/watch?v=V1Dq4LHfAZ4>

Toronto Bathhouse Raids

- Track Two Enough is Enough is a documentary film about the 1981 Toronto bathhouse raids and riots and the events that precipitated them. It is a rare and unique record of a watershed moment in the gay liberation movement in Canada, which resulted in the first Pride March.
https://www.youtube.com/watch?v=iN4_8eurids

American LGBT elders discuss their experiences of discrimination growing up LGBT in the United States:

- Gen Silent: documentary trailer discussing long-term care and LGBTQ2S persons. <https://www.youtube.com/watch?v=fV3O8qz6Y5g>
- Silent Pioneers: a classic and award-winning, Emmy-nominated documentary produced in 1985, is about the joys and challenges of being old and gay in America. <https://www.youtube.com/watch?v=G7y1drGSGsE>
- Seniors Give Gay Advice: several LGBT elders provide advice for younger LGBT persons and share stories about their lives growing up out and LGBT in the United States, and how life is for them now. <https://www.youtube.com/watch?v=jMcFZxGdaV8>



Self-Reflection:

1. How did pervasive social stigma impact the lives of many LGBTQ2S elders? How might they still be affected today?
2. Why would an LGBTQ2S elder have to go back into the closet in long-term care or community-based programs?
3. How can long-term care homes and community-based programs facilitate hearing the voices of LGBTQ2S residents, clients, volunteers and staff?

Being an Ally

An ally is one who joins “with another person, group...in order to get or give support, to unite or form a connection or relation with” another person or group.^{xvii} Being an ally to LGBTQ2S persons involves forming collaborative relationships with individual LGBTQ2S persons, groups and organizations.

Anyone can be an ally - gay men can be allies to lesbians, lesbians can be allies to trans women, straight colleagues can be allies to bisexual colleagues, cisgender parents can be allies to their trans children, non-indigenous LGBT people can be allies to two-spirit persons. Understanding the power and privilege one has and making use of it in the interest of equity for all people is part of being an ally.

Being an ally is also about putting your LGBTQ2S cultural competence to work, regardless of your sexual orientation, gender identity or gender expression. It can involve being visible, being outspoken, having challenging conversations, taking action, getting involved, building partnerships and developing relationships of trust and respect.

The following top 10 tips are examples of how to be a LGBTQ2S ally in the workplace - many are relevant beyond the workplace.

Top Ten Tips for Being an Ally in the Workplace^{xviii}

1. **Get to know the issues.** Make time to speak to your LGBTQ2S colleagues, friends and family and find out about their experiences. They will have ideas about how your workplace can be made more LGBTQ2S-friendly.
2. **Make it personal.** Talking about experiences of your own, about LGBTQ2S family members and friends you have, or stories that queer colleagues have shared with you (check with them first!) can help others understand why it's important.
3. **Be yourself.** For inspiration on how to be an effective ally you need only reflect on your own personal values. Ask yourself, and your colleagues, how would you like to be treated at work?
4. **Ask for help.** Everyone worries about saying the wrong thing but if you're taking a positive step you'll find that LGBTQ2S individuals are happy to answer your questions.
5. **Be visible.** Make clear public statements about the importance of LGBTQ2S equality to you and your organization. Making a public commitment to equality.
6. **Put words into practice.** Whether you're the CEO or a line manager, people watch you and take cues from your behaviour. Don't simply talk about LGBTQ2S equality, challenge homophobic/biphobic/transphobic behaviour, become an ally or sponsor of the network group and attend events like Pride.
7. **Demonstrate leadership.** As a leader being visible and saying 'LGBTQ2S equality at work is important' can powerfully affect the culture and tone within an organization, a division or a team. It also demonstrates the organization's values to stakeholders, services users, clients and customers.
8. **Mentor and support LGBTQ2S staff.** Their sexual orientation, gender identity and gender expression is relevant to their experiences in the workplace and understanding this will help you to manage them better and help them to perform to their full potential.
9. **Hold colleagues to account.** No one can personally drive every single equality initiative. Holding colleagues to account on what they are doing to advance LGBTQ2S equality at work is one of the most effective tools that allies have.
10. **Make it natural.** There's no right or wrong way to be an ally. Be yourself so that your colleagues know LGBTQ2S equality isn't something you're doing because you have to, but because you want to.



Self-Reflection: As an individual or as a group, review one or more of the short case scenario videos on “Are you an Ally?” Consider the Video Discussion questions offered on the site about being an ally to LGBTQ2S persons (and others).
http://www.mountsinai.on.ca/about_us/human-rights/ally/ally-campaign-videos

How Do I Talk About...?

When considering what it means to be an LGBTQ2S ally in the consultations to develop this Tool Kit, LTCCHS staff and management expressed a consistent question:

"How do I talk about sexual orientation, gender identity and gender expression to people who are challenged (uncomfortable) by LGBTQ2S identities?"

Many people may be challenged by or uncomfortable discussing sexual orientation, gender identity and gender expression because of stigma.

If one is going to be an ally, it is important to recognize that people have been taught to fear sexuality and that homophobia, biphobia and transphobia are learned and not innate (just like racism). At the same time, many people do not have access to accurate information about human sexuality, and may be confused, curious or feel threatened by what they don't understand.

A good deal of talking about sexual orientation, gender identity and gender expression involves being compassionate and listening, deeply and non-judgmentally.

How to Have Challenging Conversations

There are several ways to consider responding to challenging conversations or hurtful language:^{[xix](#)}



[xx](#)

In Conversation:

- ✓ Be compassionate
- ✓ Listen



[xxi](#)

Listening

- ✓ Non-judgmentally; passing judgement makes free expression difficult.
- ✓ Remain calm and assume good intentions.



[xxii](#)

Talking

- ✓ Use a non-judgmental tone and facial expression.
- ✓ Set boundaries if the conversation is discriminatory and hurtful.
- ✓ Describe the problematic behaviour or language.
- ✓ Avoid labeling or name-calling.
- ✓ Clarify what you heard.
- ✓ Ask for more information.
- ✓ Appeal to common values and/or the values of the organization.
- ✓ Appeal to the speaker's integrity.
- ✓ Explain the impact of the hurtful language.
- ✓ Provide accurate information (but note that advice and information may be seen as attempts to change the person, and may not be accepted).



How to Talk About Sexual Orientation^{xxiii}

Helping others to understand the acceptable terms and their meanings when in conversation, for example, with a colleague, resident, client or family member, is part of being an ally. This includes addressing intentional or unintentional hurtful language.

The following table provides a review of the most currently accepted terminology around sexual orientation. As an ally, one should be familiar with this terminology and keep up to date on its evolution.

Terms to Use	How to Use	Terms to Avoid
<ul style="list-style-type: none"> • gay • lesbian • bi • bisexual 	“gay people” “gay man/men” “lesbian couple” “bi men and women” “He is gay.” “She is a lesbian.” “She is bi.”	homosexual “He is a gay.”
<ul style="list-style-type: none"> • being gay • being bi • being lesbian 	“She talked about being gay.”	Homosexuality, lesbianism, “That’s so gay.”
<ul style="list-style-type: none"> • sexual orientation 	“a person’s sexual orientation is...”	“sexual preference,” “gay lifestyle,” “homosexual lifestyle”, “same-sex attractions,” “sexual identity,” “how they choose to live,” “what they choose to be”
<ul style="list-style-type: none"> • gay and trans • lesbian, gay, bisexual and trans 	“laws that protect gay and trans people”	Using acronyms or ‘initialisms’ when talking with those who are unfamiliar with the issues or not yet supportive may be alienating or confusing to some people. Be sure to define initialisms like LGBT, LGBTQ2S, etc. first.
<ul style="list-style-type: none"> • openly gay • out • closeted • in the closet 	“She is an out lesbian.” “He is openly bi.” “He came out as gay to me.”	He admitted he was gay. She confessed to being a lesbian.



How to Talk About Gender Identity and Gender Expression^{xxiv}

The following table provides a review of the most current and accepted terminology around gender identity and gender expression. As an ally, one should be familiar with this terminology and keep up to date on its evolution.

Helping others to understand the acceptable terms and their meanings when in conversation, for example, with a colleague, resident, client or family member, is part of being an ally. This includes addressing intentional or unintentional hurtful language.

Terms to Use	How to Use	Terms to Avoid
<ul style="list-style-type: none"> • trans 	“trans person” “trans advocate” “trans inclusion”	“transgendered” “a transgender” “transgenders” “transvestite” “tranny”
<ul style="list-style-type: none"> • gender identity • gender expression 	“Everyone should be treated fairly, regardless of gender identity or expression.”	“sexual identity” (the correct term is gender identity) “transgender identity” (use gender identity to refer to a person’s internal sense of gender)
<ul style="list-style-type: none"> • transition • gender confirmation surgery • gender affirming surgery 	“She began transitioning last year.”	“transgendering” “sex change” “sex-change operation” “pre-operative/post-operative” “pre-op/ post-op” sex reassignment surgery"
<ul style="list-style-type: none"> • personal name • chosen name • personal pronouns 	“Jill is a trans woman. She is from Toronto.”	<ul style="list-style-type: none"> • Birth name or legal name (if different from personal name shared with you). • Pronoun <u>not</u> offered by the person. For example, if they refer to themselves as ‘she,’ refer to her as ‘she.’



