2018

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Recommended Citation

Dupuis, N., Gagné, L., Lewis, S., Sibbald, S.L. (2018). Big Comfy Couch: The Implementation of an LGBTQ2S+ Safe and Positive Space Within a Public Health Unit. in: McKinley, G. & Sibbald, S.L. [eds] Western Public Health Casebook 2018. London, ON: Public Health Casebook Publishing.

CASE 4

Big Comfy Couch: The Implementation of an LGBTQ2S+ Safe and Positive Space Within a Public Health Unit

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Samara Lewis was sitting at her desk in the Planning and Evaluation department as she planned and organized discussion points for one of her upcoming Safe and Positive Space workgroup (SPSWG) meetings. As the workgroup lead she must ensure that all relevant and pressing issues will be included in the agenda and discussed at the next meeting. She sat and thought about her next steps and which would be the most effective in reaching her goal to fully implement a Safe and Positive Space at the North Bay Parry Sound District Health Unit (NBPSDHU).

Samara, along with the supportive managerial team and Board of Health at the health unit, believe strongly that issues related to LGBTQ2S+ (Lesbian, Gay, Bisexual, Trans, Queer or Questioning, Two-Spirited) health and health equity are crucial and important to address. The implementation of a Safe and Positive Space within the health unit will increase health equity matters among the workplace as well as address the unique intersectionality that exists within this population and the Northern, bilingual, and Indigenous context.

The implementation of a Safe Space will prove challenging but be beneficial—instilling change within an organization is a laborious endeavor. It is essential to have a team that appreciates innovation and that is passionate about catalyzing positive change. The health unit is undergoing a massive transformation, and the creation of a Safe and Positive Space will further facilitate the organizational direction.

NORTH BAY PARRY SOUND DISTRICT HEALTH UNIT

The North Bay Parry Sound District Health Unit is a public health unit that operates within the Nipissing-Parry Sound district, which is within the Northern area of Ontario, Canada (North Bay Parry Sound District Health Unit, n.d.a). Within this district, the health unit provides services to over 120,000 residents, and its catchment area consists of 31 municipalities, four unorganized areas, and nine First Nations Reserves (NBPSDHU, n.d.b). The City of North Bay, known as the Gateway to the North, is located four hours north of Toronto and west of Ottawa and holds the health unit's main office (NBPSDHU, n.d.b). The City of North Bay is home to two lakes and ample recreational options, resulting in a high quality of life for its residents (NBPSDHU, n.d.b). The city is also composed of post-secondary institutions and lively arts, cultures, and sports communities (NBPSDHU, n.d.b). In addition, North Bay prides itself on its large bilingual community as well as its strong ties to the Nipissing First Nations. A health unit branch office is also located in the Town of Parry Sound (NBPSDHU, n.d.b). Parry Sound is located two hours

north of Toronto and is a large commercial centre, rich in art, culture, sports, and heritage (NBPSDHU, n.d.b).

The health unit's purpose within the community is to promote, prevent, protect, and prepare (NBPSDHU, n.d.a). The health unit's vision lies in promoting and facilitating "a healthy life for everyone in our communities" and its mission aims "to foster healthy living within our communities by preventing illness, promoting healthy choices, and providing trusted support and information" (NBPSDHU, n.d.c). The NBPSDHU's values encompass "honesty, compassion, transparency, accountability, collaboration and excellence" (NBPSDHU, n.d.c).

The health unit is composed of 29 different programs and provides a wide range of public health services that aim to help and augment health in all populations within the community. The health unit is responsible for implementing programs and services that promote health, prevent disease, protect vulnerable populations, and prepare for and respond to emergencies that can ultimately impact population health (NBPSDHU, n.d.a). Within the city of North Bay, there are several LGBTQ2S+-safe organizations. However, service and knowledge gaps still exist.

Five executive teams exist at the health unit: Clinical Services, Community Services, Corporate Services, Finance, and Human Resources. These different teams oversee and manage their respective programs and services throughout the health unit. The Board of Health ensures that the health unit is providing the community with adequate public health programs and services.

SAFE AND POSITIVE SPACE RATIONALE

The health unit strives towards becoming a Safe and Positive Space for its LGBTQ2S+ community. The latter indicated, within its 2016 annual report, that to reach its goal in promoting healthy sexuality, it needs to commit to becoming a Safe and Positive Space for all members of the LGBTQ2S+ community in their service area (NBPSDHU, 2016). The health unit's goal is to become an inclusive and welcoming space, with services and amenities that are equitable and accessible to all sexual and gender diversities, for both employees and clients alike (NBPSDHU, 2016).

