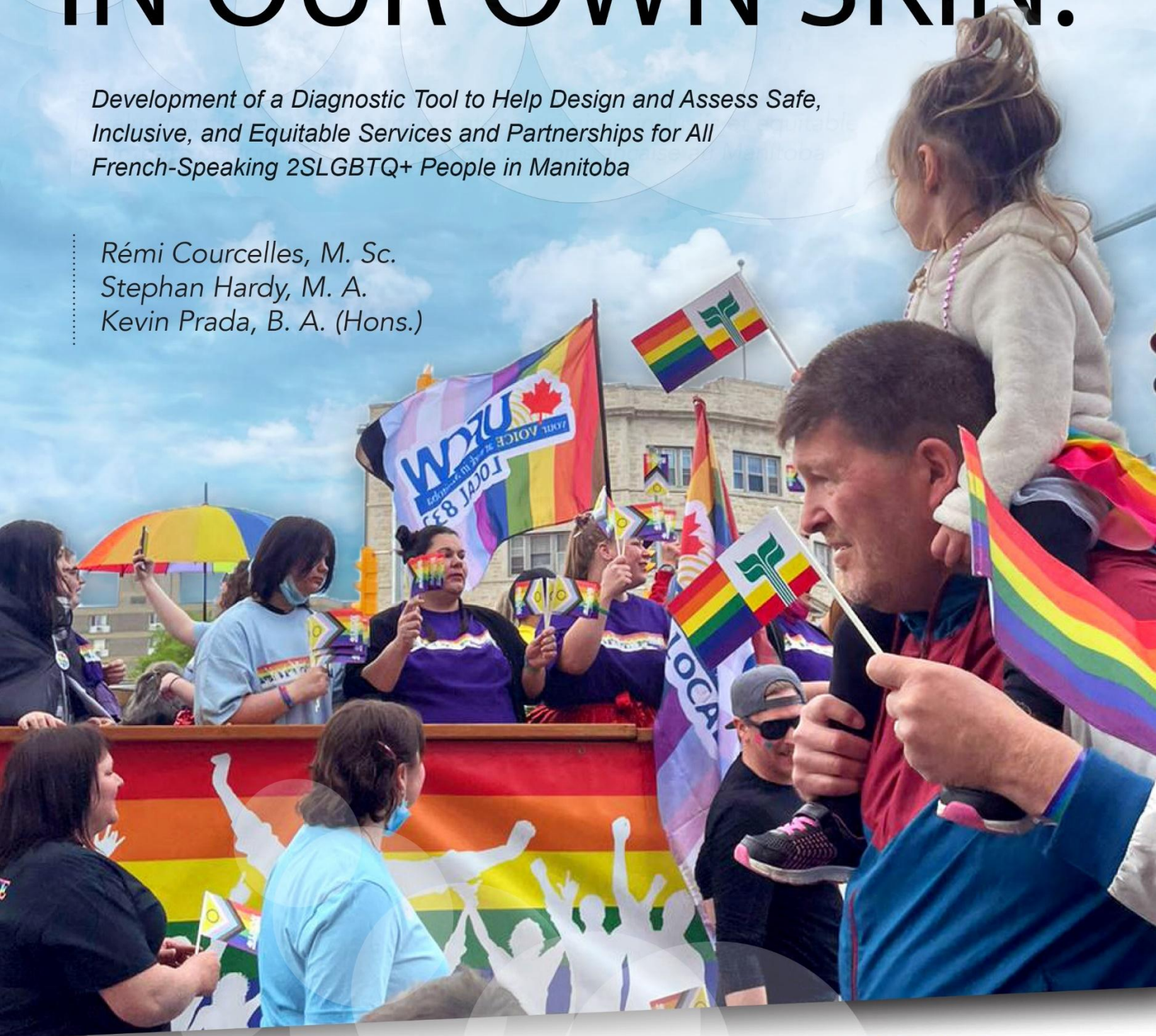


COMFORTABLE IN OUR OWN SKIN:

Development of a Diagnostic Tool to Help Design and Assess Safe, Inclusive, and Equitable Services and Partnerships for All French-Speaking 2SLGBTQ+ People in Manitoba

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For more information, please visit collectiflgbtq.ca or email us at info@collectiflgbtq.ca.

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Cover photo: Paul Sherwood

ACKNOWLEDGEMENT OF FIRST NATIONS AND TRADITIONAL TERRITORIES

This research project was carried out on land that is part of the traditional territory of the Anishinaabe, Cree, Oji-Cree, Dakota and Dene peoples, and the Homeland of the Red River Métis Nation—land shaped by our parents, our ancestors, and Louis Riel.¹

1 The French version of this land recognition was written by the Union nationale métisse Saint-Joseph du Manitoba for the purposes of this report.



Photo: Paul Sherwood

TABLE OF CONTENTS

1. Introduction	5
1.1 <i>Background</i>	6
1.2 <i>The current project</i>	7
2. Methodology	8
3. Diagnostic tool	11
3.1 <i>Social and cultural development: initiatives</i>	13
3.2 <i>Social and cultural development: partnerships</i>	17
3.3 <i>Health care: services and resources</i>	18
3.4 <i>Health care: partnerships</i>	22
3.5 <i>Education: services and initiatives</i>	24
3.6 <i>Education: partnerships</i>	28
4. Limitations and recommendations	29
4.1 <i>Limitations</i>	30
4.2 <i>Recommendations</i>	32
5. Appendices	34
6. Notes	37



Photo: Fierté Collectif

INTRODUCTION



1. INTRODUCTION

1.1 Background

Established in 2019, the Collectif LGBTQ* du Manitoba (“the Collectif” hereinafter) is a non-profit organization run entirely by volunteers. Its mission is to promote the health and well-being of French-speaking 2SLGBTQ+¹ people in Manitoba (the term Francoqueer is also used to refer to French-speaking 2SLGBTQ+ individuals more broadly). In June 2020, the Collectif collaborated with Université de Saint-Boniface (USB) on a study to better understand this community’s experience in accessing services and the discrimination perceived by its members based on their sexual orientation, gender identity and language.

This study’s report, *From and for Our Own: Needs Analysis of the French-Speaking LGBTQ2S Community in Manitoba* (2021)² represents the first profile of this community in all its diversity. The report identified significant gaps in the availability of French-language services adapted to the needs of French-speaking 2SLGBTQ+ people (“the Community” hereinafter). Applying intersectionality as a theoretical framework, the report revealed that members of the Community face a heightened risk of discrimination and stigmatization in all areas of their lives.

