Webinar
Seniors Aging OUT: Health & Community working together for safe communities for LGBTQ2+

With Jane Osborne and Ross Jenkins
A few housekeeping tips

- All attendees will be muted during the webinar. If you are listening to this presentation via phone, remember to **mute yourselves with your mute/unmute button or by pressing *6 on your keypad.**

- If you are experiencing issues, please let us know via the CHAT BOX or send an email to **benedictes.cnpea@gmail.com**

- There will be a 10-15 minute Q&A at the end of the presentation. You can send your questions via chat box or email at any time during the presentation.

- The presenters’ contact information is available on their bio slide if you have further questions.

- At the end of the webinar, you will be invited to take a short survey about this webinar. Please take a moment to participate. Your feedback will help us improve our next webinars.
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Tech issue/Can’t stay?

- You can still participate!
  - The Powerpoint is also available at this link
  - Send any question you may have to benedictes.cnpea@gmail.com
After a 30-year career in information technology management and organizational development (IBM, UBC and Metro Vancouver among others), Jane retired to explore the joys of working in community. Over the past 20 years, she has focused her energies on project and volunteer work provincially and locally; initially on the North Shore of Vancouver and more recently on Central Vancouver Island, as a passionate advocate for social justice.

Jane is currently Regional Mentor with the BC Association of Community Response Networks on the Central Island. In May 2016, Jane received SFU Gerontology Research Centre’s Elder Abuse Awareness to Action Award for her work in building community partnerships and collaborations that support positive social change, coordinated responses and improved interventions for adults experiencing abuse and neglect.
Ross Jenkins

ross.jenkins.inclusions@gmail.com

Ross started working with neuro-diverse populations and those with developmental delays in the early 1990’s. After several years working in the field as a community support worker, he realized that many people he worked with hadn’t received as much information about sex and sexuality as had their neuro-typical peers. In 2015, he took the Sexual Health Educator Certification course from Options for Sexual Health British Columbia with the intention of bringing sexual health information to vulnerable populations.

Late in 2016, he learned of Jane Osborne’s work with Seniors Aging Out and the BC Community Response Networks. Ross’s experience with younger adults and perspectives on diverse populations are extremely important to the challenges of creating safe and open environments for LGBTQ2+ adults as they transition into assisted living environments or begin to experience much higher needs for home support services.
Agenda

1. What is the issue? Why now?
2. Where have we been? Where are we now? Where are we going?
   a) IH Training Initiative – Nicole Tremblay
   b) BCCRNs Community-based Project
3. What are the findings (selected)?
4. Why the intergenerational approach? What is the importance of intersectionality?
LGBTQ2S Seniors
(Lesbian, Gay, Bisexual, Transgender, Queer, 2-Spirited)

Providing Inclusive Care in Island Health
Nicole Tremblay, MSW, MPA
What is the issue?

- https://www.youtube.com/watch?v=fV3O8qz6Y5g
- Vera & Zayda’s story
Scenario 1

Two friends of mine, Vera and Zayda, had been together for 58 years. When Vera’s Alzheimer’s became too much, Zayda moved her to an assisted living facility. Zayda could barely trust family or neighbors with the truth, let alone strangers, so she and Vera became “sisters.” Much later, after Vera’s death, Zayda needed to move into an assisted living facility herself. She had many, many photos of the love of her life, but dared not display them in her new home. The other residents would talk about husbands, children and grandchildren, but she felt too vulnerable to tell the truth. Zayda was in hiding and terribly isolated.

*Participant story from ‘Stories from the Field’

What can we do for Zayda?
What does LGBTQ2+ mean?

- Lesbian, Gay, Bisexual, Transgender, Queer & 2-spirit (IH: LGBTQ2s)
- The + incorporates queer questioning, gender fluid, asexual, pansexual, ...
- We include allies or supporters of members of these communities
- LGBTQ2+ seniors are diverse people from many backgrounds; not readily identifiable
LGBT Seniors’ Experiences

- Mentally ill
- Criminal
- Immoral/Perverted
- National security risk
- Threat to “the family
Where have we been?
Island Town Hall in Victoria

- Feb. 3, 2016
  - 1 of 6 in province
  - SFU’s Gerontology Research Centre – Gloria Gutman (Youth for Change / Quirk-e)
  - Island Health – Adult Protection
  - BCCRNs

www.sfu.ca/lgbteol.html
Four primary reasons we are talking about this now

1. Demographics
2. Invisible in many parts of the Island – we don’t ask; IH doesn’t collect data
3. LGBTQ2+ more likely to age alone
4. Older adults may return to the closet because of stigma; because they do not feel safe
Demographics …

- Younger Canadians are far more likely to say they are lesbian, gay, bisexual or transgender than older Canadians, with 10% of those aged 18 to 34 answering the question with a “yes,” compared to 2% or 3% in the four older age categories.