In addition, the implementation of a Safe Space aligns with the first priority of the NBPSDHU 2014-2018 Strategic Plan: fostering healthy behaviours in children and youth (NBPSDHU, 2014). First, the health unit believes in using a positive mental wellness approach to promoting healthy sexuality within children and youth and addressing any issues prior to the development of risky behaviours (NBPSDHU, 2014). In other words, the implementation of a Safe Space will promote healthy families and positive sexual, preconception, and reproductive health as well as the accurate and consistent transmission of a healthy sexuality message to all gender and sexual diversities (NBPSDHU, 2014). Second, the ultimate goal is to create a Safe and Positive Space for the LGBTQ2S+ community within the Health Unit's service area.

The health unit is expecting its new building to be complete at the end of summer 2017 where Safe and Positive Space recommendations can be fully implemented within a contemporary atmosphere. Due to ongoing managerial and executive support, Samara and her Safe and Positive Spaces workgroup will build knowledge and capacity within the health unit and its staff, ensuring that their goal of creating a welcoming space is achieved.

POSITIVE SPACE CHAMPION: SAMARA LEWIS

Samara Lewis is a public health nurse specialist in the Sexual Health department at the health unit, and has significant experience with the social determinants of health. Samara has worked

at the health unit for 13 years and has a Master of Public Health. Since September 2016, she has been provided with a professional development opportunity. Thus she was placed on special projects in the Planning and Evaluation department where one of her main tasks was to create and lead a Safe and Positive Spaces workgroup. As the workgroup lead, she is expected to develop an appropriate work plan that addresses the health equity issues facing the LGBTQ2S+ community and that assesses organizational readiness for a Safe and Positive Space. In addition, the workgroup must decide on what next steps to take, which recommendations to follow, which guidelines to incorporate, and on how to deliver training and education to health unit staff.

The health unit's 2014-2018 Strategic Plan (NBPSDHU, 2014) and 2016 Annual Report (NBPSDHU, 2016) address the need for a Safe and Positive Space within the health unit and indicate its plans to commence the implementation of such a space in the near future. This organizational vision enables Samara and her workgroup to implement forward-thinking and positive changes within the health unit.

Samara is a hard-working, dedicated, and innovative individual. As a public health nurse, Samara understands the complexities of the social determinants of health and health equity, and the ways in which these concepts manifest themselves within the lives of vulnerable populations. Her thorough understanding of these concepts also stems from the fact that she is co-chairing the Health Equity Action Committee and leading the Collaborative Hepatitis C and Urban Health Outreach workgroup committees. The Urban Health Outreach workgroup is currently addressing the health service gaps for the homeless population in North Bay. Samara is a Positive Space champion and a true advocate for progressive change.

HEALTH DISPARITIES IN THE LGBTQ2S+ COMMUNITY
The LGBTQ2S+ community is a vulnerable and marginalized community. This community is invisible to many Ontario health organizations, even though it accounts for 1-1.25 million of Ontario's population (Association of Ontario Health Centres, n.d.).The LGBTQ2S+ community possesses specific health needs resulting from discrimination and social isolation and, thus, are susceptible to greater health disparities (AOHC, n.d.). Factors such as homophobia, biphobia, transphobia, cultural differences, and systemic oppression also negatively impact the health of those within the LGBTQ2S+ community (Rainbow Health Ontario, 2014a). Most healthcare providers do not receive formal education or training related to LGBTQ2S+ health, specifically in terms of providing culturally sensitive, competent, and safe care (AOHC, n.d.; RHO, 2014a), resulting in health inequities.

Consequently, due to these unsafe environments, individuals who identify as LGBTQ2S+ may refrain from seeking health care and from providing specific personal information to health care providers (RHO, 2014a). Ultimately, the LGBTQ2S+ community receives a lower quality of health care than the general population (RHO, 2014a). In addition, significant gaps still exist in LGBTQ2S+ policy development and research (AOHC, n.d.).

In general, the LGBTQ2S+ community faces many unique health concerns and are at an increased risk for specific health issues, including mental health, substance abuse, smoking, depression, cancer, diet, weight, and body image issues (RHO, 2014a).

Organizations, particularly those that provide health care services to the community, should be aware of these specific health needs and should be trained and capable of addressing these issues in a safe and appropriate manner, as a means to increase health equity within this

vulnerable population. According to a Rapid Response Survey conducted by the Ontario HIV Treatment Network (2014), a facilitator to LGBTQ2S+ health care includes specifically the creation and implementation of a Safe, Gay-Positive Space that is free of violence, stigma, and discrimination (Globerman & Mitra, 2014). Other important LGBTQ2S+ health facilitators include the provision of culturally sensitive health care, based in human rights principles and the creation of inclusive health policies and procedures at the organizational level, thus facilitating the provision of safe, accessible, and equitable health services (Globerman & Mitra, 2014).