The report made a number of recommendations to enhance the Community’s health and well-being, including:

- “Improve access to health care and social services in French, in a proactively inclusive and safe environment for all 2SLGBTQ+ people” [translation] (p. 85)
- “Continue to facilitate gatherings in French for 2SLGBTQ+ individuals, in collaboration with other French-language and 2SLGBTQ2+ organizations in Manitoba, to encourage fellowship and build social connections” [translation] (p. 84)
- “Collaborate with health care and social service providers, to promote the active offer of services in French and to encourage their use by 2SLGBTQ+ individuals through the implementation of best practices in linguistic and sexual security” [translation] (p. 85)
- “Regularly evaluate all services provided to members of the Community to ensure that these services meet standards for linguistic and sexual security” [translation] (p. 85)

These recommendations fall under three main categories: health care, social and cultural development, and education. A number of questions remain. How can we mitigate the Community’s increased risk of discrimination and stigmatization when accessing services or participating in events? How can we work with non-Francophone and non-2SLGBTQ+ organizations to achieve this goal? What do accessibility, inclusion and promising practices look like in the context of Francoqueer-friendly health care and social services? What objective criteria should be used to establish partnerships, create new services, and assess and improve existing services? The Collectif’s current project seeks to answer these questions by means of a new diagnostic tool.

- 1) 2SLGBTQ+ refers to Two-Spirit, lesbian, gay, bisexual, transgender, queer and questioning people. However, this acronym is used throughout this document to refer to anyone whose sexual or gender identity is expressed or experienced differently from the heterosexual, cisgender majority.
- 2) Prada, K., De Moissac, D. & Gueye, N. G. (2021). *From and for Our Own: Needs analysis of the French-speaking LGBTQ2S Community in Manitoba*. Collectif LGBTQ* du Manitoba.

1.2 The current project

To begin answering these questions, and as a follow-up to the *From and for Our Own* report, the Collectif held community consultations in March 2022. These consultations were conducted online due to Manitoba's health regulations in effect at the time. Each live session focused on one of the three major categories that had emerged from the recommendations of the *From and for Our Own* report: health care, social and cultural development, and education. The goals of the sessions were:

1. To solicit input from Community members, in all their diversity, as an initial follow-up to the results of the needs analysis, through targeted discussions about:
 - a. Community members' experiences with current service providers and suppliers
 - b. Potential partnerships
 - c. Solutions to ensure the safety and inclusion of French-speaking 2SLGBTQ+ people

2. To use the feedback collected to develop a tool for assessing services and partnerships. There is a palpable need for an evidence-based method, informed by the real-life experiences and needs of our Community, that would allow for rigorous and objective evaluations of the services and partnerships serving Manitoba's Francoqueer population. The diagnostic tool presented below provides an objective and concrete means to assess the quality of services in the three categories mentioned above, while serving as a guide for bringing further improvements to these services and partnerships. This tool will be of particular interest to the following individuals and organizations:
 - a. Service providers seeking an honest and objective assessment to improve their services and enhance their active offer for all French-speaking 2SLGBTQ+ individuals
 - b. The Collectif leadership, who could use it to develop a certification process (see the *From and for Our Own* report, Recommendations, pp. 84 and 85) and to assess potential partnerships
 - c. Community members, to help them assert their right to high-quality services
 - d. Funders and donors (including governments), who could use it to assess service providers for their level of inclusion and service quality

This report first describes the methodology used to develop the diagnostic tool, then presents the tool as it applies to the three main categories (health care, social and cultural development, and education). This is followed by an outline of the project's limitations and recommendations for further action. The report therefore serves as both an analytical tool (in its pilot phase), and as an action plan for the Collectif as it moves to implement the recommendations of the *From and for Our Own* report.

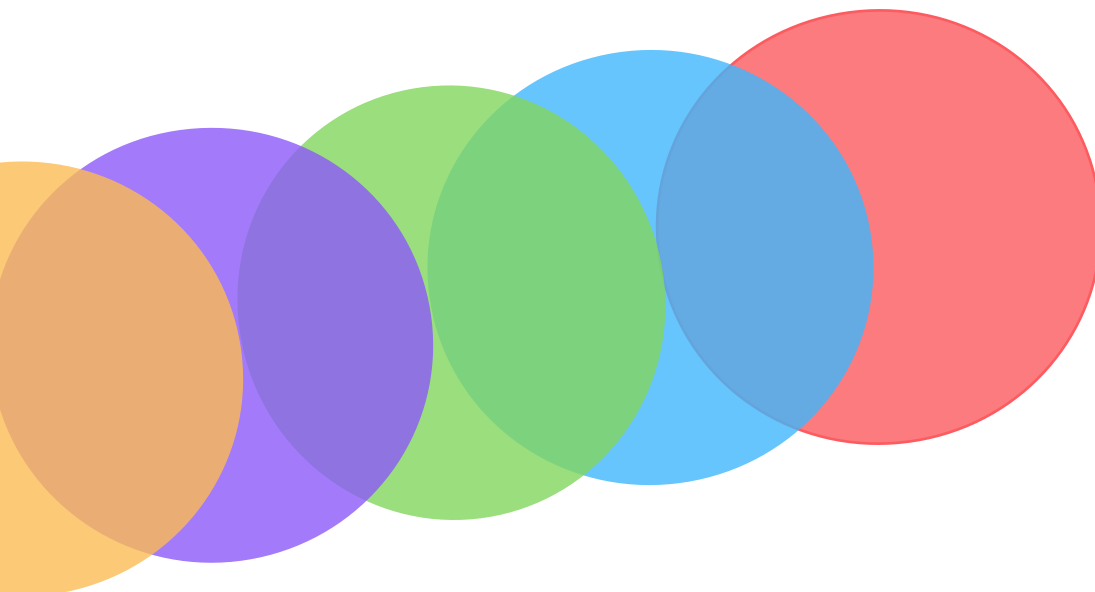




Photo: Christian Delaquis, Collectif LGBTQ+ du Manitoba

YOUTH TECHNOLOGY

2. METHODOLOGY

The Collectif conducted community consultations through three live discussion forums. Each session focused on one of the three categories addressed in the *From and for Our Own* report: social and cultural development, health care, and education.