  *SOURCE: FORUM Research Poll commissioned by National Post, July 2012*

- In 2013 a Qmunity volunteer visited all of the residential care facilities in White Rock and the surrounding area and each facility said that none of their seniors were LGBTQ. (Mirrors the Vancouver Island experience in 2017!)

  *SOURCE: Qmunity.ca Aging Out Project*
Why is it important?

- LGBTQ2+ seniors need to feel safe to come out to health/community service providers – not just tolerated but welcomed & included
- Voices of LGBTQ2+ seniors, supporters and allies need to inform how we provide services and supports to them as they age
- As the population begins to grow, we need to ensure all communities engage to provide needed services and supports
Where have we been?

Island Health Initiative

- Created LGBTQ2s Advisory
- Toolkit to support leaders to implement policy, practices, programs
  - Includes curricula, brochures, lanyards ...
- Developing face to face education module
- Showing Gen Silent in community
Where are we now?

Island Health Initiative

- Delivering presentations to groups of health professionals, e.g. Gerontological Nurses
- Preparing for Island Health wide in-house training – including visible, welcoming spaces with rainbow lanyards
- Focusing on services that support clients where they live – residential care, home and community care
Where are we now? Island Health Initiative

- Prioritised residential care for initial training
- Piloted the education module in 4 workshops in a Victoria area residential care facility
- Evaluating and planning (Nicole.Tremblay@viha.ca)
Who are LGBTQ2s Seniors?

Lesbian, Gay, Bisexual, Transgender, Queers and Two Spirited (LGBTQ2s) Elders on Vancouver Island are a diverse group of seniors who come from many different backgrounds.

This cohort has experienced a lifetime of discrimination and marginalization that has many seniors in the community feeling anxious about the loss of independence and increased health care needs that can accompany aging.

We can make a difference. By learning about the experiences and needs of this population and proactively making our services safer and more inclusive, we can ensure that LGBTQ2s seniors receive the type of care that welcomes and affirms all of who they are.

LGBTQ2s Aging Issues

Although there is limited research about LGBTQ2s seniors, several themes have emerged from the research that does exist:

- **Isolation:** Many LGBTQ2s seniors do not have the informal support networks of children and extended families that their non-LGBTQ2s peers enjoy.
- **Health disparities:** Higher rates of disability have been noted in older LGBTQ2s populations relative to non-LGBTQ2s peers.
- **Resilient:** Despite the challenges they have faced, LGBTQ2s seniors forge onward with resilience, living full lives and building strong communities.
- **Anxious about healthcare:** Several recent reports have documented the anxiety that LGBTQ2s seniors feel about increased care needs related to aging and how they will be treated by service providers and peers in the health care system.

Quote from participate in LGBTQ2s seniors research project Stories from the Field

"Two friends of mine, Vera and Zayda, had been together for 58 years. When Vera’s Alzheimer’s became too much, Zayda moved her to an assisted living facility. Zayda could barely trust family or neighbors with the truth, let alone strangers, so she and Vera became “sisters.” Much later, after Vera’s death, Zayda needed to move into an assisted living facility herself. She had many, many photos of the love of her life, but dared not display them in her new home. The other residents would talk about husbands, children and grandchildren, but she felt too vulnerable to tell the truth. Zayda was hiding and terribly isolated.”
Where have we been?

**BCCRNs Initiative**

- Nanaimo-centred working group
- Initial consultation July 2016
- IG partnership: Brechin United Reaching Out & Crimson Coast Dance Society
Where have we been?

Creating the Team

- Most members from “away” – social justice folk
- Broader team / partners: people from all generations – LGBTQ2+ and allies
- Core team: those willing to show up (8-10 at each meeting; 15-16 regularly contribute
- Support every member to offer best skills – librarian, sex educator, nurses, social workers, community volunteers, students, ...
- Hands on support for IG component: recognize needs for younger people re: work, school, parenting, ...
Where have we been?
Setting Goals & Priorities

1. LGBTQ2+ seniors feel safe to come out: welcomed and included, not just tolerated.
2. Isolated seniors are supported in ways that work for them.
3. LGBTQ2+ programming is readily available and supported in community.
4. Broadly available resources (print and web) support LGBTQ2+ seniors in communities large and small across the province.
5. LGBTQ2+ seniors free from abuse and neglect.
Where have we been?
Creating our Workplan

1. **Pre-Project Activities**  
   *(Summer 2016)*
   Roundtable discussions with community members (aged 15 to 80+ years old) through BC’s Community Response Networks (CRN).
   Youth perform *Young and Queer: Here and Now* at 18th Annual Infringing Dance Festival in Nanaimo.
   Older adults from Brechin United’s Reaching Out, Crimson Coast Dance, and others join in dialogue.
   We learn an intergenerational approach introduces even more energy and ideas!

