# Accessibility Action Plan

Summary Report



#### The Need for an Accessibility Action Plan:

The Queer & Trans Health Collective (QTHC) is an Edmonton-based grassroots organization run by and for the Two Spirit, Lesbian, Gay, Bisexual, Trans, and Queer (2SLGBTQ+) community. Traditionally the QTHC has served queer and trans guys but in recent years has expanded its programming, staff, and membership to reflect the wider community. As the QTHC continues to grow and serve a wider range of the 2SLGBTQ+ community, it is important to move forward in an intentional way that allows us to provide information and services are accessible to all those we currently serve and hope to serve in the future.

As an organization run by and for the 2SLGBTQ+ community, we know from our own experiences and the experiences which have been shared with us that our community often faces challenges accessing healthcare. Importantly, folks who experience multiple marginalizations (i.e. race, ability, immigration status) often experience barriers to accessing services and programming specifically tailored to the 2SLGBTQ+ community. We aimed to take an intersectional approach one that understands the way aspects of identity can compound barriers — in understanding the specific accessibility needs of our local community. While such experiences are generally documented in the academic literature , we wanted a snapshot of what was actually happening on the ground in Edmonton.

You can request the full Accessibility Action Plan report by contacting: <u>connect@ourhealthyeg.ca.</u>

### We developed the Accessibility Action Plan with the following goals:

- To explore 2SLGBTQ+ community members' experiences of healthcare access in the Edmonton area.
- To identify existing structural barriers in accessing healthcare for the larger 2SLGBTQ+ community in Edmonton, but also for community members whose intersecting identities may lead to experiencing additional barriers or challenges navigating the healthcare system, and
- To create a series of commitments to guide the current and future work of the QTHC, which can also serve as a guide for other organizations and service providers.

With gratitude and respect, and in the spirit of reconciliation and healing, we respectfully acknowledge that QTHC is located in amiskwacîwâskahikan on Treaty 6 territory which is traditional lands for many Indigenous Peoples whose histories, languages, and cultures continue to influence our vibrant communities. These lands are home to the Blackfoot, Assiniboine, Chipewyan, Beaver, Nakoda, Nehiyaw, Métis and other Indigenous Peoples. For thousands of years they flourished, traded and held ceremonies on these lands. Our recognition of these lands and Indigenous Nations is a part of our reconciliation and an expression of our gratitude to those whose territory we reside on or visit.

#### The QTHC held four community consultations from March to August 2019 in partnership with the following Edmonton-based communities and organizations:

- Indigenous and/or Two-Spirit, Black, and otherwise racialized folks (Edmonton 2 Spirit Society and Shades of Colour)
- Immigrants and newcomers to Canada (LGBTQ+ Newcomer Group)
- Trans and non-binary folks (QTHC)
- Deaf and hard-of-hearing folks (Edmonton Association of the Deaf)

The consultations took the form of focus groups guided by open-ended questions. Two QTHC representatives attended each consultation, with one leading the discussion and the other taking notes. Once the notes were coded and analyzed to identify major themes, the preliminary findings were shared back with the community in the form of a validation survey. Everyone who participated in a focus group or provided feedback through the validation survey received an honorarium for their time.

The following central themes were present in all of the community consultations and seem to be ongoing barriers faced by a wide range of community members.

- *Gatekeeping:* Those in positions of power, such as doctors or other healthcare professionals, may limit or refuse access to information, resources, and services, and often fail to take into account community members' expertise and knowledge of their own bodies and needs.
- *Exclusion:* Community members' lived experience and healthcare needs are not taken into consideration when developing or delivering information and services. As a result, there is a lack of information around 2SLGBTQ+ specific health concerns.
- **Community Literacy:** The level of understanding and capacity to understand health needs specific to 2SLGBTQ+ community members and the ability to make informed and accurate decisions. Many health-care providers remain unaware of the particular needs of community members.
- **Denial of Agency and Lived Experiences:** The experiences of community members with complex intersectional identities are often denied or not believed by healthcare professionals, blockingcommunity members from accessing services essential to their health and wellness.

Each of the four community groups we spoke with also identified specific barriers to healthcare access as a result of the way their identity intersects with being a member of the 2SLGBTQ+ community.

