



Rainbow Nursing Interest Group
Annual General Meeting
AGM – Executive’s Report
Thursday, September 23rd, 2021
 Zoom AGM meeting

2020 – 2021 - Executive Members

President (ENO)	(2019-2021)	Paul-André Gauthier
President-Elect (ENO)	(2020-2021)	Daniel Shvarts (resigned on August 29, 2021)
ENO – Policy and political action	(2020-2022)	Christopher Draenos
ENO – Membership	(2019-2021)	Abigayle Howell (resigned on April 9, 2021)
ENO – Finances	(2019-2021)	Linda Holm
ENO – Communication / Secretary	(2019-2021)	Ruth Trinier
ENO – Social Media	(2020-2022)	Dakota Carrie (resigned on April 12, 2021)
ENO – Workplace liaison	(2020-2022)	Zev Bernstein
B.Sc.N. Student Representatives	(2020-2022)	Kashka Ironside & Kieran Thiara

Web site --> <https://chapters-igs.rnao.ca/interestgroup/58/about>

<https://rnao.ca/connect/interest-groups/rnig>

RNIG - previous messages from us (emails): <https://chapters-igs.rnao.ca/interestgroup/58/email/903>

Facebook: <https://www.facebook.com/groups/RainbowNursing/>

Our Mission:

- ✓ To foster and advocate for nursing practice and environments that support people of all sexual orientations and gender identities and expressions.



Land Acknowledgement

We acknowledge that the work that we do is on aboriginal land which has been inhabited since time immemorial by Indigenous peoples. As settlers, we are grateful for the opportunity to use the land and we thank all the generations of people who have taken care of this land in the past, present and future. What is now commonly referred to as Ontario, covers 46 treaties and includes unceded land.

This year, it is the 31st Anniversary of the adoption of the term Two-Spirit, replacing the more abhorrent non-Native term berdache. Western notions of the gender binary do not reflect the gender diversity of the numerous Indigenous Nations on Turtle Island (Canada), described with cultural terms, language and meanings from each Nation. RNIG recognizes that the term Two-Spirit is specific to the Indigenous peoples and we celebrate this milestone with all Two-Spirit peoples and hope it is seen as one step in reconciliation.



President's Report

I became provincial President in September 2019, undertaking to represent our executive and members of the RNIG - Rainbow Nursing Association of Ontario. In June 2021, I agreed to stay one more year as President and with the resignation of our President-Elect in August. I also agreed to facilitate the transition of the new President-Elect, who will step into the role next year (2022). What an interesting year for us and our 2SLGBTQⁱ+ community. The “2S” at the beginning of the LGBTQⁱ+ reflects our support to the indigenous community 2-Spirit.

What a challenging last 2 years with Covid-19, the vaccination, and now the anti-vax movement. These are getting to become more stressful times to all of us. While nurses and other health care professionals are doing their best to control the disease and provide nursing care, some members of the public are protesting the vaccine, the immunization records and health care services. Their understanding of sciences is not the greatest, if I can say.

For over five (5) months now, I have been back in action, meaning, providing direct health care services. I am now a Public Health Nurse administering Covid vaccines with the Public Health Sudbury and District (PHSD). I have developed a different understanding

about vulnerability when meeting clients who got covid, wanting their vaccines, and of clients being scared of getting the disease, and now of clients being “forced” to get vaccinated because of work requirements, and/or travelling requirements, social events, and restaurants.

As President for the past year, I chaired executive meetings; I represented our association at provincial Assembly meetings and at the RNAO Annual General Meeting in June 2020 and 2021. All the meeting were on Zoom). We prepared newsletters to keep you informed of our activities and posted numerous messages on our Facebook page. You have received quite a few emails from RNIG during this past year. I have responded to correspondence; I have contributed to increasing the visibility of our association by speaking up and speaking out for our 2SLGBTQI+ community at meetings. I have provided reports of our activities to RNAO home office as required.

Our Executive and members have been working and contributing to the development of the BPG- **Promoting 2SLGBTQI+ Health Equity**; participated in reviewing a new Position statement (December-February) and the BPG launch in June 2021. Furthermore, I have prepared a resolution that was supported by our Executive and presented at RNAO’s AGM on June 25, 2021 and past with great support of RNAO’s voting delegates!