2. **Discovery Phase**  
   *(Now to Summer 2017)*
   - Engage with community to gather stories on LGBTQ2+ seniors and accessing health services on Vancouver Island.
   - Produce project plan, develop materials and programs.

3. **Implementation**  
   *(Summer 2017 onward)*
   - Launch materials and programs through Vancouver Island-based CRNs.
   - Gather feedback for ongoing improvements.
   - Determine sustainability plan.

**We Need Your Input**
There is little research on LGBTQ2+ people and their experiences accessing service.
Most agencies do not collect data on how seniors describe their gender identity or sexual orientation.
Few service providers educate their staff and volunteers on the needs of this particular population.
If you identify as LGBTQ2+, or are a family member or friend of someone who does, your stories will help us better understand the health landscape for this community.
We will take all measures to ensure your privacy and confidentiality.

Contact us to arrange an
What does LGBTQ2+ Mean?

LGBTQ2+ means Lesbian, Gay Bisexual, Transgender, Queer, and 2-spirited. The “plus” (+) incorporates other possibilities like queer questioning, gender fluid, asexual, and pansexual. We also include allies or supporters of members of these communities.

LGBTQ2+ seniors are a diverse community of people from many backgrounds.

The Challenges Facing this Community

LGBTQ2+ elders have lived through times of legal and social discrimination that have left some individuals feeling isolated and afraid. When seeking support, particularly health and community services related to aging, many people in this population fear identifying themselves as LGBTQ2+.

LGBTQ2+ seniors are not immediately visible: some have become adept at hiding their identity to feel safe.

SENIORS AGING OUT

What can we do to ensure the health and wellbeing of LGBTQ2+ and develop safe communities for this population?

SENIORS AGING OUT Project
Safe Communities for LGBTQ2+.

Contact: Jane Osborne
Regional Mentor, Central Island
Email: jane.osborne@bccrns.ca
Tel: 604.363.5370

TELL US YOUR STORY.
Where are we now?
Seniors Aging OUT Phase 2

- Discovery (Nov 2016 – June 2017)
  - Develop community outreach teams & plans
  - Prepare materials for initial outreach, e.g. brochures, posters, press release, presentation
  - Develop partnerships

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Where are we now (cont’d)?

Seniors Aging OUT Phase 2

- Identify social media channels, community websites, seniors serving organization websites, community bulletin boards
- Do information sessions for interested organizations and individuals
- Complete research interviews / survey
Where are we now (cont’d)?
Seniors Aging OUT Phase 2

- Individual interviews: What has your experience been? What do you need to feel “cared for”? (Dec-May)
- Design & develop set of IG training materials (Jan-Jun)
- Pilot materials (April-Jun)
  - Nanaimo Pride Week
  - WEAAD events

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Where are we going? Leverage (Local) Partnerships

Community-based & System

- If someone else can do it for you, let them (project team members, SWs, Mental Health Clinicians, RJ facilitators, police, academics, community members) – "value of networks"

- Train your team – especially when working with communities who have been traumatized
  - Experiential learning in safe containers, e.g. “Building the Village”, grounded circle processes, RJ

- Train partners – adjust curriculum to targets

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Where are we going? April to June 2017

- Partnerships (selected examples):
  - Our Cowichan Community Health Network – Island Health, municipalities/regions, Divisions of Family Practice, community agencies, EPIC
  - Seniors Connect (CI) Project (NFLA)
  - Discovery College – CSW Program
  - Origin at Longwood (residential care)
  - Trans Care (2-Spirit & LGBT)
  - Nanaimo Association for Community Living
  - Youth Advocates Network members
Origin at Longwood: Campus of Care
Independent / Assisted / Long Term Living
Origin at Longwood: April 4th Meeting Results

- Campus of care – independent living through long term care (incl. couples care)
  - Willing to partner in an experiment to make Origin a community leader in welcoming and inclusion

- Immediate action:
  - Policies:
    - Transgender (LGBTQ2+) policy for staff and residents
    - (Medical marijuana and assisted dying on list of needs)
  - Targeted staff education – all roles
  - Resident awareness raising (Gen Silent screening)
Where are we going? April - June 2017 (cont’d)