Self-Study:

Talking About LGBT Issues

This website is a comprehensive source of how to talk about LGBT issues on many fronts, including equality, religion, marriage, adoption, race and terminology. While it is an American site, there are many similarities with LGBTQ2S Canadian concerns.

<http://www.lgbtmap.org/talking-about-lgbt-issues-series>

Creating Authentic Spaces

The 519 has developed several infographic sheets related to *Creating Authentic Spaces: A Gender Identity and Gender Expression Toolkit to Support the Implementation of Institutional and Social Changes*. Examples include "Gender-Specific and Gender-Neutral Pronouns", "Starting Conversations", and "Being an Effective Trans Ally".

<http://www.the519.org/education-training/training-resources/trans-inclusion-matters/creating-authentic-spaces>

A graphic of multiple concentric, slightly offset rainbow arcs in red, orange, yellow, green, and blue, curving from the top left towards the bottom right.

Organizational Competency

LGBT Tool Kit

Achieving Organizational Competency

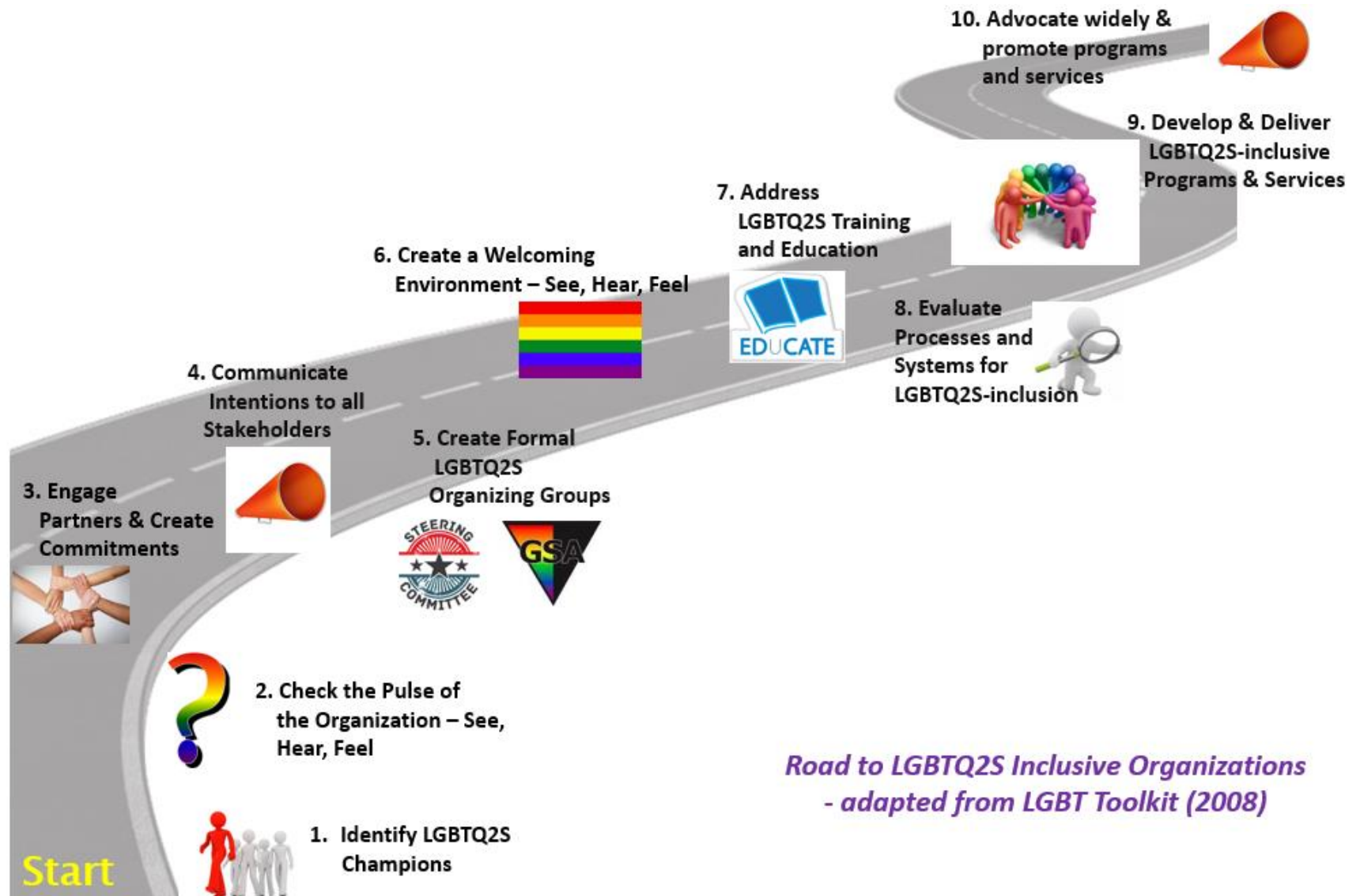
This section, *Achieving Organizational Competency*, will focus on systems-level approaches to providing organizational supports that address systemic barriers to delivering LGBTQ2S competent care and services. Approaches, strategies and best practices will be explored at the divisional level as well as specific to long-term care homes, and community-based programs and services.

10 Steps to an LGBTQ2S-Inclusive and Affirming Organizations

Recommendations made in the original LGBT Tool Kit are still valid and effective strategies for long-term care homes and other organizations. These recommendations have been summarized, updated and expanded in the *Road to LGBTQ2S-inclusive Organizations* graphic and checklist contained in the Appendices. The recommendations are presented as 10 steps which may be completed in order, concurrently or begun at different times depending on where the organization is on its journey.

Note that the first three steps, 1. Identify LGBTQ2S Champions, 2. Check the Pulse of the Organization – See, Hear, Feel, and 3. Engage Partners and Create Commitments are foundational to success and should be addressed or verified as early as possible.

It is because LGBTQ2S identities and needs are often still excluded from standard day-to-day operations and processes in health care that it is important to have multiple person-centered strategies for LGBTQ2S visibility.



***Road to LGBTQ2S Inclusive Organizations
- adapted from LGBT Toolkit (2008)***



Health Equity Impact Assessment Tool

"Developed by the Ontario Ministry of Health and Long-Term Care in partnership with local health care authorities, the Health Equity Impact Assessment Tool helps users to identify unintended potential health equity impacts of a policy, program or initiative (positive and negative) on specific population groups; supports equity-based improvements in policy, planning, program or service design; embeds equity in an organization's decision-making processes, and builds capacity and awareness about health equity throughout the organization."^{xxv} This tool is used internationally and endorsed by the World Health Organization.

<http://www.health.gov.on.ca/en/pro/programs/heia/>

Resident and Client Care & Care Planning

One of the key barriers for LGBTQ2S persons in long-term care to receiving quality health care that is mindful of their needs, is continued silence and invisibility. The *don't ask, don't tell* dynamic of the past is still present in many healthcare environments. In order to provide whole-person centered care, the whole person needs to be known, including sexual orientation, gender identity and gender expression.

It can be challenging to know who the LGBTQ2S residents and clients are because their identities are not 'spoken of' and they may choose (or cannot) 'speak of it' themselves for fear of discrimination. Some elders may not identify as 'gay' or 'lesbian', even if they are in/have been in a long-term relationship with someone of the same gender. Some persons whose lived gender is different from their sex assigned at birth, may not identify as trans.



Self-Study:

Review *To Treat Me, You Have to Know Who I am*, a video created by New York City Health and Hospitals.

<https://www.youtube.com/watch?v=NUhvJgxqAac>

Intake and Admissions Processes

Across Canada, the United States, the United Kingdom and Australia there are several large-scale initiatives, programs and projects for collecting sexual orientation and gender identity (SOGI) data.^{xxvi} Results from these initiatives are strikingly similar:

- staff believe patients and clients will not answer the questions and will be offended if asked

- the majority of patients and clients provide answers, after receiving explanations of why this information is being collected, how it will be used, and who will have access to it.

Why would one ask residents and clients in LTCHS about SOGI?

WHY Ask?

- it is welcoming and affirming to LGBTQ2S persons, their allies and loved ones, regardless of how or if the questions are answered
- creates a safe, private option for LGBTQ2S resident and client self-identification. Self-disclosure to sensitive and trustworthy persons is linked to positive mental health, and breaks the stigma and secrecy
- enables organizations to better understand who service users are, what their needs may be, and over time, to evaluate and improve programs and services offered.

