

Identifying barriers, developing solutions: Addressing the health and social needs of gay, lesbian, bisexual and transgender older adults who reside in long-term care homes – An Environmental Scan

Findings

5 Canadian Cities:

- Toronto
- Ottawa
- Montreal
- Vancouver
- Victoria



TORONTO

TASK

Briefly introduce yourself to the rest of your group On the top of a flipchart, write the name of the city you are summarizing

Write down the number of organizations and facilities that were eligible for inclusion

List which of the 10 initiatives were done by at least ½ of the combined organizations and facilities in your city.

Looking at the environmental scan as a whole, are there any initiatives that you think should have been included (in addition to the 10 listed)?

On the whole, how do you think your city is doing?

FINDINGS:

A total of six organizations and fourteen facilities were eligible for inclusion in Toronto.

Organizations

According to key informant interviews, four of the six organizations have undertaken initiatives to address issues related to LGBT older adults in congregate living. More specifically, this is what they have done:

- two organizations were instrumental in working with long-term care facilities, LGBT older adults, and researchers, in the development of a publication meant to be used by long-term care facilities to become more inclusive and welcoming of LGBT older adults;
- two organizations have offered training in congregate living facilities;
- one organization, which offers a range of services for older adults including a housing unit for older adults with dementia, adopted an LGBT inclusiveness strategy in 2010, and has ensured that all staff in their organization has been trained.



Facilities

Fourteen facilities were identified by key informants as being LGBT "friendly". Of the fourteen facilities identified as LGBT friendly 11 were publicly funded long-term care home and three were private retirement residences. Seven key informants were reached to provide additional information on the initiatives undertaken by the fourteen facilities identified in the scan.

THE INITIATIVES

On-line statements about LGBT inclusivity

Eleven facilities, including ten public homes governed by one administration identified themselves as LGBT responsive in their on-line promotional material. The ten public homes provide a link to a tool kit they developed in collaboration with community agencies to ensure LGBT identifying older adults would not experience discrimination when entering a long-term care home (http://www.toronto.ca/ltc/pdf/lgbt_toolkit_2008.pdf). Another facility, a retirement residence, is self-promoted on-line as "recogniz[ing] and celebrat[ing] the diversity of the lesbian, gay, bisexual, transsexual, transgender, two-spirited, queer, intersexed communities." These eleven facilities are the only facilities included in the scan that were identified on-line suggesting that most LGBT 'friendly' facilities can only be located through word of mouth.

General Inclusivity

Two of the fourteen facilities described their approach as "inclusive of everyone". As such, no specific steps were undertaken to address the issues of LGBT older adults, because these facilities "don't differentiate". Both facilities are members of the Toronto Senior Pride Network.

Training

Eleven facilities identified as inclusive of and welcoming to LGBT seniors reported receiving LGBT inclusivity training. In nine of the homes LGBT inclusivity training was provided to all staff and volunteers on a one time. The other two facilities offered training to selected staff such as social workers and managers.



LGBT Steering Committee

An LGBT steering committee was established by the head office of the ten public homes in collaboration with two Toronto based community organizations. The committee was established to help guide the homes in the establishment of an LGBT inclusive and positive atmosphere. The Steering committee was instrumental in the creation of the tool kit described above. Membership of the steering committee included representatives from: long-term care homes, community organizations servicing LGBT older adults and LGBT older adults.

Welcoming Physical Environment

Two facilities reported having visual cues such as the Pride rainbow flag displayed in the facility's common areas. During Pride week, one of them also distributes rainbow flag pins, displays big banners, and flies a rainbow flag on its mast.

Programming

Two facilities reported incorporating LGBT-themed activities into their programming. Programs and activities include the following:

- Gay-themed readings and movies on a regular basis
- Tea with the Vicar: a social for the LGBT population, often with a guest speaker
- Guest speakers or roundtables on LGBT issues
- Pride week BBQ, entertainment, and flag-raising
- Participation in the Pride parade
- Bingo called by a prominent drag queen
- Cabaret shows
- "True Colours" social club organizes lunches out in the Gay village, for example
- · Renting out rehearsal space to a gay choir
- LGBT publications available in common areas

Key informants from facilities who have not developed LGBT themed programming suggested that they would develop this type of programming if they had a big enough LGBT population at their facility. As one key informant stated "We simply don't have the commodity – but if we did, we would set things up in a New York minute."



