

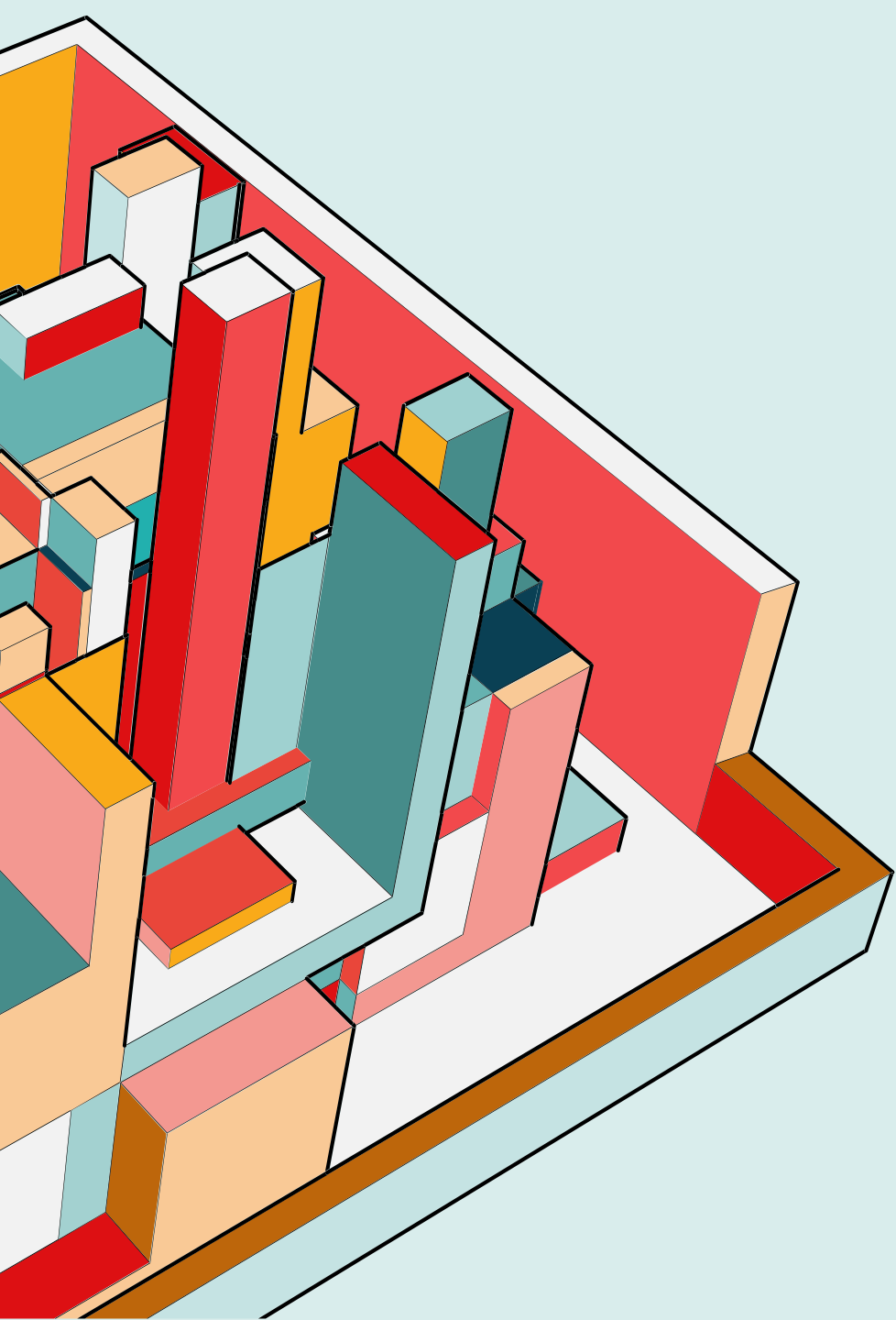
An abstract graphic on the left side of the slide consists of several 3D rectangular blocks of various colors (red, orange, teal, light blue, and white) arranged in a stepped, architectural fashion. The blocks are outlined in black and set against a solid light blue background.