SAFE AND POSITIVE SPACES

A Positive Space refers to an organization that is open, welcoming, inclusive, equitable, and accessible to all sexual and gender diversities and whose policies and practices reflect a supportive environment and personnel for both clients and staff (Ontario Public Health Association, 2011). Welcoming spaces are spaces that help to connect individuals and to strengthen communities (WHAI, 2017). Safe and welcoming spaces aim to build warm, inclusive, and friendly environments, and these spaces can often act as safe havens from stigmatization and discrimination (WHAI, 2017). In addition, a Safe and Positive Space applies to an organization in which all employees and staff are educated and trained on the issues surrounding gender, sexual diversities, and human rights and possess the ability to direct clients and patients to the appropriate resources (OPHA, 2011). When developing and implementing Safe and Positive Spaces, it is imperative to also consider and acknowledge the needs, desires, and strengths of the organization's various staff teams (WHAI, 2017). A significant amount of work and advocacy awaits Samara throughout this implementation process. However, the creation of a Safe and Positive Space within the health unit ensures that the organization will provide safe and appropriate services to all members of the LGBTQ2S+ community, including its employees.

A safe and welcoming space encompasses three components: physical space, organizational culture and atmosphere, and individual staff actions (WHAI, 2017). A positive physical space refers to the ways in which the target community will experience and develop a sense of connection with the space (WHAI, 2017). Features like all-gender washrooms, inclusive posters, and gender-neutral intake forms aid in appropriately receiving clients and patients in this positive physical space. Organizational culture and atmosphere refers to inclusive policies and a welcoming ambiance, as policies lay the foundation for the ways in which individuals interact within the organizational space (WHAI, 2017). As for individual staff actions, the staff should be kind and warm and treat everyone with respect, patience, and dignity (WHAI, 2017). Individual actions, such as oral language and body language, provide the basis to building trust within the organization (WHAI, 2017).

Pride symbols, such as the Pride flag, should be openly displayed throughout the organization to demonstrate that said organization is a Positive Space (OPHA, 2011). Significant effort is required to enact policies and procedures that achieve optimal cultural sensitivity and health equity (OPHA, 2011). Rainbow Health Ontario (2014b) provides Safe and Positive Space stickers that organizations can openly display for clients and staff (see Exhibit 1).
There is no official designation or criteria for a Safe Space within an organization. The Ontario Public Health Association's Public Health Alliance for Lesbian, Gay, Bisexual, Transsexual, Transgender, Two-Spirit, Intersex, Queer, and Questioning Equity workgroup has developed a personal assessment tool, by which individuals can evaluate their levels of LGBTQ2S+ cultural competency (OPHA, 2011). In addition, the Ottawa LGBT Cultural Competency Project (2004) has developed a workplace assessment tool, which enables an organization to evaluate its environment, policies, practices, and procedures to ensure that they are facilitating a Safe and

Positive Space (OPHA, 2011). Lastly, the Ontario Council of Agencies Serving Immigrants' Positive Spaces Initiative has developed 25 recommendations to creating a Safe and Positive Space within an organization (Ontario Council of Agencies Serving Immigrants, n.d.).

Many socially conscious organizations have created and developed training, resources, workshops, educational guides, tools, and training kits to aid organizations that are either in the Safe Space contemplation phase or in the implementation process. It is important to share resources, as this further facilitates the sharing of accurate information among organizations. The Ontario Public Health Association, the Ontario Public Service Pride Network, the Ontario Council of Agencies Serving Immigrants' Positive Spaces Initiative, Rainbow Health Ontario, and the 519: Space for Change are all examples of organizations that have taken leadership roles in raising awareness on Safe and Positive Spaces and that have created tools for interested organizations (see Exhibit 2). In addition, the Safe Zone Project (n.d.) and the Ontario Public Service Pride Network's 2010 *Being Ourselves at Work* campaign (Milne, 2012) are two examples of the ways in which organizations are advocating for the human rights and the health equity rights of the LGBTQ2S+ community (see Exhibit 2).