Participation in Pride Parade

Six facilities reported participating in the Pride parade.

Outreach/Recruitment

Three facilities were identified as having made efforts to outreach and recruit residents or volunteers from the LGBT community. For example one facility invited the seniors' group at a nearby LGBT organization to come to the facility for a recital and social with current LGBT residents, and then gave a tour of the facility. Another facility asked LGBT organizations to advertise their facility amongst its older members. A third facility has actively outreached to the LGBT community to recruit volunteers.

Including LGBT Representation on Advisory Committees/ Boards

Two facilities invited representatives of LGBT organizations to sit on their advisory committees.

Attention to Language

Two facilities reported making efforts to use inclusive language in programming, documentation and in discussions with residents. For example, one facility renamed its "Family Christmas dinner" a "Family and Friends Christmas dinner" in recognition of the notion of "chosen families".



OTTAWA

TASK

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List which of the 10 initiatives were done by at least ½ of the combined organizations and facilities in your city.

Looking at the environmental scan as a whole, are there any initiatives that you think should have been included (in addition to the 10 listed)?

On the whole, how do you think your city is doing?

FINDINGS:

A total of three organizations and ten facilities were eligible for inclusion in Ottawa. Eight key informants were reached to provide information on LGBT initiatives undertaken by facilities in Ottawa.

Organizations

According to key informant interviews, two of these organizations have done work directly relevant to LGBT seniors in congregate living:

- One organization is currently working with the head office of Ottawa's municipal homes to adopt an LGBT inclusiveness strategy. This organization is also reaching out to private retirement homes to offer LGBT sensitivity training.
- One organization hosts a regular LGBT social activity, which has taken place in a room at an Ottawa-based retirement home; however, no residents have participated in the activity to date (instead, communityresiding older LGBT adults attend the program).



Facilities

Of the ten facilities identified as LGBT "friendly" by key informants four are public long-term care homes, and six are private retirement homes (one of which has recently been allocated funding for transitional beds).

THE INITIATIVES

On-line promotion or recognition of LGBT residents

According to our search results No Ottawa facilities identified themselves as LGBT sensitivity in their on-line materials.

General Inclusivity

One of the retirement homes reported providing in-house seminars on treating everyone equally regardless of ethnicity, religions, sexual preference, etc. This was the sole strategy adopted by the organization.

Advisory/Steering Committee

None of the Ottawa facilities identified reported forming an LGBT advisory or steering committee. However, one long-term care home administrator reportedly acts as a long-term care home representative on the Ottawa Senior Pride Network.

Training

Nine of the facilities (five retirement facilities and four public long-term care homes) reported receiving LGBT inclusivity training. In all cases the training was provided to management only. One of these retirement homes explained that part of the motivation for requesting the training was to be "ahead of the curve in responding to the new babyboom cohort."

Welcoming Physical Environment

None of the Ottawa facilities identified reported having visual cues such as the Pride flag or pictures of same-sex couples in their environments.

Programming

None of the Ottawa facilities reported offering LGBT-themed programming for residents. However, one retirement home reported occasionally providing space for a community organization to host a "Rainbow Coffee Group", but residents do not appear to participate in this.



Outreach/Recruitment

None of the Ottawa facilities reported any outreach work to recruit volunteers, staff, or residents from the LGBT community.

Attention to Language

None of the key informants from the Ottawa facilities specifically mentioned that their respective facilities had made sure, or were planning on making sure, that the language used in policies, publications, meetings with residents, and any communication within the facility is inclusive of sexual minorities.



MONTREAL

TASK

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List which of the 10 initiatives were done by at least ½ of the combined organizations and facilities in your city.

Looking at the environmental scan as a whole, are there any initiatives that you think should have been included (in addition to the 10 listed)?

On the whole, how do you think your city is doing?

