# The Canadian Rainbow Health Coalition (C.R.H.C.)

We are pleased to announce the formation of the Canadian Rainbow Health Coalition (CRHC). At a meeting in Toronto on February 1 to 3 a committee of community activists, male and female, representing different regions of the country, came together to form the CRHC. This meeting was a follow-up to the successful national health conference, 2001: A Health Odyssey – Building Healthy Communities held in Saskatoon August 31 to September 3, 2001. At that gathering representatives indicated the need for a mechanism to connect those organizations and individuals addressing health and social issues facing people who have emotional and/or sexual relationships with people of the same gender.

The committee has begun the process of putting together a national organization that will address the concerns expressed by people from across Canada during the Saskatoon gathering. This document is a beginning point in developing a national coalition. It is by no means comprehensive and further work is being done on the objectives and activities but we wanted to inform people about this exciting work in progress.

#### Mission Statement

The Canadian Rainbow Health Coalition is a community-based coalition dedicated to addressing the emotional, physical, spiritual and mental health needs and the well-being of people who have emotional and /or sexual relationships with people of the same gender.

Recognizing that we constitute a population that continues to experience significant inequities we will provide a national voice that:

- -Advocates nationally and regionally for resources to address our health and wellness issues:
- -provides leadership on our health and wellness in a holistic way; and
- -facilitates networking and sharing of resources and information.

#### **Mandate**

A. At this point the committee has directed their attention to addressing the issues raised in the Saskatoon Declaration, which was approved by Gathering participants in September of 2001.

# Saskatoon Declaration of GLBT Health & Wellness September 3, 2001

The following resolutions were unanimously supported by delegates at 2001: A Health Odyssey - Building Healthy Communities, a GLBT health conference held in Saskatoon August 31 to September 3, 2001. They are broad based and macro in perspective to provide a beginning point in looking at addressing the health care and social service needs and concerns of Canadians who have emotional and/or sexual relationships with people of the same gender. This list of recommendations was originally culled from past grassroots-based research studies on the issues and discussed and voted on by participants in 2001: A Health Odyssey. They are presented here in a generic manner so as to encompass the numerous specified identities that make up our

diverse communities; i.e. lesbians, gays, bisexuals, transsexuals, transgendered, Two-Spirit people, queers, seniors, youth, disabled, rural and urban dwellers, their families and friends, etc. (For the purpose of this document these communities are collectively referred to as GLBT) This is not an inclusive list, nor are the resolutions listed in order of importance.

# We the GLBT People of Canada:

In recognition that the Canada Health Act guarantees equity in the delivery of health services to all Canadians and in light of the Supreme Court of Canada ruling in the Egan vs. Canada case where they said "Gays, lesbians and bisexuals, as individuals or as couples, form an identifiable minority, which is still today, victim to serious social, political and economic inequities," we propose the following resolutions:

# National GLBT Health and Wellness Organization.

Funding must be provided for the formation of a national GLBT health and wellness organization that would advocate for systemic changes in governmental policies including the allotment of core funding for national, regional and local organizations, diversification of educational curricula, encouragement of ongoing research and establishment of a national clearing house of GLBT health and wellness information.

# **National GLBT Health Promotion Strategy**

The development, implementation and evaluation of a national GLBT health and wellness promotion strategy, must be undertaken and driven by GLBT communities in partnership with Health Canada and other departments, supported by significant financial resources for ensuring success. This would involve a strong and closely linked collaboration between Health Canada, other branches and governmental levels and the GLBT communities towards ensuring positive health and wellness for these communities.

# Population Health & Determinants of Health

Those that are responsible for the health of all Canadians, (Health Canada and other federal departments, provincial/territorial departments/ministries and regional/district health boards) must develop a broader, more comprehensive, encompassing perspective of GLBT health as a focus. This requires a perspective that moves beyond an illness/disease-based focus (i.e. HIV/AIDS, breast cancer) to a more holistic view that defines health in psychological, mental, emotional, spiritual, physical, environmental and cultural means with documented concrete determinants of health including conditions that affirm choices of coming out. To this end the diverse GLBT communities must be recognized by health policy as distinct health populations with specific health and wellness issues and needs.

