

BEING SAFE, BEING ME 2019

Results of the Canadian Trans and Non-binary Youth Health Survey

UBC

THE UNIVERSITY OF BRITISH COLUMBIA

BEING SAFE, BEING ME 2019

Results of the Canadian Trans and Non-binary Youth Health Survey

We would like to acknowledge that the writing and data analysis for this report took place on the traditional, ancestral, and unceded territory of the Musqueam people.

Suggested citation:

Taylor, A.B., Chan, A., Hall, S.L., Saewyc, E. M., & the Canadian Trans & Non-binary Youth Health Survey Research Group (2020). *Being Safe, Being Me 2019: Results of the Canadian Trans and Non-binary Youth Health Survey*. Vancouver, Canada: Stigma and Resilience Among Vulnerable Youth Centre, University of British Columbia.

Available online in pdf format at saravyc.ubc.ca.

Copyright © 2020 SARAVYC, UBC. Some rights reserved. (CC BY-NC-ND)





About the Canadian Trans and Non-binary Youth Health Survey

Research Team

Principal Investigator Dr. Elizabeth M. Saewyc*, University of British Columbia

Co- Investigators

Dr. Greta Bauer, Western University

Dr. Anita DeLongis, University of British Columbia

Dr. Jacqueline Gahagan, *Dalhousie University*

Dr. Dan Metzger, University of British Columbia

Dr. Tracey Peter, University of Manitoba

Dr. Annie Pullen Sansfaçon, University of Montreal

Dr. Catherine Taylor, University of Winnipeg

Dr. Julie Temple Newhook, Memorial University of Newfoundland

Dr. Robb Travers, Wilfrid Laurier University

Dr. Jaimie Veale, University of Waikato

Dr. Kristopher Wells, MacEwan University

Senior Postdoctoral Fellow Dr. Ashley B. Taylor*,

University of British Columbia

Community Partners and Research Staff

Ace Chan*, University of British Columbia

Mauricio Coronel Villabos, University of British Columbia

Dr. Hélène Frohard-Dourlent, University of British Columbia

Stephanie Hall*, University of British Columbia

Yeshvi Mehta, University of British Columbia

Shannon Millar, University of British Columbia

Cormac O'Dwyer*, University of British Columbia

Dr. Françoise Susset, Institute for Sexual Minority Health

Thanks to Former Staff

- Sophie MacLean
- Monica Shannon
- Dr. Jennifer Wolowic

Funding

This study was funded by Grant #F17-01257 from the Canadian Institutes of Health Research. The recommendations within this report are solely the opinions of the investigators.

Ethics

The Canadian Trans and Non-binary Youth Health Survey received ethics approval from the following university ethics research boards:

- University of British Columbia -Certificate #H18-00808
- Wilfrid Laurier University -Certificate # 5880
- MacEwan University Certificate #101561
- University of Manitoba Certificate #P2018:113 (HS22237)
- University of Montreal Certificate
 #CERAS-2018-19-202-D
- University of Waikato
- University of Winnipeg Certificate #GT923- Multi-site UBC

Photography and Design

The photographs in this report are of some of the research team members, trans and/or non-binary youth, their families, and allies from across the country. Photos were taken by Belle Ancell Photography, Kate Madden, Zachary Drucker via The Gender Spectrum Collection, Disabled and Here, and Martin Dee Photography.

This report was designed by Stephanie Hall with input from the research team and youth advisory groups.

*Denotes individuals who substantively contributed to the analyses and/or writing of this report.

Table of Contents

Executive Summary	2
Introduction	4
Demographics	8
Gender Identity	11
Home Life	18
School and Work	
Physical Health	
Injury Prevention	
Health Care Access	
Mental Health	
Substance Use	
Sexual Health	52
Safety, Discrimination, and Violence	57
Supportive Relationships	67
Conclusions and Recommendations	74
Regional Information Sheets	

Executive Summary

In 2014, and five years later in 2019, trans and/or non-binary youth from all across Canada shared their experiences through the Canadian Trans and Non-binary Youth Health Survey.

