Wednesday, March 9, 2016

Full Day Schedule

Note: Simultaneous Translation will be provided at all plenaries and one session in each time slot.
Traduction simultanée sera offerte à toutes plénières et un session par créneau horaire.

7:00 am – 6:00 pm Registration
7:45 – 8:30 am Breakfast
8:00 am – 5:00 pm Exhibits
8:00 – 9:00 am Facilitated Caucus Meetings:
(1) Gender Journeys Group Facilitators
9:00 – 10:30 am Welcome & Opening Plenary (Simultaneous Translation provided)
Mot de bienvenue et séance plénière d’ouverture
Leadership in LGBTQ Health
Le leadership en santé LGBTQ (service de traduction simultanée au besoin)
10:30 – 11:00 am Refreshment Break & Exhibits
11:00 am – 12:30 pm Concurrent Sessions
12:30 – 1:30 pm Lunch & Exhibits
1:30 – 2:00 pm Poster Presentations (Authors present)
2:00 – 3:30 pm Concurrent Sessions
3:30 – 3:45 pm Refreshment Break & Exhibits
3:45 – 5:15 pm Concurrent Sessions
8:00 pm London Lesbian Film Festival & Reception
“SHE’S BEAUTIFUL WHEN SHE’S ANGRY”

OPENING PLENARY/SÉANCE PLÉNIÈRE D’OUVERTURE   9:00 AM – 10:30 AM

Leadership in LGBTQ Health

We are accustomed to thinking of Canada as a leader in LGBTQ human rights legislation and policy, but what about LGBTQ health? Are we falling behind our stateside neighbours and other countries? We are thrilled to have special guest, Hector Vargas, Executive Director of the renowned GLMA: Health Professionals Advancing LGBT Equality, a multidisciplinary membership organization of LGBTQ health professionals and their allies whose mission is to ensure equality in health care for LGBTQ individuals and health care professionals. GLMA, formerly known as the Gay & Lesbian Medical Association, has engaged its membership to in advocacy and education to promote equality for LGBTQ people for over two decades. Hector will speak to us about the history and work of the GLMA and other leaders.
in advancing LGBTQ health policy and practice. What strategies have been used and which issues have gained traction with decision makers? What progress has been made and what are the most difficult challenges? As we hear about the accomplishments of health care providers, activists and researchers in the United States, what lessons can we adopt or adapt as we work to keep LGBTQ health on the radar of our leaders here at home?

Keynote Speaker

Hector Vargas, JD, is Executive Director of GLMA: Health Professionals Advancing LGBT Equality, a multidisciplinary membership organization of LGBTQ health professionals and their allies whose mission is to ensure equality in health care for LGBTQ individuals and health care professionals. GLMA (formerly known as the Gay & Lesbian Medical Association) is a leading voice on LGBTQ health and employs the expertise of its health professional members in policy, advocacy and education to advance the health and well-being of the LGBTQ community. Vargas serves on the Health Disparities Subcommittee of the Advisory Committee to the Director of the US Centers for Disease Control and Prevention (CDC) and served for four years on President Obama’s Advisory Commission on Asian Americans and Pacific Islanders. He has more than 20 years of LGBTQ and civil rights advocacy experience, including with organizations such as Lambda Legal, the National LGBTQ Task Force and the American Bar Association’s Section of Individual Rights and Responsibilities.

Le leadership en santé LGBTQ

Nous avons l’habitude de voir le Canada comme un chef de file des lois et des politiques relatives aux droits de la personne LGBTQ, mais qu’en est-il de la santé LGBTQ au pays? Sommes-nous à la remorque de nos voisins américains, et derrière d’autres pays? Nous sommes heureux d’accueillir comme invité spécial Hector Vargas, directeur général de Health Professionals Advancing LGBT Equality (GLMA), un organisme américain multidisciplinaire regroupant des professionnels de la santé LGBTQ et leurs alliés et dont la mission consiste à assurer l’égalité dans les soins de santé pour les personnes et les professionnels de la santé LGBTQ. GLMA, connue autrefois sous le nom de Gay & Lesbian Medical Association, travaille avec ses membres depuis deux décennies à faire pression et à assurer une éducation en vue de favoriser l’égalité pour les personnes LGBTQ. M. Vargas nous entretiendra de l’histoire du travail de GLMA et des autres chefs de file qui contribuent à l’avancement des politiques et des pratiques en matière de santé LGBTQ. Quelles stratégies ont été utilisées et quels enjeux ont pu faire leur chemin jusqu’aux décideurs? Quels progrès ont été accomplis et quels sont les défis les plus ardus? Devant les réalisations des fournisseurs de soins de santé, des activistes et des chercheurs américains que cette plénière nous donnera l’occasion de découvrir, quels enseignements pouvons-nous tirer, adopter et adapter alors que nous travaillons à garder la santé LGBTQ sur l’écran radar de nos dirigeants ici, chez nous?

Conférencier principal

Hector Vargas, JD, est directeur général de Health Professionals Advancing LGBT Equality (GLMA), un organisme multidisciplinaire regroupant des professionnels de la santé LGBTQ et leurs alliés et dont la mission consiste à assurer l’égalité dans les soins de santé pour les personnes et les professionnels de la santé LGBTQ. GLMA, connue autrefois sous le nom de Gay & Lesbian Medical Association, est une voix forte en matière de santé LGBTQ et a recours à l’expertise de ses membres professionnels de la santé en matière de politique, de défense des droits et d’éducation pour l’avancement de la santé et du bien-être de la communauté LGBTQ. M. Vargas est membre du sous-comité sur les disparités en matière de santé (Health Disparities Subcommittee) du comité consultatif du directeur du Center for Disease Control and Prevention (CDC) américain et a fait partie pendant quatre ans de la commission consultative du président Obama sur les Asiatiques américains et sur les citoyens des îles du Pacifique. Il possède plus de 20 ans d’expérience en défense des droits des personnes LGBTQ et des droits civils, notamment auprès d’organismes tels que Lambda Legal, la National LGBTQ Task Force et la section du Barreau américain sur les responsabilités et droits individuels.
1. The Invisibility of LGBQ Women’s Identities in the Context of Rural Birthing Care

Presenters:
Jennifer Searle, BSc, Fourth Year Nursing Student, School of Nursing, Dalhousie University, Halifax, Nova Scotia; Shannon Pringle, BA, MA, Project Coordinator, School of Nursing, Dalhousie University, Sex Educator, Venus Envy, Halifax, Nova Scotia

(Authors:) Jennifer Searle, BSc; Shannon Pringle, BA, MA; Lisa Goldberg, RN PhD; Megan Aston, RN PhD. School of Nursing, Faculty of Health Professions, Dalhousie University,

The aim of the presentation is to offer new insights from current research with women who self-identify as lesbian, gay, bisexual, and/or queer during their birth experiences across rural Nova Scotia. Findings will be shared during the presentation. Strategies will be offered to counter current practices where, despite the caring nature of many health care providers, the sociocultural privileging of heterosexuality remains systemically pervasive within institutionalized care grounded in the historical narrative of perinatal health. This analysis has further benefit for advancing health care practice, policy and education with LGBQ women in birthing contexts (and beyond), particularly when understood in the context of the broader body of evidence in the areas of LGBTQ health, women’s health, and perinatal nursing.

Learning Objectives:
1. Recognize the harms to LGBQ women associated with systemic heteronormativity socially constructed by historical narratives within perinatal health.
2. Understand how health care providers’ use of power to inhabit birthing spaces influences LGBQ women’s decisions to disclose personal circumstances that inform their birth.
3. Become aware how the findings offer insights to inform educational curricula in nursing and other health care disciplines especially when understood within the broader body of evidence in LGBTQ health, perinatal nursing and women’s health.

2. Trans People’s Experiences with Assisted Reproduction Services in Ontario: A Qualitative Study

Presenters:
Sarah James-Abra, MSW, RSW, Social Worker, Child, Youth, and Family Program, Lakeridge Health, Oshawa, Ontario; Lori Ross, PhD, Associate Professor, Division of Social and Behavioural Health Sciences, Dalla Lana School of Public Health, University of Toronto and Affiliate Scientist, Centre for Addiction and Mental Health, Toronto, Ontario

This session presents the findings of a qualitative research study that explored the experiences of trans people who sought or accessed assisted reproduction (AR) services in Ontario, Canada, between 2007 and 2010. The study involved a secondary qualitative analysis of data from nine trans-identified people and their partners (total n=11) collected as part of a community-based study of access to AR services for sexual and gender minority people between 2010 and 2012 (the “Creating Our Families” study). The data highlight barriers to accessing AR services for trans people, including problems with clinical documentation, providers’ cisnormative and heteronormative assumptions and refusal of services for trans clients. Participant recommendations for improving AR service provision to better meet the needs of this population will be presented. These recommendations address the following areas: (i) AR service provider education and training; (ii) service provider and clinic practices and (iii) clinic environment. This study provides recommendations for ways in which AR services can be improved to better meet the needs of this population, from the perspectives of service users themselves.