LEGISLATION AND THE *CODE*
Within the *Ontario Human Rights Code* (the *Code*), sexual orientation and gender are both protected grounds against discrimination. As indicated within the *Code*, it is illegal to discriminate against an individual based on sexual orientation or same-sex partnership status (OPHA, 2011). Discrimination based on gender identity is legally protected under the "sex" category of the *Code*. This protection includes transsexual, transgender, and intersex individuals, cross-dressers, and any person whose gender identity or expression is, or is perceived to be, different from their assigned sex at birth (OPHA, 2011). Discrimination, among its many forms, can be manifested systemically, particularly in terms of non-inclusive policies (OPHA, 2011). Individual rights to be free from discrimination apply to, but are not limited to, employment, facilities, and services (OPHA, 2011). In addition, the Gay, Lesbian, Bisexual, and Transgender Health Care Consumer's Bill of Rights indicates that LGBTQ persons of all ages possess the human right to access full and equal health care services and to do so in a safe, inclusive, and welcoming environment (OPHA, 2011). Moreover, these individuals have the right to health care services that are comprehensive, inclusive, and culturally appropriate and sensitive (OPHA, 2011). The workgroup has been accessing these toolkits and testing which components would most benefit its staff and community, paying close attention to the different levels of intersectionality that exist within the local context and its different population groups (i.e., French and Indigenous).

Employment and labour legislations have been put in place in order to ensure that organizations and agencies adhere to the *Human Rights Code* in regards to basic LGBTQ2S+ human rights. The workgroup is aware of these regulations and their legal requirements to be implemented within organizations. The workgroup plans to extend beyond these basic regulations and to implement safe and inclusive policies and procedures within the organization as a whole. Human Resources (HR) will communicate with the SPSWG in terms of the activities that HR is required to implement—to ensure that the workgroup and HR are not duplicating efforts (Lewis, 2017a).

SAFE AND POSITIVE SPACES WORKGROUP
The health unit's SPSWG was established sometime between December 2016 and January 2017 and is being led by Samara Lewis as part of her role as a public health nurse specialist. The purpose of the SPSWG is to raise awareness, build capacity, change attitudes, develop a

plan of action, and implement said plan in order to achieve a safe, positive, and welcoming space at the NBPSDHU. The workgroup is composed of members of various departments and is consequently facilitating capacity and awareness building and knowledge translation among every team within the health unit.

Samara and her workgroup members have created their very own mission, vision, and values statements, which aid in guiding their work in an appropriate and consistent manner across the health unit. The SPSWG's vision consists of a "safe and inclusive space for our LGBTQ community". The workgroup's mission is "to create a welcoming and supportive environment for our LGBTQ community through education, policies, relationships, and an organizational culture that affirms differences, fosters diversity, and cultivates inclusivity". The workgroup's values consist of "respect, trust, open mindedness, compassion, humility, inclusivity, advocacy, and courage". The team has also established expected workgroup outcomes and their associated indicators and activities, which have been further compiled into a logic model. In addition, Samara and her team have conducted scenario planning, enabling them to investigate and to explore all the possible outcomes that may arise throughout the implementation process. This tool provides the workgroup with the ability to determine specific factors, influencers, and driving forces; such as politics, finances, and organizational culture; that may facilitate or inhibit their Safe Space progress. The workgroup can then be proactive and develop action plans that target each potential outcome that they identified in their scenario planning.

Based on the 2014-2018 NBPSDHU Strategic Plan's Priority # 1: fostering healthy behaviours in children and youth through the use of a positive mental wellness approach in promoting healthy sexuality (Strategic Plan 2014-18 Priority 1 Aim 1.1), the workgroup's three short-term outcomes include: 1) "NBPSDHU staff and executive team are aware of the direction, outcomes, vision, mission, and values of the SPSWG"; 2) "Communities across our districts are made aware of our direction and progress towards becoming a Safe and Positive Space"; and 3) "Awareness of the status of current organizational culture surrounding LGBTQ2S+ and becoming a Safe and Positive Space" (Lewis, 2017b). The three long-term outcomes consist of 1) "NBPSDHU staff viewing the workplace as a Safe and Positive Space"; 2) "Members of the community viewing the NBPSDHU as a Safe and Positive Space"; and, 3) "NBPSDHU staff and community members who self-identify as a member of the LGBTQ community feel more welcomed, included and safe while working and using health unit services" (Lewis, 2017b). The workgroup has also discussed the social aspects of their outcomes and expressed that they hope to create a space that feels like a "big comfy couch" for their staff and clients (Lewis, 2017c).

To achieve a Safe and Positive Space, Samara, as the workgroup lead, has taken the initiative to meet and discuss with two health unit staff members who were instrumental in the implementation of the *Baby Friendly Initiative* (BFI) within the health unit. Because of its tremendous success, the workgroup will follow the process that the health unit undertook to receive its BFI designation. The BFI took 17 years to implement at the NBPSDHU, and the Safe and Positive Spaces workgroup hopes to achieve its goal in a shorter timeframe. The process to implement the BFI included an organizational self-appraisal, a timed plan of action, the creation of a committee, Board of Health approval, a numerous amount of capacity and awareness building meetings, and the development of relevant policies and procedures, training, and education within the organization (Lewis, 2017a). BFI is an on-going successful endeavor, as it was achieved through policy and education (Lewis, 2017a). The workgroup will need to present its case in a positive light backed by relevant literature and best-practice evidence to gain momentum (Lewis, 2017a).