WHO to Ask?

Ask all potential service users (residents and clients). Everyone has a sexual orientation and a gender identity. Not asking about these key areas of one's identity means the service provider is making assumptions, usually that the resident or client is straight and that they identify with the sex they were assigned at birth.

WHO should Ask?

- caseworkers, Counsellors (Social Workers)
- nurses and Physicians
- intake Administrator

WHEN to Ask?

- during registration, admission, referral or intake processes where general personal information is requested and/or suitable services or placements are being considered
- during clinical assessments
 - Medical professionals should be aware of a person's sexual orientation and gender identity to provide effective and relevant care
 - Doctors, nurses and counsellors in particular, should review sexual orientation and gender identity questions with all clients, residents and patients. Further health, behavioural and life experience questions be explored if deemed relevant
- when evaluating programs and services, for example, in confidential surveys looking for feedback from your service users or their family, friends and supporters.

HOW to Ask?

Explain the purpose for asking the questions, guarantee confidentiality, inform the resident or client that the questions are optional, explain who will see this information and why, explain how their information may be used in the future.

What to Ask?



Do Ask Do Tell: A Toolkit for Collecting Data on Sexual Orientation and Gender Identity in Clinical Settings

An online tool kit created by The Fenway Institute and the Center for American Progress, both of whom have been at the forefront of efforts to address LGBT health disparities by promoting the routine and standardized collection of SO/GI data in clinical settings. <http://doaskdotell.org/>



Measuring Health Equity: Demographic Data Collection in Health Care

Through the Toronto Central Local Health Integration Network's (LHIN) Measuring Health Equity mandate, hospitals and community health centres with the LHIN geography ask a number of standardized demographic questions, including gender and sexual orientation, to service and recipients. Comprehensive tools, resources and education has been developed. <http://torontohealthequity.ca/>

Long-Term Care Homes

Spiritual and Religious Care

Spiritual and religious caregivers have an important role in helping to create safe spaces for LGBTQ2S persons. They also play an important part in end-of-life care, where sensitivity to the life experiences, losses and joys specific to being an LGBTQ2S person should be validated, celebrated, understood and reconciled where possible. Given that spiritual and religious caregivers often include volunteers from the community, LGBTQ2S affirming and inclusive organizational processes for volunteer engagement, outreach, recruitment, training, monitoring and evaluation apply.

Unfortunately, many LGBTQ2S seniors living in or arriving at long-term care homes will have experienced exclusion and outright expulsion from their respective religious and faith communities. In consultations to develop this Tool Kit, both internal staff and community members noted the history of exclusion and discrimination against LGBTQ2S persons from most religions.

In the last couple of decades, across Canada and the United States a growing number of churches, spiritual and faith traditions are declaring themselves welcoming, inclusive and affirming of LGBTQ2S persons. These faith traditions are affirming the presence of their LGBTQ2S members and recognizing that LGBTQ2S persons are whole persons, and have spiritual and faith needs like anyone else.

Under the Ontario Human Rights Code (OHRC), all people have the right to religious freedom; at the same time, all people have the right to freedom from discrimination, including freedom from discrimination based on religion "or practices and observances that purport to have a religious basis but which contravene international human rights standards or criminal law".^{xxvii} LGBTQ2S persons of all faiths, ethnicities and cultures are protected from discrimination under the sexual orientation, gender identity and gender expression grounds in the OHRC and the Canadian Human Rights Act.



United Church of Canada Affirming Ministries Program

"The Affirming Ministries Program is a network of United Church congregations and ministries that declare themselves to be fully inclusive of people of all sexual orientations and gender identities." The United Church has created a comprehensive tool kit and commitment process for becoming an affirming ministry, called Open Hearts: Resources for Affirming Ministries in The United Church of Canada.

<http://ause.ca/wp-content/pdf/OpenHearts.pdf>

What is Spirituality?

Most people are fairly certain they understand what religion is, but what is spirituality?

Spirituality

A universal and fundamental aspect of being human - it is a person's unique and subjective perspective on, and relationship with the nature of existence, and the meaning and purpose of life and death.


Being more inclusive regarding multi-faith services and programs includes an understanding of all persons as spiritual beings.



Supporting Diversity and Multi-Faiths

True Davidson Acres has developed a variety of initiatives to celebrate LGBTQ2S-affirming and welcoming spiritual, religious and faith-based practices. These include a wall of honour within the home as well as hosting educational workshops.

The LGBTTIQ Muslim: Health Care Needs and Barriers



The purpose of the **workshop** is to raise and develop awareness on the LGBTTIQ Muslim community issues, seeking to support and increase awareness and skills of Muslim and non-Muslim professionals who work with those who belong to this community.

You will learn more about various approaches to the LGBTTIQ issue in Islamic theology and also learn practical tips that you may be able to apply in your practice.

You will also learn key terms and concepts related to LGBTTIQ in the Islamic tradition and social sciences that may improve your therapeutic relationship with your clients.

Friday October 21, 2016
Time: 10:30 a.m.
Worship Centre



Leisure Activity Programs and Services

Developing programs and resident services with an LGBTQ2S theme open to all residents, clients, staff, family members and volunteers promotes an inclusive celebration of diversity. When these programs and services are supported by a mix of LGBTQ2S staff and volunteers/allies, both the quality of life of LGBTQ2S residents is improved, as is the LGBTQ2S cultural competency in the home.

Providing a variety of events with LGBTQ2S themes will help people:

- feel safe to be out
- develop confidence and comfort as an ally

- increase their exposure to LGBTQ2S persons
- have access to 'people like me'.

Hosting LGBTQ2S events and activities is a great opportunity to partner with LGBTQ2S community members and advocates, integrate LGBTQ2S communities into the home, promote the home's initiatives and support diverse volunteering opportunities.



LGBTQ2S Programs in LTCHS

In addition to Pride-related celebrations held each year in June such as flag-raising and home-specific events (e.g., staff BBQs), LGBTQ2S events are organized throughout the year and are supported by staff, volunteers, gender sexuality alliances and community members.

- Movie and Film series
- Book Club
- Flag Raising and Pride BBQ
- LGBTQ2S Entertainment /Saturday Social
- Rainbow Crafts
- LGBTQ2S Rapport Building – Which Shoe Are You?

Within the City's long-term care homes, Managers, Resident Services developed a LGBT Activity Program Protocol to support the development and implementation of these programs and activities. These protocols not only describe program details such as duration, target group and openness, but also goals, implementation considerations and resources required. The Appendices provides sample program templates for these various social and recreation programs.

Community Engagement and Volunteering

Community Engagement

A large part of creating a long-term care home where it is safe for LGBTQ2S people to live, work and volunteer involves creating opportunities for people to get involved and to be an ally. This can include:

- partnering with LGBTQ2S community members, organizations, advocates and allies to provide programs, training, and education
- increasing the representation of LGBTQ2S persons in formal organizing groups, committees and councils
- promoting LGBTQ2S initiatives and friendly homes in the community
- performing outreach to prospective LGBTQ2S residents and volunteers.



Pride Planning Committee

In LTCHS, the Managers, Resident Services work together to plan and execute Pride-related programming. This action creates a systemic support for LGBTQ2S social programming, allows for the transfer of knowledge between different parts of the organization, supports dispersed geographical areas, and increases the visibility of LGBTQ2S persons and initiatives to all staff, residents, family members, clients and volunteers.

In a long-term care home the 'community' involves both the community inside as well as outside the home. A community engagement plan or strategy needs to consider both of these communities and the purpose and expected outcomes for each.

The home will already have internal communication strategies, plans or methods and LGBTQ2S topics, themes and issues should be integrated into those home practices. For example:

- as part of any multicultural/diversity-related communications or engagements within the home, since LGBTQ2S persons come from every culture
- promote LGBTQ2S topics, themes in newsletters and/or regular modes of communication
- use home (and/or organizational) surveys to poll the home's stakeholders on LGBTQ2S questions, issues or topics to 'check the pulse of the home.'



True Davidson Acres LGBTQ2S Community Engagement (*Home Advisory Committee, Gender Sexuality Alliance*)

True Davidson Acres Home Advisory Committee and Gender-Sexuality Alliance group have formally embedded Toronto's LGBTQ2S communities within the daily operations of the home by welcoming LGBTQ2S community members and advocacy organizations, and other municipal and provincial health organizations to contribute to formal organizing groups in the home.

LGBTQ2S Engagement Survey

In spring 2016, True Davidson Acres administered a short survey with residents, staff, family/next of kin and volunteers at the home to better understand education, support and resource needs related to supporting welcoming and affirming care and services at the home. Questions included level of comfort with LGBTQ2S topics such as sexual orientation, gender identity and gender expression, educational areas of interest, methods for delivering education and training, relevant educational topics as well as feedback on current education received to date. Results from the survey have been shared with the home's Gender Sexuality Alliance and are being used to inform action planning at the home.



