

THINK AND FEEL

What really counts
Major preoccupations
Worries and aspirations

- If they will be believed in the first place.
- That the experience will not be fully appreciated given genders involved.
- Fear of being outed.
- Gender expression - more likely to be believed given their current appearance.
- How the dress and appearance impacts service.
- Perspective of the Org - will they assume that the mental health issues is due to gender or sexual orientation rather than it is the aggression experienced.
- Ability to ask for help - will I become a victim if I ask for help? Will it still be self sufficient?
- The feeling of having to look a particular way (more feminine) to receive service.
- To be accepted for whom I am and what I am experiencing. The ability to secure my safety.
- Not seen as a priority. Will be treated equal to others being served or will I be empty let in as the 'latter client'.
- Confidence in the organization - will it then become my responsibility to fix it.
- Will the agency be able to address / welcome the complexity of the person presenting. Mental health, current state.

HEAR

What is heard?
What matters?
What hurts and what pleases?

- What will they want to hear or afraid to hear?
- Any assumptions made around the gender of your partner. Referral to partner. Make no assumptions related to pronouns.
- Affirmation that you are allowed and safe to be there.
- Reassured that my safety matters.
- Would not like to hear that you are not allowed in the program. i.e. youth vs. adult settings.
- Clients note how comfortable the staff are using gender neutral pronouns and speaking to you.
- Partnerships - who the organization works with i.e.) police. Can be both affirming or be a negative experience.
- Fun activity! Ask them to retell fairy tale with gender neutral wording.
- Biological vs. cis indicates depth and comfort of understanding.
- Which name and pronouns is it safe to use or what pronouns/name would you like me to use? Inviting the conversation.
- How to deal with the errors - apologize and move on vs. blowing up. How do we process and move on and make amends in a way that does not damage the relationship.
- General language used to address staff i.e.) ladies vs. staff. That everyone is asked for their preferred pronouns.

SEE

Environment
Printed Material
On the Website

- Arriving at the agency - what do you hope to see or not see?
- Religious affiliation - depending on wording, religious symbols.
- Child care toys, literature, pink vs. blue.
- Sticker on the door - inclusion welcome message, pronouns on nametags.
- Artwork on the wall.
- Forms - what do we see or hope not to see?
- Who the staff are - what gender presentation, ages. People note who is greeting them at the door.
- Open space for pronouns, gender as opposed to tick boxes.
- Ability to specify preferred name and legal name - to ID how they would like to be referred to.
- When looking for services what words would they search for?
- Crisis, gender identity, relationship, counselling, inclusion - pride or trans flag (and what is there binary wording - men and women)
- Gender neutral pronouns
- Children only
- In small communities the fact that service organizations are limited.
- non judgmental wording, working around inclusion
- gender labeled washrooms

SAY AND DO

Attitudes, appearance
Behaviour towards others

- If preoccupied with appearance may come across as shallow or as if experience is not serious, when this is not the case.
- Is my gender expression suitable?
- To be activated - movement, voice less, speaking more quickly, regulated, dislocated.
- If I disclose will I be related - not allowed in shared areas.
- Worries if sharing rooms is required.
- If you partner uses it - across the same when going there will it make you feel like you are being looked at and what about the staff too?
- Minimization of their experiences so that it doesn't reflect poorly on their community.
- Reassurance of safety and confidentiality. Comfort that your information is safe.
- Know the limits of our partners. Service denied is not. To be clear of what agencies help deliver - hearing their words.
- Idea! Gallery Wall -
- Staff: let me get the token colleague to help you - who may or may not have the necessary training. They have a 'gay' to help you.
- Subtle interactions, voice tone - is this a prank, is this an offender trying to find where the shelter is located?
- Expectation is everyone is shared room and you are given 'special' treatment i.e.) having a room to yourself.
- Are the staff fully case planning for the client a collaborative process? Do I have a say?
- If client appear resistant or uncooperative if they are withholding information or uncomfortable sharing information.
- Fear of being outed in your own community - geographical or cultural.
- Colleagues are welcoming and accepting of anyone seeking services.
- That staff take it seriously, treat others with dignity - do not a whatabout.
- How will the agency be able to handle me? Will I have to relocate.
- What do we either hope staff will say or do or not say or do?
- Looking to hear them say I know this person. Warm handshakes are so valuable for every client.
- Let's do it together - let's reach out together vs. a list of numbers and names.

PAIN

Fears, frustrations, obstacles

- Both partners needing to access the same resource - present huge barrier esp. in smaller communities.
- Hopelessness of being denied services. Where one thing is said and another thing is done in practice.
- Admin staff are not trained even though they are the first point of contact.
- How are other clients and staff going to react? Reaction of other clients to you.
- Will I be treated equal? Or are other people the real clients and I am a token.
- How the experience changes from shift to shift.
- The fear of having to correct your story to each staff member.
- Service level vs. deep policy commitment.
- Fear that having to be outed or explain your story to all the staff or having all the staff find out about you as 'gossip'.
- Fear of the gap between theory and practice.

GAIN

Wants/needs, measure of success

- When clients feel comfortable referring friends.
- When clients feel safe to come back.
- When clients feel comfortable enough to stay more than one night.
- When queer clients don't feel a difference between how they are treated and others are treated.
- How do staff communicate with each other / reviews of service delivery? Similar to TIC.
- Can the client advocate for themselves within the space?
- Does the client feel comfortable opening up in group or becoming a support for other clients.
- Assessing the comfort levels of staff - who did they connect to staff, other clients, more than one staff.
- Do we have any meaningful way to track outcomes and measures. Are we contributing to more than anecdotal understanding.
- How did my referrals go? Was it a good referral a good experience?
- That staff take it seriously, treat others with dignity - do not a whatabout.