When asked about her reasoning behind the use of the BFI process to aid in the Safe Space implementation, Samara indicated that "given the success of our organization and our BFI designation, the SPSWG plans to learn from the successes and the challenges of the BFI designation to ensure equal success". It is clear that using a previously successful implementation process will only benefit the workgroup in its journey towards becoming a Safe and Positive Space.

Members of the workgroup have been attending workshops and trainings to ensure that the workgroup is composed of Positive Space champions. In addition, trained members of the SPSWG will wear Pride flag buttons on their lanyards to demonstrate to other staff members and clients that they are Positive Space champions and are aware of their responsibilities and accountabilities as champions.

A major concern facing the workgroup is the fact that Samara's role in the Planning and Evaluation department ends in September 2017 and consequently, so does her role as the workgroup lead. Because of this, the future of the workgroup is unknown.

NEW HEALTH UNIT BUILDING
The North Bay Parry Sound District Health Unit is in the final process of building a larger, more innovative and modern building to serve its clients within the community. The new building's purpose is to address inefficiencies and inadequate work spaces that exist at the NBPSDHU (North Bay Parry Sound District Health Unit, n.d.d). The Health Unit currently provides its services from three buildings in North Bay and two branch offices; one in Burks Falls and one in Parry Sound (NBPSDHU, n.d.d). The consolidation of North Bay's three offices into one larger, main building will enable the Health Unit to provide more accessible, accommodating, effective, and efficient services to its clients and provide appropriate workspaces for its staff and their programs (NBPSDHU, n.d.d).

As per the 2014-2018 Strategic Plan and the 2016 Annual Report, the health unit has committed to becoming a Safe and Positive Space for the LGBTQ2S+ community (NBPSDHU, 2014; NBPSDHU, 2016). Thus, the new health unit building will possess all-gender washrooms, where members of all sexual and gender diversities may feel included, free, and welcome to use the washrooms of their choice. The new building will also possess traditional male and female washrooms to accommodate those who identify as male or as female.

It is certain that new dynamics will emerge from such a move. The workgroup's hope is that this new building provides a fresh start and implements a Safe and Positive Space for staff and clients alike.

NBPSDHU AND A SAFE AND POSITIVE SPACE: A GOOD FIT?
The SPSWG has been working relentlessly to find the most effective and impactful ways to implement a Safe and Positive Space at the North Bay Parry Sound District Health Unit. Though the SPSWG possesses managerial support, it goes without saying that modifications to organizational climates often result in several challenges and obstacles.

In terms of the Health Unit staff, organizational culture, climate, and readiness for change will be assessed through a survey. The survey will evaluate factors such as workplace attitudes and staff readiness for Safe and Positive Spaces, establishing baseline measures for the workgroup. The group has sent out a Research, Planning, Implementation, Dissemination, and Surveillance (RAPIDS) request to the Health Unit's Planning and Evaluation department, which will enable

the group to conduct staff data collection throughout the organization. Extraneous variables, such as a lack of education and training on LGBTQ2S+ matters may impact and confound the answers that the respondents provide on the survey. A significant factor that may impact the ways in which the staff view the importance of a Safe and Positive Space consists of the real and perceived lack of visible diversity within this Northern-Ontarian context. Importantly, the intersectionality that exists between the LGBTQ2S+, Indigenous population, and French populations within this context must be considered, as each population brings about a unique set of needs, desires, and complexities. It is not only important to provide culturally sensitive services to the LGBTQ2S+ community but also to the many subgroups and cultures that fall within this umbrella term.

There are many challenges that may arise throughout the implementation of a Safe and Positive Space. The process of fully implementing this space and conducting an environmental scan to ensure that this space has been fully achieved may prove to be extremely lengthy. The capacity and the available resources at the health unit may not be sufficient to complete this task in a short timeframe. In addition, different health unit departments may hold different views and beliefs and may have different needs for a Safe Space. This is a difficult obstacle to overcome, as full consensus throughout the organization may not be achieved. Furthermore, due to staff turnover, it is difficult to assess the sustainability of the workgroup and of its achieved outcomes. The health unit may benefit by making tailored Safe and Positive Spaces training mandatory, ensuring that all new employees are aware of the work behaviour that is expected of them. Effective knowledge translation will be imperative to overcome the challenges associated with staff turnover. Knowledge translation may also entice committed individuals to become Positive Space champions at the health unit.

The workgroup, in addition to creating their outcomes, also established the social cultural aspects associated with the outcomes. This will enable the workgroup to evaluate the feelings and experiences of their staff and clients once the team succeeds in achieving their outcomes (Lewis, 2017c).