I am pleased of all the work and milestones that we were able to achieve despite our own work or studies (as students) during Covid time. I was involved in the presentation / launch of the 2SLGBTQI+ BGP in June, you can view this on the YouTube link. See the links for more information, and they are posted on our website.

- **RNAO - RNIG-Rainbow Position Statement**
-June 2021 [link-here](#)
- **2SLGBTQI + Best Practice Guideline. BPG.** June 26, 2021. [Info-here](#)
- **BPG - Promoting 2SLGBTQI+ Health Equity.** June 2021 - Available here. [Free PDF version.](#)
- **RNAO & RNIG-Rainbow nursing.** Launching the 2SLGBTQI+ Saturday, June 26, 2021.
Best Practice Guideline - BPG —> [YouTube link](#)

I would like to extend my gratitude to our Rainbow Executive members for their support and encouragement during this past year. Speaking out for our 2SLGBTQI+ community is only possible if we are working together for the betterment of our society. Also, thanks to our ENO colleagues who had to step down during this past year.

A sincere thank you to you all !

I want to acknowledge the land that I reside on, Sudbury, also known as N’Swakamok in Anishnabemowin, meaning “Where the three roads meet”. This land on which we learn, work and live is in

the Robinson-Huron Treaty territory. Sudbury is located on the traditional lands of the Atikameksheng Anishnawbek and the Wabnapitae First Nation. In our city we also like to recognize the presence and important contributions of Metis peoples in the community and on this land.

You can reach us... RNIG Executive- by writing an email to Rainbow-RNIG@hotmail.com

Respectfully submitted,

Paul-André Gauthier.

Provincial President - RNIG.

Rainbow Nursing Interest Group

Pronouns: He/Him - Lui/ IL



ENO Policy and Political Action

The COVID-19 pandemic has required different ways to engage with Policy & Political Action. Despite additional challenges due to restrictions on in-person engagement, the RNIG has had a very successful year. We have raised several issues important to 2SLGBTQIAA+ communities, including questions to Minister of Health Christine Elliot about the impact of clinic closures/reduced capacity and the impact on access to sexual and reproductive health, which many queer people in Ontario rely upon due to lack of queer competency from their healthcare providers.

We were also successful in passing a resolution at the RNAO AGM that will have the RNAO advocate with our regulator CNO to include specific competencies on 2SLGBTQIAA+ health for all nurses in Ontario. We now need to focus on moving this forward within the RNAO to ensure future nurses receive this necessary educating.

Our other accomplishments include updating the RNAO position statement on respecting sexual and gender minority communities, supporting the 2SLGBTQIAA+ BPG development and release, and recently highlighting issues to RNAO home office for the federal platform on important issues, such as bans to conversion therapy and drug decriminalization, both of which disproportionately negatively impact queer, trans and racialized communities.

Christopher Draenos.

ENO Policy & Political Action.

Pronouns: He/Him



ENO Finance

We have submitted to RNAO home office an annual financial report in January, 2021 as required. We began the 2019-2020 year with a balance of \$5,714.56, at the end of the fiscal year, we had a balance of \$7,303.22 in the bank (Oct. 31, 2020); and we completed the year with a surplus of \$1,588.66.

In **2019-2020**, we paid \$351 to participate in the Virtual Toronto Pride. For 2020-2021, we did not contribute financially to Toronto Pride as the event was online again but we were free to attend. The balance as of the most recent bank statement (July 30, 2021), is \$ 9643.22.

We have submitted to RNAO home office an annual financial report in January 2021 as required.

All bills have been paid and money received deposited and documentation verified by our internal auditor.

Respectfully submitted,

Linda Holm.

ENO Finance.

Pronouns: She/Her



ENO Communication / Secretary

Another year under the clouds of COVID has continued to challenge both RNIG and our profession. Despite the hope provided by vaccines, it appears that we still have challenges to face.