Kipling Acres Community Partnership (*Inside Out LGBT Films*)

Kipling Acres have formally partnered with Inside Out, a not-for profit organization that facilitates LGBT programs within neighbourhoods in the greater Toronto area that have limited access to LGBTQ2s services and supports. At Kipling Acres, Inside Out facilitates screenings of LGBT films and holds discussions afterwards for residents who attend.

Volunteering

Access to 'people like me', out staff and volunteers and LGBTQ2S role models were identified as key factors in helping LGBTQ2S residents and staff to feel safe in the home and workplace. Attracting LGBTQ2S volunteers is a key part of engaging LGBTQ2S communities and integrating those communities into the home's daily life.

It is important to consider all people of all ages when thinking about attracting volunteers, including LGBTQ2S volunteers.

LGBTQ2S older persons may or may not be distanced from their families. Research in the United States and Canada shows that, in general, the social circles of LGBTQ2S older adults shrink considerably more than heterosexual and cisgender adults as they age.

Intergenerational volunteering, or attracting both younger and older volunteers can be mutually beneficial. Younger LGBTQ2S persons may also be without the presence of older persons in their lives, and particularly older LGBTQ2S role models.



Appendices

LGBT Tool Kit

Appendices

Appendix 1. A Brief LGBTQ2S North American History

Appendix 2. Timeline of Major LGBTQ2S Human Rights Events in Canada (1969 – 2016)

Appendix 3. LGBTQ2S Health Promotion Initiatives and Research Projects in North America

Appendix 4. Relevant LGBTQ2S Health Outcomes

Appendix 5. 10 Steps to Creating an LGBTQ2S-Inclusive Long-Term Care Home

Appendix 6. LGBTQ2S Affirming Religious and Spiritual Groups

Appendix 7. LGBTQ2S Activity Program Protocol

- LGBTQ2S Movie Night
- Rainbow Theatre
- LGBT Rapport Building – Which Shoe are You?

Appendix 8. Important Events for LGBTQ2S Communities

Appendix 9. LGBTQ2S Toronto Community Resources

Appendix 10. LGBTQ2S Training Options

Appendix 11. LGBTQ2S Technologies, Tools and Apps

Appendix 1. A Brief LGBTQ2S North American History

Silence, Secrets and the Underground

LGBTQ2S seniors today were born and grew up in a time when being lesbian, gay, bisexual or trans was criminalized and considered pathological. It wasn't until 1969 in Canada that 'homosexuality' was decriminalized, and until 1973 that the American Psychological Association removed 'homosexuality' from its list of mental disorders. Due to social stigma, outright violence, threat of imprisonment, job loss, family rejection and being institutionalized, many LGBTQ2S persons were forced to hide their identities for their own safety. Some of today's elder LGBTQ2S persons would have also entered heterosexual marriages in order to fit in. Hiding one's identity successfully as an LGBTQ2S person was a key self-care strategy that served people well during this time.

Seniors born during the Depression Era (1912-1921) or in the Silent Generation (1922-1945) had few options for living their lives freely or without extreme stigma and discrimination. Still, despite the danger, some people were out and did disclose their identities to supportive friends and family members. For some others, hiding was not an option if they could not pass as heterosexual or cisgender. LGBTQ2S lives were forced underground and meeting people like one's self and developing loving relationships had to be kept secret, even if it was a so-called open secret. The creation of secret societies and clubs, relationships and communities were a source of strength and resilience for LGBTQ2S persons during these times.

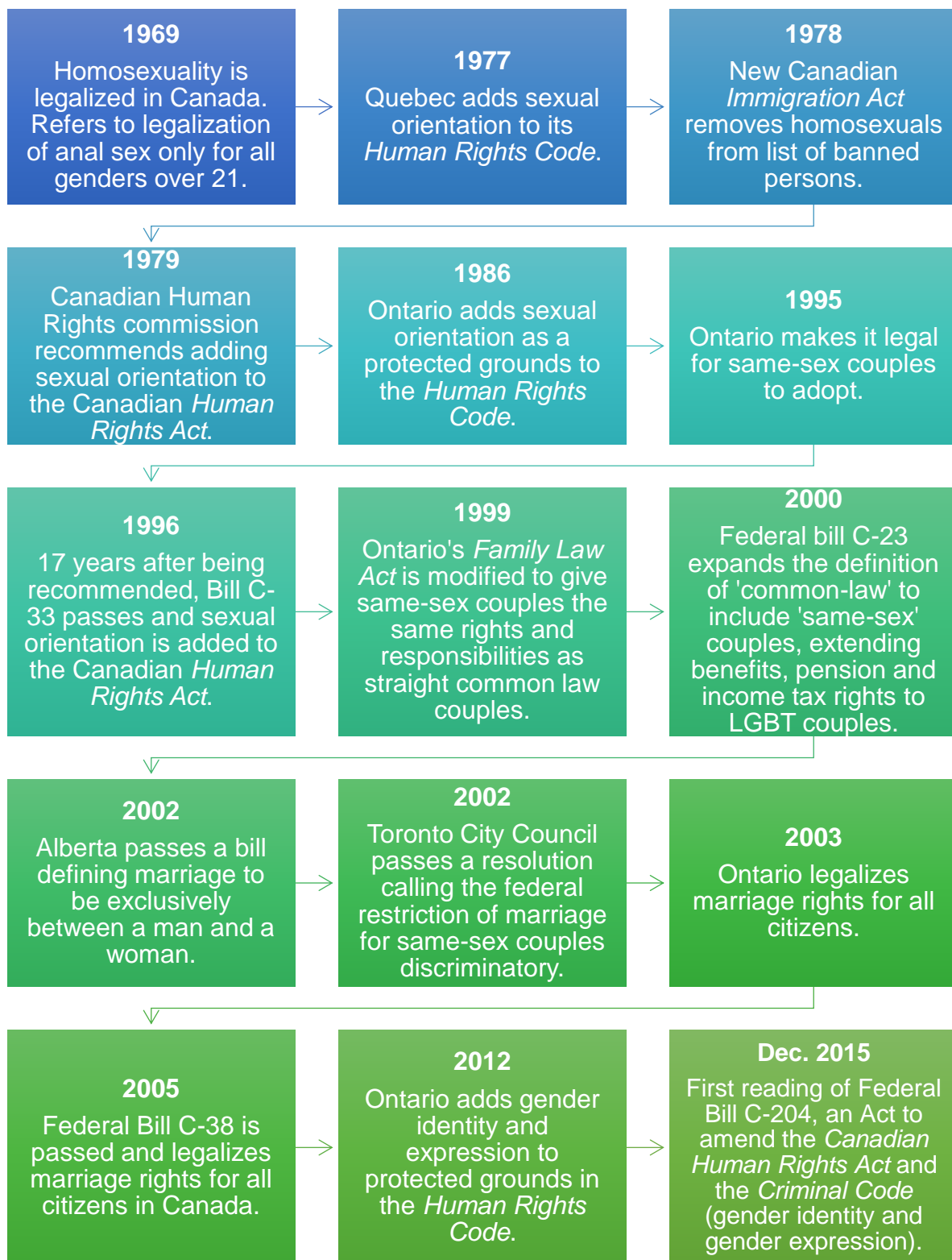
Increasing Activism and Visibility

LGBTQ2S Baby-Boomers (b.1946-1965) and Gen-X'ers (b. 1966-1976) might be considered the LGBT activist generations. Several of the major events, like the Stonewall Riots (1969)^{xxviii} in the U.S., the Toronto Bathhouse Raids (1981)^{xxix}, and the HIV crisis in the 1980s were major political turning points regarding LGBT equality and human rights in North America. In contrast to many seniors born in earlier generations, Baby Boomers are much less likely to be closeted and to be living their lives openly. With increasing equality of human rights since the 1970s in Canada and the U.S. many lesbian, gay and bisexual persons today are 'completely out' in many and/or all facets of their lives. The 2010 US Metlife Study, found that 75 per cent of lesbians and gay men in the study, 39 per cent of trans people, and 16 per cent of bisexuals were completely or mostly out.

LGBTQ2S seniors born in earlier generations were certainly not always silent, and have played and continue to play important roles in increasing LGBTQ2S visibility and equality. The most recent example is 87-year-old Edie Windsor, an American lesbian born in 1929.^{xxx} Edie was instrumental in winning marriage rights for all Americans. When Edie and Thea, who were partners for 44 years, could not marry in the U.S. they legally married in Toronto in 2007. When Thea passed away in 2009, Edie was denied rights as a spouse and forced to pay significant inheritance taxes. Edie fought the U.S. government and took her case to the U.S. Supreme Court, which eventually led to the overturning of the U.S. Defense of Marriage Act, which had denied marriage equality to LGBTQ2S persons across the nation.