Learning Objectives:
1. Describe the main ways in which trans people use assisted reproduction (AR) services.
2. Explain the main barriers trans people may encounter when attempting to access AR services.
3. Implement changes to AR services that will better enable trans people to meet their AR needs.
3. Opening the Closet Door on Reproductive Cancer Care for Lesbian and Bisexual Women

Presenter:
Laura Legere, MSc Nursing, Nursing Research Associate, Registered Nurses’ Association of Ontario, Member, Rainbow Nursing Interest Group, Toronto, Ontario

The experience of undergoing clinical cancer care can undoubtedly be a tumultuous period in an individual’s life and it becomes critical that health care providers (HCPs) act as navigators for their patients during a cancer journey. However, barriers can arise that create challenges for individuals to receive equitable clinical cancer care. These barriers to equitable clinical cancer care can be perpetuated by interactions with HCPs, can be distressing, and can also contribute to negative health effects. For sexual minority women (SMW) experiencing cancer, barriers to clinical care perpetuated by negative health care interactions are well documented within the literature (Boehmer & Case, 2004, 2006; Sinding, Barnoff & Grassau, 2004). In an attempt to expand on the limited research in the area of sexual minority women’s reproductive cancer care, the aim of this research study undertaken as a Nursing Master’s thesis was to illuminate aspects of interactions between sexual minority women with reproductive cancers and HCPs that may perpetuate or challenge barriers to receiving equitable clinical care.

Learning Objectives:
1. Gain an increased understanding of the reproductive cancer experience as it relates to women who self-identify as lesbian or bisexual.
2. Gain an increased awareness of how health care interactions and environmental elements related to clinical cancer care may perpetuate or challenge barriers to equitable care for sexual minority women.
3. Ask questions and discuss some suggested recommendations for health care providers regarding improving reproductive cancer care for sexual minority women.

W2: AM
Format: Workshop

Queering the Medical Curriculum: How to Design, Develop, Deliver and Assess Learning Outcomes Relevant to LGBT Health for Health Care Professionals

Presenters:
Jacques Abourbih, Retired Urology Surgeon, University of Toronto for 27 years and then professor of surgery and recipient of Professor Honorarius at the Northern Ontario School of Medicine.
Karly Dudar, MA, Public Health, Queen’s University, OPHA and Clinical Sciences Department, Northern Ontario School of Medicine, Co-developing LGBTQ2-S Curriculum for Undergraduate Medical Learners, Kingston, Ontario;
Golnaz Ghaderi, MEd, Developmental Psychology, Master’s Student, Applied Psychology, Laurentian University, Member, Canadian Psychological Association, Sudbury, Ontario;
Joël Dickinson, PhD, Professor, Laurentian and Co-chair, Sexuality and Gender Diversity Committee, Laurentian University, Sudbury, Ontario

The Northern Ontario School of Medicine (NOSM) in keeping with “its social accountability mandate to contribute to improving the health of the people and communities of Northern Ontario” has incorporated relevant health issues of the LGBT community into the undergraduate medical curriculum. This presentation reviews the development of LGBT content in the undergraduate medical education program offered to medical students. We describe the challenges encountered in designing a curriculum that was relevant and practical for students entering general practice. This workshop discusses the lessons learned by tracing the historical development of the clinical curriculum and the development of assessment tools. We will also discuss the result of a questionnaire administered to faculty and students about their learning experience, as well as briefly present the aggregate performance of the students on two assessment tools based on content knowledge and simulated clinical encounter. Participation in this workshop will provide medical educators, social sciences educators, universities and public school educators with a lived model to introduce in their curriculum to health issues faced by the LGBT community.
Learning Objectives:
1. Providing audience members with transferrable knowledge and skills in introducing LGBT curriculum or training within their agency or organization.
2. Explore different modalities of interactive curriculum delivery (problem based learning (PBL), small group case discussion, Structured Clinical Skills (SCS).
3. Providing participants with guidance in evaluating the outcomes of the delivery of their curriculum offered within their agency or organization.

W3: AM
Format: Workshop
Effective LGBTQ Tobacco Interventions: You Can Make It Happen

Presenter:
Monica Bennett, Regional Coordinator, Smokers’ Helpline Canadian Cancer Society’s Smokers’ Helpline, Hamilton, Ontario

Tobacco use is the leading cause of preventable death in the developed world and LGBTQ communities have a higher prevalence of smoking rates than the general population. In part, this is due to the tobacco industry marketing their products to the LGBTQ community. LGBTQ individuals are more likely to have risk factors for smoking; this includes the daily stress related to prejudice (sometimes from the medical community) and the stigma that they may encounter. Also, the social determinants of health disproportionately affect LGBTQ communities. As a result, LGBTQ folks suffer more smoking related death and illness than their straight/cis peers. The majority of tobacco users want to quit and those who work with LGBTQ communities are in a uniquely powerful position to help them make a quit attempt. This session will provide participants with the knowledge and tools to explore and understand tobacco use and then to appropriately and effectively intervene with their clients and patients. Participants will learn about evidence-based interventions that will build on their existing capacity to assist their clients and practice employing techniques that have been proven to make a difference.

Learning Objectives:
1. Tobacco and its related health issues and the importance of implementing smoking cessation interventions with LGBTQ individuals and communities.
2. Reasons behind the higher prevalence of tobacco use in LGBT communities compared to the general population.
3. Practical tools and techniques for addressing nicotine dependence, nicotine withdrawal and tobacco cessation, and information about resources and services available both to practitioners and smokers.

W4: AM
Format: Workshop
Self-Care as Warfare: The Art of Healthy Queer Relationships

Presenter:
anya gwynne, Prevention Education / Rainbow Youth Facilitator, Peterborough AIDS Resource Network, Peterborough, Ontario
Bailey Smith, The QueeRAdicals, Rainbow Youth Program, Peterborough AIDS Resource Network, Peterborough, Ontario;
Damien Murtha, The QueeRAdicals, Rainbow Youth Program, Peterborough AIDS Resource Network, Peterborough, Ontario

This interactive workshop explores ideas surrounding self-advocacy, communication and consent. This workshop is geared towards those working with LGBTQ* youth and will focus on how to encourage conversations that youth want but may struggle to have due to lack of validation and visibility. With a strong focus on consent and sex positivity, we will use self-care as a framework to discuss the unique factors that affect LGBTQ* relationships and what we need to feel empowered to make choices for ourselves and with our partners. Starting with an exploration of holistic health and happiness, we will create wellness wheels to identify areas of personal strength and our challenges to self-care. We will then practice what it might look and feel like to put that care into action and advocate for our needs through a consent lens. Finally, we will identify the importance of communication and potential barriers that can impact our ability to have the kind of intimacy we want and deserve.

Learning Objectives:
1. Participants will gain comfort in using consent and self-advocacy as a framework for conversations about health and wellness.
2. Participants will develop new tools and strategies to use when working with LGBTQ* youth populations.
3. Participants will engage in their own self-care activities, in a sex positive, inclusive environment to develop and exchange knowledge.
W5: AM
Format: Panel

Preventing, Reducing and Ending LGBTQ2S Youth Homelessness Across Canada

Panelists:
Lesley McMillan, Program Officer, Eva’s Initiatives, Toronto, Ontario;
Dr. Alex Abramovich, Postdoctoral Fellow, Centre for Addiction and Mental Health, Toronto, Ontario;
Kate Miller, Director, YMCA Sprott House, Toronto, Ontario

It is estimated that up to 40% of youth experiencing homelessness identify as lesbian, gay, bisexual, transgender, queer, questioning and two-spirit (LGBTQ2S). We have known about the issue of LGBTQ2S youth homelessness in Canada for over 20 years, but we have only recently started to have serious conversations about this issue nationally. Over the past two years, a number of dynamic systemic interventions have been developed to support organizations in meeting the needs of LGBTQ2S youth experiencing homelessness. This session will provide background information on the issue of LGBTQ2S youth homelessness in Canada and the unique needs of this population of young people. It will also explore various models for a strategy to prevent, reduce, and end LGBTQ2S youth homelessness in Canada. Dr. Alex Abramovich will provide an overview of LGBTQ2S youth homelessness in Canada and share the findings of his research. He will also outline his work with the Alberta Government. Lesley McMillan will discuss the work of the National Learning Community on Youth Homelessness to create their LGBTQ2S Toolkit that has been designed to offer staff training and tools to organizations in order to make it better now for LGBTQ2S youth. Jeanette Blair will share the work and experiences of the YMCA’s Sprott House, the first LGBTQ2S youth transitional housing program in Canada. Jeanette will discuss the LGBTQ2S youth housing model put into practice at Sprott House, as well as LGBTQ2S affirming practice in the context of the YMCA’s youth emergency shelter.