The sessions took place over the following dates and times:

- Social activities¹ Wednesday, March 2, 2022, 7:00 p.m. to 8:30 p.m.
- Health care - Thursday, March 3, 7:00 p.m. to 8:30 p.m.
- Education - Saturday, March 5, 10:30 a.m. to 12:00 p.m.

To promote the events, an invitation was sent via a newsletter to the 230 people on the Collectif’s mailing list (see Appendix 5.2 for the text of the invitation and accompanying images). The Collectif also shared promotional messages and images on social media, namely its Facebook and Instagram pages, as well as on other pages and forums across those networks. The invitation was also posted on the Collectif’s website.

1 “Social activities” was the term used during the discussion forums to ease communication. See Appendix 5.2.





Participants were required to register in advance. A total of 30 registrations were received for all three sessions.

The Collectif issued a reminder via a newsletter a few days before the first session. Based on feedback from a Community member, the invitation and registration form were amended to include parents and guardians of 2SLGBTQ+ youth (see Appendix 5.2 for the text of the parents' invitation). Since publishing the *From and for Our Own* report, the Collectif has focused its next research phase on the needs of Francoqueer youth in Manitoba. The perspectives of parents and guardians—particularly their views on services for their children—was therefore deemed valuable, and they were invited to take part in the discussions. The invitation was reworded, and the new version was included in the reminder distributed via the newsletter and on social media. The invitation was also emailed to various Francophone organizations, including the Division scolaire franco-manitobaine (DSFM) and the Fédération des parents de la francophonie manitobaine (FPFM). On March 1, the Collectif sent Zoom links and briefing notes (see Appendix 5.4) for each session to all registrants.

Ultimately, nine participants attended the session on social activities, six attended the session on health care, and six attended the session on education. The significant gap between registered participants and actual attendees is difficult to explain, but is likely due to a combination of factors, including Zoom burnout during the health restrictions and fatigue linked to the Omicron wave that was then sweeping across Manitoba and Canada. Extending the invitation to allies (in addition to parents) may have attracted more registrations, but it might not have resulted in a higher participation rate due to the reasons mentioned above.

The forums employed methods such as brainstorming and collective ideation, grounded in the appreciative inquiry approach. Participants were invited to reflect on the ideal conditions for providing safe and inclusive services and partnerships for French-speaking 2SLGBTQ+ people in all their diversity. Their personal stories, both positive and negative, sparked discussions about the barriers they face in accessing services and the factors that contribute to a sense of sexual, gender, and linguistic security.

Photo: Sol Sevilla



DIAGNOSTIC TOOL

3. DIAGNOSTIC TOOL

Using feedback from the community consultations, the Collectif developed a set of objective criteria for a new diagnostic tool to assess services and partnerships in each of the three categories: social and cultural development, health care, and education. For each category, services and partnerships are evaluated separately, resulting in six distinct variations of the tool. The diagnostic tool for health care services therefore differs from the tool for health care partnerships. The same applies to social activities and education. Users are advised to determine which of the six tools is most appropriate for their situation.

To boost the tool's effectiveness, each objective criterion is broken down into several success factors. Users are asked to consider each success factor and assess its presence within the service or partnership by assigning a score between 1 and 10. These scores can be used not only to evaluate individual services and partnerships but also to compare them. For example, a service that scores 350 total points out of a possible 500 will receive a diagnostic score of 70%, while a service that scores 400 points will receive a score of 80%. The formula used to obtain these percentages is as follows:

$$\text{Diagnostic score} = (350 \text{ points obtained} / [50 \text{ success factors assessed} \times 10 \text{ possible points}]) \times 100 = 70\%$$

These diagnostic scores highlight the services' strengths in terms of inclusivity while also quantifying any shortcomings.

It's worth noting that while most of the success factors emerged from the community consultations, some elements were added by the report's authors (who are also members of the Community) to enhance the tool.



3.1

Social and cultural development: initiatives¹

The following is a list of initiatives identified by participants in the social activities discussion forum:

- Discussion groups covering topics and issues that affect the Community
- Weekend parties / club nights / singalongs
- Happy hours / patio get-togethers
 - › Participation in existing community festivals
 - › Pride Winnipeg and pride festivals in rural communities
 - › St. Jean-Baptiste Day in La Broquerie
 - › Saint-Pierre-Jolys Frog Follies
- Activities tailored to specific interests
 - › Film screenings (French films with subtitles) / Cinémental nights
 - › Sports activities (volleyball, hiking/walking, Jets/Canadiens nights)
 - › Arts and culture evenings (Cercle Molière, concerts, cabarets, music workshops/jam sessions)
 - › Singles nights
- An online calendar/forum where Community members can view a complete schedule of community activities and add their own events
- A mini survey distributed at Collectif social events to get a better grasp of the participants' demographics and plan for future activities

<i>Diagnostic Tool for Social and Cultural Development Initiatives</i>		
<i>Criteria</i>	<i>Success factors</i>	<i>Score from 1 to 10, with justifications and comments</i>
Community building	The activity attracts Community members who would not otherwise come together	
	The activity helps people get to know each other and form relationships	
	The activity provides a fun experience	
By and for the Francoqueer community	The activity calls for the use of French	
	The activity provides a unique experience focused on Francophone culture(s)	
	The activity enables French speakers, including immigrants, to build new networks	
	The activity provides a safe space in terms of sexual orientation and gender identity	
	The activity provides linguistic security	
	The activity allows all participants to feel 100% comfortable being themselves	

¹ The term *initiatives* is used in place of *services* in this version of the tool.