Conducted by researchers from universities and community organizations across Canada, the survey included questions about a wide range of health and social experiences, as well as risk and protective factors.

In 2019, a total of 1,519 youth ages 14 to 25 from every province and territory in Canada took part in the survey. This report is a first glimpse at what they told us.

Key Findings



Half of youth who took the survey (50%) are currently living in their felt gender all of the time, which is a significant increase from the 2014 survey. However, the majority of youth did not have their correct gender—the gender that accurately reflects their felt gender identity—listed on most identification cards and records.



In the past 12 months, almost half of youth missed out on physical health care they needed (43%), and almost three quarters (71%) did not get mental health services when they needed them.



Almost half of youth who took the survey (44%) have taken hormones to affirm their gender.



Most trans and/or non-binary youth (63%) reported experiencing severe emotional distress; however, those with supportive families, safe schools, and/or a legal name change were less likely to report severe emotional distress.



Sexual assault is a serious form of violence. More than 1 in 4 youth (28%) reported being physically forced to have sex when they did not want to, which was a significant increase from 2014 (23%).



Youth with supportive families and safe schools were much less likely to report suicidal thoughts. However, almost two thirds of the trans and/or non-binary youth who took the survey told us that they have self-harmed (64%) and/or seriously considered suicide (64%) within the past year.



The majority of trans and/or non-binary youth (70%) reported experiencing some form of discrimination in their lifetime. Youth were most likely to report they had experienced discrimination because of their sexual orientation (51%), their sex (53%), their physical appearance (45%), or their age (36%).

Approximately 74% of youth told us they avoided public washrooms for fear of being harassed, being seen as trans, or being outed. Out of 19 listed locations, youth in all provinces and territories reported public washrooms as the most commonly avoided location.



Youth were most likely to ask their trans friends (92%) followed by their nontrans friends (85%) to call them by their correct name or pronouns. These percentages have significantly increased since 2014, where 86% of youth asked their trans friends and 78% asked their non-trans friends.

Introduction

Over the past several years, there has been growing acceptance throughout Canada that a person's gender does not always match their sex assigned at birth. Gender is complex, multifaceted, and does not easily fit into boxes. People identify with many terms transgender, non-binary, Two Spirit, agender, genderfluid, genderqueer, female/girl, and male/boy—to name a few. For this report, we have decided to use trans and/or non-binary to describe the gender of youth who took the survey. We realize that these terms do not correctly capture all the identities reported by youth in this study, but are currently the most inclusive.



Photo by Belle Ancell Photography

2SLGBTQIA+ stands for Two Spirit, lesbian, gay, bisexual, trans, queer/questioning, intersex, asexual, and all gender/ sexual minorties.



About the Survey

This is the second national survey of its kind. In 2014, the Canadian Trans and Non-binary Youth Health Survey collected the first ever Canadian national data on trans and/or nonbinary youth in relation to health, social challenges, and protective factors. Data from the 2014 survey were used to guide practices, programs, and policies in several places across Canada. For the current 2019 survey, we included many of the same questions from 2014, and added questions our advisory groups thought are relevant to Canadian youth today (e.g. surgical procedures and gender listed on IDs). Since we have data from both 2014 and 2019, we are also able to report if there have been significant changes in the experiences reported by trans and/or non-binary youth. Throughout this report, where we can, we compare the responses from the 2014 and 2019 surveys. We have also structured this report like the original 2014 report, Being Safe, Being Me 2014,

to make them easier to see where we have new topics.

Although trans and/ or non-binary youth are becoming increasingly visible in communities and research, there are very few populationbased adolescent health surveys that capture trans identity or ask questions specifically relevant to Canadian trans and/or non-binary youth. Current research indicates that trans and/or non-binary youth experience health, social challenges, and protective factors specific to their identity. Therefore, most of the questions in our survey focus on protective factors, health outcomes, risk factors, and additional questions in our attempt to capture the experiences of Canadian trans and/or non-binary youth. It is important to share this information about trans and/or nonbinary youth to inform inclusive policy, move research forward, and guide resources and interventions for trans and/or non-binary youth.