Learning Objectives:
1. Understand how homophobia and transphobia lead to youth homelessness, how homophobia and transphobia occur and are sustained in the shelter system and how institutional norms and culture, and broader policy issues serve to create oppressive contexts for LGBTQ2S youth.
2. Address specific barriers to support (housing and health care) and gaps in services.
3. Examine local interventions that are supporting LGBTQ2S youth experiencing homelessness.

W6: AM
Format: Panel

Creating Primary Health Service Capacity in CHCs for Trans* Populations: The Ottawa Story

Panelists:
Tamara Chipperfield, Director, Mental Health and Addictions, Centretown Community Health Centre, Ottawa, Ontario;
Jennifer Purkiss, RN, Trans* Health Nurse Navigator, Centretown Community Health Centre, Ottawa, Ontario;
Bonnie Stephanson MSW, RSW, Mental Health Counsellor, Somerset West Community Health Centre, Ottawa, Ontario;
Beck Hood, Trainer & Public Educator, Family Services Ottawa, Ottawa, Ontario

Given the marginalization of individuals with trans* identities, and CHCs’ longstanding history of serving LGBT communities and equity advocacy, in 2011 four Ottawa CHCs identified trans* health as a priority on their shared strategic plan. Since then, Centretown CHC has been leading an inter-CHC initiative to develop primary health services that meet the needs of local members of the trans* community. This session will provide an overview of the progression of the trans* health initiative, and explain key aspects in greater detail, including:
• Creating access to bilingual counselling services for hormone assessment
• Stabilizing access to bilingual services for hormone maintenance and initiation
• Capacity building for trans* positive primary health care services, including hormone treatment prescribed by CHC primary care providers
• Community engagement
• System navigation for clients and support for clinicians via the Trans* Health Nurse Navigator role
• Creating a network of local trans* health experts across multiple agencies and professions

This session will also describe the unforeseen challenges, opportunities and lessons learned.
Learning Objectives:
1. Learn about the progression of the Ottawa inter-CHC trans* health initiative.
2. Gain an understanding of key success factors that enabled and built momentum during the initiative.
3. Understand the challenges and lessons learned throughout the initiative.

W7: AM
Format: Panel
The Impact of Migration and Resettlement on the Mental Health of LGBT Refugees in Canada

Moderator:
Phyllis Waugh, Knowledge Mobilization Coordinator, Envisioning Global LGBT Human Rights, Toronto, Ontario

Panelists:
Nick Mulé, Associate Professor, School of Social Work, York University, Toronto, Ontario;
Kathleen Gamble, PhD Candidate, Gender, Feminist and Women's Studies Program, York University, Toronto, Ontario;
Polina Rakina, LGBT Refugee Programs Coordinator, The 519, Toronto, Ontario

This panel will include a presentation and discussion of the findings of a research study that examined the experiences of LGBT refugees and asylum seekers and their service providers in Toronto. The team’s work has focused on a number of issues including: a) emerging trends and root causes of forced migration for LGBT people; 2) experiences and obstacles for LGBT asylum seekers in navigating the refugee claims process and accessing services; 3) how and to what extent their needs are being met by agencies and services; and 4) how the implementation of Bill C-31 has impacted LGBT asylum seekers. The study was conducted by the Canada Research Team (CRT) is one of the five research teams part of the Envisioning Global LGBT Human Rights project.

Learning Objectives:
1. Gain a better understanding of the specific mental health challenges experienced by LGBT refugee claimants in Canada through personal testimony.
2. Learn about the specific challenges service providers experience in providing mental health services to refugee claimants.
3. Examine the structural implications of the current refugee system in Canada and its implications on LGBT refugees and settlement workers.

W8: AM
Forme: atelier
(Simultaneous Interpretation provided)
La violence conjugale ou l’agression sexuelle chez les lesbiennes: le silence de notre communauté

Présentatrices :
Suzie Bordeleau, Coordonnatrice par interim, Centre de solidarité lesbienne, Montréal, Québec;
Marjolaine Landry, Intervenante, Centre de solidarité lesbienne, Montréal, Québec

La violence conjugale et les agressions sexuelles chez les lesbiennes ne sont pas des phénomènes nouveaux. Pourtant, après 15 ans de travail comme intervenante, ça demeure un sujet tabou dans notre communauté. Pourquoi? Certaines disent ne pas vouloir en parler car les masculinistes reprennent nos dires pour démontrer que les femmes aussi sont violentes. D’autres affirment que le nombre de victimes n’est pas assez nombreux pour en faire mention. Mais à qui profite ce silence? Comment protéger les victimes et responsabiliser les agresseures?

Objectifs d’apprentissage :
1. Comprendre ce silence et l’impact qu’il a sur les victimes
2. Susciter l’intérêt de vouloir dénoncer cette violence.
3. Apprendre comment il est possible de responsabiliser les agresseures.
Spousal Abuse and Sexual Assault Among Lesbians: Silence in the Community

Presenters:
Suzie Bordeleau, Acting Coordinator, Centre de solidarité lesbienne, Montreal, Quebec;
Marjolaine Landry, Case Worker, Centre de solidarité lesbienne, Montreal, Quebec.

Spousal abuse and sexual assault among lesbians is not something new. However, after 15 years as a case worker, the topic is still taboo in our community. Why? Some people say they don’t want to talk about it, because masculinists twist women’s words to show that women are abusive as well. Others say that there are not enough victims to bother talking about it. Who benefits from the silence? How can we protect victims and hold abusers accountable?

Learning objectives:
1. Understand the silence and its repercussions on victims.
2. Arouse interest in speaking out against the abuse.
3. Learn how we can hold abusers accountable.

The TRANSforming JUSTICE, Trans* Legal Needs Assessment Ontario project, will help to ensure that the legal needs of trans people in Ontario are being met and to determine the barriers that trans people face in accessing justice.

An anonymous survey for Ontario residents, age 16 and over, who identify as trans* is available now at: www.transformingjustice.ca.

Focus groups and workshops that will be held across Ontario in the coming months:
- trans community focus groups & trans legal rights and legal services workshops open to trans community.
- legal service provider focus groups & trans 101 and trans legal basics for the legal service provider community.

For more information about all of the project’s activities, eligibility for participation, confidentiality, and sign-up sheets for focus groups, including one-on-one interviews for trans people living with or impacted by HIV, visit the project website: www.halco.org/our-services/trans-legal-needs-assessment-ontario.

If you are interested in participating, or if you would like more information, please contact Nicole Nussbaum, project lead: email transneedsassessment@lao.on.ca

The core survey will take approximately 30-45 minutes to complete for most participants. An optional section which asks more in-depth questions about experiences in the legal/justice system that will take approximately 20 minutes to complete. Focus groups and interviews will take up to 90 minutes.

“Trans*” is as an umbrella term to refer to a diverse array of experiences and identities, including two-spirit, non-binary, agender, gender queer, cross dressers, transgender, transsexual, as well as those who identify as men or women but have a history that involves a gender transition. While the project is focused on the needs of the broader trans* community, a specific component of the project is dedicated to trans* people living with HIV.
A. Mind the Gap: Social Determinants of Transgender Health Disparities

**Presenter:**
Maaya Kuri Hitomi, Master’s Student, Applied Social Psychology, University of Saskatchewan, Saskatoon, Saskatchewan

Past research has demonstrated a relationship between experiences of transphobia and health disparities in the transgender communities. These findings suggest an explanation for the health disparities found generally throughout the transgender population; yet, no research has attempted catalogue, organize, or compare the size of these disparities across samples. This analysis begins to fill this gap, by systematically reviewing available English literature and by building an estimate for the extent of these disparities. Topics of interest include HIV/AIDS prevalence, sexual risk taking, suicide, depression, anxiety, and smoking and drug use. Special attention was given to research which included a cisgender comparison group. Overall, evidence was found supporting disturbingly large health disparities between transgender and cisgender populations.

**Learning Objectives:**
1. Identify and quantify the consequences of prejudice and discrimination on the health and well-being of transgender people.
2. Highlight gaps in the literature and understand what these gaps mean for academics, health care providers and transgender people.
3. Explore community centred ways of addressing health concerns and improving transgender health care services.