WHAT'S IN A NAME: BEING EXPLICIT ABOUT INCLUSIVITY IN WOMEN'S HEALTH

May 27, 2024

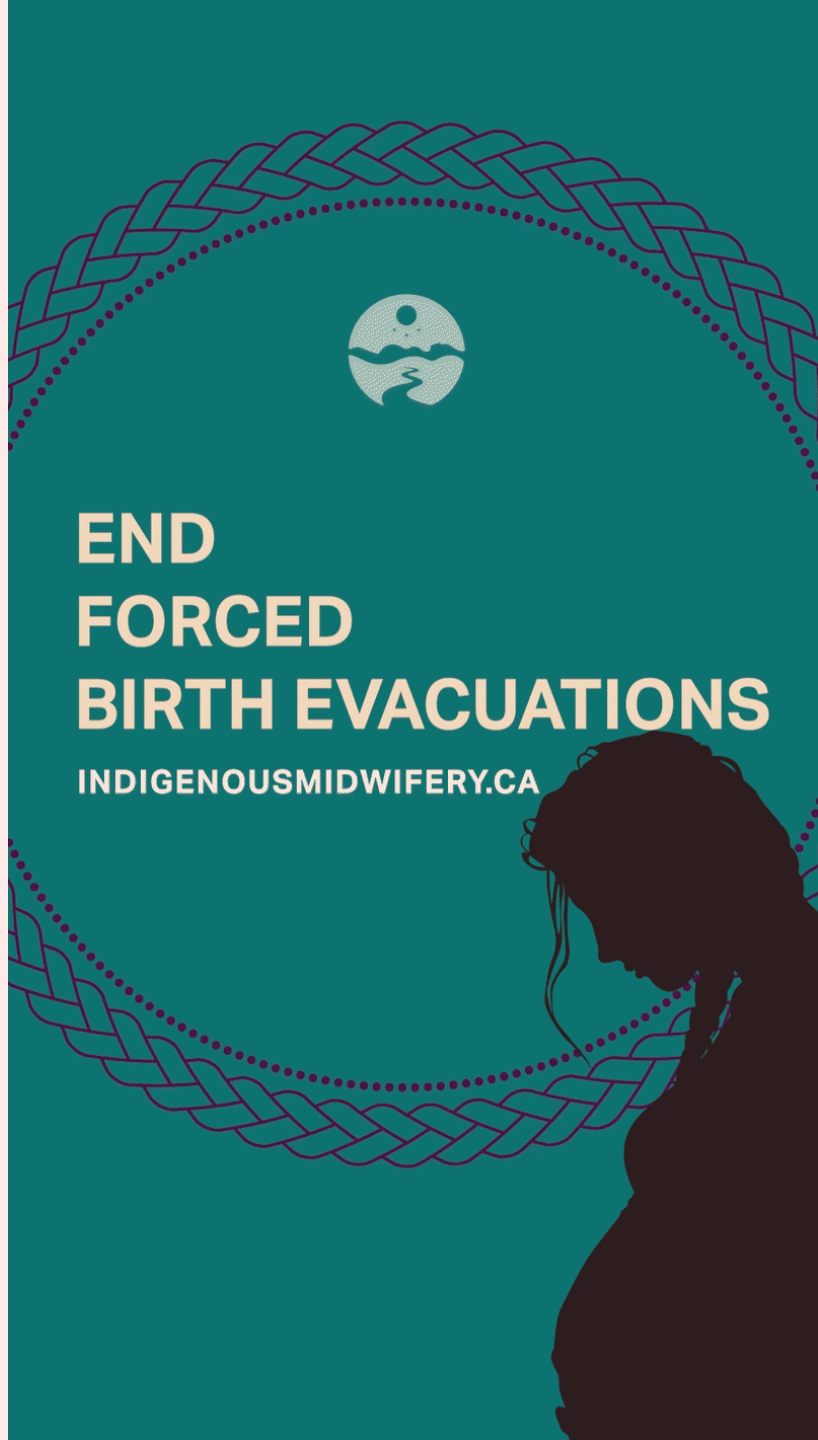
12th Annual Thomas and Alice
Morgans Fear Memorial Conference

CJ Blennerhassett, RM, MHA, CHE
Candidate



CONFLICT OF INTEREST

None to declare



END FORCED BIRTH EVACUATIONS

INDIGENOUSMIDWIFERY.CA

DALHOUSIE UNIVERSITY SITS ON LAND THAT HAS NEVER HAD ITS TITLE SURRENDERED

The IWK is located in Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq People. We acknowledge them as the past, present, and future caretakers of this land.

For more than 400 years and across more than 50 communities, African Nova Scotians have contributed significantly to the growth and prosperity of this province.

What do I know about the colonial history of OBs-GYN? (see Dr. Mae Sanaee's work)

How does my work relate to the national calls to action?



OBJECTIVES

1. Explain how IWK Health is working towards inclusive healthcare for 2SLGBTQIA+ patients and families.
2. Describe challenges in naming reproductive and sexual health services.
3. Extrapolate the relationship between health service design and health service provision.

IWK HEALTH'S GENDER INCLUSIVE CARE COMMITTEE

About Us

Last Updated: March 8, 2024 10:57 AM

IWK HEALTH GENDER INCLUSIVE CARE COMMITTEE SCOPE

IWK Health's Gender Inclusive Care Project will have a Steering Committee that meets quarterly, composed of interprofessional(s) centre wide at IWK Health in collaboration with community partner(s), patients, and families. The Steering Committee will oversee the development of a framework for policy and program evaluation in consultation with meeting attendees, leadership, and other interested parties.

IWK HEALTH'S GENDER INCLUSIVE CARE COMMITTEE

PURPOSE

To provide leadership and overall direction for the development of a framework, including a monitoring and evaluation tool, for IWK leadership to operationalize gender and trans-inclusive policies and practices. The framework will include guidance for how to train and educate staff, recommendations for updated signage, documentation, technology, and facilities, and recommendations for enhancing service provision, including institutional policies, as well as an implementation plan.