Methods

The Canadian Trans and Non-binary Youth Health Survey research team includes researchers from universities and community organizations throughout Canada. The research staff at our main office at UBC in Vancouver led the data collection, data analyses, interpretation of results, facilitation and tracking of Youth Advisory Groups, and writing and design of this report.

There were six Youth Advisory Groups across Canada—Quebec, Nova Scotia, Ontario, Alberta, British Columbia, and a rural online advisory. We would like to acknowledge that these advisory groups took place on the traditional, ancestral, and unceded territories of the St. Lawrence Iroquoians, Mohawk, Huron-Wendat, Haudenosaunee, Wabanaki Confederacy, Mi'kmaq, Anishinabewaki, Neutral, Cree, Tsuu T'ina, Métis, Tsleil-Waututh, Stó:lo, Musqueam, and Oavgavt people. They met several times and helped our team identify ways to reach trans and/ or non-binary youth, helped make sense of the results, suggested topics of interest and importance for



Photo by Kate Madden

their part of Canada, and provided feedback on the area fact sheets (located at the end of this report) and on this national report.

Most of the questions asked in this survey are repeated from the 2014 Canadian Trans and Nonbinary Youth Health Survey. Those questions, as well as most questions we added to the 2019 survey, are from existing youth health surveys or trans health surveys in Canada, the United States, and New Zealand, Unlike the 2014 survey where we asked different questions for younger (age 14-18) and older youth (age 19 to 25), in 2019 we asked the same questions of all youth. Where we compare older and younger youth in this

report, younger youth are 18 and under, older youth are 19 and over.

We developed the online survey to be taken with a desktop, laptop, smart phone, or tablet. Youth were able to switch between French and English with the click of a button on every page of the survey. Youth were recruited through the networks established by our research team across Canada. We sent emails to over 130 2SLGBTOIA+ youth organizations and health care providers across the country asking them to share a flyer for our survey. We also posted on social media platforms-Twitter, Facebook, Reddit, and Tumblr—and reached out to 2SLGBTQIA+ social

media influencers, asking them to share information about our survey. Our study received ethics approval from several universities and school districts across Canada. The survey was open from November 1, 2018 to May 31, 2019.

Youth could participate in the survey if they were between the ages of 14 and 25, lived in Canada, and identified as trans or nonbinary. We excluded a few surveys that did not meet those criteria, those which were duplicates, and those which were clearly joking or malicious. The survey was anonymous, but we did ask for the first three digits of youths' postal codes in order to categorize them as living in either a rural or urban area. The survey took up to 45 minutes to complete, and youth were able to save their progress and come back to it later.

This report includes descriptive information for all youth who participated in the survey. Percentages have been rounded to the nearest full percent.

We tested comparisons between results from the 2014 and 2019 surveys, and, where questions are the same, significant differences are mentioned throughout the report. Moreover, we compared regions across Canada by province, grouping survey participants from New Brunswick, Nova Scotia, Prince Edward Island, and Newfoundland/Labrador as the Atlantic Provinces, and Saskatchewan and Manitoba as the Prairie Provinces, due to smaller sample sizes in some regions. Due to low sample size in the Yukon, Nunavut, and Northwest Territories we were unable to include these youth in regional comparisons.

Youth were able to add optional comments throughout the survey to voice additional thoughts with us. Quotes throughout this report are from those comments.

"

TERRITORIE

ALBERTA

PRAIRIE

PRO\

BRITISH

"I identify as genderqueer (or non-binary) but feel like the differences in struggles and the oppression that trans people face is too wide a gap and I cannot justify claiming the transgender label for myself."

ATLANTIC

Ontario, Age 25

Who Participated in the Survey?