What We Found

#### Indigenous and/or Two Spirit, Black, QT POC and Racialized Folks:

- The need for healthcare providers and frontline staff to have training in anti-oppression and anti-racism, and an awareness of intersectionality
- Indigenous-specific resources and supports, especially for sexual and mental health, which are trauma-informed and rooted in Indigenous perspectives
- A desire for a more holistic, trauma-informed approach to healthcare, including the creation of safe(r) space to explore sexuality and gender and heal from past trauma, including a peer- support healing collective
- Frustration with emotional labour constantly required by experiences and questioning of BIPOC

#### **Trans and Non-Binary Folks:**

- Desire for gender-neutral terminology and frustration with the gendering of healthcare (e.g. "people with a cervix" rather than "women" or "female genitals")
- The need for trans-affirming, trauma informed care
- Increased provider education and trans-literacy
- The need for a centralized health resource for trans and non-binary folks in Alberta

#### Immigrant and Newcomers to Canada:

- Experiencing intersecting discrimination (e.g. transphobia and xenophobia) and experiencing discrimination both within the medical system and their own community (e.g. homophobia)
- Discrimination related to refuge status; emotional labour of constantly answering questions about immigration status
- Challenges navigating an unfamiliar healthcare system (e.g. lack of support completing paperwork) and finding providers fluent in their first language
- Need for more accessible resources for sexual health and mental health
- Challenges integrating into Edmonton's 2SLGBTQ+ community and general feelings of isolation and loneliness

#### **Deaf and Hard-of-Hearing Folks:**

- Frustration with the medical system's ability to accomodate folks with multiple disabilities
- Challenges finding a doctor who can be contacted in advance to book an interpreter
- Providers often do not understand the importance of Deaf and hard-ofhearing culture
- Awareness of improvement in care with knowledgeable and affirming providers and interest in a list of such healthcare providers

#### Increasing information access:

- Provide clear, sex-positive, body-positive, trauma-informed 2SLGBTQ+ sexual health education
- Support training of healthcare providers to deliver safe and affirming care to all members of the 2SLGBTQ+ community
- Support the promotion of 2SLGBTQ+ community events to create social environments, which can improve information access, healthcare outcomes, and overall well-being
- Provide explicit information on the accessibility of QTHC-hosted events, such as physical accessibility, presence of captioners, or any other accommodations that can be provided.

#### Improving inclusivity:

- Readily available healthcare information, resources, and services may be tailored toward a small subsection of the 2SLGBTQ+ population.
- Delivery of healthcare services and resources in a manner that acknowledges lived experiences.
- Recognizing inclusion as central to providing effective healthcare to community members.
- Using trans-affirming language and continuing to advocate for trans -affirming healthcare.
- Using chronic-pain-affirming language, services, and resources, as well as acknowledge and support community members experiencing chronic pain.
- Fostering an inclusive community as well as advocating for inclusion and affirmation across the Edmonton queer and trans community and beyond.

#### Being intentional with language:

- Continue respecting pronouns of all folks with the intent of creating a culture of respect and normalization around the diversity of pronouns.
- Use non-binary language when referring to individuals and their bodies, including genitals and other body parts that are commonly gendered in medical and everyday language.
- Recognizing, respecting, and advocating for diversity of language in our community, and acknowledging the range of languages that community members use, including sign language, braille, and languages other than English.

#### Affirming experiences:

- Using affirmative listening in health services and resources and to advocate for its use in the healthcare system broadly.
- Using affirmative language in the delivery of health services, resources, and information to support the patient's authority over their identity and experiences.

#### Supporting advocacy:

- Providing support and education for community members who are forced to self-advocate when accessing health information, resources, and services.
- Supporting ongoing community advocacy initiatives, such as PrEP Alberta, the Trans Wellness Initiative, 2SLGBTQ+ led research, and the QTHC's Health Empowerment through Active Leadership (HEAL) program.

The Accessibility Action Plan is a starting point for an ongoing process of improving accessibility, both in regards to our processes as an organization and on a larger systemic scale. As the QTHC evolves, our approach to improving accessibility will evolve, and we commit to continue to engage community members to guide this process. Please contact us with any suggestions and feedback for increasing accessibility for all members of the 2SLGBTQ+ community.

In keeping with the goal of increasing accessibility on a larger scale, we encourage organizations, healthcare providers, and individuals to engage with and draw from our findings. In addition to this summary, a more detailed report of these findings can be requested by contacting connect@ourhealthyeg.ca. We ask you respect the integrity of the data provided by our community members and acknowledge the contributions of the QTHC where appropriate.

## **Acknowledgments**

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