- Partnerships (selected) cont’d:
  - Robert Beringer – Royal Roads
    - PhD Dissertation: An exploration of the non-metropolitan rewards and challenges of aging among older gay men
  - Victoria Lesbian Senior Care Society
  - Nanaimo Association of Family Living
  - NFLA: Seniors Connect
  - Community Health Services - South Nanaimo Team (under development)
  - Restorative Justice – RJ Victoria, Ladysmith CJP
Where are we going? April - June 2017 (cont’d)

- Outreach Activities
  - Screenings of Gen Silent (selected)
    - Reaching Out (May 3)
    - Film Societies – Cowichan, Nanaimo
    - Origin at Longwood residents
  - Private residential care & home care providers
    - Staff training – Origin, NACL, Nurse Next Door, …
  - Events
    - WEAAD events centred on LGBTQ2+ INR presentations
    - Nanaimo PRIDE
Seniors Aging OUT is a grassroots project that envisions Vancouver Island communities, including LGBTQ2+ people, in all aspects of community life. Currently, there is little data and research on the unique aging needs of this population.

We are asking lesbian seniors to volunteer their stories to help us understand their experiences accessing health and community services. Or, complete our online survey @ www.bccms.ca. We will respect your privacy and confidentiality.

Contact: Jane Osborne, jane.osborne@bccrn5.ca or 604.363.5370.
The Story of HawkOwl

- 90-years old, lesbian (“she thinks”)
- PhD in theatre trained at three different universities, worked in the Philippines, Japan, US and Canada
- Retired from UBC after 16 years as a student and then a professor
- Studied Physiotherapy in Cold Mountain, Esslen and Oregon. Worked as a therapist for 12 years and retired at age 70.
- Artist who creates ceramic sculptures of ancient goddesses, animals, owls, ...
The Story of HawkOwl

- Calls herself a “discreet” lesbian
  - Out with her doctor when in relationship; otherwise, “Why would I be?” (different for gay males)
- The Academy hasn’t always been welcoming of women – her story one of gender-based abuse framed by patriarchy and capitalism
- Her life’s direction largely a reaction to being told what “she couldn’t do as well as a man”
  - “My brother was expected to get an education and have a career. I was expected to do something more traditional for women, like become a kindergarten teacher.”
INR for LGBTQ2+ Older Adults: Need to make *Queer*-friendly
LGBTQ2+ INR: Creating culturally safe workshops

Debrief of LGBTQ2+ INR Presenters

- The Professor scenario most suitable since not quite so obviously heteronormative
  - Add Doctor and/or Family Table scenarios (woman supported by a woman & man by a man);

- Framing
  - Add slide or two at beginning that defines LGBTQ2+
    - Recognize full range on the gender & sexuality axes
  - Add self-care slide re: triggers
  - Add slide with additional risks, e.g. homophobia
Debrief of LGBTQ2+ INR Presenters cont’d

- Welcome & Introduction
  - Create a safe space with guidelines, e.g. gender neutral pronouns / preferred pronouns
  - Nametags with preferred name and pronouns

- Discussion
  - Written scenarios based on the permitted scenarios with genders/names that fit LGBTQ2+
  - Emphasize the additional risk of social isolation for LGBTQ2+ people
Seniors Aging OUT is a grassroots project that envisions Vancouver Island communities including LGBTQ2+ in all aspects of community life. Currently, there is little data and research on the unique aging needs of this population.

We are asking gay senior men to volunteer their stories to help us understand their experiences accessing health and community services. Or, complete our online survey @ www.bccrns.ca. We will respect your privacy and confidentiality.

Contact: Jane Osborne, jane.osborne@bccrns.ca or 604.363.5370.
Some Selected Findings

- **LGBTQ2+ Community Needs Healing**
  - Older gay males hugely impacted by homophobia, criminalization, the AIDS crisis; many perceive their plight as worse than other LGBTQ2+ (examples)
  - Stereotypes/labels used by some groups of LGBTQ2+ trigger others – very diverse community

- **Goal: LGBTQ2+ Welcoming & Inclusive Communities**
  - **Safety** the dominant need expressed early in the process – must address this need before moving to bigger goals
  - **Privilege** a barrier between many LGBTQ2+ members in their full diversity
Cultural Safety in Two-Spirit and LBGTGT Context