Canada has been a leader in LGBTQ2S equality, and was one of the first nations to grant all citizens the right to marry. For a brief history of the major legal events in Canada regarding LGBTQ2S human rights, refer to the timeline that follows.

Appendix 2. Timeline of Major LGBTQ2S Human Rights Events in Canada (1969 – 2016)



Appendix 3. LGBTQ2S Health Promotion Initiatives and Research Projects in North America

(2011 – 2016+)

Psychosocial Needs of Older Lesbian, Gay, Bisexual, Transgender and Queer Adults Living with HIV/AIDS on Accessing Health Care Services (2016-) – Toronto & Vancouver.

<http://lgbtqhealth.ca/projects/psychosocialneedsolderlgbtqadultsliving.php>

- Psychological and social needs that older lesbian, gay, bisexual, transgender, and queer (LGBTQ) adults with HIV/AIDS.

The PRIDE Study (2015 -) – United States

<http://www.pridestudy.org/FAQ.html>

- First large-scale, longitudinal (long-term), cohort health study of US residents who identify as lesbian, gay, bisexual, transgender, queer (LGBTQ), or another sexual or gender minority.

Project Affirm (2015 -) – United States.

<http://projectaffirm.org/>

- "AFFIRM is a study that aims to learn more about the identity development and health of people who identify as transgender, transsexual, or gender non-conforming across the course of the lifespan. This project is in the first year of its data collection and recruitment process."

Your Voice! Your Health! A study of how to engage and empower LGBT people of color within healthcare settings (2015 -) : – United States.

<http://chicagodiabetesresearch.org/research/lgbtq-sdm/>

- Your Voice! Your Health! is a three-year project that aims to reduce healthcare disparities in the LGB/T racial and ethnic minority community.

Caring and Aging With Pride Over Time (2014 -) – United States.

<http://caringandaging.org/>

- The first ever on-going national project designed to better understand the health and well-being of lesbian, gay, bisexual, and transgender (LGBT) adults 50 years of age and older.

LGBTTQI Home Care Access Project (2011-2015) – Ontario.

<http://www.yorku.ca/lgbthome/index.html>

- "This research hopes to increase what we know about LGBTTQI access to community home care services, with the long-term goal of improving home care for these communities."

"We Ask Because We Care" (2010 - 2014) – Toronto, Ontario.

<http://torontohealthequity.ca/>

- Over four years, the group piloted socio-demographic questionnaires for patients that asked about race, language, sexual orientation and gender identity among other things.

LGBT End-of-Life Conversations (2014) – Canada.

<https://www.sfu.ca/lgbteol.html>

- 1 year community-based research project where the goal is to better understand LGBT seniors' needs at end-of-life and to help LGBT older persons to be better prepared for end-of-life.

Out and Visible: The Experiences and Attitudes of Lesbian, Gay, Bisexual and Transgender Older Adults, Ages 45-75. (2014)

- SAGE survey and research report examining the values, needs, wants and lifestyle preferences of older LGBT adults.

Healthy People 2020 – United States Government.

<http://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health>

- Healthy People provides science-based, 10-year national objectives for improving the health of all Americans.

Appendix 4. Relevant LGBTQ2S Health Outcomes^{xxxi}

Cancers

- **Higher Risk:**
Anal Cancer, Penile Cancer (Gay and Bisexual Men), Testicular Cancer (HIV-positive, Gay and Bisexual Men, Transgender women with testicles)
- **Evidence of Lower Screening Rates**
Colorectal Cancer (LGBT), Breast Cancer (Lesbians, Bisexual Women, Transgender Men and Women), Cervical Cancer (Lesbians, Bisexual Women, Female-To-Male Transgender), Prostate Cancer (Male-To-Female transgender), Ovarian and Uterine (Female-To-Male Transgender).

Cardiovascular Disease (CVD)

- **Higher Risk** (LGBT) US and Canadian evidence of 2-4x tobacco and alcohol use in LGBT adults, compared to heterosexual adults. Even higher in LGBT youth . Trans persons may be at higher risk due to hormone usage.
- **Screen for:**
High Blood Pressure, Lipid Disorders, Diabetes Mellitus (Type 2)

Diabetes Mellitus

- **Higher Risk:** US evidence shows higher rates of obesity in Lesbians, particularly when linked to poverty.
- US and Canadian evidence shows higher risk of CVD in LGBT population.

Substance Use

- **Higher Risk:** US and Canadian evidence shows higher use of Tobacco and Alcohol in LGBT. Toronto study finds 36% of LGBT adults versus 17% of heterosexual adults. US studies show higher use of alcohol for Lesbian and Bisexual women than heterosexual women.
- **Screen For:** Abdominal Aortic Aneurysm, other alcohol and tobacco related conditions, offer behavioural counselling.

HIV

- **Higher Risk:** Gay Bisexual, and other men who have sex with men (MSM) accounted for 75% of all new diagnoses (400) in Toronto in 2013. Transwomen are 49 times more likely than the general population to be HIV infected.
- **Lower Screening Rates** by 2015, one in two people with HIV/AIDS in the US will be age 50 and older. All seniors are less likely to be screened for HIV due to the belief they are no longer sexually active.
- US national research shows that older adults are sexually active into their mid-80s. A 2007 study found 53% of adults 65-74 and 26% of adults 75-85 being sexually active.

Dementia

- **Trauma :** LGBT senior populations often have high rates of victimization and trauma, which are correlated with higher risk of dementia. A recent US study found the most traumatized LGBT seniors displayed the most severe cognitive impairments. **Smoking:** Overall, the LGBT population has high smoking rates. Smoking cessation at any age is strongly linked to reducing risk of dementia. Controlling Diabetes and high blood pressure (higher risk in lower income Lesbians) are also indicated in reducing dementia risk.

Appendix 5. 10 Steps to Creating a LGBTQ2S-inclusive Organization

1. Identify **LGBTQ2S Champions**

- ☐ Create a formal and visible role or roles with the required levels of authority and resources

2. Check the Pulse of the Home – **See, Hear, Feel**

- ☐ Engage in Conversation at all levels of the organization
 - Evaluate the level of willingness informally through conversations with management, staff, residents, family, friends and volunteers
- ☐ Evaluate organization with the 'See-Hear-Feel' framework
 - **SEE**: What visible evidence of welcoming LGBTQ2S persons is there?
 - **HEAR**: What is being talked about/or not talked or written about regarding sexual orientation, gender identity and gender expression? Is there silence around the topic?
 - **FEEL**: Do LGBTQ2S service recipients, staff and allies feel that the organization is welcoming and safe?
- ☐ Develop a plan for addressing barriers and gaps

3. Engage **Partners and Create Commitments**

- ☐ Engage with and secure commitment from the management team
- ☐ Engage with and secure commitment from relevant councils/committees (e.g. Home Advisory, Residents' Council, Family Council, Volunteer Committee)
- ☐ Create strong links with the local LGBTQ2S community
- ☐ Integrate LGBTQ2S persons or allies into councils/committees
- ☐ Encourage volunteering from LGBTQ2S community members

4. **Communicate** Intentions Widely

- ☐ Create an initial communication plan and publicly state to all stakeholders, the home's intentions and commitment to the initiative

5. Create **Formal LGBTQ2S Organizing Groups**

- ☐ Create a formal organizing group, including community partners and home stakeholders to plan, manage and implement relevant initiatives such as:
 - Create an LGBTQ2S Steering Committee
 - Create a Gender Sexuality Alliance

6. Apply the **See-Hear-Feel Framework**

- ☐ Apply the See-Hear-Feel framework to all areas of the organization
- ☐ Address the gaps found in the See-Hear-Feel evaluation. Create a welcoming environment

7. Address LGBTQ2S **Training and Education**

- ☐ Ensure staff, management and volunteers have LGBTQ2S knowledge and sensitivity training
- ☐ Tackle the myths regarding aging and sexuality as a precursor to addressing sexual orientation, gender identity and gender expression. Present intimacy and sexuality as a general topic relevant for all service recipients
- ☐ Include formal and informal 'just-in-time' training with qualified LGBTQ2S educators, preferably with lived experience
- ☐ Include LGBTQ2S training in general staff orientation
- ☐ Ensure key people (doctors, nurses, social workers, admissions personnel) have relevant training and health factors knowledge
- ☐ Include an ongoing evaluation component for education

8. **Evaluate Processes and Systems** for LGBTQ2S-Inclusion

- ☐ Evaluate and modify the organization's administrative forms, processes, procedures and practices for inclusion and equity, privacy and confidentiality
- ☐ Ensure admissions and placement processes are inclusive of sexual orientation, gender identity and gender expression. Ensure data collection is private and confidential
- ☐ Evaluate the organization's hiring practices for inclusive strategies and equitable processes. Develop a plan for mitigating/enhancing hiring practices
- ☐ Evaluate the volunteer management program for inclusion and equity and develop a plan to engage volunteers in LGBTQ2S initiatives
- ☐ Identify systemic issues and changes required, i.e., individual service location responsibilities versus organizational responsibilities
- ☐ Add LGBTQ2S-inclusion to ongoing monitoring and evaluation processes
- ☐ Ensure the formal complaints mechanism in place regarding discrimination and/or harassment is inclusive of sexual orientation, gender identity and gender expression is accessible and monitored regularly

9. Develop LGBTQ2S **Programs and Services**

- ☐ Enhance resident/client care and care planning processes.
 - Deliver 'just-in time' training to priority stakeholders (i.e., asking open-ended questions, using inclusive language, using correct gender pronouns, gaining LGBTQ2S specific clinical health knowledge, expanding the definition of family)
 - Engage care teams in applying LGBTQ2S knowledge and awareness to Resident/Client Care and Care Planning
- ☐ Develop and deliver Leisure Activities and Social Programs

- Engage relevant teams in applying LGBTQ2S knowledge and awareness to Leisure Activities and Social programs
- Involve LGBTQ2S volunteers and community organizations
- Include LGBTQ2S specific and integrated activities and programs in all activities initiated by the organization (e.g. Adult Day programs, convalescent care etc.)