Diagnostic Tool for Social and Cultural Development Initiatives

<i>Criteria</i>	<i>Success factors</i>	<i>Score from 1 to 10, with justifications and comments</i>
Open to non-members	The activity is open to French-speaking anglophones and allophones	
	The activity is open to heterosexual and cisgender people	
Inclusive design	The activity's main objective and target audience are clear and well defined	
	The activity promotes the full inclusion of French-speaking 2SLGBTQ+ youth	
	The activity includes dynamic, fun components to attract young people	
	The activity promotes the full inclusion of Francoqueer seniors	
	The activity promotes the full inclusion of people living in rural communities	
	The activity promotes the full inclusion of people living in urban settings	
	The activity promotes the full inclusion of people living in suburban communities	
	The activity promotes the full inclusion of marginalized people	
	The activity promotes the full inclusion of trans and nonbinary people	
	The activity promotes the full inclusion of Indigenous and Two-Spirit people	
	The activity promotes the full inclusion of racialized people and racial minorities	
	The activity promotes the full inclusion of immigrants and newcomers to the province	
	The activity promotes the full inclusion of people living with disabilities	
	The activity promotes the full inclusion of low-income people	
	The activity promotes the full inclusion of single people	
The activity promotes the full inclusion of people who lack a social circle or who do not usually participate in events		
The activity does not assume that Francophones or Francoqueers all know each other		

Diagnostic Tool for Social and Cultural Development Initiatives

Criteria	Success factors	Score from 1 to 10, with justifications and comments
Inclusive promotional activities	The activity is promoted beyond the usual networks (Facebook, <i>La Liberté</i> , etc.)	
	The activity is promoted in DSFM and French immersion schools and on Instagram, Snapchat, etc.	
	The language used in promotional materials is affirming, inclusive, accessible and gender-neutral	
	The promotional material is sent to a list of people who wish to receive information about social activities	
	An effort has been made to reach young and old alike	
	An effort has been made to reach people living in rural communities	
	An effort has been made to reach marginalized people	
	An effort has been made to reach trans and nonbinary people	
	An effort has been made to reach Indigenous and Two-Spirit people	
	An effort has been made to reach racialized people and racial minorities	
	An effort has been made to reach immigrants and newcomers	
An effort has been made to reach people living with disabilities		
Calendar of activities	The calendar of activities includes geographically diverse events (urban vs. rural, St. Boniface vs. elsewhere)	
	The calendar of activities features different types of events	
	The calendar features a mix of activities of varying frequency (regular and one-off events)	
	The calendar prioritizes in-person events, while offering occasional online and hybrid activities	
	The calendar of activities strikes a balance between events that are open and closed to non-members of the Community	

Diagnostic Tool for Social and Cultural Development Initiatives

<i>Criteria</i>	<i>Success factors</i>	<i>Score from 1 to 10, with justifications and comments</i>
Reduced workload	Informal activities are prioritized over formal ones to reduce the workload of organizers and the Collectif	
	The activity builds on existing events to limit workloads	
	Series of events are prioritized to limit promotional requirements	
Visibility of the Collectif	The Collectif is positioned as the primary gateway to Manitoba's French-speaking 2SLGBTQ+ community	
	The Collectif's visibility at events is discreet, to protect the identity of individuals who have yet to come out.	
Total diagnostic score	Highest possible diagnostic score: 510 (51 success factors)	Final diagnostic score (points earned/510) x 100 = %



Photo: Olivier Poulin, Collectif LGBTQ* du Manitoba.

3.2 Social and cultural development: partnerships

The following is a list of potential partners identified by participants in the social activities discussion forum:

- Reel Pride Film Festival
- Rainbow Resource Centre
- Out There Winnipeg
- Cercle Molière
- French-speaking 2SLGBTQ+ artists
- Société de la francophonie manitobaine – 233-ALLÔ
- Conseil jeunesse provincial
- Centre culturel franco-manitobain
- 100 NONS
- Sports en français
- *La Liberté*
- Union nationale métisse Saint-Joseph du Manitoba
- Winnipeg Folk Festival
- Nonsuch Brewing Co.
- Winnipeg Wrestling Club
- Little Brown Jug Brewery

<i>Diagnostic Tool for Social and Cultural Development Partnerships</i>		
<i>Criteria</i>	<i>Success factors</i>	<i>Score from 1 to 10, with justifications and comments</i>
Strategic value	The partnership enables the Collectif to meet the needs of the Community	
	The partnership alleviates the Collectif's workload in organizing social activities	
	The partnership enables the Collectif to establish contact with more members of the Community	
Issue awareness	The partner is aware of the unique issues faced by Manitoba's Francoqueer community	
	The partner understands the importance of safe spaces for the Community	
	The partner recognizes that French-speaking 2SLGBTQ+ people already belong to the community it serves	
Commitment and visibility	The partner is willing to proactively promote a 2SLGBTQ+ activity in French	
	The partner is willing to position itself as an ally of Manitoba's Francoqueer community	
	The partner is committed to the safety of Community members	
	The Collectif is fully and/or fairly included in the decision-making process	
Total diagnostic score	Highest possible diagnostic score: 100 (10 success factors)	Final diagnostic score (points earned) = %

3.3 Health care: services and resources

Existing and potential services and resources

The following is a list of potential services and resources identified by participants in the health care discussion forum:

- Online directory/resource hub that Community members can use to find French-language health care services adapted for French-speaking 2SLGBTQ+ people
- Literature that addresses the following topics:
 - › Previous studies conducted by Canadian Francoqueer organizations that identify legal frameworks and best practices in inclusive health care for French-speaking 2SLGBTQ+ people
 - › Existing codes of ethics in Manitoba and other Canadian jurisdictions
 - › International best practices in health care services for 2SLGBTQ+ people, including services provided in an official minority language
 - » 2SLGBTQ+ health care: Nordic countries, among others
 - » In a minority language: Valencia, Wallonia, Fribourg, etc.
- Government and political partnerships and advocacy groups, in order to:
 - › Encourage Canadian Heritage to support the provinces in the further francization of health care services for the 2SLGBTQ+ Community
 - › Encourage Manitoba Health and the Francophone Affairs Secretariat to establish standards for French-language health care services, including for 2SLGBTQ+ people, and to improve access to those services and to information on their availability
 - › Ensure that all governments, post-secondary institutions, and 2SLGBTQ+ and Francophone organizations recognize the shortage of French-speaking physical and mental health professionals and work together to address it
 - › Create scholarships to encourage Francoqueers who possess the necessary skills and interest to become French-language health care service providers
 - › Encourage the creation of specialized training—possibly leading to renewable certification—for inclusive and affirming providers of French-language health care services adapted to the needs of 2SLGBTQ+ people
 - › Encourage all governments to facilitate the creation of gender-neutral washrooms in health care centres and other facilities
 - › Enable French-language health care service providers to study medical terminology, especially gender-neutral language, in French in Manitoba
- If Francophone organizations are unable to create inclusive health care services for French-speaking 2SLGBTQ+ people, approach English-speaking 2SLGBTQ+ organizations about creating French-language services for this clientele
- Meet with the Archbishop of St. Boniface to discuss issues that impact the Francoqueer community, including health care
- Organize social activities and discussion/support groups to promote the mental health of Community members