I have come to the end of my second year as ENO Communications/Secretary. During this year, your executive has continued to conduct meetings virtually. Meetings will likely continue in this format for the foreseeable future.

Over the year, in collaboration with the executive of RNIG, I have been involved in a number of initiatives including: the revision of the Position Statement, Respecting Sexually and Gender Diverse Communities; as a stakeholder in the review and provision of feedback for the Best Practice Guideline for Promoting 2SLGBTQI+ Health Equity; and in the provision of concern to the Postsecondary Education Quality Assessment Board regarding

the application from Canada Christian College for university status and expanded degree-granting authority. It is our hope that each of these initiatives will bring support to our communities both now and in the future.

I have volunteered to fill the position of ENO Social Media for my final year on the executive of RNIG. I hope it is a year where we can all celebrate both further successes and some resolution to COVID. Thank you for your support.

Respectfully submitted,

Ruth Trinier.

ENO Communication and Secretary.

Pronouns: They/Them



ENO Membership and Education

Here are the membership number. We are presenting you some data.

RNIG	October 31, 2019	May 11, 2020	August 2021
RNs	92	105	117
B.Sc.N. students	978	1,012 + 97 New Grads	1,319 + 159 New Grads
Total:	1,070	1,214	1,595

Respectfully submitted,

Paul-André Gauthier.

ENO Membership and Education.

Pronouns: He/Him



Workplace Liaison

No report provided.

Zev Bernstein.

Workplace Liaison

Pronouns: He/Him



B.Sc.N. Student Representatives

Despite the challenges of the past year, filling the role of RNIG student representatives has been an incredible learning experience. Working with a team who are passionate about advocating for inclusive practice has helped to shape how we view our roles as advocates. We have taken this year to assess potential areas for improvement in nursing education to create a more inclusive curriculum, learning spaces, and learning content. This upcoming year we are looking forward to sharing what we have learned, the connections we have made, and ways that we think we can make a difference as Nursing Students.

Looking forward to more learning and growth in the upcoming year,

Respectfully submitted,

Kashka Ironside.

B.Sc.N. Student Representative

Pronouns: She/Her

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As Kasha has stated, the past year has been challenging for many in regards for current and prospective health care providers. Navigating the role of being a student representative has been a positive way for myself to advocate for the changes I wish to see within the nursing curriculum. Kashka and I are looking forward to meeting our initial goals of creating spaces where nursing students can implement inclusive frameworks into their classroom and patient environments. A key component in this learning comes from collaborating with various organizations that provide this training alongside sharing a platform with Nursing Students of Ontario (NSO). We are eager to share future events with members this upcoming school year in order to help address the learning gaps associated with caring for 2SLGBTQI+ patients and practicing allyship for present and future colleagues within the 2SLGBTQI+ community.

Respectfully submitted,

*Kieran Thiara.*

B.Sc.N. Student Representative.

Pronouns: He/Him



## Resolution from the Rainbow Nursing Interest Group (RNIG-Rainbow)

Adopted June 25, 2021- at the RNAO AGM.

### **Sexual and Gender Minorities Content in the Nursing Standards.**

**WHEREAS** Given that sexual and gender minorities in Ontario experience prejudice, stereotyping, discrimination, harassment and barriers in accessing health services and experience higher rates of mental health concerns, lower rates of preventive screening for chronic health issues and cancer, higher rates of HIV and other sexually transmitted infections, higher rates of substance use (Health Equity Impact Assessment LGBT2SQ Populations, Sherbourne Health & Rainbow Health Ontario), and;

**WHEREAS** Consistent with the recommendation in the Standing Committee on Health Report *the Health of LGBTQIA2 Communities in Canada* that "the Government of Canada work with the provinces, territories and provincial health professional and regulatory bodies to establish a working group to identify ways to promote training and education of health care professionals about the health needs of sexual and gender minorities," and;

**WHEREAS** RNAO is in the process of completing the development of a Best Practice Guideline (BPG) "Reconciling 2SLGBTQI+ Health: Best practices for advancing health equity in sexual orientation and gender identity minority communities (working title) Best Practice Guideline;" and;

**WHEREAS** RNAO and RNIG-Rainbow have reviewed the "Position statement: Respecting sexual and gender minorities" in February 2021.

