

Introduction

Why We Need Welcoming Health Environments

Everyone working in health care in PEI is doing important work to make people feel comfortable and safe when they access the health care system. Despite this, some women, gender diverse people, Indigenous and racialized people, people with disabilities, and newcomers to Canada have reported unwelcoming experiences accessing healthcare. There is more work to be done to improve health care environments so they feel inclusive to everyone. It is also important that staff feel like their workplaces are inclusive.

From extensive community engagement in the development process of the Health Strategy for Women and Islanders who are Gender Diverse (which included surveys of health care providers, gender diverse people, and women, focus groups, workshops, and key informant interviews), it was found that:

- 76% of gender-diverse survey respondents and 38% of women respondents identified stigma/bias of service providers as a barrier to accessing care.
- 57% of women survey respondents expressed a fear of being judged or dismissed.
- 49% of service providers and 77% of gender-diverse survey respondents, as well as some participants from the consultation focus groups and interviews, noted that trans/homophobia makes it challenging to access services. ¹

These fears and experiences are by no means unique to PEI. Research from across Canada and on PEI indicates that women and people who are gender diverse experience inequities and differences when it comes to health outcomes, interactions with health care services and professionals, and experiences with other social services. These inequities are often heightened for Indigenous people, racialized communities, people with disabilities, newcomers, and members of the 2SLGBTQIA+ community.

One of the goals of the Women and Gender Diverse People's Health Strategy is to embed cultural safety and trauma-informed practices across multiple settings, to eliminate bias, build awareness, and create psychologically safe spaces.

Keep reading to learn more about welcoming health settings, including an infographic on how to make your space more inclusive for everyone.



¹Prince Edward Island Department of Health and Wellness (2022). *Awareness to Action: A Health Strategy for Women and Islanders Who Are Gender Diverse 2022-2027* ²Rainbow Health Ontario, 2022. *Health in Focus: Racialized 2SLGBTQ Health*

What makes you feel welcome in a space? Have a discussion with your team about what you think are some important aspects of a welcoming environment.

Before Using the Toolkit

Having a foundational understanding of the following concepts will help in your journey through the toolkit.

What is health equity?

According to the Canadian Institute for Health Information: “Health equity is achieved when everyone, regardless of sex, gender, income, race or other socio-demographic characteristics, has the fair opportunity to reach their optimal health.” This toolkit aims to increase health equity throughout the healthcare system in PEI.

What are the social determinants of health?

Social determinants of health are the non-medical factors that influence one’s overall health, e.g., the economic and social factors in which we live, learn, work, and play. They include things like income, race/racism, employment, housing status, education, disability, sexuality and gender. Research from all over the world has shown that the social determinants of health can have just as much impact on our health as our genetics and behaviours.

⁴Canadian Institute for Health Information:
<https://www.cihi.ca/en/topics/health-equity-and-population-health>

⁵Live Well PEI, Chief Public Health Office of PEI:
<https://www.livewellpei.ca/about/health-promotion/social-determinants-of-health>

What is intersectionality?

When it comes to health disparities and their causes, it isn't **just** race or gender or sexual orientation that leads to health disparities – rather it is how these things **interact** and **intersect** with the social determinants of health that can contribute to disparities. The term “intersectionality” was originated by a Black American legal scholar Kimberle Crenshaw in the 1980s. It is defined as “An analytical framework for understanding how aspects of a person’s identity (for example, sex, gender, age, ethnicity, class, religion, sexual orientation, ability) combine to create particular forms of discrimination and privilege.” A person who is a newcomer, who doesn’t speak much English or French, and who is racialized may have a very different experience with the healthcare system than someone who speaks English and has lived on the Island for a long time. A transgender person who lives in a rural community may have a very different experience than a cisgender person who lives in town. It is important to be aware of these various factors of identity and how they can combine to create health inequity.

Additional terms and definitions related to equity, diversity, inclusion, accessibility, and cultural safety can be found in the Inclusive Language Glossary.