Diagnostic Tool for Existing and Potential Health Care Services

Criteria	Success factors	Score from 1 to 10, with justifications and comments
Welcome, safety and openness	The health care service promotes the well-being of French-speaking 2SLGBTQ+ people	
	Affirming and inclusive service providers receive ongoing training on the health issues that affect our Community and on the behaviours needed to create a safe environment	
	Service providers recognize sexual orientation and gender identity as a major determinant of health	
	Service providers do not assume that patients are heterosexual or cisgender	
	Service providers are open and willing to learn about and confront their shortcomings	
	Service providers are open and willing to talk freely about 2SLGBTQ+ issues	
	The service prioritizes the complete safety of Community members	
Language requirements	The service can be easily accessed by unilingual French speakers	
	Service providers designated as “Francophone” possess the necessary language skills and medical terminology to offer services in French	
	Patients do not need to provide linguistic support to service providers	
	Service providers do not assume that patients speak or understand English	
	Service providers understand how to use inclusive, gender-neutral language in French and English	
	Service providers offering services in both official languages understand the importance of French to Community members	
	Service providers offering services in both official languages recognize the increased risk of discrimination faced by 2SLGBTQ+ Francophones	
	Service providers offering services in both official languages consistently enforce a robust policy on the active offer of French-language services	

Diagnostic Tool for Existing and Potential Health Care Services

Criteria	Success factors	Score from 1 to 10, with justifications and comments
Policies, advocacy and transparency	The service provider consistently enforces a robust policy to ensure a high level of discretion and confidentiality for 2SLGBTQ+ patients and staff	
	2SLGBTQ+ people can choose to be seen by a select number of service providers to ensure continuity of care and to mitigate the psychosocial effects of repeatedly coming out; they are also informed about the potential impact that this limited number of providers could have on their care	
	The facility/provider publicly and systematically demonstrates its commitment to the safety of our Community in a clear and convincing manner	
	The facility/provider adopts an inclusive approach, which is also reflected in the language and behaviour of its staff	
	Health care service providers strictly adhere to the code of ethics in force	
	Relevant sections of the facility's/provider's code of ethics are shared with 2SLGBTQ+ patients in both official languages	
	Health care service providers work closely with Community stakeholders to create effective strategies that meet their needs	
Intersectionality	The service applies a highly intersectional lens to the Community	
	Service providers do not assume that racialized individuals are better served by someone of the same race or culture, especially when the individual is 2SLGBTQ+	
	Service providers are sensitive to intersectionality and undergo training to better understand its impact on patients	

<i>Diagnostic Tool for Existing and Potential Health Care Services</i>		
<i>Criteria</i>	<i>Success factors</i>	<i>Score from 1 to 10, with justifications and comments</i>
Promotion of resources	Inclusive services are available and shared with members of our Community	
	Resources are promoted beyond the usual networks (Facebook, <i>La Liberté</i> , etc.)	
	The Collectif is featured when promoting or sharing resources	
Total diagnostic score	Highest possible diagnostic score: 510 (51 success factors)	Final diagnostic score (points earned/510) x 100 = %

Photo: Collectif LGBTQ* du Manitoba





3.4 Health care: partnerships

The following is a list of potential partners identified by participants in the health care discussion forum:

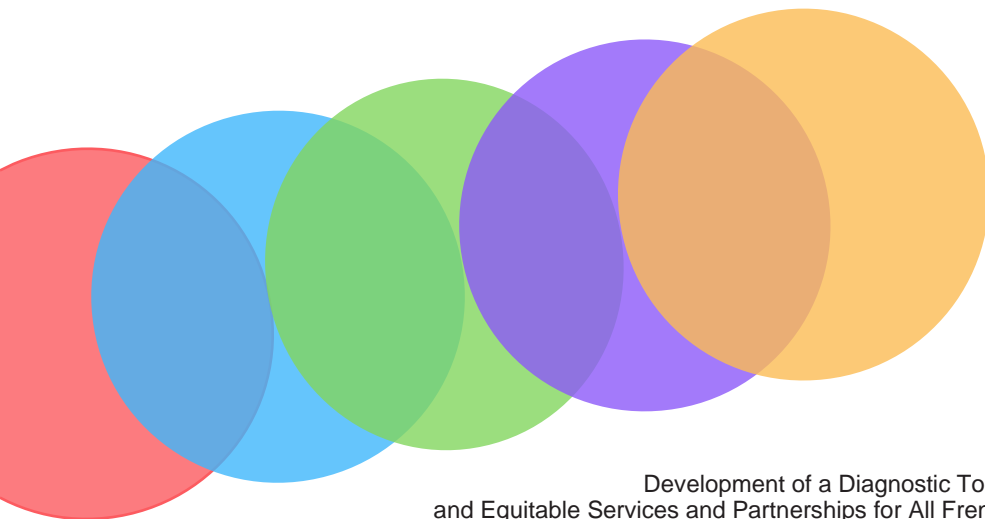
- Société de la francophonie manitobaine (SFM)
- St. Boniface Health Centre
- Santé en français (Manitoba)
- Réseau Compassion Network
- Centre Renaissance
- Winnipeg Regional Health Authority (WRHA)
- French-language services in rural communities (Ste. Anne, Notre-Dame-de-Lourdes)
- Telehealth services
- Fédération des aînés de la francophonie manitobaine (FAFM)
- Fondation Émergence
- Foyer Notre-Dame-de-Lourdes
- Université de Saint-Boniface (USB) Language Enrichment Service

<i>Diagnostic Tool for Health Care Partnerships</i>		
<i>Criteria</i>	<i>Success factors</i>	<i>Score from 1 to 10, with justifications and comments</i>
Strategic value	The partnership enables the Collectif to better meet the needs of its Community	
	The partnership reduces the Collectif’s workload to foster well-being and inclusion throughout the continuum of care	
Awareness and openness	The partner is aware of the unique issues faced by Manitoba’s Francoqueer community	
	The partner understands the impact of rejection and exclusion on the physical and mental health of French-speaking 2SLGBTQ+ people	
	The partner is open to learning best practices in inclusion	
	The partner understands the importance of safe spaces for our Community	
	The partner recognizes that French-speaking 2SLGBTQ+ people are already part of the community it serves	
	The partner is open to proactively promoting its 2SLGBTQ+ services in French	