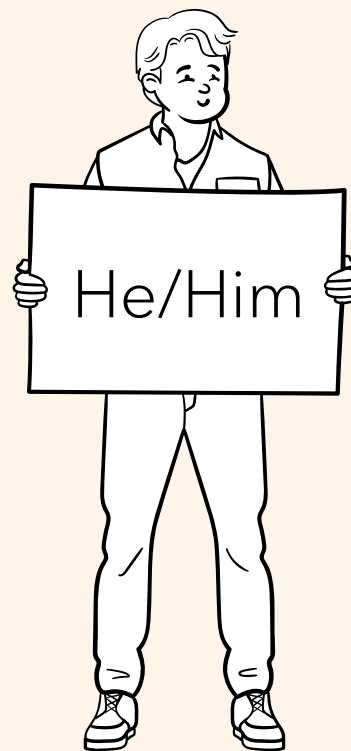
GOAL(s)

The goal is for the framework to be used in the review of new and existing policies and programs at IWK Health to ensure gender, transgender and non-binary inclusivity in alignment with IWK's value and commitment to cultivate belonging and equity as we work to eliminate discrimination, prejudice, and stigma and, strategic directions and values of IWK Health.

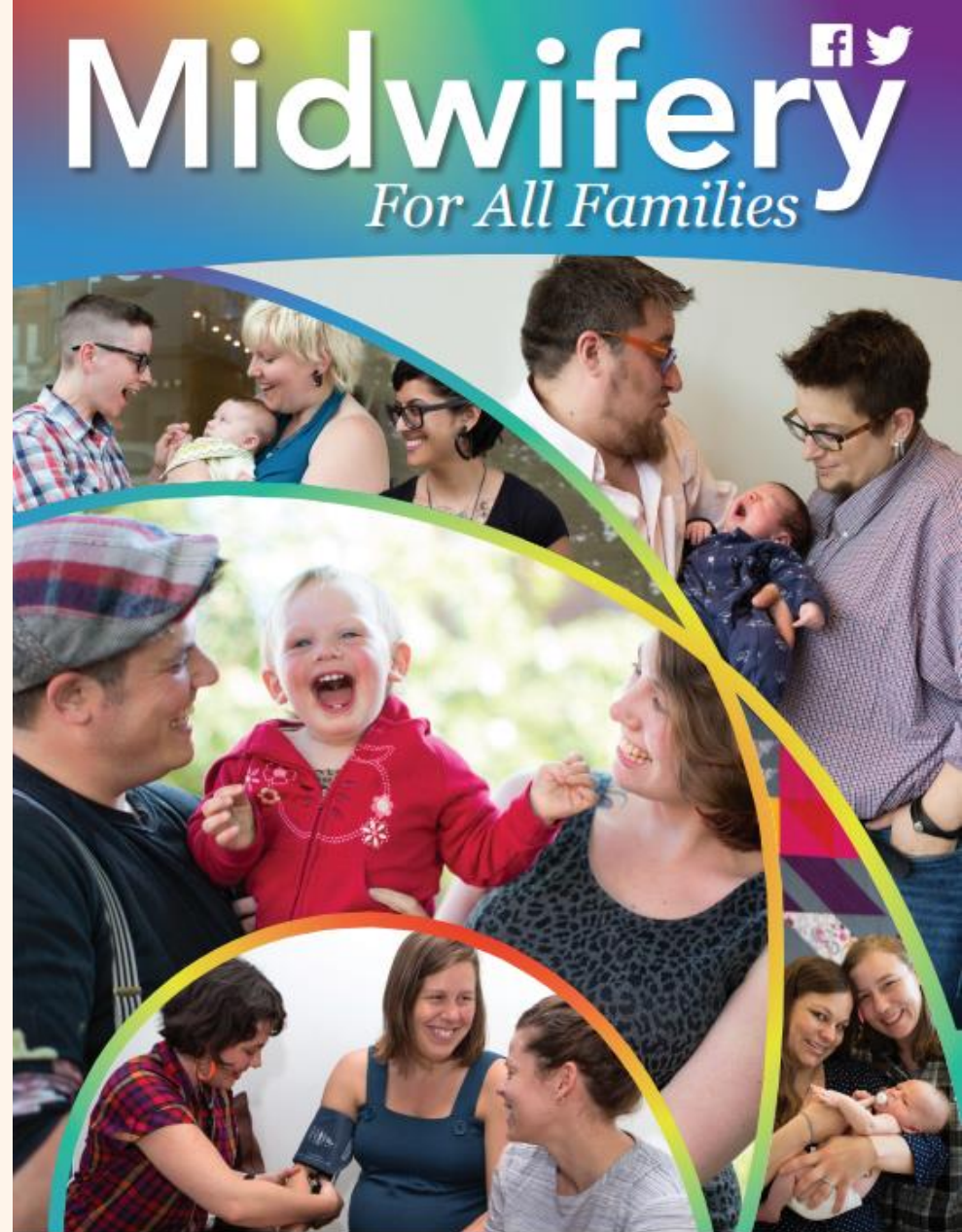


Working groups:

1. Policy
2. Education and training
3. Environment and infrastructure



CHALLENGES



Association of
Ontario **Midwives**
Delivering what matters.