During one of their monthly meetings, the workgroup created a "wish list" that encompassed the following:

1. No resistance from staff in their contribution to the creation of a Safe and Positive Space.
2. The feeling of a "*big comfy couch*" for staff and clients.
3. The resources and capacity to evaluate programs and services to ensure they accurately reflect LGBTQ2S+ language and issues.
4. An increased visibility and recognition that the health unit is a Safe and Positive Space.
5. The knowledge, skills, and self-efficacy to advocate for the LGBTQ2S+ community.
6. An appropriate screening tool to assess the Health Unit's current resources to ensure that they are inclusive and culturally sensitive (Lewis, 2017c).

One of the most significant challenges in implementing a Safe and Positive Space within an organization is the lack of evidence-based best practices. Lengthy recommendations, guidelines, and checklists exist; however, they are not consistent nor are they standardized. In addition, there are suggestions, trainings, and workshops that an organization should follow and participate in as well as mandated and legally required employment practices. The 519, a Toronto agency and registered charity, is an organization that is committed to the health, happiness, and participation of the LGBTQ community and to providing services, space, and

leadership that promote inclusion, empathy, compassion, and respect (The 519, n.d.a). The 519 has created an infographic within their *Creating Authentic Spaces* document (Hixson-Vulpe, n.d.) that provides suggestions on how to create a welcoming space within an organization (see Exhibit 3, The 519, n.d.b). Nonetheless, health units possess the freedom to choose which recommendations to implement, resulting in inconsistencies across health units. Consequently, it is difficult for an organization to create their own Safe Space criteria and standards of practice that reflect the needs of both the organization and the LGBTQ2S+ population. In addition, there is no official Safe and Positive Space designation, therefore making it difficult to evaluate when a true Safe and Positive Space has been achieved within the organization. However, the health unit may benefit in merging existing standards of practice and creating their own to suit their organizational context.

Despite these challenges, the health unit possesses significant managerial support and a committee that is determined to catalyze positive change within the organization and to increase health equity for the LGBTQ2S+ community. September is approaching quickly and it will be necessary to establish a framework upon which future Positive Space champions can continue the Safe and Positive Space work. Many tools, trainings, and resources exist to help facilitate this process, and the committee is hard at work in finding the most comprehensive and appropriate resources for the North Bay Parry Sound District Health Unit.

THE IMPLEMENTATION OF A SAFE AND POSITIVE SPACE
Samara has been tasked with a challenging goal. Many steps need to be undertaken to successfully implement changes within an organization. It is up to Samara and her workgroup to decide which next steps are the most effective in reaching their goal in the shortest amount of time. Good things take time, and so does achieving a Safe and Positive Space.

To initiate the implementation process, Samara and her workgroup have put in a RAPIDS request for a survey to evaluate organizational culture and readiness. This will establish a starting point for the implementation of a Safe and Positive Space. The survey will enable the workgroup to assess staff opinions and the current atmosphere at the health unit and will facilitate the next implementation steps. The workgroup is also consulting the Ontario Public Service Pride Network's Safe Space model (Milne, 2012) and the *Being Ourselves at Work Campaign* in hopes to implement a similar framework. It is not always necessary to reinvent the wheel. Often, it is beneficial to see what other organizations have done, evaluate their successes and challenges, and replicate what has been successfully achieved within one's own organization.

The workgroup is in the process of developing an informative presentation for an upcoming Program and Services Managers Committee (PSMC) meeting. The ultimate goal of this presentation is to persuade the program managers to make Safe and Positive Spaces a mandatory agenda item for all department meetings. This presentation is crucial in reinforcing to the managers the importance of a Safe and Positive Space and ensuring that they understand the urgency of raising Safe and Positive Space awareness among the health unit staff.
In terms of the workgroup's plan of action, some next steps have been developed and elaborated upon that will help achieve the implementation of a Safe Space (see Exhibit 4A).

One workgroup success consists of the inclusion of the health unit on the Find Refuge website, a site that is aimed at providing a list of organizations that contain all-gender, gender inclusive, and accessible washrooms (Refuge Restrooms, 2017).