FINDINGS:

A total of five organizations and six facilities were eligible for inclusion in Montreal. Ten key informants were reached to provide information on LGBT initiatives undertaken by facilities in Montreal.

Organizations

According to key informant interviews, three of the organizations have done work directly relevant to LGBT seniors in congregate living:

- One has launched a campaign called "Pour que vieillir soit gai," for which it has written a *Charte de la bientraitance envers les personnes aînées homosexuelles* and developed some information resources.
- One has screened a documentary for residents of various congregate living facilities about the experiences of older lesbians.
- One has outreached to a housing non-profit organization to secure a number of retirement apartments, half of which will be governmentsubsidized.



Facilities

In Montreal, a total of six facilities were identified for inclusion by key informants.¹ Two of these facilities are currently in development, one is a public long-term care home and three are retirement residences (two private and one not-for-profit). The two currently under construction will both be located in or near Montreal's Gay Village. One is a multi-purpose facility which will include apartments for older gay men, and one is a facility for seniors with reduced autonomy which has identified lesbians as a priority population.

Six key informants were reached to provide additional information on the initiatives undertaken by the facilities.

THE INITIATIVES

On-line promotion or recognition of LGBT residents

None of the Montreal facilities were found to advertise inclusion of LGBT sensitivity in their on-line materials.

General Inclusivity

One Montreal facility described their approach as open to and inclusive of all residents. This facility has a *Charter of the Rights of the Elderly* which, while not making any specific reference to LGBT seniors, does include two rights that could be especially pertinent to them: these are the "right to express his/her individuality and sexuality" and the right to be called by the name of his/her choice.

¹ The Québec Ministry of Health and Social Services offers two training programs to service providers about working with the LGBT population. These are entitled "Training for a new vision of homosexuality" and "Training to adapt our interventions to homosexual realities: intervening at all ages" (both our translations). From information gathered, it appears that a number of congregate living facilities throughout the province have received such training; however, the project coordinator was not able to find a list naming all of these facilities, or even get a number of how many have requested the training. For the purposes of this scan, the project coordinator relied on the information provided by the key informants included in the sample in order to identify facilities of interest. None of the key informants at the facilities identified recalled receiving this provincial training.



Advisory/Steering Committee

None of the Montreal facilities reported forming an LGBT advisory or steering committee.

Training

None of the Montreal facilities identified in this scan reported offering LGBT training to any of its staff. This was somewhat surprising given that in Quebec the Minister of Health and Social Services funds voluntary LGBT sensitivity training to any congregate living facility that requests it.

Welcoming Physical Environment

One of the facilities reported displaying the *Charte de la bientraitance envers les personnes aînées homosexuelles* created by Fondation Émergence in the residence.

Programming

None of the facilities identified reported offering regularly-scheduled LGBT-themed activities or programs. One of them, however, once held a coffee discussion on aging and homosexuality, and held discussions with residents leading up to a joint press conference that the facility did with the Fondation Émergence about its *Charte de la bientraitance envers les personnes aînées homosexuelles*.

Two of the facilities (one long-term care home and one retirement residence) allowed a community organization to screen a documentary on older lesbian women. In one long-term care home residents followed up by planning a Valentine's Day event that was inclusive of same-sex couples.

Outreach

Three facilities reported actively outreaching the LGBT community. Two of these facilities are in the process of development and are scheduled to open in the coming year: one of these is a multi-purpose facility which will include apartments for older gay men, and one is a facility for seniors with reduced autonomy which has identified lesbians as a priority population. In both of these facilities, both located in or near Montreal's Gay Village, about half of the apartments will be government-subsidized and the others will not.



Official Partnership with an LGBT Organizations

None of the Montreal facilities identified reported having an official partnership with any LGBT organization.

Attention to Language

One facility reported making a language adaptation when interviewing potential residents. In the case of this facility, potential residents are asked how they would feel having a neighbour of a different culture, background or sexual orientation. Previously the question asked only about culture and background.



VANCOUVER

TASK

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Write down the number of organizations and facilities that were eligible for inclusion

List which of the 10 initiatives were done by at least ½ of the combined organizations and facilities in your city.