CHALLENGES FOR HEALTH SYSTEMS: MACRO TO MICRO

Policy

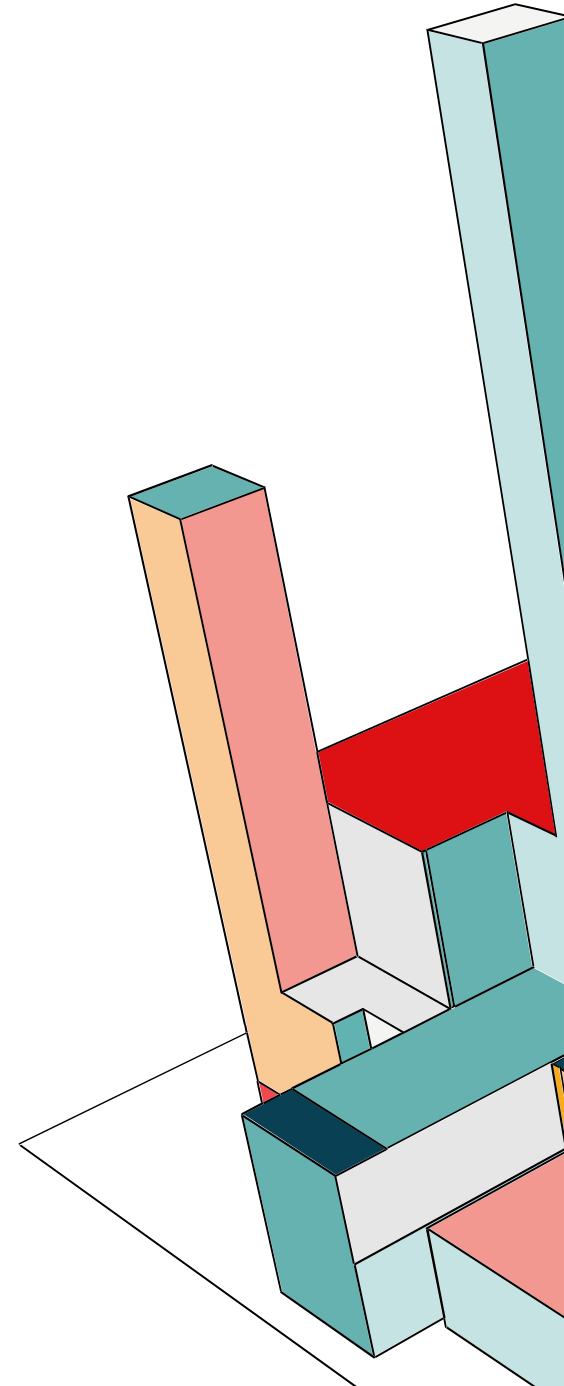
Across all levels: government funding/fee structures, billing codes, distribution of resources at the operational/health authority level, administrative processes at the institutional level (registration and intake).

Infrastructure

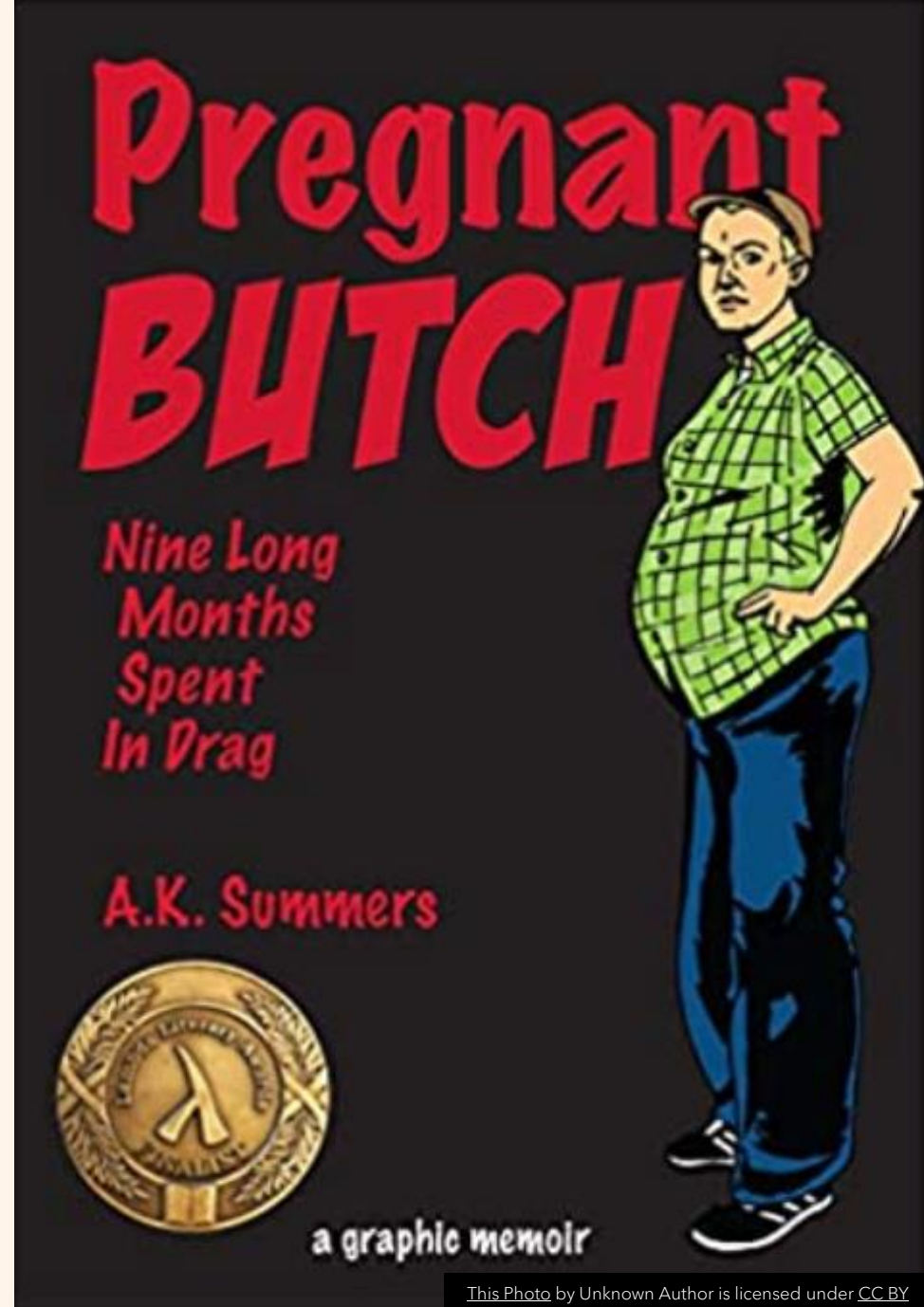
- Physical/environmental (requiring significant financial investment).
- Technological (EMR's).
- Data: lack of accurate data and applicable research.