Due to the multidimensional nature of this process, it will be necessary for Samara and her team to conduct a routine environmental scan to assess the Safe Space progress within the health unit. It will also be essential to provide a platform within which the LGBTQ2S+ community can provide feedback on the health unit's Safe Space progress, as outlined within the logic model. To help achieve this goal, the health unit had a guest speaker from Rainbow Health Ontario come to discuss LGBTQ2S+-specific health issues and barriers (NBPSDHU, 2016). This presentation was also conducted to aid the health unit in building capacity, staff skills, and knowledge for providing equitable, accessible, and appropriate health services to the community and raising awareness on staff accountability (NBPSDHU, 2016). There are many practices that an organization can undertake to aid in their Safe and Positive Space implementation and to ensure that the latter is contextually relevant and considers the various levels of intersectionality that exist within a Northern Ontario context (see Exhibit 4B). Consequently, the staff survey will aid in identifying which Safe Space practices are realistic and appropriate to implement within the health unit, based on staff readiness and organizational culture, and which are the most efficient given the time restraints.

CONCLUSION

Time is of the essence. Only a few months remain until Samara will return to the sexual health department and will no longer lead the Safe and Positive Spaces workgroup. The workgroup must develop an appropriate plan of action prior to September to ensure that the Safe and Positive Spaces work does not end when the workgroup does. Further marginalization of this population will occur if the workgroup is dissolved.

One question still remains: who will lead the Safe and Positive Spaces initiative once September arrives? Ideally, a Positive Space champion will step up and take on the workgroup lead position. This will ensure that the work will continue and that further Safe Space actions may be implemented, resulting in the health unit confidently earning its Pride sticker.

As Samara prepped for her next workgroup meeting, she could not help but think about the progress that has been made and all of the work that has yet to be completed. Predominantly, consultations with members of the Francophone and Indigenous communities who identify as LGBTQ2S+ will also be necessary to target the needs of these unique and intersectional groups. It is up to Samara to ensure that the right decisions are being made, the right steps are taken, and the right populations are consulted to guarantee that a culturally appropriate and contextually relevant Safe and Positive Space is created and implemented within the North Bay Parry Sound District Health Unit.

EXHIBIT 1

lesbian · gay
bisexual · trans
two spirit · queer

this is a
POSITIVE SPACE
that welcomes and
supports everyone

Source: Rainbow Health Ontario, 2014b.

EXHIBIT 2

List of resources and websites that can be used to aid organizations in becoming Safe and Positive Spaces:

- The Ontario Public Health Association: http://www.opha.on.ca/getmedia/125e32e7-f9cb-48ed-89cb-9d954d76537b/SexualHealthPaper-Mar11.pdf.aspx?ext=.pdf
- The Ontario Council of Agencies Serving Immigrants' Positive Spaces Initiative: http://positivespaces.ca/
- Rainbow Health Ontario: https://www.rainbowhealthontario.ca/
- The 519-Space for Change: http://www.the519.org/
- The Safe Zone Project: http://thesafezoneproject.com/
- The Ontario Public Service Pride Network's 2010 Being Ourselves at Work Campaign: http://canadiangovernmentexecutive.ca/being-ourselves-at-work/

EXHIBIT 3

CREATING A WELCOMING ENVIRONMENT

THE PERCEIVE AND FEEL FRAMEWORK

A welcoming environment feels safe. It is a space where people can find themselves represented and reflected, and where they understand that all people are treated with respect and dignity. This happens when services consider, and are equitable and accessible to all members of the LGBTQ community, including clients, staff, and volunteers.

A SPACE WHERE PEOPLE CAN FIND THEMSELVES REPRESENTED AND REFLECTED AND WHERE THEY UNDERSTAND THAT ALL PEOPLE ARE TREATED WITH RESPECT AND DIGNITY.

PERCEIVE
physical environment and language

Service users/staff must be able to look around their physical environment and see positive and inclusive symbols, images, and artwork.

Service users/staff must be able to look around and see positive and inclusive brochures and pamphlets that represent their experiences.

Service users/staff must be able to hear positive and inclusive language and be comfortable using inclusive and positive language.

FEEL
overall environment, which imparts a sense of safety

Service users' and employees' gender identities and expressions are acknowledged, affirmed, and respected.

SAFE PLACE There are visible and verbal reminders that the agency is a safe place.

Accessible/supportive processes are available that allow people to raise issues and concerns, and to feel that they have been acknowledged and that there will be follow-up.

Service users and staff are aware that communication goes two ways.

MATERIALS ✓
Put up inclusive posters and stickers. Think about the reading material in your waiting rooms and the people represented in them.

LANGUAGE ✓
Make sure that inclusive and affirming language is the standard. Educate employees and make sure your policies reflect the changes to Ontario's *Human Rights Code*.

FORMS ✓
Make sure forms have a space for legal name and another name (some people don't go by their legal name). Make sure forms reflect only what you need to know.

#TRANSINCLUSION

INFOGRAPHIC DESIGN BY: LIGHTUPTHESKY.CA

HEAR STOP IT! IT! #NOBYSTANDERS

THE 519 SPACE FOR CHANGE

Source: The 519, n.d.b.