Diagnostic Tool for Health Care Partnerships

Criteria	Success factors	Score from 1 to 10, with justifications and comments
Commitment, policies and transparency	The partner actively seeks to raise awareness of Francoqueer life experiences among health care service providers	
	The partner publicly and systematically demonstrates its commitment to our Community in a clear and convincing manner	
	The partner enforces a robust equity and inclusion policy that includes the 2SLGBTQ+ Community	
	The partner enforces a zero-tolerance policy against bullying, hostility, harassment and violence towards our Community	
	The partner provides a safe medical and work environment for members of our Community	
	The partner has mechanisms in place that enable Community members to successfully file complaints	
	The partner makes its policies and mechanisms public so that everyone is aware of their rights and obligations	
Decision making	The Collectif will be fully and/or fairly included in the decision-making process throughout the duration of the partnership	
Total diagnostic score	Highest possible diagnostic score: 160 (16 success factors)	Final diagnostic score (points earned/160) x 100 = %

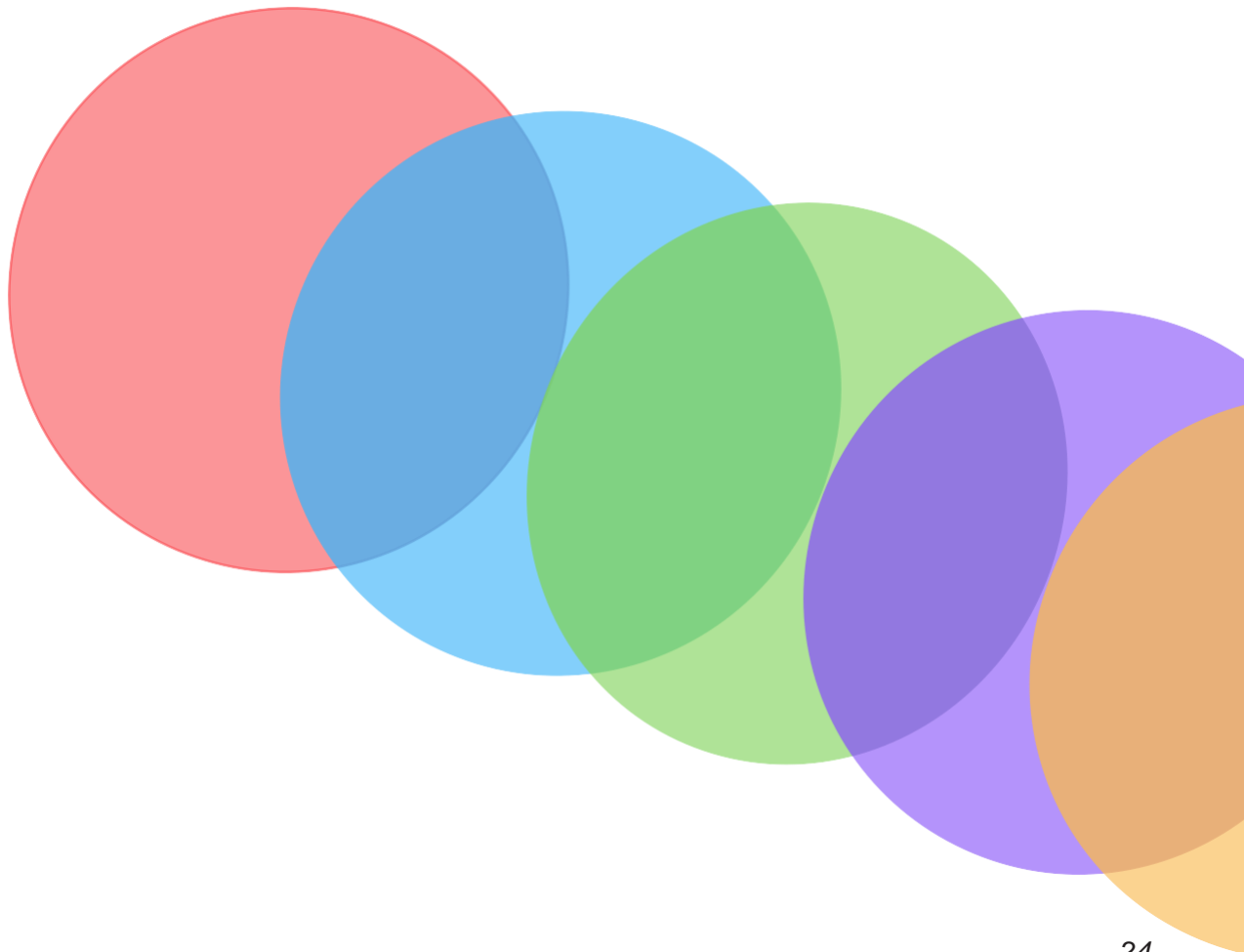


3.5 Education: services and initiatives

Existing and potential services and initiatives

The following is a list of potential services and initiatives identified by participants in the education discussion forum:

- Identify and leverage 2SLGBTQ+ educational resources in French and make them accessible to young people to normalize Francoqueer life experiences
- Establish a group of four to five Francoqueer facilitators who could meet with young people, share their life experiences and successes, and answer questions
- Create a new section on the Collectif's website featuring testimonials from members of the Community to promote visibility among 2SLGBTQ+ youth
- Establish partnerships and lobby the Department of Education and Early Childhood Learning to:
 - › Offer additional queer and gender-neutral content throughout the education continuum
 - › Provide training for school staff to normalize sexual and gender diversity and better manage phobic attitudes
 - › Secure additional funding for 2SLGBTQ+ resources in French
 - › Create policies and strategies that promote the well-being of French-speaking 2SLGBTQ+ people throughout the education continuum
- Review previous initiatives and work carried out by other Francoqueer organizations and identify best practices in minority-language education