10. Advocate for LGBTQ2S **welcoming and inclusive care**

- ☐ Create strong links with other levels of government, Community Care Access Centres, Ministry of Health and Long-Term Care and Local Health Integration Networks
- ☐ Communicate the LGBTQ2S programs and services to prospective applicants
- ☐ Promote and celebrate the accomplishments of any LGBTQ2S- related initiatives.

Appendix 6. LGBTQ2S Affirming Religious and Spiritual Groups

The following is a sample of organizations and groups in Canada with churches in Toronto that have publicly declared their commitment as allies to LGBTQ2S people.

Faith	Name	Websites
Aboriginal	Two- Spirited People of the First Nations	http://www.2spirits.com/index.html
Aboriginal - Christian	Toronto Urban Native Ministry	http://tunm.ca/ Anglican Diocese of Toronto United Church of Canada All Native Circle Conference http://allnativecircleconference.com/
Anglican	Anglican Diocese of Toronto	http://www.toronto.anglican.ca/parish-life/same-gender-blessings/
Buddhist	Dharma Friends	http://www.dharmafriends.ca/
Buddhist	Shambhala Meditation Centre of Toronto	http://toronto.shambhala.org/
Catholic	All Inclusive Ministries	http://www.allinclusiveministries.org/
Catholic	Dignity Canada	http://www.dignitycanada.org/
Christian	United Church of Canada	http://affirmunited.ause.ca/affirming-ministries-program/ In Toronto: 18 churches as of May 2017 http://affirmunited.ause.ca/ontario/#Toronto
Christian, Multi-Denominational	Metropolitan Community Church of Toronto	http://www.mcctoronto.com/ Seniors Network: http://www.mcctoronto.com/what-we-do/connection-groups/seniors-network
Inter-spiritual	Sunset Service	https://sunsetservice.wordpress.com/

Faith	Name	Websites
Ismaili	Queer Ismailis	https://thequeerismaili.wordpress.com/
Judaism	Congregation Shir Libeynu	http://shirlibeynu.ca/
Judaism	Kulanu Toronto	http://kulanutoronto.org/
Lutheran	Lutherans Concerned in Canada	https://www.reconcilingworks.org/
Muslim	Salaam Canada: Queer Muslim Community	https://www.facebook.com/Salaam-Canada-153766412578/ http://www.selfhelp.on.ca/2014/04/salaam-support-group/
Muslim	Toronto Unity Mosque	https://www.facebook.com/pages/Masjid-el-Tawhid-Toronto-Unity-Mosque/300967203268830 and http://jumacircle.com/
Sikh	Sikh LGBT Global Gurdwara	https://www.facebook.com/sikhlgbt

Further Resources:

- http://www.gaychurch.org/find_a_church/
- <http://www.torontocas.ca/out-and-proud>

Appendix 7. LGBTQ2S Activity Program Protocol - SAMPLES

Program name: LGBTQ2S Movie Night

Program start date: 2014

How long has the program been running? 1 Year

Program duration: ☐ One-time ☒ On-going (once a month)

Program openness: ☐ Specifically for LGBTQ2S residents
☐ LGBTQ2S program open to everyone
☒ Standard activity program that has been adapted to incorporate needs of LGBTQ2S residents

How was the need for this program identified/how did this program come about?

There was an LGBTQ2S movie screening special event that was very successful. In order to continue the momentum of this success a monthly movie night was established. In addition to this, the LGBTQ2S resource centre that was in the process of being established contained a variety of movies that were appropriate to this program.

This evening program was a continuation of the afternoon Saturday Social program with Michelle Du Berry which established a full day of LGBTQ2S programming.

Resident target group: ☐ LGBTQ2S population only
☒ General resident population

☐ Cognitively Intact ☐ Self-directed
☐ Cognitively impaired ☐ Special needs
☐ Room bound ☒ Other: All inclusive

SIPPS Focus:

☒ Social ☐ Intellectual ☒ Psychological ☐ Physical ☐ Spiritual

Goals of the Program:

1.	To create a safe, welcoming and social atmosphere for LGBTQ2S residents and their supporters.
2.	To educate and familiarize residents through the viewing of LGBTQ2S themed movies.
3.	To offer programming that fosters the development of sensitivity towards LGBTQ2S needs.

Describe the program in detail:

Residents are invited to attend the program, and are encouraged by recreation staff and volunteers to participate. Residents gather in the space where special events are held. The movie is viewed, followed by open dialogue and discussion about the content of the movie.

LGBTQ2S Activity Program Protocol - SAMPLES

2

How does the program meet the needs of the LGBTQ2S population or promote inclusiveness?

The LGBTQ2S Movie Night program meets the needs of the LGBTQ2S population by:

- Creating an inclusive, safe, respectful and welcoming environment for all residents.
- By offering movies with LGBTQ2S content or themes.

Steps to implementing program:

Select movies or documentaries relevant to LGBTQ2S programming. Invite and encourage residents to attend and participate in the movie screening. Provide an opportunity for discussion. Assist in escorting residents requiring support to and from the program.

Staffing requirements

Number of staff required to run the program: 1

Which staff (disciplines): Recreation

Is any special expertise required to run this program? ☒ Yes ☐ No

If yes, please describe:

To run this program a person must have developed sensitivity to LGBTQ2S perspectives and have the ability to openly discuss this subject matter.

Are any partnerships in existence to run this program? ☒ Yes ☐ No

If yes, please describe:

Volunteer support would be helpful.

Resource requirement:

Location/space required: Auditorium

Supplies/equipment required: Television, DVD player, movies and documentaries

Refreshments required: No

Other expenses (please provide cost and description):

Potential cost to movie rental or purchase.

How is the program marketed?

Verbally, the program calendar and in house posters.

What lessons were learned by the home when implementing this program?

Other information (optional):



RAINBOW THEATRE

**presents an afternoon at the
movies with short films.**

**Life, love, friendship and family in
the LGBT community.**



Date: March 9th, 2016

Location: Gathering Place

Time: 2:00 pm

Host: INSIDE OUT

Light refreshments will be served



LGBT Diversity Project

Activities Program Plan – LGBT Rapport Building: Which Shoe are You?

Staff Name:

Discipline:

Date:

Time/Place:

Start Date:

Review Date:

Activity/Program Type

Specialty ☐

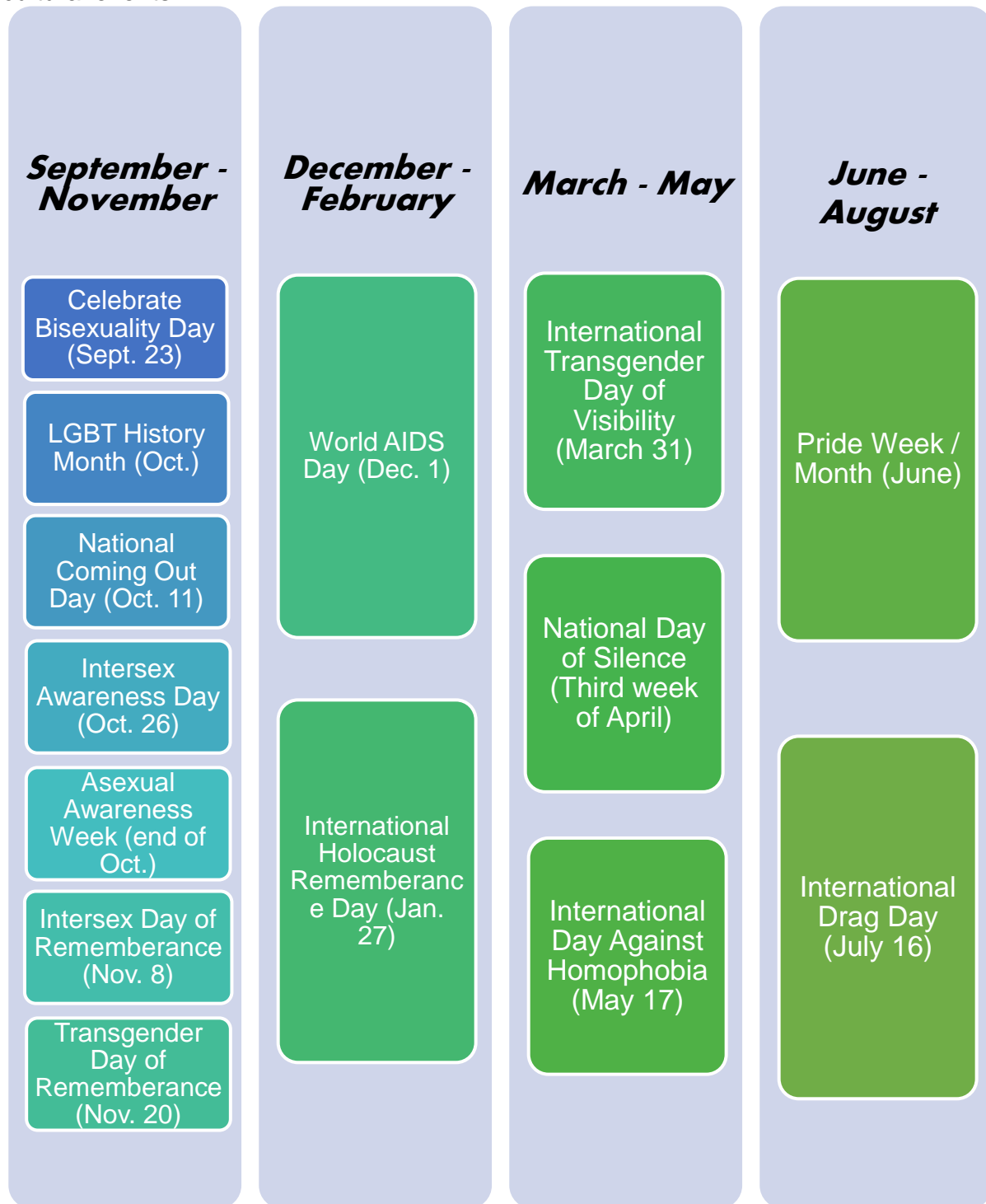
Integrative ☒

LGBT ACTIVITY/PROGRAM	What Kind of Shoe Are You?
NEEDS ASSESSMENT	The sensitive subject area of LGBT programming requires rapport building tools which help participants relax, warm up to, and get to know each other, before opening the floor for discussion groups or other programs which involve participants who do not know each other very well, or who will be discussing private matters.
GOAL	The goal of implementing rapport building strategies into programming is to help break the ice in a fun and casual way. Providing interesting tools for stimulating conversation and helping participants get to know each other, so that they can relax and feel safe to express themselves.
PROGRAM DESIGN	Before jumping into the main content of a program, Interesting questions for self-reflection are posed. Participants are asked to briefly reflect on the question and share their answers with each other. <u>Example: What Kind of Shoe are you?</u> What kind of shoe reveals who you are? Red pumps, flats or sneakers with a star? What, we wonder is it, that needs to be done,

PROGRAM DESIGN	<p>For it to be safe to reveal all you have become?</p> <p>Loving yourself is one thing it takes, To feel the power self-acceptance creates.</p> <p>Honour yourself, and together we will see, Personal liberation being set free.</p> <p>Participants are asked to select a kind of shoe which they feel is a good representation of themselves and to explain why, such as: “I am a running shoe because I like to move quickly, get things done and be comfortable while working”. OR “I am a red high heeled pump because I like to stand tall, make a bold statement and look fabulous”. OR “I am a Birkenstock sandal, because I am down to earth and comfort is important to me.</p>
INDICATORS FOR EVALUATION	When the room begins to fill with conversation, smiles, laughter, handshakes and the volume of speech increases, people are relaxed and speaking freely.
COMMUNICATION	Verbal communication, as the rapport building exercises are described. Written copies can be supplied to caregivers.
MATERIALS	Handouts, soft background music, name tags.
RESOURCES REQUIRED	Human resources.

Appendix 8. Important Events for LGBTQ2S Communities

Consider planning events to coincide with some of the following LGBTQ2S notable dates and events. The City of Toronto already recognizes several of the events below, beyond the Pride Parade. Also consider including an LGBTQ2S component in all multi-cultural events.



Appendix 9. LGBTQ2S Toronto Community Resources

Comprehensive

- http://www.uhn.ca/PatientsFamilies/Health_Information/Health_Topics/Documents/LGBTQ_Community_Services_and_Resources.pdf

End-of-Life Care

- <https://www.sfu.ca/content/dam/sfu/lgbteol/pdf/Toronto-Inventory-2.pdf>

Multicultural and General

- http://blackfamiliesandfriends.ca/?page_id=96
- <http://accessalliance.ca/programs-services/lgbtq-programs/lgbtq-resources/>
- <http://settlement.org/ontario/health/sexual-and-reproductive-health/sexual-orientation-and-gender-identity/where-can-i-find-support-groups-for-lesbian-gay-bisexual-trans-queer-or-questioning-lgbtq-newcomers/>
- <http://www.mcctoronto.com/resources/community-resources>
- <https://familyservicetoronto.org/our-services/areas-of-expertise/sexual-orientation/>

Older LGBTQ

- <http://www.the519.org/programs/category/older-lgbtq>
- <http://www.seniorpridenetwork.com/older-lgbt-resources-gta>

Trans Resources:

- <http://toronto.cmha.ca/files/2012/09/GBTQ-General-Referral-List-pdf.pdf>
- <http://www.the519.org/programs/category/trans-specific>
- http://blackfamiliesandfriends.ca/?page_id=108
- <http://www.the519.org/education-training/training-resources/trans-inclusion-matters/creating-authentic-spaces>

Appendix 10. LGBTQ2S Training Options

Name	Type	LGBT Tool Kit Topic Area	URL	Purpose / Description	Notes
Project Visibility – Person Centered Care for LGBT Older Adults	Online - Free	Basic Cultural Competence	http://projectvisibility.networkofcare4learning.org/CourseList2011.aspx	Project Visibility 24/7 is a 30 minute, highly interactive online course that teaches CNAs and staff members of nursing homes, assisted living facilities and home healthcare agencies about LGBT older adults in their care	
OCASI Positive Space Initiative	Online - Free	Positive Space / Safe Space	http://learnatwork.ca/ Positive Spaces Initiative (self-directed)	Competency with and creating a positive space for LGBTQ+ culturally diverse LGBTQ+ newcomers to Canada and people who work with the service users.	Account Required
GLMA: Health Professionals Advancing LGBT Equality	Online - Free	LGBT Health – Clinical Competence	http://www.glma.org/index.cfm?fuseaction=Page.viewPage&pageId=1025&grandparentID=534&parentID=940&nodeID=1	A series of webinars: <ul style="list-style-type: none"> • Understanding the Health Needs of LGBT People: An Introduction • Creating a Welcoming and Safe Environment for LGBT People and Families • Clinical Skills for the Care of Trans Individuals 	

Name	Type	LGBT Tool Kit Topic Area	URL	Purpose / Description	Notes
The National LGBT Health Education Centre (Fenway Health)	Online – Free, On demand and Live Webinars, Courses, Videos	LGBT Health – Clinical Competence	http://www.lgbthealtheducation.org/	The National LGBT Health Education Center provides educational programs, resources, and consultation to health care organizations with the goal of optimizing quality, cost-effective health care for lesbian, gay, bisexual, and transgender (LGBT) people	Account Required
The National LGBT Health Education Centre (Fenway Health)	Recommended Online Modules	Achieving Health Equity for LGBT People	http://www.lgbthealtheducation.org/lgbt-education/webinars/	This module provides an overview of LGBT health disparities, demographics, and terminology, as well as key strategies for bringing high quality care to LGBT people at health centers and other health care organizations. Strategies for collection of sexual orientation and gender identity data in clinical settings will be addressed. Participants will also learn about creating LGBT-inclusive environments of care and about the intersections of LGBT health, population health and team-based care.	
		Caring for		The module illustrates the	

Name	Type	LGBT Tool Kit Topic Area	URL	Purpose / Description	Notes
		LGBT Older Adults		unique medical, psychological, and social service needs of LGBT older adults, and gives recommendations for how clinicians can adequately address the needs of this group.	
		Improving Health Care for Transgender People		This module will guide learners through the basics of transgender health care in four parts. Part 1 begins by defining transgender-related terminology, demographics, and health disparities. Part 2 focuses on providing affirmative health care to transgender patients. Part 3 discusses gender affirmation treatment, including hormonal and surgical care, and part 4 describes ways to create a more inclusive and welcoming environment for all patients.	
CAMH	Online - free	Diversity and Health Equity 101	http://www.camh.ca/education/online_courses/webinars/mha101/diversity/Diversity_.htm		