# Revitalization of HIV/AIDS Prevention in GLBT Communities

In light of the alarming rate with which HIV/AIDS continues to affect GLBT communities, the Canadian Strategy on HIV/AIDS must be strengthened and address HIV/AIDS issues in the context of the broader health and social issues that impact on GLBT populations.

#### **Funding**

All levels of government must provide GLBT communities with adequate core funding at national, regional and local levels to address the numerous barriers we face within the health and social service fields. Standards of equitable funding distribution must be established so as to include the full participation of the diverse GLBT populations.

#### **Directives & Guidelines**

Policy and funding processes concerning health and social services at all levels (federal, provincial/territorial, regional, municipal, aboriginal governments,) must develop directives that call for sensitive and equitable health and social service provision to GLBT populations including children and youth. This would include goals of correcting prejudicial attitudes through best-practice guidelines, when implementing policy and programming.

#### Research

Health Canada and those engaged in health research, such as the Canadian Institute for Health Research, must support continued research and demonstration projects that address health and social service barriers and accessibility issues faced by GLBT populations across the country. The voices of those who have lived with the impact of homophobia and heterosexism must be recognized and legitimized.

# **Educating Professionals**

Educational institutions and professional associations must include and be held accountable for GLBT issues in the curricula of their health, education and social service training to redress the historic invisibility and recognize the contribution of GLBT people, and to counter homophobia and heterosexism. The issues of GLBT people must be integrated both into the curriculum of education systems at all levels and the ongoing professional training of professionals by their professional organizations.

#### **Public Education**

Those responsible for the health of Canadians must provide resources for local, provincial/territorial and national organizations to deliver public education to both the GLBT and broader communities as to the role homophobia and heterosexism plays in negatively affecting the health and wellness of GLBT people and their families. Homophobia and heterosexism are killing us.

### B. Staying Connected

An important mandate of the Canadian Rainbow Health Coalition is to develop mechanisms to enable people across the country to stay connected and share resources. The formation of the CRHC is the first step in meeting this mandate and a further step will be the hosting of a second national health conference hopefully in May 2003.

# C. Health Promotion Within Our Community

Another important mandate for the CHRC is to advocate for our health issues and to promote better health and wellness within our communities as well as within the broader communities across Canada. This will be accomplished through the CRHC with the full participation of all members.

# Objectives & Activities Canadian Rainbow Health Coalition - C.R.H.C Toronto Meeting Feb. 1-3, 2002

#### NATIONAL GLBT HEALTH & WELLNESS ORGANIZATION

#### OBJECTIVE:

-To promote a holistic perspective that moves beyond an illness/disease based model.

#### ACTIVITY:

- -To identify our health and wellness issues as a distinct population and to frame them in the determinants of health as impacted by homophobia, heterosexism, and colonialism.
- -To support and facilitate a process that permits lesbians to appropriate and apply the population health model and it's determinants of health to their health needs.
- -Activities include (but not exclusive of) addressing areas of coming out, addictions, mental health, low self esteem, HIV, violence, breast cancer, lack of culturally appropriate services, etc.

### NATIONAL GLBT HEALTH PROMOTION STRATEGY

#### OBJECTIVE:

-To advocate for the development of a national health promotion strategy(ies) for our communities.

#### **ACTIVITY:**

- -To participate in activities leading to the development of health promotion strategies.
- To advocate with health funders in Canada to ensure that our developed health promotion strategies are addressed.

#### POPULATION HEALTH & DETERMINANTS OF HEALTH

#### OBJECTIVE:

-To ensure equitable health and social service provisions for our communities.

#### **ACTIVITY:**

- Develop a national inventory of research, best practices and projects
- -Meet with provincial and Canadian Human Rights commissions

-Meet with the Federal/Provincial/Territorial Committee on Population Health to advocate for the inclusion of GLBT health and well-being issues.

#### REVITALIZATION OF HIV/AIDS PREVENTION IN GLBT COMMUNITIES

## OBJECTIVE:

-participate in the revitalization of HIV/AIDS prevention in our communities.