Looking at the environmental scan as a whole, are there any initiatives that you think should have been included (in addition to the 10 listed)?

On the whole, how do you think your city is doing?

FINDINGS:

A total of six organizations and two facilities were included in the scan in Vancouver. Three key informants were reached to provide information on LGBT initiatives undertaken by facilities in Vancouver.

Organizations

According to information gathered through key informant interviews, only one of these organizations actually does work directly relevant to LGBT seniors in congregate living. This organization has provided LGBT diversity training in continuum of care complexes. While the organization would like to outreach to more facilities, limited staffing has required that training be offered by demand only.

One of the organizations identified in the on-line search advertised itself as working in partnership with a business to try to "consider the development of a progressive living community for The Second Fifty Years," a community that "will welcome LGBTQ and our friends and families." The project coordinator was not able to contact a key informant at this organization, and no other key informant could speak to this project.



Facilities

The two facilities included in the scan from Vancouver are continuum of care complexes.

THE INITIATIVES

On-line promotion or recognition of LGBT residents

None of the Vancouver facilities were found to advertise inclusion of LGBT sensitivity in their on-line materials.

Advisory Committee

One of the facilities reported being is in the process of putting together an LGBT Advisory Committee which will be composed of staff members, residents, family members, and members of the community at large.

Training

Both of the facilities identified in the scan reported receiving training from a community organization. In both cases a management level staff member approached the organization to pursue training. One of the facilities had heard about the LGBT Diversity Initiative in Toronto and was interested in learning more about how to become an LGBT competent facility. At this facility, training was offered on a first come first serve basis to any interested staff. Demands exceeded the capacity for the one-day training. The second facility organized training for its professional staff (social workers, occupational therapists, and nurses).

Welcoming Physical Environment

One of the Vancouver facilities reported displaying a few rainbow stickers in the residence to provide visual "safe space" indicators.



Programming

Neither of the Vancouver facilities reported regular LGBT-themed programming, but one of the facilities hopes to have a community organization host a discussion with residents on LGBT history. This idea developed after an activity was held on the history of women and pants; residents who participated in this expressed an interest in having a similar activity on LGBT history. Some staff at this facility also participated, as representatives of the facility, in a queer breakfast event held in the community.

Outreach

One of the Vancouver facilities reported actively outreached to the LGBT senior community: it hosted a tea and tour for senior lesbians.

Attention to Language

One of the facilities identified the need to review its policies and procedures to ensure that LGBT-inclusive language is used in all facility documentation. This process has not started yet.



VICTORIA

TASK

Briefly introduce yourself to the rest of your group On the top of a flipchart, write the name of the city you are summarizing

Write down the number of organizations and facilities that were eligible for inclusion

List which of the 10 initiatives were done by at least ½ of the combined organizations and facilities in your city.

Looking at the environmental scan as a whole, are there any initiatives that you think should have been included (in addition to the 10 listed)?

On the whole, how do you think your city is doing?

FINDINGS:

A total of two organizations and two facilities were included in the scan in Victoria. Three key informants were reached to provide information on LGBT initiatives undertaken by facilities in Victoria.

Organizations

Both organizations were identified on-line, and both are volunteer organizations. According to information gathered by key informants, only one of these organizations has done work directly relevant to LGBT seniors in congregate living. This organization was originally formed to try to establish housing for lesbian seniors, but it has more recently focused on providing recreational and social activities to senior lesbians, as well as on raising awareness about the health and social service needs of senior lesbians.



Facilities

Two facilities were identified in the Victoria by one key informant. One facility is a public long-term care facility, and the other is a public continuum of care complex that services veterans. Another Victoria facility, a retirement home for lesbian seniors, had been identified but was excluded because plans for its development had halted.

THE INITIATIVES

On-line promotion or recognition of LGBT residents

None of the Victoria facilities were found to advertise inclusion of LGBT sensitivity in their on-line materials.

General Inclusivity

Neither of the facilities identified have taken any explicit steps to ensure LGBT-inclusivity. The key informant at one facility explained that any government-funded facility does not have the right to exclude anyone on any basis (other than level of care needs), and suggested that by not being exclusive, the facility was being inclusive.