B. Maintaining a White Canada: How Representations of Same-Sex Marriage in Queer Media Contribute to the (re)Production of Neo-colonialism

**Presenter:**
David Kinitz, MSW, York University, Toronto, Ontario

Whiteness is invasive in many areas of daily life, particularly queer-targeted media, where stereotypes and the construction of ‘normal’ are consistently perpetuated. Discussions regarding the production of whiteness, and how colonialist practices are present within aspects of daily life, are necessary. As a result, this research project will explore the use of same-sex marriage (Bill C-38), as discussed in Toronto-based, queer-targeted media articles, and how it is used to (re)produce whiteness through the subjugation of others. Critical race theory, whiteness studies and queer theory are employed through engaging in literature that challenges how knowledge and power are produced and accepted as truth. Using a Foucauldian discourse Analysis, this research explores the use of text to perpetuate ideas of an ideal citizen - one who is value laden, strives to become a full citizen through conforming to the ‘norm’ and often white. Queer media articles discussing same-sex marriage refer very little to issues outside of marriage equality. A linear representation of who is and who is not an ideal queer subject is presented. It is critical for people to understand and acknowledge the prevalence of whiteness within queer communities. Moreover, dominance needs to be challenged. What is presented to us as ‘norms’ is not representative of queer communities and should not be accepted. This research is a beginning step in a complex process of challenging whiteness and working towards healthier queer communities.

**Learning Objectives:**
1. Begin to notice or start discussions regarding the prevalence of whiteness in queer culture.
2. Engage in critical thinking about how they contribute to dominating relationships (not necessarily just about race but through any daily relations).
3. Reject and challenge what is presented in dominant culture as a ‘norm’.
C. Work Conditions and Health of LGBTQ Employees in Taiwan

**Presenter:**
(Jaden) Hsin-Yun Peng, Case Manager, Taipei City Employment Services Office, New Taipei City, Taiwan

This study observes the working experiences of Taiwan’s LGBTQ employees in facing career planning and explores the pressure and consequences in dealing with the gender stereotypes of entering the workplaces. In my work, ten LGBTQ people were interviewed from June 2014 to February 2015. Each interview was 1.5 to 3 hours long with follow-up interviews added if necessary. Research methods include semi-structured interviews, with self-identified LGBTQ people who have struggled to make their career choice, or who are unemployed. Through analyzing the subtle feelings and strategies in career choices, this study hopes to bring out LGBTQ subjectivities, and to critically examine the consequences of traditional gender stereotypes in the workplace within a heterosexual society. The study findings will be shared during the poster presentation. In Taiwan, the employment services do not focus on improving working conditions or the mental or physical health of employees in workplace. The service providers are also somewhat lacking in social justice and counseling skills for diverse people. LGBTQ workers have adopted the strategy of following the principles of office culture. Otherwise, they choose to leave if they do not adapt well. To improve the health of LGBTQ employees requires not only eliminating discrimination, but also increasing acceptance of LGBTQ employees from employers. Career counseling and LGBTQ friendly employment services help both employers and LGBTQ employees to face the struggles in workplace and review how past experiences influenced career decisions. The goal is to raise awareness by understanding specific individuals and minorities, which will make LGBTQ employees healthier in the working environment and decrease their anxiety from life’s uncertainties.

**Learning Objectives:**
1. Understanding of LGBTQ experiences in Taiwan.
2. Acknowledge workplace homophobia and transphobia.
3. Examine health disparities within LGBTQ workers in Taiwan.

D. Inequalities in Social Determinants of Health in the Ontario Trans Population

**Presenter:**
Rachel Giblon, MSc Candidate, Department of Epidemiology & Biostatistics, Shulich School of Medicine & Dentistry, Western University, London, Ontario

It is now widely recognized that the major factors shaping the health of Canadians are not, as formerly believed, lifestyle choices or medical treatments, but are instead their everyday surroundings and living conditions: the social determinants of health. I aim to explore whether and to what extent inequalities in social determinants exist between trans Ontarians and the general Ontario population. In 2009-2010 the Trans PULSE team collected survey data on social determinants, demographics, health and health care from 433 trans individuals in Ontario. Comparison data will come from the 2009-2010 Canadian Community Health Survey (CCHS), which collects cross-sectional information on “health status, health care utilization and health determinants for the Canadian population”. While previous studies have lacked comparable baseline data, a series of the Trans PULSE questions. I will provide preliminary results, conclusions and potential implications for this study. Investigation into this area will add to a growing collection of research on the marginalization of gender minorities in Ontario, and answers questions on how inequalities in social determinants for this group may lead to global health disparities. This knowledge can lay the foundation for policies and programs aimed at community development, improved health care access, and education.

**Learning Objectives:**
1. Bring attention to the importance of social determinants of health in shaping health outcomes for trans individuals.
2. Assess the existence and magnitude of inequalities in social determinants of health.
3. Explore the health and social justice implications of inequalities in social determinants of health for the transgender population.
E. Single Lesbian Mothers and Support: Implications for Service and Information Providers

Presenter:

Lara Descartes, PhD, Faculty Member, Family Studies, Brescia University College, London, Ontario

Results from a qualitative study are used to address the experiences of single lesbian mothers. Areas examined include the women’s pathways to lone parenting, their interactions with others, and the support sources they had access to, including family, friends and neighbours, the LGBTQ community, support groups, daycares and schools, health care providers, and online and print resources. Room for improvement in recognizing the women’s existence and supporting them was found particularly in mental health care venues, support groups, and online and print parenting resources. Recommendations are for those providing services and information to parents, and the LGBTQ community in general, to be more aware of the existence and needs of single lesbian mothers.

Learning Objectives:
1. Identify the pathways by which single lesbian mother families might form.
2. Create awareness of some of the challenges specific to being a single lesbian mother.
3. Become aware of some of the ways in which service providers, community agencies, and others may better serve single lesbian mothers.

F. Be Our Ally - Photographic Images

Presenter:

Anna Gaby-Trotz, MFA, Printmaker & Photographer, Associate Artist, Sheatre, Kemble, Ontario

Profound social, educational and health issues have been well documented among LGBTQ youth. The overall goal of Be Our Ally is to improve the lives and health of LGBTQ youth by energizing others to be allies. Be Our Ally draws on the unique perspectives of LGBTQ youth and their allies who live in rural and small-urban settings to address issues of homophobia and homophobic violence to foster understanding, diversity and respect for difference. These posters are a composite of photographs of youth taken at GSA Conferences and schools during the creation and presentation of the Be Our Ally Forum Theatre show and photographic exhibitions. Photographer Anna Gaby-Trotz asked the subjects why they want to participate and be an ally. As they responded, they revealed themselves. The resulting photographs capture their essence. By creating a show that sheds light, literally and metaphorically, on the strength, resiliency, and struggle of rural LGBTQ youth, we can begin to create positive social change and give voice and image to those often not seen in our society.

Learning Objectives:
1. Viewers respond to and feel the humanity of the individuals in these visceral images, promoting inclusivity and health benefits.
2. The exhibit showcases an educational method using visual art to make a statement and reach learning objectives set out by the Ontario Ministry of Education.
3. Viewers become interested in learning more about the reality of rural LGBTQ youth.

G. Gender Journeys CMHA HKPR: From Project to Program

The successes and challenges of creating and sustaining services to support trans and gender diverse people, their allies and communities in rural Ontario

Presenters (Authors):

Jan Tkachuk, M.A., RP, Program Coordinator Gender Journeys CMHA HKPR, Peterborough, Ontario; Stacey Vetzal, Education and Support Worker, Gender Journeys CMHA HKPR, Durham Region, Ontario; Stacey Love-Jolicoeur, Education and Support Worker, Gender Journeys CMHA HKPR, Belleville, Ontario; Drew Whatman, Education and Support Worker, Gender Journeys CMHA HKPR, Peterborough, Ontario; Lori Thompson, Education and Support Worker, Gender Journeys CMHA HKPR, Peterborough, Ontario; Sharon Hagan-Vetzal, Education and Support Worker, Gender Journeys CMHA HKPR, Durham Region, Ontario

With a three year grant from the Trillium Foundation, CMHA HKPR began to develop services across the Four Counties to educate and support people identifying as trans or gender diverse, their loved ones, allies, agencies and communities. Beginning with a Core Gender Journeys program (adapted from Sherbourne Health Centre’s template in order to more effectively support
people in rural communities), the project has grown to provide Parent and Guardian Support groups, Youth Gender Journeys groups, Beyond Gender Journeys peer support groups and three ongoing drop-ins situated in Lindsay, Peterborough and Cobourg. We have also developed and delivered various training modules for organizations, institutions and communities. We advocate for inclusive and thorough Primary Health Care for trans and gender diverse people and strive to provide access to those requiring support where it has been previously been unavailable to them. We utilize resources within CMHA HKPR to support clients (such as the OTN for access to specialized health care and consultations). Through connection with Gender Journeys, clients can more easily access other programs that address needs of housing, crisis support, employment and mental health supports, if required. We also act as a resource for other people and agencies throughout Canada but primarily in Ontario and rural areas to share what we have learned through the development of this project. Our team collaborates with other not for profit agencies throughout the Four Counties, as well as hospitals, primary health care professionals, school boards, law enforcement/justice systems, media and communities, as a whole, to help trans and diverse people traverse the stigma they inevitably face and to assist them in gaining the access to services and support they require. Our challenges are many, the first being fiscal. We are in the final year of a 3 year funded project and acquiring sustainable funding to keep Gender Journeys services running and keeping up with the increasing needs of our service as it gains momentum is of paramount importance. Other challenges include finding ways to bring our services to people and people to the services across the large expanse of the 4 Counties.