Diagnostic Tool for Existing and Potential Education Services

Criteria	Success factors	Score from 1 to 10, with justifications and comments
Awareness, normalization and safety	The service provider promotes the normalization of 2SLGBTQ+ realities in Francophone and French immersion school settings	
	The school setting encourages Francoqueers to proudly embrace their 2SLGBTQ+ and Francophone identities	
	The service creates highly safe spaces for Francoqueers	
	The staff understand that normalizing 2SLGBTQ+ life experiences helps to counter discomfort and reduces anxiety over being unintentionally offensive	
	School administrators are properly trained on 2SLGBTQ+ life experiences and the issues facing our Community	
	The service prioritizes discretion with respect to young people's sexual and gender identities and their need for information	
	The service provider takes a holistic approach to their awareness campaigns, seeking to reach not only students and teachers but also school administrators, extracurricular coordinators and all other staff associated with the school setting (janitors, bus drivers, etc.)	
	The school administrators work proactively to create safe spaces for 2SLGBTQ+ youth and teachers	
	The administration respects the choice of teachers and other staff to self-identify or not as 2SLGBTQ+	
	The administration is attuned to the challenges associated with coming out	
	The administration is aware of the impact of toxic masculinity on boys	
	The school's counsellors are fully capable of working in French	

Diagnostic Tool for Existing and Potential Education Services

Criteria	Success factors	Score from 1 to 10, with justifications and comments
Linguistic and conceptual standards	The service promotes the use of inclusive, nonbinary French	
	Service providers strive to disengage from heteronormative and cisnormative concepts such as families with one mother and one father, brothers and sisters, little boys and girls, etc.	
	All staff are trained in gender-neutral French and the importance of presenting queer narratives in the classroom	
Promotion and visibility of sexual and gender diversity	The provider/facility encourages the presentation of queer narratives in school settings, adapting the curriculum if necessary	
	Young people are introduced to Francoqueers in the course of their studies and learn about their achievements	
	School administrators do not hesitate to show their support for the Community	
	Individuals who choose to be open about their identity are fully supported by the administration	
	The administration seeks consent from individuals who choose to be open about their identity before celebrating them as role models	
	Teachers talk openly about homophobia and transphobia in school settings	
Promotion of language and culture	The service provider encourages open discussions about Francophobia and the impact of language and culture on well-being and resilience	
	The French language and Francophone cultures are actively embraced and promoted in school settings	
	Teachers talk openly about Francophobia and the impact of internalized Francophobia on cultural resilience	

Diagnostic Tool for Existing and Potential Education Services

Criteria	Success factors	Score from 1 to 10, with justifications and comments
Educational resources	Inclusive educational resources are widely known and shared with members of our Community	
	Resources are promoted beyond the usual networks (Facebook, <i>La Liberté</i> , etc.)	
	The Collectif is prominently featured when promoting resources	
	Francophone youth know where and how to access 2SLGBTQ+ information and resources in French	
	Information and resources can be accessed anonymously, and young people are aware of this fact	
	Francophone 2SLGBTQ+ resources that are currently available elsewhere can also be found in Manitoba resource centres	
Total diagnostic score	Highest possible diagnostic score: 300 (30 success factors)	Final diagnostic score (points earned/300) x 100 = %

Photo: Collectif LGBTQ+ du Manitoba



Comfortable in our own skin: development of a diagnostic tool to help design and assess safe, inclusive and equitable services and partnerships for all French-speaking 2SLGBTQ+ people in Manitoba

3.6 Education: partnerships

The following is a list of potential partners identified by participants in the education discussion forum:

- Université de Saint-Boniface (USB) Faculty of Education
- GRIS Montréal/GRIS Québec
- Conseil jeunesse provincial
- Division scolaire franco-manitobaine and other school divisions with French immersion schools
- Édicateurs et éducatrices francophones du Manitoba
- French-language and bilingual daycare centres
- Childhood education resource centres
- USB's École technique et professionnelle (technical and vocational school)
- Rainbow Resource Centre
- 2SLGBTQ+ associations within Manitoba universities and colleges
- Pluri-elles
- Inclure (Mamadou Ka's program)
- Festival du Voyageur
- Éditions des Plaines
- Canadian Museum for Human Rights (CMHR) and CMHR Reference Centre

Diagnostic Tool for Education Partnerships		
Criteria	Success factors	Score from 1 to 10, with justifications and comments
Strategic value	The partnership enables the Collectif to better meet the needs of its Community	
	The partnership reduces the Collectif's workload, fostering well-being and inclusion throughout the education continuum	
Awareness and openness	The partner is aware of Francoqueer realities or is open to learning about them	
	The partner works to raise awareness among education professionals or is open to doing so	
Commitment, policies and transparency	The partner has a robust equity and inclusion policy that applies to our Community	
	The partner provides a safe educational and work environment for members of our Community	
	The partner has mechanisms in place that enable Community members to successfully file complaints	
	The partner publicly and systematically demonstrates its openness to our Community in a clear and convincing manner	
Decision making	The Collectif will be fully and/or fairly included in the decision-making process throughout the duration of the partnership	
Total diagnostic score	Highest possible diagnostic score: 90 (9 success factors)	Final diagnostic score (points earned/90) x 100 = %

Photo: Collectif LGBTQ* du Manitoba



LIMITATIONS AND RECOMMENDATIONS

4.1 LIMITATIONS

4.1.1 **Potential underrepresentation of numerous community segments**

To protect participant anonymity, our methodology precluded the collection of socio-demographic information and other data on participants in our community consultations. Given this lack of data and the participants' apparent homogeneity, certain groups were potentially underrepresented. These groups include women, youth, and visible minorities, as well as Two-Spirit, transgender, lesbian, intersex, asexual, aromantic, agender, polyamorous, and questioning individuals. Refugees, immigrants, and people with disabilities were also likely underrepresented. This sampling bias was evident in the *From and for Our Own* report as well, and appears to be a recurring issue in studies conducted on 2SLGBTQ+ communities, both locally and internationally. There may be multiple reasons for this, including insufficient measurement tools, the likelihood that many 2SLGBTQ+ or questioning individuals may choose to conceal their identity, and the long-standing hetero/cisnormative and homo/bi/transphobic nature of research systems and infrastructure, which have led some members of the 2SLGBTQ+ community to mistrust these kinds of studies. Intentionally reaching out to individuals from these Community subpopulations could result in a more diverse and representative sample. The barriers that hinder participation should be identified, and alternative methods (such as one-on-one interviews) should be explored to ensure that these groups' perspectives are considered. It will be vital to seek out these subpopulations and incorporate their voices in future versions of this diagnostic tool. Phases 2 and 3 of the needs analysis project will be crucial for achieving this objective. Heterogeneous recruitment strategies must be developed to reach individuals without Internet access or who do not frequent the social and community spaces identified on pages 13 and 17 of this report.