#### ACTIVITY:

- -C.R.H.C. participate in initiatives that develop frameworks for HIV/AIDS prevention for gay men.
- address HIV/AIDS issues in the context of the broader health and social issues that impact on our populations. Describe to: funders, our communities, A.S.O.'s, politicians, and all those concerned with HIV/AIDS prevention in Canada.

#### FUNDING

#### OBJECTIVE:

-to secure core funding for the CHRC and secure funding streams that can be accessed locally, regionally and nationally to address our health and wellness issues.

# ACTIVITY:

- -advocacy with those responsible for the health of all Canadians to ensure equitable funding distribution for all sectors of the GLBT community across Canada
  - explore charitable tax status and establishing a foundation
- -develop mechanisms for information sharing about funding programs, background information for proposal writing; proposals.
- -address equality issues in funding distribution based on population; hold governments accountable.
  - -provide tools for capacity building for members.

#### DIRECTIVES AND GUIDELINES

#### OBJECTIVE:

-to advocate with those responsible for the development of health and social policy in Canada to develop policy that addresses the health and social needs of GLBT people

#### **ACTIVITY:**

- -research best practice models of service delivery to GLBT people for distribution to those involved in delivery of health and social programs to Canadians.
- -advocate for the development of policy that equitably address the ranges of health and social problems that are endemic to GLBT communities.
- -develop programs that educate and correct prejudices held by policy makers and service deliverers.

#### RESEARCH

#### **OBJECTIVE:**

-Encourage new and continued research that addresses social service and health barriers and accessibility issues faced by our population.

#### **ACTIVITY:**

- -Direct links to our community researchers
- -Link with Canadian Health Network
- -Identify what kind of research needs to take place, (gaps)
- -Link with Canadian Institute of Health Researchers (C.I.H.R.)
- -Share research projects and findings

#### **EDUCATING PROFESSIONALS**

#### **OBJECTIVE:**

-To ensure the inclusion of our issues into the curricula and continuing education of health, social and educational systems.

#### **ACTIVITY:**

- -To review and advocate inclusion of our issues in codes of ethics
- -Meet with those responsible for accreditation and procedures in each profession
- -Meet with professionals associations
- -Meet with councilors of ministers of education
- -Collect and share resources that demonstrate inclusive curricula

#### PUBLIC EDUCATION

#### OBJECTIVE:

-Initiate National public education to our and the broader community to demonstrate the negative impact of homophobia and heterosexism.

#### ACTIVITY:

- -To develop partnerships that are agenda driven by the coalition, to develop public education initiatives on our health and wellness
- (i.e): CPHA, CSW, CASW, CAE, AMHA, Canadian Civil Liberties, CHRC, Kids Help Line, Heritage Canada, Justice Canada.
  - -Research Australia, Britain, as well as other models
  - -Media Communication Strategy
- -Conferences participate in Romanow Commission and other political initiatives (raise our political voices)
  - -Regional Workshops
  - -National Gatherings
  - -Apply for Funding

A follow-up meeting of the organizing committee will be meeting in May to put together other areas such as membership policy and to plan activities to assist in carrying out the objectives of the CRHC. We will notify you as soon as more details are available.

At the present time Gay & Lesbian Health Services of Saskatoon (GLHS) is coordinating and facilitating the organizing efforts of the Canadian Rainbow Health Coalition. If you have suggestions, questions or comments please feel free to contact Gens Hellquist at GLHS: 306-665-1224, 1-800-358-1833, fax at 306-665-1280 or by email at <a href="mailto:gens@glhs.ca">gens@glhs.ca</a>. Watch for the coming website of the CRHC.

# **CRHC Co-ordinating Committee Members**

Robert Allen Halifax Bill Ryan Montreal Art Zoccole Ottawa Barry Deeprose Ottawa Tony Caines Toronto Nick Mulé Toronto Donna Huen Winnipeg Saskatoon Gens Hellquist Chris Morrissey Vancouver Lori Crozier Whitehorse

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Administrative support