People

- Leadership.
- Lack of access to primary care (unnecessary referrals to Endocrinology for HRT).
- Staff/physicians: lack of training leading to lack of confidence, myths and stereotypes, cultural/religious/political influences.



CHALLENGES FOR 2SLGBTQIA+ PATIENTS



World

It's already a record year for anti-2SLGBTQ bills in the U.S. Here are some of the rights rolling back

Advocates tracking a range of legislation targeting gender-affirming care, bathroom use and more

[Nick Logan](#) · CBC News · Posted: May 14, 2023 5:00 AM ADT | Last Updated: May 24, 2023

News · CBC Investigates

U.S. conservatives are using Canadian research to justify anti-trans laws

Toronto psychologist James Cantor has testified in 25 cases in the U.S. related to trans issues since 2021

New Brunswick

Students face uncertainty as legal battle brews over N.B.'s gender-identity policy

Province says mandatory to get parental consent before staff can use chosen names, pronouns for kids under 16

Edmonton

Alberta premier says legislation on gender policies for children, youth coming this fall

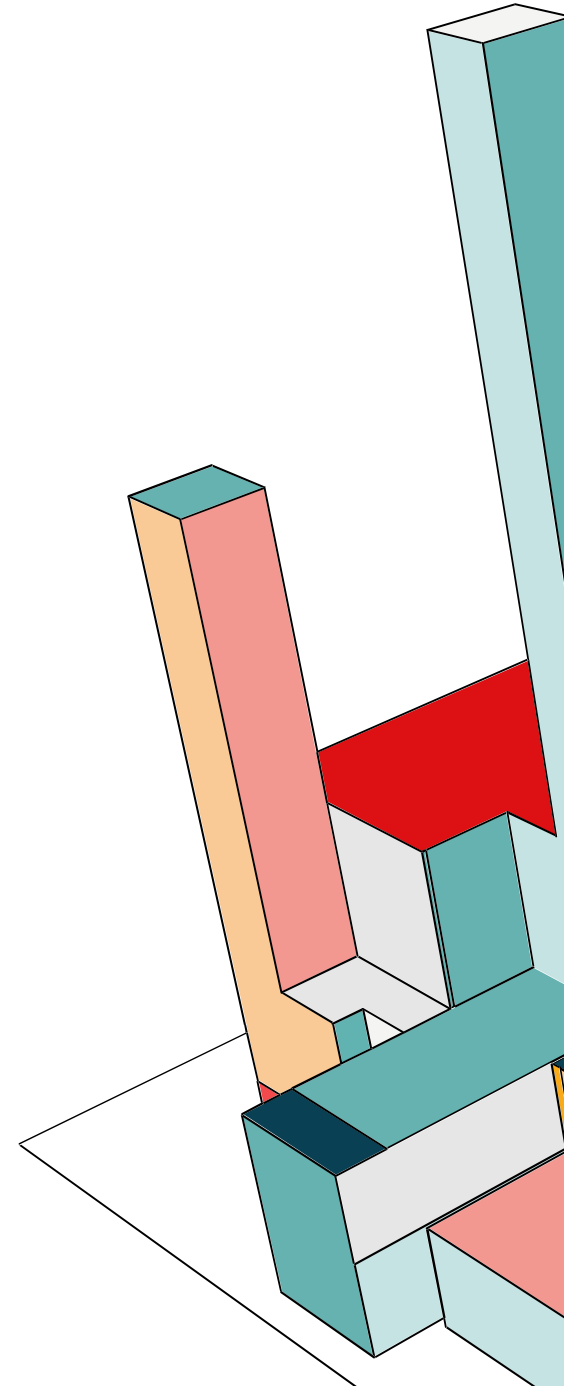
'We're putting this forward with the best interests of the child in mind,' Danielle Smith says



[Janet French](#) · CBC News · Posted: Feb 01, 2024 12:59 PM AST | Last Updated: February 2

ACCESSING HEALTHCARE AS A 2SLGBTQIA+ PATIENT

- Society, popular discourse and culture impact the context in which 2SLGBTQIA+ people seek health care.
- Up to 60% of 2SLGBTQIA+ people do not talk to their healthcare provider about their sexual orientation (HESA, 2019, p 33).
- In a 2017 study 43.9% of trans people reported unmet healthcare needs in the past year and negative experiences with healthcare providers who had little knowledge of issues facing this population (SOGC).
- People often delay or avoid seeking health services based on past experiences of homophobia or transphobia (Rapid Response Service, 2014).
- The relationship often starts from a “deficit of trust” (Carney, 2016).