It is also important to include seniors, and the Collectif is already planning to study their experiences and needs during Phase 4 of its needs analysis project. Additionally, to avoid marginalizing certain ethnolinguistic subgroups, it will be necessary to contextualize the social activities component of the diagnostic tool. While the tool currently focuses on safe services and partnerships for French-speaking individuals, it could potentially be used to assess activities that also target other ethnolinguistic groups. The needs of exogamous couples and families must be considered.

4.1.2 **Evidence from other sources**

This diagnostic tool is based solely on data collected from the Community. Are there other diagnostic tools or complementary assessment methods that objectively measure the safety and inclusiveness of services for 2SLGBTQ+ people and linguistic minorities? Are there any national or international accreditations or standards for services targeting those populations? A literature review and environmental scan are needed, to enhance the tool with evidence from other sources and to make it useful for similar populations in other parts of Canada. In short, the tool must reflect current best practices in safety, inclusion and equity for all 2SLGBTQ+ people in linguistic minority settings.

4.1.3

Evidence from health care, education, and social service providers and managers

Service providers in the social, health care, and education sectors sometimes face obstacles to creating safe and effective services for Community members. These challenges must be fully understood. Expanding our consultation to include interviews with service providers, managers, and other professionals in these and other fields could help improve future iterations of this diagnostic tool. A diagnosis without a treatment plan has limited value. In the interest of a holistic approach, this tool must also equip service providers with the support they need, when and where they need it, to ensure the well-being and health of the entire Community.



4.2 RECOMMENDATIONS

The following recommendations arose from our community consultations and are based on the needs identified by participants. They are intended to serve as a springboard for future actions.

4.2.1 *Recommendation 1*

For any future consultation or study, the Collectif should launch a promotional campaign supported by an adequate budget for newspaper advertisements, paid social media posts, etc., and provide honorariums for participants. This approach would increase the number and diversity of participants, compensate them for their time and effort, and attract underrepresented and unrepresented subgroups. Oversampling these subpopulations could boost their recruitment and participation.

4.2.2 *Recommendation 2*

The Collectif should conduct two additional rounds of consultations. The first should focus on segments of the Community that may have been underrepresented in preparing this diagnostic tool's initial iteration. The second should target health care, education, and social service providers/managers to inform a future version of the tool. This could be achieved by holding interviews with members of the wider community to introduce this diagnostic tool and encourage its use. Framing these consultations as a research project could help secure additional funding and contribute to the international literature on this topic.

4.2.3

Recommendation 3

The Collectif should conduct an environmental scan and a literature review focused on assessments of services for 2SLGBTQ+ people in linguistic minority settings. The contextualized results could inform a future iteration of this diagnostic tool, incorporating established best practices in the field.

4.2.4

Recommendation 4

Building on recommendations 2 and 3, a professional development component should be created and presented alongside the diagnostic tool. This component would offer a set of resources to allow for further training, helping service providers address any identified gaps. A diagnosis is only as good as the treatment plan that follows. Based on best practices, this component would empower providers with essential information targeting their specific needs, enabling them to ensure that their services are truly and proactively safe and secure for every member of the Community. The voice and experience of Community members must inform the content of this component, while also being its main focus.

4.2.5

Recommendation 5

The Collectif should hire someone to test the diagnostic tool and, crucially, suggest improvements for a future version. The tool must remain a living document, adaptable to the Community's changing needs. This individual could also be tasked with promoting the tool and developing a strategic plan for its dissemination and use. Finally, the diagnostic tool could be further refined based on future research phases of the Collectif's needs analysis project.

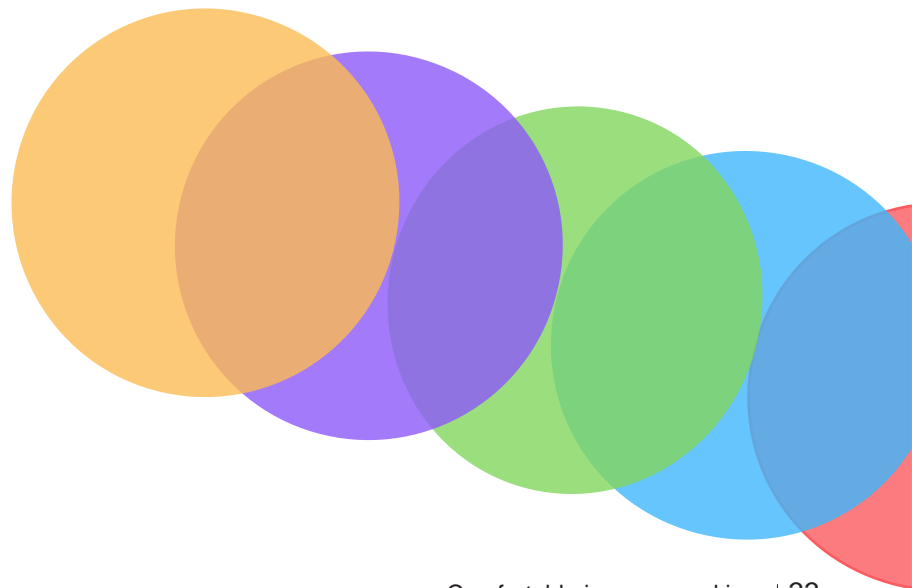


Photo: Anete Lusina, on pexels.com

APPENDICES

5.1 Call for tenders

Text of the call for tenders outlining the consultation process and objectives (PDF, in French)

[CLICK HERE TO DOWNLOAD](#)



5.2 Promotional materials

Text of the newsletter announcing the discussion forums (PDF, in French)

[CLICK HERE TO DOWNLOAD](#)



5.3 Invitation to parents

Invitation to parents sent to several groups (PDF, in French)

[CLICK HERE TO DOWNLOAD](#)



Or scan this QR code with your smartphone to download!

Sessions d'engagement :

soyez Des nôtres!




COLLECTIF
LGBTQ* DU MANITOBA

 Femmes et Égalité
des genres Canada Women and Gender
Equality Canada



5.4 Briefing notes

Briefing notes on *social activities* (PDF, in French)

[**CLICK HERE TO DOWNLOAD**](#)

Briefing notes on *health care* (PDF, in French)

[**CLICK HERE TO DOWNLOAD**](#)

Briefing notes on *education* (PDF, in French)

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