**THEREFORE, BE IT RESOLVED** that the Registered Nurses Association of Ontario advocates with the Ministry of Health of Ontario (MOH), the College of Nurses of Ontario (CNO), and the Canadian Association of Schools of Nursing (CASN) to include, the health needs of sexual and gender minorities into entry-to-practice competencies and a nursing practice standard.

**FURTHER BE IT RESOLVED** that the Registered Nurses Association of Ontario works with the Rainbow Nursing Interest Group (RNIG) in the lobbying in regard to the health needs of sexual and gender minorities, with other organisations, such as the Ministry of Health of Ontario (MOH), the College of Nurses of Ontario (CNO), and the Canadian Association of Schools of Nursing (CASN), in ensuring that our LGBTQ2S+ community is well represented in the process.

## **Submitted on behalf of the Rainbow Nursing Interest Group (RNIG)**

### **Background**

As healthcare is historically heteronormative, many of the biases within the system against members of the LGBTQ2 community, may not be readily apparent (Enson, 2015). When there is a lack of discussion regarding gender identity and sexual practice with a health-care provider, for the majority, the assumption is that the client is cisgender and heterosexual (Baker & Beagan, 2014). This may induce fear and discomfort felt by some members of the LGBTQ2 community when accessing health services. Some of this discomfort is linked to a fear of discrimination from the health-care provider which can cause stress to the patient (Bidell & Stepleman, 2017; Von Doussa et al., 2016), and may lead to nondisclosure. Nondisclosure influences quality of care as those health-care issues prevalent in this population are neither discussed nor investigated (Baker & Beagan, 2014).

It has been known for some time that LGBTQ2 related health-care education for all health-care professionals is inadequate (Carabez et al., 2015; Charles et al., 2015; Greene et al., 2018; Lim & Hsu, 2016; Parameshwaran et al., 2017; Singer, 2015). There must be recognition of LGBTQ2 health in all aspects of normal human behaviour and health care provision. Time and emphasis in curricula for LGBTQ2 relevant health needs should be on par with the degree given of cisgender and heterosexual centric issues.

Although children in grades K-12 have little influence on current healthcare practice, early education influences student thoughts and behaviours and can impact future societal change (Westheimer, 2017). Despite the recognition that Canadian schools have been shown to be unsafe for LGBTQ2 youth (Taylor et al., 2011), encouraging teachers to integrate recognition of LGBTQ2 marginalization in the curriculum and to develop empathic concern has been associated with a reduction in homophobic behaviours in heterosexual youth (Baams, Dubas, Aken, 2017; Espelage et al., 2019). Proactive responses to harassment based on sexual and gender non-conformity can create a positive learning environment for LGBTQ2 youth and educators (Enson, 2015).

People who identify as LGBTQ2 experience high rates of discrimination in health care, including being refused health care, health-care providers refusing to touch them, use of harsh/abusive language, physical abuse, or blame for their health status (Lambda Legal, 2010).

In consideration of this, there should be an expectation that all who work in the system have received adequate education in respectful care of LGBTQ2 clients, through the use of formal, substantive education and training.

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## Position Statement: Respecting Sexually and Gender Diverse Communities

The Registered Nurses' Association of Ontario (RNAO) recognizes the inherent dignity and worth of every person and endeavors to provide for equal rights and opportunities without discrimination. RNAO believes that sexually and gender diverse communities should be respected.

### **Prejudice, Stereotyping, and Discrimination Threaten Health through Violence and Social Exclusion**

RNAO denounces any kind of stigmatization, discrimination and social exclusion based on sexual orientation, gender identity and gender expression. Certain views and assumptions about sexual orientation, gender identity and gender expression can be harmful and create conditions that result in human rights violations and health inequities. Health inequities can be intensified when other identities and determinants of health intersect with gender identity, gender expression and sexual orientation.

2SLGBTQI+ is an acronym that describes a variety of sexually and gender diverse people, including those who identify as lesbian, gay, bisexual, trans, queer, and Two-Spirit.