THE IMPACT OF “EXCLUSIVE” HEALTH CARE

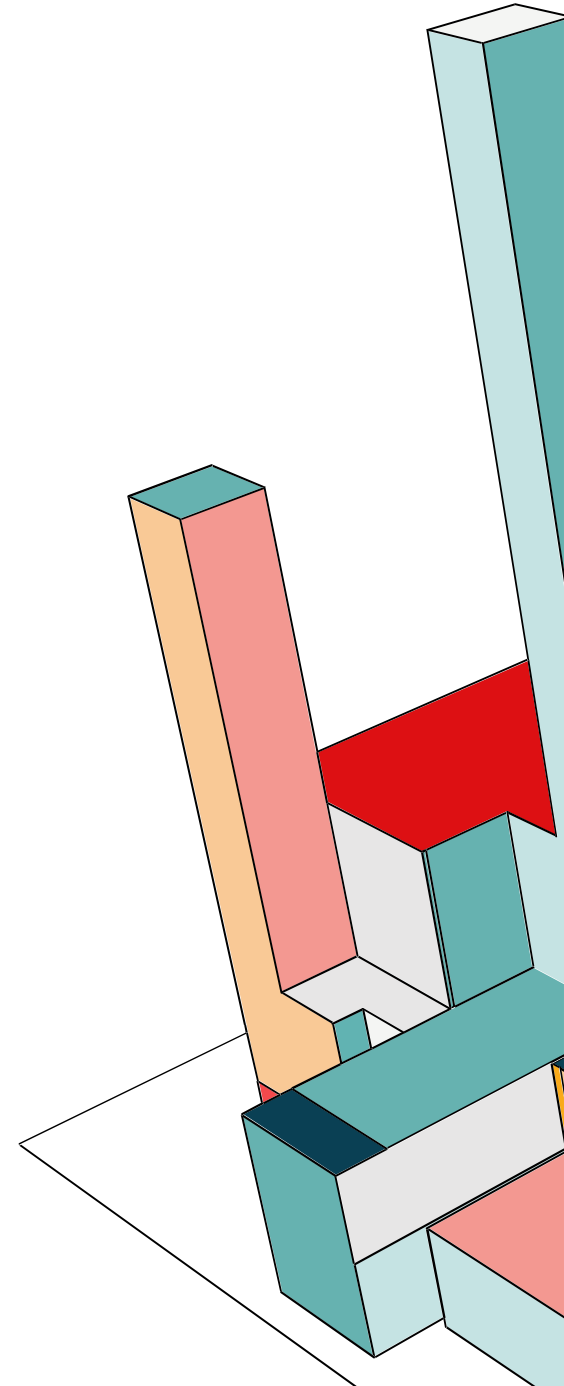
History of health care in Western medicine: pathologization of homosexuality and transgender people (currently gender dysphoria is labelled as a mental disorder in the DSM).

Structural injustices: government negligence in response to the AIDS crisis, lack of access to housing disproportionately harming 2SLGBTQIA+ people (Schreiber, 2021).

Lack of access to intersectional equity: Two Spirit, Black and Indigenous 2SLGBTQIA+ people face unique challenges and harm from oppressive systems in multiple ways: racism, colonialism, ableism.

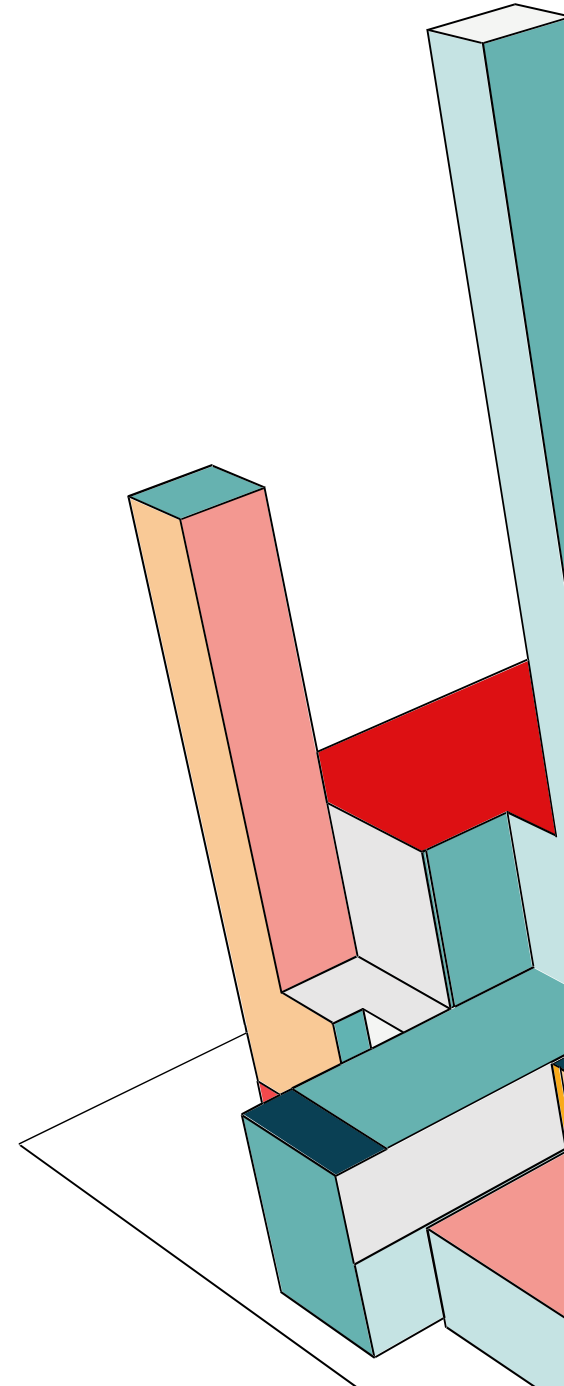
Education and training: health care providers receive inadequate training in 2LSGBTQIA+ care and they report significant knowledge gaps, contributing to suboptimal experiences for patients (Schreiber, 2021).