**Learning Objectives:**

1. To promote awareness of Gender Journeys CMHA HKPR services in order to maximize outreach to the trans and gender diverse communities.
2. To network and to exchange knowledge and tools for the betterment of future programming with likeminded organizations and allies.
3. To share our knowledge of funding resources and discover knowledge of new funding options to ensure the continued existence and growth of Gender Journeys CMHA HKPR.
1. The Role of Technology in Quality of Life and End-of-Life Planning Among LGBT Adults and Their Service Providers

Presenter:
Steven Mock, Associate Professor, University of Waterloo, Waterloo, Ontario

Technology is often intended to enhance performance of daily tasks and contribute to quality of life. However, technological advances can sometimes make life more difficult and frustrating, stereotypically, especially for older adults. Although this stereotype does not hold up to scrutiny, to get the most out of technology it is important to consider individual, social, and contextual factors that enhance or detract from the usefulness of technology for older adults (Rogers & Fisk, 2010; Wahl, Iwarsson, & Oswald, 2012). One often overlooked context in the lives of older adults is LGBT status. LGBT adults’ experiences with stigmatization and social isolation have been examined (Meyer, 2003), but LGBT adults share similar developmental needs with all adults and may use technology to help overcome isolation and stigmatization. Drawing on data collected with focus groups in five Canadian cities we examined the breadth of technology use, the ways technology contributed to social integration and enhanced later-life planning, and also explored the ways technology sometimes falls short for LGBT adults. Results will be shared during the presentation.

Learning Objectives:
1. Learn about the diverse meanings and uses of technology among older LGBT adults.
2. Learn what technology means to service providers who work with older LGBT adults.
3. Explore the challenges and opportunities related to technology and later life planning.

2. What’s Up With Older LGBTQ Folks in Niagara?

Presenters:
Sarah Burtch, Women’s Community Development Coordinator, Positive Living Niagara, St. Catharines, Ontario;
Colleen McTigue, Activist & Facilitator, Transgender Niagara, St. Catharines, Ontario

The results of the environmental scan being conducted with older members of the LGBTQ community in Niagara will be discussed. What’s Up With Older LGBTQ Folks in Niagara? is a project developed in collaboration with Quest Community Health Centre, Positive Living Niagara and a community advisory committee consisting of older LGBTQ Niagara residents. The goal of this study is to document challenges and risks to healthy aging among older (50+ years of age) LGBTQ individuals residing in the Niagara Region; to explore and understand the role of community and voluntary sectors working with older LGBTQ individuals and to identify gaps in current services and develop recommendations for best practices with this population. Project outcomes will be identifying the health and support needs of Niagara regions’ older (50+ years of age and older) LGBTQ communities as well as any current gaps in knowledge and services for community organizations working with older populations. Data analysis will focus on emerging themes and recommendations for best practices with older LGBTQ communities in Niagara region.

Learning Objectives:
1. Barriers to aging well among the LGBTQ community in underserved areas.
2. Strategies for building community capacity to meet the needs of LGBTQ people as they age.
3. Engaging and working with LGBTQ seniors in research.
3. Where do we look for care as we age?: Reporting Back on the Landscape in Ontario

Presenter:
Celeste Pang, PhD Student, Anthropology, University of Toronto, Toronto, Ontario

Where do we look for care as we age? What strategies are individuals, families, and communities using to mobilize for later and end-life-care? What networks are created, and what barriers are faced? This session reports back on preliminary qualitative research undertaken in Ontario in summer of 2015. It provides an analysis of the current landscape of later life care for aging LGBTQ people in the province in the wake of shifting health care and housing policies, and foregrounds the stories of older adult community members and stakeholders in their care. It invites the audience to engage with these stories and to take a critical look at how the balance of care sits between formal sources (such as services provided by the state or sought from private industry) and informal sources (such as care provided by family and friends). It also aims to inspire reflection and conversation about people’s own professional practices and plans for their own futures.

Learning Objectives:
1. Gain insight into the diverse situations of LGBTQ older adults seeking care throughout Ontario.
2. Learn about the structural and socio-economic factors that influence the options people have for care, and the way that we are beginning to mobilize around later-life care for our older adults.
3. Become equipped with analytical tools to interrogate how responsibility for care is balanced between formal and informal sources and networks.

W10: (2)PM

Follow-Up Discussion:
Leadership in LGBTQ Health: What’s happening in the US and Canada?

Join GLMA Executive Director Hector Vargas for a follow-up discussion to the plenary session Leadership in LGBTQ Health: What’s happening in the US? During this informal discussion session, participants will be able to engage in a more detailed conversation about the progress being made in the US to advance LGBT health. We will look at the groups that have provided leadership as well as the issues and opportunities that have provided leverage for change. We will compare our progress in the Canadian context and look for similar opportunities within our federal and provincial health systems and among our colleges and associations.

Learning Objectives:
1. Gain a more detailed understanding of the keys to LGBT health policy change in the United States.
2. Begin an in-depth conversation among service providers and advocates in Canada on strategies that could be adapted to address LGBT health policy issues at the federal and/or provincial level.
“Cruising Counts”: Online Sexual Health Outreach for Gay, Bisexual, and Other Men Who Have Sex With Men in Ontario

Panelists:
David J. Brennan, Associate Professor, Social Work, University of Toronto, Toronto, Ontario;
Rusty Souleymanov, MSW Doctoral Student, Factor-Inwentash, Faculty of Social Work, University of Toronto, Toronto, Ontario;
Daniel Pugh, BSW, MSW, RSW, LGBT Team, Sherbourne Health Centre, Toronto, Ontario

This interactive, interdisciplinary panel will present mixed-methods research on online outreach services in Ontario and provide implications for health providers, managers and others interested in effective online outreach programs for MSM. This panel will draw on findings from the qualitative and quantitative arms of the Cruising Counts Study, and provide an overview of the unique implications of this innovative sexual health service for MSM. First, we draw on the data from the province-wide community-based Cruising Counts study of MISM aged 16+ who completed a 15-minute anonymous online questionnaire. In this panel, we will present five major themes that were identified across interviews: the importance and goals of online outreach, the strengths and advantages of online outreach, challenges and barriers to providing effective online outreach, the personal skills and training required for online outreach, and online outreach service evaluation practices. Service providers suggested that there is increased demand for online outreach services for MSM. We present and elaborate on themes that were identified as barriers to providing effective online outreach services. We also present findings for managers and funders with regard to the strengths and advantages of online outreach over face-to-face outreach. Based on the results of this study, we present the newly revised guide that will be used to increase capacity of online outreach programs in Ontario. This presentation will be of interest to front-line workers who are committed to gain new skills and the training required for providing culturally competent online HIV prevention and sexual health outreach to MSM communities.

Learning Objectives:
1. Participants will gain a greater understanding of how front-line providers conduct online sexual health outreach and of the strengths, challenges, and ethical implications involved in the provision of these services to diverse MSM communities.
2. Participants will be presented with the survey results from the Cruising Counts study conducted among MSM in Ontario.
3. Increase awareness of the skills and tools required for health service providers interested in providing culturally relevant online outreach programs for MSM communities.