- Multifactored – complexity beyond anything I imagined
- Layers of trauma from residential school experience combined with the LGBTQ2+ experience
- Divisions between indigenous identities and First Nations (naming is very important)
- Other cultural factors at play:
  - Strength of connection to culture
  - Coastal vs interior, urban vs rural
  - Education, employment, income level
Gender, Sexual Orientation & 2-Spirit

- Each unique First Nation, aboriginal or indigenous community in different phase of development around the concept of Two-Spirit and LGBTQ
- Meet the community where it is and honour that place
- Work together towards healing when invited to do so
Collective vs Individual Trauma and Safety

- Individual risks for abuse and trauma:
  - Gender, sexuality, age, religion, race, education, income level, place ...
  - Privilege conferred by membership – difficult to understand what is invisible to you

- Collective (whole tribe) risks for abuse & trauma, e.g.:
  - Gay males criminalized and persecuted
  - Residential schools / cultural genocide
Why Intergenerational?

- Intersectional lens – many variations even in older adult population (next section)
- Western cultures separate and silo and that impedes cross-generational learning; First Nations and many eastern cultures different
- Intergenerational = older & younger adults, youth
- We have learned so much from younger LGBTQ2+ (Crimson Dance, Youth Advocates Network, VIU students, high school students, Transcare)
Intersectionality promotes an understanding of human beings as shaped by the interaction of different social locations (e.g., ‘race’/ethnicity, Indigeneity, gender, class, sexuality, geography, age, disability/ability, migration status, religion). These interactions occur within a context of connected systems and structures of power (e.g., laws, policies, state governments and other political and economic unions, religious institutions, media). Through such processes, interdependent forms of privilege and oppression shaped by colonialism, imperialism, racism, homophobia, ableism and patriarchy are created.
Intersectional Lens Required
(Olena Hankivsky, Intersectionality 101, 2014)

- People’s lives are multi-dimensional and complex. Lived realities are shaped by different factors and social dynamics operating together.
- Relationships and power dynamics between social locations and processes (e.g., racism, classism, heterosexism, ableism, ageism, sexism) are linked.
- People can experience privilege and oppression simultaneously.
- Intersectionality is explicitly oriented towards transformation, building coalitions among different groups, and working towards social justice.
Needed Refinements for Implementation Toolkit

- Build models to understand LGBTQ2+ experience through an intersectional lens
- Develop tools to heal LGBTQ2+ community
  - Cultural safety training (similar to IH FN training)
    - More scales, e.g. add gender / homophobic violence - exercise to place yourself, explore Genderbread Model
  - Need intergenerational approach – older adults learn from younger, more fluid youth/adults and vice versa
- Address the gap between BC coastal First Nations & urban aboriginal/indigenous groups
Where are we going?

Implementation – 2017/18

- IH – Geography 2 & 3 (Nanaimo/Cowichan) and Geography 4 (Victoria)
  - Expand program Island wide to all sectors of our communities – public and private

- BC Wide
  - Launch materials and programs through CRNs across the province
  - Support communities that want to move ahead with creating “queer-friendly” services
What Will Be in the Base Toolkit?

- In place & modifiable (see samples)
  - Seniors Aging OUT & IH LGBTQ2s brochures
  - Senior Gay Men & Senior Lesbians posters
  - Add other LGBTQ2+ posters

- Gen Silent Screenings
  - Movie available, discussion guideline to follow

- PowerPoint Presentation & Discussion Guideline (under development)

- INR Training Presentation (in discussion)
What Will Be in the Augmented Toolkit?

- Research (survey/interview) Findings
  - Seniors Aging OUT & Robert Beringer research
- LGBTQ2+ Training Outlines (in process):
  - Island Health: LGBTQ2s Training Outline
  - Seniors Aging OUT: Community Agency Staff & Volunteers Training Outline
- Cultural Safety Training Outline (early 2018)
  - Partnership between IH, Cultural Safety trainers (IH & MCFD) and Seniors Aging OUT project
How to help:

- Don’t assume everyone is heterosexual and cisgender!
- Use neutral language to “make room” for everyone (And if you don’t know – ASK!)
- Engage in reflective practice and explore assumptions
- Learn about health disparities and health care needs in LGBTQ2s communities
- Challenge homophobia and transphobia when you see it/hear it. Become an ally!
Questions / Discussion

Where is your region or community in relation to this issue?
What are the gaps? The challenges?
How can we work together and support each other as CRN-connected people?
Thank you!

Please take a minute to answer a few quick questions about your experience of this webinar. Click on this link or copy/paste it in your browser:

https://goo.gl/forms/5VWv7c7I7gbKPqG02

Deadline: June 14, 2017

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