Poor outcomes: negative clinical experiences mean 2SLGBTQIA+ people avoid health care, have persistently unmet health care needs (SOGC, 2017).



INACCURACIES IN NAMING

- Gender inclusive terms are not new. Lesbian parents have been distinguishing between birth and non-birth mothers for generations. Trans and nonbinary parents have always existed.
- By uncoupling gender from the body's ability to gestate a pregnancy and birth a child we include adoptive mothers, mothers who have not given birth, and trans mothers assigned male at birth, among others.
- When we separate the body's ability to gestate a pregnancy from a person's identity as a woman, we acknowledge cisgender women facing infertility or those who are childless by choice.
- Individuals who may never become mothers – surrogates, trans people assigned female at birth – may still need obstetrical care.



Women and Children's Health Program



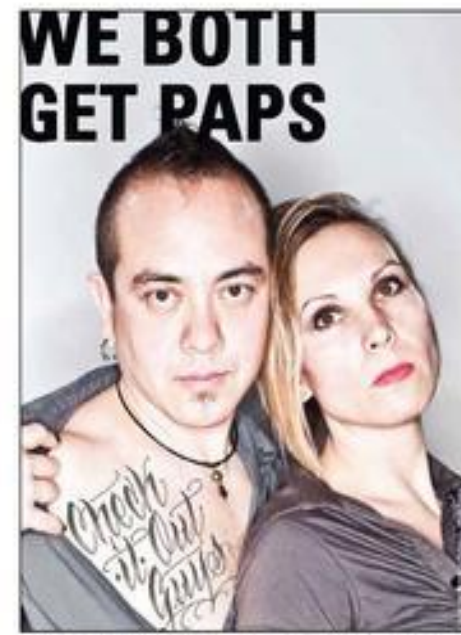
The Women & Children's Health Program provides health care and social resources to mothers, their newborn babies, children and young people. The services focus on prenatal care, obstetrical care, midwife-led...

NOVA SCOTIA HEALTH

Programs and Services

- Prenatal clinics
- Neonatal Intensive Care Unit (NICU)
- Pediatric inpatient services
- Pediatric outpatient services
- Postnatal care
- Public Health pregnancy supports
- Public Health parenting supports
- Educational resources

THE RELATIONSHIP BETWEEN SERVICE DESIGN AND SERVICE PROVISION



If you've ever been sexually abused or sexually harassed, you need a Pap. Check It Out Guys is a national organization that helps you get a Pap. checkitoutguys.ca