1. Opening Doors to LGBTQ Communities

Presenters:
Dale Boyle, Community Development Coordinator, Gilbert Centre, Barrie, Ontario

How does an organization become LGBTQ competent? How does an organization work toward organizational change and become knowledgeable of the tools and resources that are available to build LGBTQ capacity? This community soundbyte will review the work done by the Gilbert Centre. The Gilbert Centre conducted a survey to local human service organizations, the results showed many organizations self-identified as needing to be more LGBTQ competent. The findings of the survey contributed to the Gilbert Centre which has been awarded a two-year Trillium Foundation Grant to do capacity building with organizations across Simcoe/Muskoka, to increase access to services to LGBTQ individuals in the region. This project supports organizations as they undergo an assessment of how accessible the organization is currently, identify barriers to providing service and develop plans to address training needs and any policy issues. In this session, an overview of the Capacity Development project in Simcoe County will be provided. Some of the content will include local data that supports the project, initial feedback from participating agencies, ways in which organizations can evaluate change, and a review of some of the documents used.

Learning Objectives:
1. Awareness of how to engage an agency towards organizational change for LGBTQ competency.
2. Knowledge of the tools and resources available for building capacity.
3. Awareness of ways to evaluate and assess community impact from organizational development.

2. The Ottawa Paramedic Service Diversity Champion Program: Internal Culture Change and External LGBTQ Community Engagement to Provide Culturally Safe Emergency Clinical Care

Presenters:
Ashley Murfin, MA, ACP(f), Commander (Operations), Ottawa Paramedic Service, Diversity Champion Program, Ottawa, Ontario;
Paul Morneau, BSc, ACP, Acting Commander (Professional Standards), Ottawa Paramedic Service, Diversity Champion Program, Ottawa, Ontario;
Deanna Schofield, BSc, ACP, Acting Superintendent (Operations), Ottawa Paramedic Service, Diversity Champion Program, Ottawa, Ontario

In 2010 a few service members of the Ottawa Paramedic Service Diversity Champion Program (DCP) asked permission to start a group to work on supporting and increasing the diversity within the service. The group started off with their first event which was the PRIDE Flag Raising BBQ at Ottawa Paramedic Service HQ. This event has now grown to a full City of Ottawa Bus Tour featuring multiple stops for Flag Raising Events with Paramedics, Police, Fire, By-Law, OC Transpo & City Hall. Those who were the first members took on this challenge in addition to their jobs and at no additional cost to the Service or City.

The Diversity Champion Program main objectives:
1. Support the current diversity that we have within the Ottawa Paramedic Service;
2. Engage and build relationships with diverse communities in Ottawa. Allowing us to learn how we can better meet their unique needs and to educate them on what we need from them;
3. Improve diversity through recruitment and retention strategies so the Ottawa Paramedic Service is diverse and representative of the community we serve.

The Diversity Champion Program has won multiple awards both internal and external City Manager Kent Kirkpatrick announced that all City of Ottawa Departments will have a DCP-like Committee by the end of 2015.

Learning Objectives:
1. Learn how the Ottawa Paramedic Service set up their Diversity Champion Program and how it is being adopted for all City of Ottawa departments.
2. Be able to distinguish and evaluate their own experiences between external training and the role that “Diversity Champions” play and how they support and help create a more inclusive workplace and help offer better pre-hospital health care to the community.
3. Apply the cultural shift activities in their home agencies to support LGBT Diversity both inside their organization as well as with their patients or clients with a commitment to accomplish within the year.

W13: (2)PM
Format: Workshop

Our Mad Selves: Queer and Trans* Youth Exploring Mental Health

Presenters:
Agnieszka Forfa, Mental Health Counsellor, Sherbourne Health Centre, Toronto, Ontario;
Sonny Berenson, Trans-identified Community Coordinator, Facilitator & Artist, Toronto, Ontario

Through presentation, discussion, creative activities and skill sharing, Our Mad Selves is a workshop that invites participants to envision new ways of talking and thinking about mental health and madness within the context of queer and trans* identities and communities. Even though the medical and recovery model have made significant contributions to our well-being, the exclusive reliance on these approaches of understanding and approaching mental distress/variance has become detrimental. In contrast, this workshop aims to explore how psychiatric conditions can be mad gifts which need cultivation and care; and that mad people have unique ways of experiencing the world, making meaning, developing community and creating culture. Deeply inspired by Disability Justice movements, Our Mad Selves embraces difference, moves away from normalizing experiences, neoliberal notions of individualism and single issue organizing; instead we commit to understanding how madness/sanism is interconnected with other struggles, such as those of disabled people, people of color, genderqueer and transgender, poor and working class, youth, immigrants, queer and more. We are pushing for an understanding of how sanism affects all of our movements for justice. To ground the conversation, this workshop will heavily draw from our experiences facilitating and developing a group at Supporting Our Youth, which was focused on LGBTQ youth who are living with and/or affected by experiences often diagnosed and labeled with psychiatric conditions.
Learning Objectives:
1. Inspire transformation through linking creativity, madness, collaboration and care.
2. Share and gather information/experience on how sanism operates with other systems of oppression, such as homophobia and transphobia, and how this impacts our well-being.
3. Provide an opportunity to confront the shame and oppression experienced as a result of psychiatric histories/experiences and encounters with the mental health system.

W14: (2)PM
Format: Workshop

Queer Think for the Straight Shrink: How to Integrate the Canadian Psychiatric Association Position Paper on LGBTQ Mental Health Into Your Practice

Presenter:
Albina Veltman, MD, FRCPC, Associate Professor, Department of Psychiatry & Behavioural Neurosciences, Diversity & Engagement Chair, Undergraduate MD Program, McMaster University, Hamilton, Ontario

In most medical schools and psychiatry residency programs in North America, there is a lack of education related to LGBTQ health. Lack of knowledge about the health care needs of LGBTQ-identified individuals is one of the major barriers to the provision of high-quality care to this traditionally marginalized and underserviced population. In 2014, the Canadian Psychiatric Association (CPA) published a position paper entitled “Mental Health Care for People who Identify as Lesbian, Gay, Bisexual, Transgender and (or) Queer”. Unfortunately, psychiatry has a history of conflating LGBTQ identities with mental illness and has, therefore, historically contributed to the stigma and discrimination faced by people who identify as LGBTQ, affecting not only their mental health but also their access to appropriate mental health care. This CPA Position paper addressed the need for psychiatrists to increase their understanding of the mental health needs of people who identify as LGBTQ. This presentation will provide participants from a wide variety of mental health care professions with the opportunity to review and discuss the recommendations within this CPA position paper. The aim of the workshop is to ensure that mental health practitioners gain more knowledge and comfort in providing LGBTQ-affirmative care within their respective practices.

Learning Objectives:
1. Gain knowledge about the mental health care needs of individuals who identify as LGBTQ.
2. Increase awareness of the health care barriers that are often faced by individuals who identify as LGBTQ and discuss with colleagues various methods of reducing these barriers to care.
3. Understand and be able to incorporate the recommendations from the CPA position paper on mental health care for people who identify as LGBTQ into their practices.

W15: (2)PM – Cancelled

W16: (2)PM
Forme: atelier
(Simultaneous Translation provided)

Les besoins en matière d’établissement des immigrants et réfugiés LGBTQIA francophones

Présentatrices :
Julie Lassonde, avocate, membre du Barreau du Haut-Canada et du Barreau du Québec, Toronto, Ontario;

Objectifs d’apprentissage :

1. Mieux comprendre les besoins en matière d’établissement et d’intégration des immigrants et réfugiés LGBTQIA francophones en Ontario
2. Comprendre l’intersection entre les identités immigrantes/réfugiées, LGBTQIA et francophones
3. Développer des stratégies de mise en œuvre de recommandations visant à mieux répondre aux besoins des immigrants et réfugiés LGBTQIA francophones en Ontario

W16: (2)PM
Format: Workshop
(service de traduction simultanée au besoin)

The Settlement Needs of Francophone LGBTQIA Immigrants and Refugees

Presenters:
Julie Lassonde, Lawyer, Member of the Law Society of Upper Canada and the Barreau du Québec, Toronto, Ontario;

In this interactive workshop, the results of the evaluation of the settlement needs of Francophone LGBTQIA immigrants and refugees in Ontario will be presented. This evaluation was conducted in 2014 by FrancoQueer and the Ontario Council of Agencies Serving Immigrants (OCASI). The evaluation report was released in English and in French in 2015. First of all, we will take a brief look at the research methodology. Next, we will present the evaluation results, highlighting the aspects affecting the physical and mental health of Francophone LGBTQIA immigrants and refugees. Lastly, we will present the recommendations that arose from the evaluation and discuss the progress being made to implement them. The second part of this interactive workshop will be an opportunity for participants to discuss the research findings, identify ways to implement the recommendations in the evaluation report, and share best practices in the area of health services for Francophone LGBTQIA immigrants and refugees.