Name	Type	LGBT Tool Kit Topic Area	URL	Purpose / Description	Notes
		Stigma 101	http://www.camhx.ca/education/online_courses_webinars/mha101/stigma/Stigma.htm		
Gender and Health Collaborative Curriculum Project (GHCCP)	Online free	LGBT Health – Clinical Competence Gender and Sexual Diversity	http://www.genderandhealth.ca/en/modules/sexandsexuality/module-map.jsp	6 Ontario medical schools collaborated to secure funding from the Ontario Women’s Health Council and embark on the GHCCP to create online learning materials for undergraduate medical students in the area of Gender and Health.	The intended audience is medical students so some of the medical classifications used ex. Homosexual, hermaphrodite, are not considered appropriate by LGBTQ2S people themselves.
		Terminology / Language	http://www.genderandhealth.ca/en/modules/sexandsexuality/gss-definitions-02.jsp?r=	Comprehensive online activities to understand and test your own knowledge of terminology around sexual and gender diversity	
		Older Gay Male – Case Study – Cultural	http://www.genderandhealth.ca/en/modules/sexandsexuality/gss-case-2-	Case study highlighting some unique concerns that an older gay male may have when they have declining health.	

Name	Type	LGBT Tool Kit Topic Area	URL	Purpose / Description	Notes
		Competence for Health Care	02.jsp?r=		
		Practicing without Bias: Asking Inclusive Questions during a routine clinical interview	http://www.genderandhealth.ca/en/modules/sexandsexuality/gss-interview-format-01.jsp?r=	Asking questions of all residents and clients that are inclusive of diverse sexual orientations and gender identities	
		Introduction to Lesbian and Bisexual Women's Health Issues	http://www.genderandhealth.ca/en/modules/sexandsexuality/gss-lesbian-issues-01.jsp?r=		
		Introduction to Gay Men and Bisexual Men's Health Issues	http://www.genderandhealth.ca/en/modules/sexandsexuality/gss-gay-men-issues-01.jsp?r=		
HIV & Older Adults	Factsheets	Clinical Competence	http://www.realizecanada.org/en/our-	Understand and respond confidently to the health and	

Name	Type	LGBT Tool Kit Topic Area	URL	Purpose / Description	Notes
		– HIV	work/hiv-and-aging/	social needs of clients aging with HIV Identify and connect people to relevant services Challenge myths and misconceptions about aging, HIV and sex	
LGBT Local Projects in a Box	Online – free	Educational Resources	http://www.amsa.org/advocacy/action-committees/gender-sexuality/lgbt-local-projects-in-a-box/	Various resources for various topics	
LGBT Mental Health Syllabus	Online – free	Clinical Competence – Mental Health	http://www.aglp.org/gap/	Comprehensive online interactive curriculum focused on psychotherapy, counselling and mental health needs. Created by the Association of Gay and Lesbian Psychiatrists.	
The 519	Custom curriculums	Various	http://www.the519.org/education-training	Various topics related to creating inclusive environments and authentic spaces	

Appendix 11. LGBTQ2S Technologies, Tools and Apps

Quist is a mobile app that displays events from this day in **LGBTQ history**.

<http://www.quistapp.com/>

- Historical events in the app paint a picture of how far the LGBTQ community has come over time — how we have been treated, how we have reacted, how our allies have supported us, and how others have worked vehemently to stop the progress. LGBTQ individuals' contributions to society and events in HIV/AIDS history are also included

Queerstory

<http://www.queerstory.ca/>

- Explore the sites and sounds of Toronto's vibrant and storied queer history with Queerstory, a free locative app. This walking tour app will lead you to more than 30 points of interest where significant events occurred.

JusticeTrans

<http://www.justicetrans.com/>

- JusticeTrans' vision is to be the most up-to-date application offering **legal information about transgender rights across Canada**. JusticeTrans will help foster an environment where transgender Canadians are increasingly aware of their legal rights in the face of an ever-changing legal environment.

Refuge Restrooms

<http://www.refugerestrooms.org/>

- REFUGE is a web application that seeks to provide **safe restroom access** for transgender, intersex, and gender nonconforming individuals.

Endnotes

- ⁱ <http://www.pridetoronto.com/>
- ⁱⁱ <http://www1.toronto.ca/wps/portal/contentonly?vnextoid=af71df79b2df6410VgnVCM10000071d60f89RCRD&nrkey=321A9DF9ACD8831E05257F3A005C61CA>
- ⁱⁱⁱ <http://www1.toronto.ca/City%20Of%20Toronto/Children's%20Services/Divisional%20Profile/Planning/Service%20Plan/pdf/CS-ServicePlan-2015-2019.pdf>
- ^{iv} <http://www.toronto.ca/legdocs/mmis/2015/ex/bgrd/backgroundfile-78824.pdf>
- ^v City of Toronto (2016). Human Rights and Anti-Harassment/Discrimination Policy
- ^{vi} <https://wx.toronto.ca/intra/hr/policies.nsf/9fff29b7237299b385256729004b844b/7269cc141836eb1385257bb800537b2f?OpenDocument>
- ^{vii} <http://www.torontopolice.on.ca/publications/files/reports/2015hatecrimereport.pdf>
- ^{viii} <https://wx.toronto.ca/intra/hr/policies.nsf/a8170e9c63677876852577d7004ff7f8/016cf11dc15e227a85257da40051e7e2?OpenDocument>
- ^{ix} <http://complicatingqueertheory.wordpress.com/queer-families/chosen-family/>
- ^x Betancourt, J. R., Green, A. R., Carrillo, J., & Ananeh-Firempong, O. (2003). Defining cultural competence: A practical framework for addressing racial/ethnic disparities in health and health care. *Public Health Reports*, 118(4), 293-302.
- ^{xi} <http://effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/?productid=1934&pageaction=displayproduct>
- ^{xii} http://www.ohrc.on.ca/sites/default/files/attachments/Policy_on_discrimination_and_harassment_because_of_sexual_orientation.pdf
- ^{xiii} <http://www.ohrc.on.ca/sites/default/files/Policy%20on%20preventing%20discrimination%20because%20of%20gender%20identity%20and%20gender%20expression.pdf>
- ^{xiv} <http://www.stop-homophobia.com/transphobia>
- ^{xv} <http://planettransgender.com/trans-people-ban-together-and-ask-can-you-stop-killing-us-for-one-week/>
- ^{xvi} Sage (2014). *Out & Visible: Experiences and Attitudes of Lesbian, Gay, Bisexual and Transgender Older Adults, Ages 45-75*.
- ^{xvii} <http://www.merriam-webster.com/dictionary/ally>
- ^{xviii} Adapted from: Miles, N. (2011). *STRAIGHT ALLIES: How they help create gay-friendly workplaces*. Stonewall Workplace Guides. London:UK.
- ^{xix} http://www.mountsinai.on.ca/about_us/human-rights/ally/ally-tools/what-can-an-ally-say
- ^{xx} Icon made by <http://www.flaticon.com/authors/freepik>
- ^{xxi} Icon made by <http://www.flaticon.com/authors/plainicon>
- ^{xxii} Icon made by <http://www.flaticon.com/authors/plainicon>
- ^{xxiii} Adapted from http://www.glaad.org/sites/default/files/allys-guide-to-terminology_1.pdf
- ^{xxiv} Adapted from http://www.glaad.org/sites/default/files/allys-guide-to-terminology_1.pdf, http://www.rainbowhealthontario.ca/wp-content/uploads/woocommerce_uploads/2016/01/Media-Reference-Guide-Trans-and-Gender-Diverse-People-3.pdf
- ^{xxv} <http://www.healthycanadians.gc.ca/publications/science-research-sciences-recherches/rio/index-eng.php> : Section 2.3.7
- ^{xxvi} Canada: [Measuring Health Equity \(We Ask Because We Care\)](#), US: [Do Ask, Do Tell](#), UK: [Happy to Ask, Happy to Tell](#)
- ^{xxvii} [Ontario Human Rights Commission \(2008\). Policy on Creed and the Accommodation of Religious Observances](#)
- ^{xxviii} https://en.wikipedia.org/wiki/Stonewall_riots
- ^{xxix} https://en.wikipedia.org/wiki/Operation_Soap
- ^{xxx} https://en.wikipedia.org/wiki/Edith_Windsor
- ^{xxxi} Adapted from: Fenway Guide to Lesbian, Gay, Bisexual and Transgender Health (2008). World Alzheimer Report 2014. HIV Statistics, Aids Committee of Toronto. SAGE USA. The National Health, Aging, and Sexuality Study: Caring and Aging with Pride over Time. WHO Policy Brief: Transgender People and HIV, 2015.