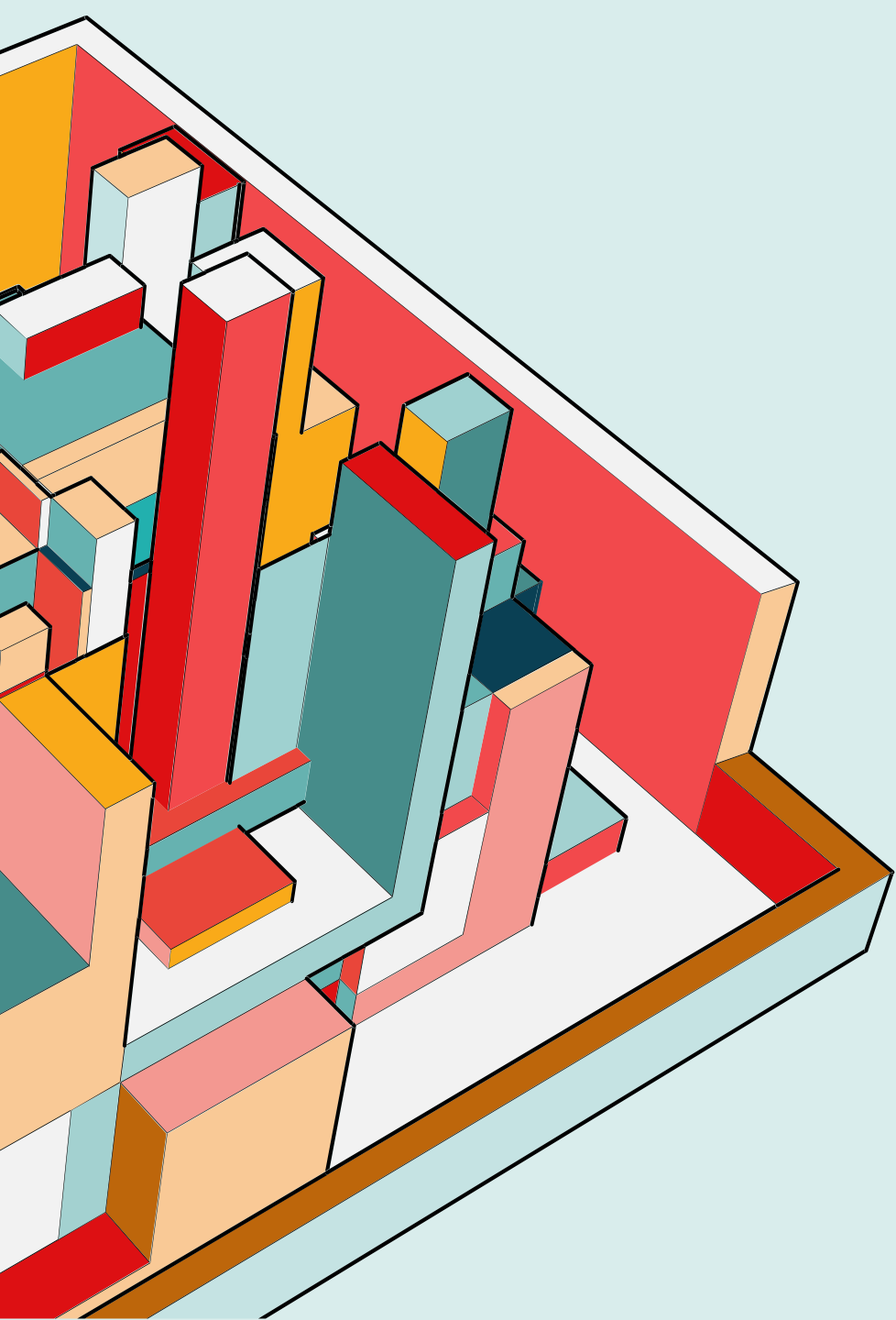
If you've ever been sexually abused or sexually harassed, you need a Pap. Check It Out Guys is a national organization that helps you get a Pap. checkitoutguys.ca



If you've ever been sexually abused or sexually harassed, you need a Pap. Check It Out Guys is a national organization that helps you get a Pap. checkitoutguys.ca



If you've ever been sexually abused or sexually harassed, you need a Pap. Check It Out Guys is a national organization that helps you get a Pap. checkitoutguys.ca



HEALTH EQUITY

The way we build, design and create things has a significant impact on equity in service delivery.

Does your program make it clear: we are expecting you; we know you will come here; we are prepared.



INCLUSIVITY IS FOR EVERYONE

- When we talk about queer, trans & nonbinary inclusion we often forget to talk about intersectional equity – the things that work for queer people work for everyone (solo parents, kinship relationships, racialized families, disabled parents, etc.)
- 2SLGBTQIA+ people will navigate and access health care because they have no other choice, even though it is often unsafe.



Images from www.havingababy.co
Illustrator: Ashley Seil Smith



"This life-changing book is equal parts practical handbook and sensitively written resource. Highly recommended!"

—TONI WESCHLER, MPH,
author of *Taking Charge of Your Fertility*

QUEER CONCEPTION

The COMPLETE
FERTILITY GUIDE
for QUEER and TRANS
PARENTS-TO-BE

KRISTIN L. KALI
LICENSED MIDWIFE

THE IMPORTANCE OF INCLUSIVITY

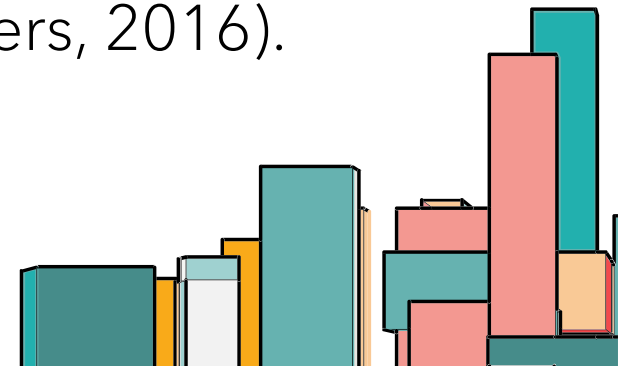
Transmasculine clients who are pregnant described better experiences when care providers were well equipped to communicate an understanding of gender dysphoria, the different methods of infant feeding, and transgender identity (MacDonald et al., 2016).

THE IMPORTANCE OF INCLUSIVITY



Explicit and visible support:

Research clearly demonstrates that services directed specifically at, and designed by, 2SLGBTQIA+ clients are perceived by those families as invaluable sources of information and support (Flanders, 2016).





TAKEAWAYS

1. Health systems face multifaceted challenges in renaming reproductive and sexual health services that require multifaceted solutions.
2. Service names that are inaccurate and not inclusive create barriers for 2SLGBTQIA+ patients in accessing care.
3. The way we design services has a direct impact on the ability of clinicians to provide care and the way patients experience care.
4. Designing health care services that include 2SLGBTQIA+ people improves our ability to care for everyone.

THANK YOU

CJ Blennerhassett, RM, MHA, CHE Candidate

902-943-5918

cj.blennerhassett@iwk.nshealth.ca