EXHIBIT 4A

The Safe and Positive Spaces workgroup's action plan includes:

1. Forming a subgroup for mandatory comprehensive and tailored staff training;
2. Creating LGBTQ2S+ resource sheets for staff and clients;
3. Developing a form of messaging (posters, digital communication, social media…) to demonstrate that the NBPSDHU is a Safe and Positive Space "work in progress";
4. Creating a bucket on the health unit's intranet to provide the staff with Safe and Positive Spaces resources (conversation starter activities, glossary of terms, guidelines, posters…);
5. The inclusion of the Ontario Public Service Pride Network videos on team agendas to aid with Positive Space education;
6. The finalization of the SPSWG's logic model and scenario planning;
7. Developing a workgroup work plan; and,
8. Developing recommendations for more inclusive and gender-neutral patient forms.

Source: Lewis, 2017a.

EXHIBIT 4B

Safe and Positive Space practices that could greatly benefit the North Bay Parry Sound District health unit include:

1. Inclusive and gender neutral intake and referral forms that provide a blank space for "sex", that explain why the "sex" is required, and that provides space to indicate pronouns, gender identity, and a preferred name;
2. Normalizing the conversation. This can be achieved by commencing meetings with pronoun identification and creating email signatures that contain the person's appropriate pronouns. This can also be achieved by recognizing one's responsibility, as a public health professional, to be aware and informed of LGBTQ2S+ health barriers and facilitators;
3. Implementing a standardized interview question regarding the importance of LGBTQ2S+ issues for prospective employees, volunteers, and placements. Thus, instilling and maintaining positive change within the organization;
4. Creating an inventory of Safe Space organizations within the North Bay and Parry Sound areas and contributing to the "in progress" Positive Spaces Network of North Bay and Area. It is important to share individuals and resources among organizations and ensure constant communication channels;
5. Conducting focus groups with members of the LGBTQ2S+ community to see if the health unit is inclusive to all gender and sexual diversities, to ask where the NBPSDHU can improve, where it is lacking, how it is perceived in the community, and if the health unit staff should be further trained in Positive Spaces. By doing so, the health unit will gain essential and valuable feedback and will be acknowledging important lived experiences; and,
6. Displaying posters and providing information that is inclusive of all diversities and that portray LGBTQ2S+ families.

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INSTRUCTOR GUIDANCE

Big Comfy Couch: The Implementation of an LGBTQ2S+ Safe and Positive Space Within a Public Health Unit

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BACKGROUND

Samara Lewis is a public health nurse specialist at the North Bay Parry Sound District Health Unit (NBPSDHU). Samara has been tasked with creating a Safe and Positive Spaces workgroup that will aid in the implementation of an LGBTQ2S+ Safe and Positive Space at the health unit. Priority number one in the health unit's 2014-2018 Strategic Plan aligns directly with the creation of said spaces, as the health unit is committed to provisioning healthy sexuality messaging and to ensuring safe, welcoming, and accessible health services to all sexual and gender diversities. Safe and Positive Spaces act as facilitators in achieving health equity for the LGBTQ2S+ community. In September 2017, Samara will return to the Sexual Health department—her home department. Consequently, the future of the workgroup is unknown. Will a Positive Space champion step up and commit to leading the workgroup? Will the health unit achieve health equity for the LGBTQ2S+ community? Time is of the essence.

OBJECTIVES

1. Consider the complexities involved in gender and sexual diversities, as well as familiarity with the appropriate LGBTQ2S+ terms.
2. Identify contextual organizational factors that may facilitate or inhibit the implementation of a Safe and Positive Space.
3. Analyze policies to assess inclusivity and cultural competency.
4. Discuss and understand the importance of implementing a Safe and Positive Space in a public health organization.
5. Develop a context-specific implementation plan for Safe and Positive Spaces.
6. Discuss roles, responsibilities, and accountabilities that public health professionals have in ensuring health equity and inclusivity for the LGBTQ2S+ community.

DISCUSSION QUESTIONS

1. What are effective strategies in ensuring the implementation of a Safe and Positive Space?
2. How can public health professionals advocate for the rights of the LGBTQ2S+ population in terms of safe and equitable health services?
3. How do Safe Spaces facilitate health equity within the LGBTQ2S+ community?
4. What are potential challenges that may arise in implementing a Safe and Positive Space?
5. How can an organization ensure that it is providing safe and welcoming services to its clients?

6. What steps are the most effective in creating a Safe and Positive Space (i.e. inclusive policies, all-gender washrooms, positive space stickers, etc.)?

KEYWORDS

LGBTQ2S+ health; Safe and Positive Space; implementation research; health equity; cultural competency; cultural safety; inclusivity.