Advisory/Steering Committee

Neither of the Victoria facilities identified reported forming, or planning to form, an LGBT advisory or steering committee.

Training

Neither of the Victoria facilities reported receiving LGBT sensitivity training.

Welcoming Physical Environment

Neither of the Victoria facilities identified reported displaying any visual "safe space" indicators such as the Pride flag or pictures of same-sex couples. The key informant of one facility explained that residents would be welcome to display whatever they like in their rooms, but that the facility would not display such signage in the hallways since this is shared space and the residents' home – the residence would not want to be imposing.

Programming

Neither of the Victoria facilities identified reported offering any LGBT-themed programming or activities.



Outreach/Recruitment

Neither of the Victoria facilities reported initiative to recruit LGBT residents, staff, or volunteers.

Official Partnerships

Neither of the Victoria facilities reported establishing a formal relationship with an LGBT organization.

Attention to Language

Neither of Victoria facilities reported assessing all of their respective policies and procedures to ensure that language used is inclusive of sexual minorities. The key informant of one facility, however, said that she is participating in the development of a policy on resident sexuality, and is pushing to ensure that the language used in this policy is inclusive of sexual minorities.



Identifying barriers, developing solutions: Addressing the health and social needs of gay, lesbian, bisexual and transgender older adults who reside in long-term care homes – An Environmental Scan

Environmental Scan Report: Summary of Results

A total of 34 facilities were surveyed and the following summarizes all of the results. This summary is grouped by: Initiatives, Perceived Facilitators for the Implementation of a Comprehensive Approach, Challenges Implementing LGBT Initiatives and Strategies, and Points of Contention. Note: The LGBT Tool Kit published by the City of Toronto Long-term Care Homes and Services outlines a clear framework for the inclusivity of LGBT residents: (1) programs & services, (2) governance, (3) human resources, (4) physical facility & environmental design, (5) communications, and (6) community relations.

Initiatives:

Online Promotion or Recognition of LGBT Residents – 11 facilities included an online statement about LGBT inclusivity and 22 facilities were described by others as LGBT inclusive without any online promotion.

<u>General Inclusivity</u> – 15 facilities described themselves as broadly inclusive and welcoming of everyone; not featuring specific LGBT activities nor signage (safe space visuals); rather working from a premise that being inclusive of everyone was sufficient for LGBT residents to feel included.

<u>Advisory/Steering Committee</u> – 11 were (or soon would be) guided by an LGBT steering committee or advisory group in the development and implementation of an LGBT sensitivity and inclusivity strategy.

<u>Training</u> – 22 received some sort of staff training on LGBT older adults; of these only 10 provided training to all staff; 3 offered training only to professional staff; 9 offered training only to management staff. Note: the



concept of training is new (1st facility in 2000 and rest since 2008). Only 5 of the 22 are private facilities.

<u>Welcoming Physical Environment</u> – 5 display visual signs (rainbow flags/stickers or a charter of rights for older LG adults)

<u>Programming</u> – 2 have regularly-scheduled LGBT-themed programming. 9 others held 1-time occasional LGBT-themed activities (like participation in a pride parade).

<u>Outreach/Recruitment</u> – 7 advertise amongst LGBT community; 1 actively seeks volunteers from the LGBT community; 2 specifically were developed to recruit LG residents.

Official Partnership – 2 have formal partnerships with an LGBT organization; all the rest who have taken concrete steps to be inclusive have partnered with an LGBT organization in one way or another.

<u>Attention to Language</u> – 3 have made adaptations to the language of their programming or intake process to ensure more inclusivity (as a result of training received); 2 others intend to review their language.

<u>Comprehensive Approach</u> – 3 have fully embraced the 6 category framework of the LGBT Tool Kit (see note on page 1). 27 others have undertaken at least 1 initiative that fits into 1 category.

Perceived Facilitators for the Implementation of a Comprehensive Approach:

LGBT Staff or Volunteers Open at Work – if staff and volunteers are not comfortable being open about their sexual orientation, residents won't either. Having openly LGBT staff doesn't guarantee residents will feel comfortable and recognized, but it is an indication a facility can be open and welcoming. There seems to be a correlation between facilities that don't have any openly LGBT staff or volunteers and who also don't have openly LGBT residents.