Two-Spirit refers to a person who identifies as having both a masculine and feminine spirit, and is used by some Indigenous people to describe their sexual, gender and/or spiritual identity.

The plus '+' is meant to be inclusive of all other diversities along a spectrum, to represent those who identify as non-binary, intersex, pansexual, asexual or are questioning their sexual orientation, gender identity and/or gender expression.

The core concepts of gender identity, gender expression, sexual orientation, physical attraction and emotional attraction underlie the terms. Some people identify with one or more labels to align with these concepts, while others do not identify with any label. One's understanding of their own gender identity, gender expression and sexual orientation may be fluid and can change over time.

Members of sexually and gender diverse communities routinely experience stigma and discrimination that contributes to poor health and well-being. Discrimination against 2SLGBTQI+ people may take the form of homophobia, biphobia, or transphobia.

Heteronormativity is a world view that assumes that everyone is, or should be, heterosexual. Cisnormativity is the belief in the binary construct of gender, as either male or female, as defined by birth assigned sex.

The health and wellbeing of 2SLGBTQI+ people is compromised by micro-aggressions, sexual and physical assault, harassment, hate crimes, emotional/psychological and verbal abuse, and chronic stress caused by stigmatization. Sexual

orientation, gender identity and gender expression conversion efforts (“therapy”) are psychologically harmful and unethical.

### **Prejudice, Stereotyping, and Discrimination Threaten Access to Health Services and Care**

2SLGBTQI+ people experience barriers to inclusive and appropriate care because of implicit biases of health-care professionals and cisheteronormative, heterosexist and discriminatory policies and practices ingrained in health-care institutions.

### **Prejudice, Stereotyping, and Discrimination Threaten Quality Work Environments**

These same cisheteronormative, heterosexist, discriminatory practice environments can be traumatizing to health-care professionals who identify with the 2SLGBTQI+ community, whether that discrimination comes from colleagues, supervisors, employers, or clients.

### **CALL TO ACTION:**

RNAO will:

#### **Speak out for human rights and health equity**

- Speak out against implicit biases, prejudices, stereotypes and policies that are discriminatory and cisheteronormative
- Speak out against discrimination and social exclusion based on sexual orientation and gender identity/expression
- Speak out against social inequities faced by those who identify as 2SLGBTQI+

### **Advance person-centred, inclusive, and appropriate health care**

- Advocate for health-care services and programs that are inclusive of the needs of 2SLGBTQI+ clients, staff, and the communities they serve -- all people should be able to see, hear, and feel that their identity is acknowledged and welcomed
- Provide neutral and inclusive assessment tools, forms, and educational materials to aid in care delivery in all health-care settings
- Promote and champion educational opportunities for health-care professionals to learn about and maintain competence related to health issues affecting the 2SLGBTQI+ community and for skill-building opportunities to promote inclusive and appropriate care

### **Foster and advocate for safe, inclusive and healthy work environments for nurses and staff**

- Develop organizational or agency-specific policies, procedures, and codes-of-conduct for all staff to help educate them on cultural diversity, sexual and gender diversity, and the duty to treat everyone respectfully
- Ensure a safe and affirmative employment setting for all health-care professionals, including those who identify as 2SLGBTQI+

It is essential to consult with and include 2SLGBTQI+ people in the development, implementation and evaluation of all policies, procedures and programs.



## RNIG- Rainbow 2021 – 2022

### Executive Members

|                                          |             |                                    |
|------------------------------------------|-------------|------------------------------------|
| <b>President (ENO)</b>                   | (2019-2022) | Paul-André Gauthier                |
| <b>President-Elect (ENO)</b>             | (2021-2022) | Shelley Evans                      |
| <b>ENO – Policy and political action</b> | (2020-2022) | Christopher Draenos                |
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### Rainbow Nursing Interest Group

- **New members** – from the summer election.

You may contact us through our **website**: <https://chapters-igs.rnao.ca/interestgroup/58/about>.

Follow us on **Facebook**: <https://www.facebook.com/groups/RainbowNursing/>

or contact the President directly: [Rainbow-RNIG@hotmail.com](mailto:Rainbow-RNIG@hotmail.com)