Learning objectives:

1. Better understand the settlement and integration needs of Francophone LGBTQIA immigrants and refugees in Ontario.
2. Gain an understanding of how immigrant/refugee, LGBTQIA and Francophone identities intersect.
3. Develop strategies for implementing the recommendations to better respond to the needs of Francophone LGBTQIA immigrants and refugees in Ontario.
1. “It’s For Us—Newcomers, LGBTQ Persons and HIV-positive persons. You Feel Free To Be”: Experiences of Social Support Group Participation Among LGBTQ African, Caribbean and Black Newcomers and Refugees in Toronto, Canada

Presenters:
Carmen Logie, PhD, Assistant Professor, Factor-Inwentash Faculty of Social Work, University of Toronto, Adjunct Scientist, Women’s College Research Institute, Toronto, Ontario; Ashley Lacombe-Duncan, PhD Student, Factor-Inwentash Faculty of Social Work, University of Toronto, Toronto, Ontario; Shannon Ryan, Executive Director, Black Coalition for AIDS Prevention (Black CAP), Toronto, Ontario

Background:
African, Caribbean and Black (ACB) populations in Canada are over-represented in the HIV epidemic. Social drivers of HIV—including racism, sexual stigma, and HIV-related stigma—enhance HIV vulnerability among ACB populations. The Black Coalition for AIDS Prevention implements monthly peer support and psycho-education groups: (1) Rainbow Sistahs (RS), for lesbian, gay, bisexual, transgender and queer (LGBTQ) ACB women, and (2) Foreign Integration (FI), for LGBTQ ACB newcomers and refugees. We explored perceived benefits of social support group participation among LGBTQ ACB newcomers and refugees in Toronto, Canada. Methods: We conducted three focus groups with ACB participants (n=29) who attended RS, FI or both. We conducted semi-structured individual interviews with health care and social service providers (n=5) from AIDS service organizations and community health centres serving ACB populations. Interviews and focus groups were recorded, transcribed verbatim, and analyzed using narrative thematic techniques. Findings will be shared during the session. Findings highlight the synergistic effects of social exclusion produced through multiple forms of marginalization, including sexuality and newcomer/refugee status. Social support groups tailored for LGBTQ ACB newcomers and refugees have the potential to address the complexity of social, legal, economic and health issues that elevate HIV vulnerability.

Learning Objectives:
1. Describe the social determinants of health for African and Caribbean Black LGBTQ newcomers and refugees, such as poverty, HIV-related stigma, and racism.
2. Explain social support groups as a community based intervention to address health, social isolation and basic needs among LGBTQ newcomers and refugees.
3. Discuss the associations between poverty, stigma and health among African and Caribbean Black LGBTQ newcomers and refugees, and situate these in discussions of HIV vulnerability and syndemics theory.

2. Access, Identity & Men (AIM) Study: Exploring How South Asian MSM Navigate Their Sexual Health

Presenter:
Ramraajh Sharvendiran, Men’s Sexual Health Coordinator, Alliance for South Asian AIDS Prevention (ASAAP), Toronto, Ontario

The AIM study explores how South Asian MSM navigate their sexual & overall health within the diaspora in the Greater Toronto Area (GTA). The purpose of this study was to generate a strong evidence base for HIV/AIDS and sexual health programming; address the lack of representation in research; and, to adapt to the needs of the community. This presentation will explore the qualitative data collected from thirty-nine (39) participants. The following is the thematic breakdown of the results: • Relationships • Mental Health and Social Isolation • Navigating Sex • Sex, HIV and Health The presentation will delve deep into the lived experiences of the participants and present both the strengths and challenges of being a South Asian MSM in the GTA.

Learning Objectives:
1. Understand the socio-cultural context some South Asian MSM are coming from.
2. Understand the systemic and internal challenges that South Asian MSM are experiencing as it pertains to their sexual and overall health.
3. Understand the strength there in within this population and how they’ve used it to navigate the system to survive and thrive.
W18: (3)PM
Format: Workshop

Breaking Down Medical Barriers to Better Serve Transgender People

Presenters:
Vincent Bolt, Student, School of Indigenous Relations, Indigenous Social Work Program, Laurentian University; Project Coordinator, TG Innerselves, Sudbury, Ontario; Jenna Webber, Third year Medical Student, Northern Ontario School of Medicine, Sudbury, Ontario; Rita Olink, Community Relations Representative, TG Innerselves, Sudbury, Ontario; Darlyn Hansen, Community Relations and Education, TG Innerselves, Sudbury, Ontario; Stephan Imbeau, Third year Medical Student, Northern Ontario School of Medicine, Sudbury, Ontario

TG Innerselves and the students from the Northern Ontario School of Medicine’s Breaking Down Barriers Project have collaborated on improving health care and creating positive change for lesbian, gay, bisexual, transgender, queer, and two spirit people in Northern Ontario. Being a member of the trans community in Northern Ontario for many is a determinant of health. Many trans individuals have difficulty finding physicians that will assist with transition in small cities and remote communities. There are also difficulties in finding employment, housing, and experiences of social exclusion. This project revealed through community engaged research what physicians and health care providers can do to create a trans inclusive space, engage members of the trans community in the services they provide, and improve the health of the trans people they are serving.

Learning Objectives:
1. Highlight the strengths and opportunities in collaboration between the medical community and LGBT2-SQ people.
2. Learn how a person’s gender identity and gender expression in itself becomes a social determinant of health.
3. Encourage creative ways to address the barriers to health care for trans people in a manner that is inclusive and culturally sensitive.

W19: (3)PM
Format: Workshop

Providing Excellent Palliative Care for the LGBTQ Community: Challenges and Opportunities at the End of Life

Presenter:
Kate Whitehead, MD, Palliative Care Physician, Toronto Grace Hospital, Facilitator, Centre for Inter-Professional Education, University of Toronto, Toronto, Ontario

The end of life can be a time of diverse and changing clinical and psychosocial needs. People of the LGBTQ community face challenges and opportunities that can be unique when faced with life limiting illness. This workshop will encourage participants to explore issues that are common for LGBTQ people as they approach death with a mind to improving our collective approach to end of care in this population. Real clinical cases will be presented from hospital, hospice, and home settings. Participants are encouraged to share their own cases and experiences. These will be incorporated in to the workshop discussion and activities. Highlighted concepts will be: -What current research tells us (and doesn’t tell us) about the expectations and realities of end of life care for the LGBTQ community. -Barriers and enablers to seeking and receiving end of life care for LGBTQ clients. -Advanced care planning. -Consent and substitute decision makers (the law and the practical realities). -Identity and self-image issues in people who are dying. -Communication strategies for end of life issues. -Fears and expectations of families and caregivers of a dying person. -Common end of life changes and how they can impact identity and relationships. -Treatment in dying persons (including hormone treatment). -Death Certificates and other forms that may need a “non-standard” approach. The presenter, who is experienced in Palliative Care, does not pretend to have all of the answers and hopes to both share expertise and be enlightened by participants.

Learning Objectives:
1. Gain an understanding of consent laws and advanced directives in Ontario and how LGBTQ people can best prepare themselves to have their wishes known and respected at the end of life.
2. Become familiar with common clinical changes at the end of life (feeding, self-care, mental status, pain etc.) and appreciate how they may present unique challenges to LGBTQ clients.
BECAUSE LGBTQ HEALTH MATTERS

W20: (3)PM
Format: Panel

Be Our Ally: Voices of LGBTQ2S Youth In & From Ontario’s Systems of Care

Panelists:
Sandy Wynia Katz, Child and Youth Advocate, Provincial Advocate for Children and Youth, Lead Advocate, You Are Not Alone Project, Toronto, Ontario;
Theodore Syrette, Batchewana First Nation of the Ojibways, Advocate, Community Creationist & Artist, Sault Ste. Marie, Ontario;
Yaz Martens, Youth Artist & Advocate, Toronto, Ontario;
Elys Gardiner, Activist, University of Ottawa, Ottawa, Ontario;
Victoria Corbett, Youth Advocate, Sault Ste. Marie, Ontario;
Jay Bruneau, Youth Advocate, Sudbury, Ontario.

The Advocate’s Office launched the You Are Not Alone (YANA) campaign during PRIDE Week 2012 in response to a youth demand for a province wide LGBTQ2SIA strategy. For two years Sandy Wynia Katz and YANA ‘Amplifier’ travelled around Ontario meeting with LGBTQ youth in and from care and posing two questions: (1) What is it like for LGBTQ2S/GSM youth in care today? (2) What can be done to make it better?