<u>Champions of the Cause</u> – It is important to have Champions of LGBT inclusion at all levels of the facility/organization.



Residents Comfortable Coming/Being Out – 2 facilities that have adopted a comprehensive approach have had residents coming out while at the facility ... at least one for the very first time ... and most facilities have at least one openly out resident. Anecdotal evidence suggests that sometimes residents are open because of the efforts the facility has taken to be inclusive and at others it is the reverse, the facility has taken steps to be more inclusive as a result of having an out resident.

Challenges Implementing LGBT Initiatives and Strategies:

<u>Staff: Homophobic Attitudes</u> – staff may have strong culturally and religiously based homophobic attitudes. Strategies: 1) one facility makes it explicit at the beginning of training sessions that the purpose of the training is to ensure human rights codes and charters are respected and not to change cultural/religious beliefs. 2) some facilities have explicit anti-discrimination policies specifically mentioning LGBT residents.

Staff: High Turnover – one-time training sessions don't have lasting impact. Strategy: 1) mention LGBT inclusiveness mandate in general training given to all new staff (not as effective as specific LGBT training); 2) ensure LGBT inclusiveness is incorporated comprehensively within the facility. Additional suggestion: integrate LGBT health and social needs of seniors into core curriculum at professional schools (nursing/social work/medical) – this doesn't address training for non-professional support staff.

Questioning the Need of LGBT-Specific Initiatives — belief that general culture of inclusivity and equality means they are LGBT-inclusive ... however, "treating everyone the same" generally means treating everyone like they are heterosexual which leaves LGBT residents feeling excluded. LGBT seniors often have unique needs if staff members do not understand the historical context of their lives (experiences of discrimination and stigmatization LGBT residents' have lived through). Resistance to taking further steps to increase LGBT inclusiveness ... not enough LGBT residents to warrant. To counter this, see entry under "Residents Comfortable Coming/Being Out".



Non-LGBT Residents' Attitudes – Assumptions about anticipated resident homophobic attitudes, particularly in Quebec (Catholic Church influence) seem not to have come true ... particularly when facilities adopted the comprehensive approach and when they held discussions with residents before implementing their LGBT strategy. At one facility where they showed a documentary on older lesbians, residents made an effort to ensure their Valentine's Day event was inclusive of same-sex couples.

Being in the Context of a Religious Facility – 2 of the facilities are public long-term care homes with a specific religious denomination who have been identified as LGBT inclusive. This did pose some unique challenges and calls for creativity and patience. It is important to build partnerships and find allies with the facility and various stakeholders. Important to host workshops or discussions on LGBT history and present-day rights.

<u>Lack of Resources</u> – both financial and human resources ... asked to do more with less ... challenge to try to find money for LGBT-specific programming. One paid staff member in Vancouver whose professional mandate is to advocate and provide services specifically for LGBT older adults – same in Toronto. None of the other cities have a paid staff person doing this work.

Points of Contention:

<u>LGBT Inclusivity in Mainstream Facilities vs LGBT-Specific Facilities</u> – most facilities identify as mainstream taking steps to better serve LGBT residents but 3 facilities specifically target the LGBT community. Disadvantages of specific LGBT facilities: segregation/ghettoization, securing financing difficult, might have to move far away, and non-LGBT friends/family could not live with LGBT resident.



<u>LGBT vs L, G, B, and T</u> – focus is on L & G groups with B & T persons being largely overlooked. Only one facility actively engaged with trans community. Even the progressive tool kits and inclusivity strategies focus very little on trans residents. Completely different life experiences and issues: LGB can be invisible whereas T cannot (depending on stage of transition – reassignment surgery). Different discrimination faced as well. Bisexuals have been left out altogether in most cases ... issues of rejection from both the LG and hetero residents.



Identifying barriers, developing solutions: Addressing the health and social needs of gay, lesbian, bisexual and transgender older adults who reside in long-term care homes – An Environmental Scan

Summary of Recommendations

The recommendations are grouped by: Practice Recommendations, and Research Recommendations.

