news

Barre Safe Zone Fallout: Ayers Rebuked

ccording to notes posted on the Barre City
Schoolboard website, the board members have rebuked the man who removed a teacher's
Safe Zone placard from her classroom door (*OITM*, December, 2002). In a letter to David Ayers, who maintained he would remove such a placard again, Dorothy Anderson wrote that he must notify the school of any future visits and check in at the school office.

The letter was read into the public-record minutes and was posted on the website as follows:

"Dear David:

"On behalf of the Barre City School Board, I need to inform you that taking the sticker from a teacher's door or taking anything else from the school is totally unacceptable and, according to Police Chief Trevor Whipple, could fall in the category of petty larceny. We are requesting you return the sticker to the school. In addition to this matter, your action has sparked a debate about the teacher's contractual right to freedom of individual conscience, association and expression. Any objection you had to the posting of the sticker should have been processed through the chain of command beginning at the principal level. You should not have taken it upon yourself to make a determination as to whether the sticker was appropriate or not.

"Because of these events, the board has requested me to tell you that when you wish to visit Barre City Elementary and Middle School, you need to phone ahead and schedule an appointment with one of the principals and state what business you intend to conduct when you arrive. When you arrive, you need to sign in. If you do not follow these procedures and are found in the building, we will notify the police."

Another board member, Martin Prevost, "wished to add that at this time it is not intended that the sticker be placed in the school and was only a return of property."

quality Vermont (formerly the Vermont Coalition for Lesbian and Gay Rights) Co-Liaisons Virginia Renfrew and Keith Goslant announced at the January 11th Third Queer Community Summit meeting that they had met with then-Governor-Elect-Apparent Douglas and his top aide, and that the governor had recognized their positions of co-liaisons from the LGBTIQ communities to his administration.

It had been far from certain, based on statements that candidate Douglas had made during the campaign, whether he would, if elected, continue the tradition of recognizing and meeting with liaisons from the queer community.

The meeting, held on December 31st, was scheduled as a brief introduction and lasted approximately 30 minutes, according to Goslant. Renfrew and Goslant reintroduced themselves to then-Governor-Elect-Apparent Douglas and presented some of the concerns of Vermont's lesbian, gay, bisexual, transgender, intersex and questioning communities as defined at the previous Queer Summit meetings. Some of the topics included: the targeting of Outright VT for exclusion from schools, medicinal marijuana, adequate funding for a broad range of health care issues (including HIV/AIDS), Reciprocal Partnerships versus Civil Unions, and maintaining open communication between



Gov. Douglas Meets With Liasons

the LGBTIQ communities and the Douglas administration.

The Co-Liaisons offered to act as community contacts to assist in coordinating meetings between the Douglas Administration and organizations and constituents from within the LGBTIQ communities. The importance of the contact, said Goslant later, was that "we could

coordinate contact with people who understand these issues to brief members of the governor's administration. We can get real information to a governor who is willing to hear from us."

Douglas said numerous times during the meeting that the Equality Vermont co-liaisons could call him at any time, and reiterated his willingness to meet with concerned constituents. The Governor has also agreed to continue the tradition of Statehouse meetings held on Visibility Day (January 31) and HIV/AIDS Awareness Day (February 12). The Governor has not yet designated which member of his Cabinet will function as the official contact person for the Co-Liaisons.

GLBTQ Concerns To Be Negotiated by Nurses' Union

BY PAT OSBORNE

fter last fall's landslide victory in favor of joining and being represented in negotiations by a union, the gay and lesbian nurses who work at Fletcher Allen Health Care (FAHC) are looking forward to gaining important legal protections.

The primary issue remains patient care, first, last and always, say the nurses who agreed to speak on the record with OITM. But according to Andrew Tripp, lead organizer at FAHC for the Federation of Nurses and Health Professionals (FNHP), also on the table are contractual clauses reflecting the nondiscrimination policies now embodied in the corporation's employee handbook. The handbook, suggested Tripp, is not legally binding, whereas including the nondiscrimination policies as part of the contract would give members of the nurses' union recourse to a specified and legally binding grievance process.

Gender identity is not currently part of the FAHC's nondiscrimination policies, nor is the union planning to add the phrase. "Gender identity [discrimination] could be grieved under other clauses," said Tripp, such as those preventing sexual harassment and discrimination based on sexual orientation. Tripp

also cited the union bargaining team's hope to include a requirement that FAHC provide a "respectful and dignified work environment."

The bargaining teams meet weekly for negotiations, said Tripp.

Other nondiscrimination categories currently in the handbook that may be subject to the contract negotiations include marital status, pregnancy, and status as a military veteran.

No other single issue unites the gay and lesbian nurses at FAHC, but some mentioned more subtle concerns.

Suzanne Hall is a psychiatric nurse at FAHC. "The docs will collect a history from a dyke or a gay man and use sexual identity as part of the assessment. [But] they don't specify 'heterosexual' when speaking of straight women and men." Hall, who has worked 'on the hill' for 20-odd years, has helped to teach decades of psychiatric residents and interns how to abandon the assumption of heterosexuality.

When lesbian or gay patients are admitted to her unit, Hall is often tapped to include them in her caseload. She appreciates the matter-of-fact acceptance of her sexual orientation but doesn't want it to limit her nursing practice. "I'm a professional," she maintains. "I'm good at taking care of street people, too." And, of course, her taking the lesbian

and gay cases allows other nurses to avoid learning how best to relate to these patients.

David O'Vitt worked at FAHC as a pediatric staff nurse when he adopted a newborn. He questioned a short-term disability policy that he felt might be discriminatory. To help him cope with the adjustments common to becoming a parent, he inquired about short-term disability, an option that is offered to women on maternity leave to extend the available time off. He was told that the benefit was only intended for women. He felt that the response was discriminatory; however, he chalked it up to gender discrimination rather than homophobia.

Debra Kutzko is a nurse practitioner who has provided service to the AIDS community for over a decade. She says she feels more covert discrimination against her as a Jew than as a lesbian.

Employees identify FAHC as a gay-friendly environment. Linda Klein has been a neonatal nurse practitioner there for 4 years. She is out to all the docs, all her colleagues. "I have absolutely zero concerns about [discrimination]." James Lapierre works in the MICU (medical intensive care unit). By wearing a rainbow stripe across the bottom of nametag, he makes it possible for his patients to identify him as a gay man. He says it gives him another credential, simi-

lar to having "RN" after his name, that will let patients from the queer community know there's someone caring for them who might better understand their needs.

Lapierre was interviewed by Channel 22, the local ABC affiliate, about the inconsistency in the Red Cross's refusal to allow him to donate blood because he is a man having sex with men when his credential qualifies him to administer blood at FAHC. James felt that he was well supported by FAHC in his decision to do the interview: the institution allowed Channel 22 to do on-site filming for the background to the piece.

FAHC offers equal health insurance and other benefits to employees to cover their domestic partners regardless of the employee's marital status or sexual orientation. It also prohibits discrimination based on sexual orientation as part of its written employment policy statement. GLBTQ nurses hope both policies – and the inclusion of gender identity and gender presentation – will be incorporated into the union contract.

Kutzko was confident that Vermont medical professionals and the hospital administration are unlikely to engage in anti-gay discriminatory action. "It's Vermont," she concluded. ▼