After hearing from hundreds of youth, a group of 12 Queer youth from around Ontario came together and formed the YANA Working Group. They reviewed all of the submissions and recommendations. One message came up again and again: Find a way to create allies to help LGBTQ2S/GSM youth in care as they negotiate their way through the system and find their way in the wider world. During WorldPride 2015 the Advocate’s Office launched #BeOurAlly (#BOA). In addition to a short, award winning video developed by and for youth, sharing the Be Our Ally message, the #BOA presentation features youth from the Advocate’s Office mandate telling their own stories and the stories of youth from around Ontario. The presentation will consist of a brief introduction about the Office of the Provincial Advocate for Children and Youth and the history of the You Are Not Alone Project. Five youth presenters will speak about their lived experience in the five mandated areas of the Advocates Office. They will also talk about how others can be allies to children in these systems of care. Then there will be a facilitated discussion/Q and A session. A brief, award winning video about allyship and youth in systems of care will be screened.

Learning Objectives:
1. Listen to first hand lived experiences of LGBTQ2S children and youth who are (or have been) involved with Ontario’s systems of care. These voices are not often heard within the broader LGBTQ community.
2. Hear about the experiences of hundreds of youth from around Ontario and develop a better understanding of the unique needs of youth in the Provincial Advocate’s mandate, including those in rural and remote communities.
3. Obtain concrete strategies for how to support and be allies to LGBTQ2S youth from Ontario’s systems of care.

W21: (3)PM
Format: Seminar

This is Our Community: Creating Education Videos to Disseminate Research Findings

Presenters:
Loralee Gillis, Research and Policy Coordinator, Rainbow Health Ontario, Toronto, Ontario;

Many researchers struggle with the perennial question of how to get people -- community members, service providers, policy makers -- to pay attention to their research. In our ever evolving digital age, traditional methods of knowledge dissemination are not effective if you want to reach a broader audience. Academics are being challenged to learn and use new methods of communication which may be unfamiliar and technologically challenging. The Re:Searching LGBTQ health team and Rainbow Health Ontario have been conducting research on bisexual health together since 2006. In that time we have creating two major campaigns to share the findings from our work: a poster campaign and a video campaign. Both initiatives were highly successful and garnered much attention in social and print media. In our session we will share the process we undertook to: (1) identify opportunities for creating change, (2) create accessible and interesting products that appeal to diverse audiences, and (3) engage audiences through social media. During our session we will share the resources we developed and screen the
videos. Our videos and posters were created to respond to issues that continually arose in our research and generally caused stress in the lives of our participants. During our presentation we will share data we are collecting to evaluate the effectiveness of these initiatives.

**Learning Objectives:**
1. Learn how to identify key messages from research.
2. Learn how to develop knowledge translation products that resonate with diverse audiences.
3. Learn how to effectively disseminate knowledge translation products through social media.

**W22: (3)PM**
Format: Workshop

**Affirming Their Place:**
Research and Practice to Support Gender Diverse Children in Families, Schools and Health Contexts

**Presenters:**
Kathy Witterick, Writer & Violence Prevention Consultant, Facilitator, The 519, Toronto, Ontario;
Ilana David, Social Worker, Gender-Based Violence Prevention Office, Toronto District School Board, Toronto, Ontario;
Tuval Dinner, Outreach & Public Education Coordinator, COPA, Toronto, Ontario

Recent affirmation research identifies families, schools and health contexts as critical to promoting the health of gender diverse young people. Supporting all people to live in their felt gender improves their health and wellbeing, which makes provision of gender affirming services an important aspect of delivering adequate, quality health care to children and youth. Come to this interactive session to discuss and acquire knowledge and skills to support families and promote safety and wellbeing for gender non conformers at home, at school, in health care settings, in the community and in every social and service context that youth engage with. We’ll look at research that connects affirmation to positive health outcomes, and the reduction of negative health challenges faced by many gender diverse and trans young people. The session will also include personal and professional narrative and experience from the perspective of a parent, social worker, community activist and facilitator. There will be discussion, interactive activities, and group work, to identify effective tools like language glossaries, policy recommendations, and gender inclusive practices. Implementing these strategies could save lives and most certainly will improve the health of young people. Bring your questions, ideas, comments and thoughts, and we’ll develop a plan for action!

**Learning Objectives:**
1. Discuss significant health challenges faced by gender diverse young people, and review research that connects affirmation to positive health outcomes.
2. Equip practitioners to provide gender diverse young people and their families with adequate and accurate information to promote safety and wellbeing for gender non-conformers at home, at school, in health care settings and in the community.
3. Explore strategies for providing gender affirming health care and social services to gender diverse and trans young people, including an exploration of take away tools including language glossaries, policy recommendations, training tools, and suggestions for gender inclusive forms, spaces and practices.

**W23: (3)PM**
Format: Workshop

**Integrative Medicine: integrating eastern medicines and western biomedical health care for optimal health**

**Presenter:**
Devan Nambiar, MSc, Integrated Health Care, Education & Training Coordinator, Rainbow Health Ontario, Toronto, Ontario

Canadians have been integrating various complementary and alternative medicines (CAM) into personal health care practices to treat the whole person. CAM has been researched to treat “pain, stress related condition, living with HIV and addictions” (Singer & Adams, 2014). LGBTQ persons have been exploring and using various CAM modalities to gain and maintain health, however, there is little research on best practices of CAM. Consumers have to be knowledgeable of efficacy, potency, placebo, red flags, drug interactions, and pharmacokinetics of herbs and non-prescriptions medicines/CAM when mixed with prescription drugs. This session will provide clear guidelines and evidence on how to assess CAM and get your money’s worth. This workshop will explore the integration and practices of CAM within a western biomedical framework. The session will provide theory and practices of various CAM as per eastern practices.
and materia medica. The workshop will examine herbs and drug interactions, peak and trough and pharmacokinetics of herbs. We will explore acupressure vs. acupuncture and understanding of meridian points and energy flow. Thirdly we will explore Yoga as taught in India vs. western yoga, Pantajali yoga sutras, Astanga eight limb yoga goals, hatha yoga Pradipika, mantras, tantras, chakras, prana, pranayama and mudras. Participants will learn to practice acupressure, meditation techniques, breath work as in pranayama and core yoga practices to gain Sat-chit-anada (being-consciousness and bliss).

**Learning Objectives:**

1. Learn of complementary and alternative medicines modalities, use, practice and intake.
2. Integrate complementary and alternative medicines in daily use for mind-body health.
3. Understand various best practices of complementary and alternative medicines in the context of western biomedical/allopathic medicine.

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**W24: (3)PM**

**Format: Workshop**

*(service de traduction simultanée au besoin)*

**STD Prevention for Lesbians:**

*How to Prevent STDs While Having Fun*

**Presenters:**

*Marjolaine Landry, Case Worker, Centre de solidarité lesbienne, Montreal, Quebec;*

*Audrey Trilène, Community Worker, Centre de solidarité lesbienne [Centre for Lesbian Solidarity], Montreal, Quebec*

Health practitioners are unfamiliar with STDs in lesbians. Many lesbians report that their doctors say little or nothing about the risks involved in failing to take preventative steps. However, they are at risk. So how can they protect themselves without making a big deal of it?

**Learning objectives:**

1. Find out about the difficulties lesbians experience in getting information on protecting themselves from STDs.
2. Become aware of the different STDs that can be contracted by lesbians.
3. Learn ways in which lesbians can protect themselves.
SHE’S BEAUTIFUL WHEN SHE’S ANGRY

Mary Dore, Director/ Producer
Nancy Kennedy, Editor/ Producer
Pamela Tanner Boll, Executive Producer
Elizabeth Driehaus, Executive Producer
Abigail Disney, Co-Producer

In partnership with the London Lesbian Film Festival, we are offering a free event to attendees of the RHO 2016 Conference: a special screening of the award-winning documentary film She’s Beautiful When She’s Angry. SHE’S BEAUTIFUL WHEN SHE’S ANGRY resurrects the history of the outrageous, often brilliant women who founded the modern women’s movement from 1966 to 1971. It takes us from the founding of NOW, with ladies in hats and gloves, to the emergence of more radical factions of women’s liberation; from intellectuals like Kate Millett to the street theatrics of W.I.T.C.H. (Women’s International Conspiracy from Hell!). Artfully combining dramatizations, performance and archival imagery, the film recounts the stories of women who fought for their own equality, and in the process created a world-wide revolution.

The film does not shy away from the controversies over race, sexual preference and leadership that arose in the women’s movement.

We invite all conference attendees to join us for the screening of this film about activists working to change the world.

Cash Bar (including non-alcoholic beverages) and film-night snacks free of charge.