Practice Recommendations:

Paid Staff Mandated to Address the Needs of LGBT Older Adults in Community Organizations – LGBT organizations play an important facilitative role in connecting facilities with the LGBT community and providing training. Organizations that have a paid staff member mandated to advocate for and provide services for LGBT seniors have played a central role in facilities undertaking LGBT initiatives. There is a direct correlation between having an organization with such a paid staff person and facilities adopting a comprehensive LGBT inclusivity strategy (see info about Toronto and Vancouver in Handout #1). Critical step to developing congregate facilities that are comprehensively inclusive of LGBT residents is to resource organizations with paid staff dedicated to identifying and addressing the needs of older LGBT adults.

<u>Fostering Internal Leadership</u> – Important to have "champions" who may be either self-identified as LGBT or have family/friends who are LGBT. Hiring policies should be welcoming and encouraging of LGBT applicants and effective anti-discrimination and anti-harassment policies should be in place. In 6 facilities, it was internal LGBT staff leadership that initiated or maintained the LGBT strategy, including the 3 with the most comprehensive approach.



Comprehensive Approach – The most successful outcomes of LGBT inclusiveness initiatives are the facilities that have taken the most comprehensive approach to LGBT inclusivity. It is recommended that other facilities do the same, because the findings make it clear that providing staff training on LGBT sensitivity is not sufficient (even though it is important). The Tool Kit (mentioned in Handout #2) is available online. Supporting the first recommendation above, Montreal (which has no paid staff with a mandate around LGBT in a community organization) has the least robust networking in comparison to Vancouver and Toronto.

<u>Curriculum Development</u> – LGBT inclusivity has to be integrated into the core curricula of professional training programs and college programs. This ensures that nurses, social workers and nursing aides being hired would already have knowledge about the unique needs and experiences of LGBT seniors, and allows any in-facility training to build on rather than be the first exposure to LGBT training. This needs to include any certificate programs for nurses' aides, kitchen staff and cleaning staff.

Research Recommendations:

The recommendations in this section are meant to address two of the biggest barriers identified to implementing comprehensive LGBT inclusivity strategies: the belief that a facility should have a certain number of openly LGBT residents before it adopts such an approach; and a fear that non-LGBT residents will react negatively to LGBT inclusiveness initiatives.



Learning from the Experience of LGBT Residents in Facilities with a Comprehensive Approach – Anecdotal evidence suggests that the adoption of a comprehensive approach by a facility can make LGBT residents feel safe coming and being out, even when they had expected to have to go back to (or remain in) the closet upon moving into a congregate living facility. The data gathered by systematically tracking such experiences will allow for a better assessment of the impacts of LGBT inclusiveness initiatives. If the data collected supports the existing anecdotal evidence, then the data will challenge the belief that embracing such a framework makes sense only when there are already openly LGBT residents at a facility. This research will also allow LGBT residents to provide information based on personal experience about what has and has not facilitated their sense of comfort and well-being in congregate living, and make recommendations for improvement of LGBT inclusiveness strategies.

Tracking/Recording non-LGBT Residents' Reactions to LGBT Initiatives — More knowledge and data is needed in this area. It was anticipated that residents' attitudes would be a barrier. However, only one study has actually been conducted on resident views of homosexuality in facilities (Walker & Ephross, 1999). By contrast, facilities that have adopted a comprehensive approach or at least displayed "safe space" visuals did not report experiencing much resident resistance. The anecdotal evidence collected in this study challenges the view that non-LGBT residents will be a barrier. Research examining residents' attitudes within long-term care may help to explicate the current realities of this barrier. Ageist attitudes about seniors may contribute to the perception that residents would be more opposed than the general population. As part of this research, information should be gathered on how facilities deal with the resistance if it surfaces, so that best practices or guidelines and approaches can be developed.

Editor's Note: The recommendations in this report do not address the issues raised about the lack of inclusion for trans and bisexuals in the LGBT Tool Kit or comprehensive strategies. This is unfortunate ... particularly in light of the Research Recommendations being made.