# Community Advocacy & Systems Change Strategy



### **Background:**

The Queer & Trans Health Collective (QTHC) spent the last year reviewing the needs and desires of the 2SLGBTQIA+ community in Edmonton to determine the best ways to support our health and wellness. Through community and partner consultations we developed a total of nine recommendations organized into three strategies: Community Service Delivery, Community Advocacy and Systems Change, and Community-Based Research. In the coming year, QTHC will work with our partners and community to develop concrete steps to address these recommendations. We strive to foster collaboration and ensure that community priorities are addressed in a comprehensive and sustainable way.

### Recommendation 1: Deliver and advocate for healthcare provider competency training.

Many 2SLGBTQIA+ community members experience barriers to healthcare such as inappropriate care as a result of provider assumptions, lack of knowledge of communityspecific care or referrals, or provider judgement. Some optional training resources exist in Alberta such as the Trans Wellness Initiative and Prep Alberta. However, optional training will not reach all healthcare providers, so advocating for more widespread or potentially mandatory training is necessary. While this advocacy work takes place, community organizations should continue to expand upon existing training resources for healthcare providers.

### Recommendation 2: Advocate for consistent, adequate funding for trans and non-binary healthcare.

Trans and non-binary healthcare in Edmonton in the surrounding area has been inconsistently funded and impacted by service interruptions. This has a significant impact on the community, adding to existing challenges with wait times and provider shortages. Additionally, not all transition-related care is publicly funded (i.e. surgeries such as facial feminization or tracheal shave) and vaginoplasty and phalloplasty require out-of-province travel which adds financial barriers. These are longstanding challenges and it is important that community organizations are providing additional support to trans and non-binary community members in the meantime, such as service navigation, peer support, and mental health supports.

Recommendation 3: Advocate for better surveillance data, which adequately captures gender and sexual identity as well as other identities which may impact funding and programming decisions.

Provincial health data around trans and non-binary communities is lacking (i.e. the Alberta Health 2020 report on Sexually Transmitted Infections and HIV collects binary gender only and contains no mention of transgender community members) and national surveys (i.e. Canadian Centre on Substance Use and Addiction reporting) often omit mention of the 2SLGBTQIA+ community entirely. Understanding the health and wellness needs of our community is vital in developing successful interventions and grant applications are more likely to be successful when our proposal can be backed up with data. It is also important we are more broadly advocating for the collection of demographic data that allows us to develop and deliver services in an equitable, intersectional way.



This is a summary of the Community Advocacy & Systems Change Strategy. See the full report <u>here</u>. For more information reach out to finn.st.dennis@ourhealthyeg.ca.



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# Community Service Delivery Strategy



#### **Background:**

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### Recommendation 1: Work towards increased inter-agency collaboration, with the long-term aim of providing more coordinated and consistent services to community members.

Strengthening inter-agency relationships will improve referral coordination and lead to easier service navigation for community members. As a sector, we also have access to a limited funding pool; it makes sense to ensure services are not duplicated and that we are able to support one another's efforts. As it stands, no singular organization in Edmonton has capacity to support all needs of the full spectrum of the 2SLGBTQIA+ community, so we must work together collaboratively to do so.

## Recommendation 2: Ensure equitable service delivery to address all facets of wellbeing, including physical, sexual, mental, and social health.

Taking a wholistic approach to service delivery, which attends to all aspects of health and wellness, is more likely to result in greater overall wellbeing for our community. We must ensure that community members who have been underrepresented and underserved by community organizations are centred as we work towards equitable access. This work must be done in an intersectional way, understanding that not all community members have the same needs and desires, and that we may have different understandings of wellness. Recommendation 3: Address the lack of accessible, long-term mental health supports through 2SLGBTQIA+ peer support services.

Our community consultations highlighted the lack of adequate mental health supports that are available in Edmonton and surrounding area. Finding timely, financially accessible, long-term support is challenging. One way to address this gap is through developing 2SLGBTQIA+ peer support services. Community members indicated an interest in having support from others with similar experiences. Peer support also allows community members who may have distrust in institutional mental health services to access support and care.



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# Community–Based Research Strategy

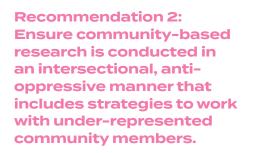


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#### Recommendation 1: Address the current data deficit in Alberta.

There is a major gap in queer and trans health and wellness data in Alberta. While national surveys provide valuable information, regional data collection provides a more targeted understanding of community needs, service and programming gaps, and health inequities. It is important to take steps towards to building a network of service providers and researchers who are interested in supporting large-scale regional data collection alongside the 2SLGBTQIA+ community. It is also vital that organisations which have the means of conducting original research have plans in place to share their findings with community members, stakeholders, and academic partners.



Two-Spirit and racialized queer and trans folks, as well as people with disabilities, are often underrepresented in research data. Addressing this allows us to better design programming, apply for funding, and advocate for needed change. Ensuring that projects engage with community members from start to finish, that a range of ways of knowing are used, and that community members are seen as experts will lead to more well-rounded, representative data. Accessibility measures must be built into research. Programming and service evaluation data should also be collected in a way that allows us to understand if programs are working for specific populations as well as the larger community.

Recommendation 3: Address knowledge gaps related to mental health and substance use within the 2SLGBTQIA+ community in Edmonton and the surrounding region.

While we understand from community knowledge there are gaps in programming and services, we don't have local data on current community mental health needs. We also have a gap in local queer and trans substance use data. Large national surveys lack consistent metrics of sexual and gender identity and local data is outdated as it doesn't capture the impact of the pandemic and increase of opioid poisonings seen within the community. Conducting research on local 2SLGBTQIA+ mental health and substance use will allow for more targeted, evidence-based interventions.

This is a summary of the Community-Based Research Strategy. See the full report <u>here</u>. For more information reach out to finn.st.dennis@ourhealthyeg.ca.



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