A total of 1,519 youth across Canada completed part or all of the survey.

Age

The survey included youth from ages 14 to 25, and the average age was 20-years-old, with approximately 37% of youth being age 18 or younger.

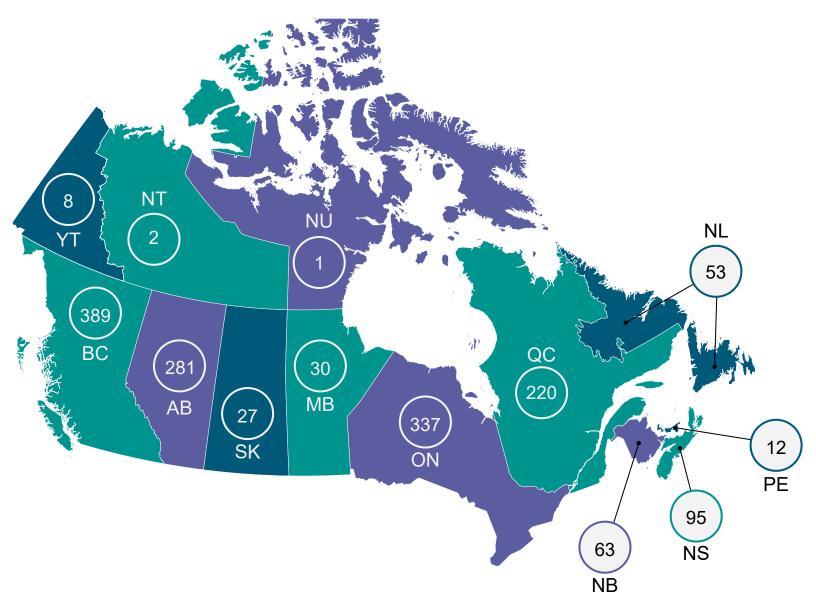


HOW OLD ARE YOU TODAY? (NATIONAL SURVEY)

Province/Territory

Youth from every province and territory in Canada participated in the survey. Similar to 2014, the majority of youth were from British Columbia and Ontario, with many youth participating from Alberta and Quebec as well. The fewest survey participants came from Canada's territories. There was an increase of youth in 2019 from most provinces compared to 2014, except for those from Saskatchewan, Manitoba, and Northwest Territories.

NUMBER OF TRANS & NON-BINARY YOUTH WHO PARTICIPATED FROM EACH PROVINCE

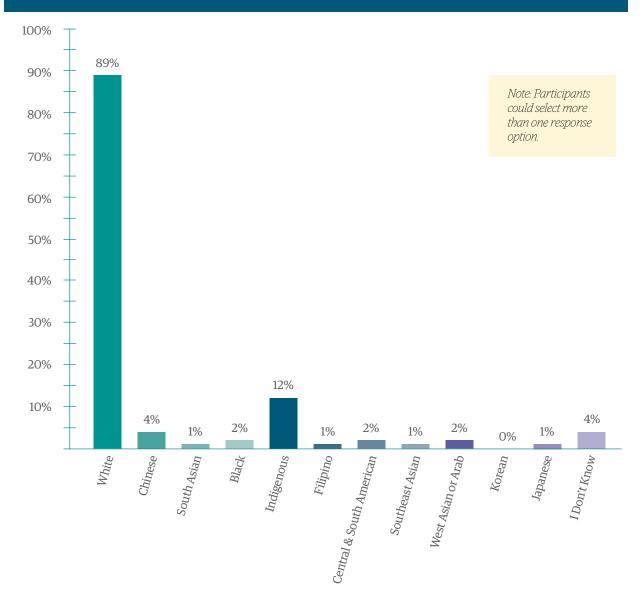


Ethnic & Cultural Background

Approximately 74% of youth identified as only White. Approximately 12% of youth identified as Indigenous, which included First Nations, Inuit, Métis, and non-status Aboriginal. Few survey participants identified as other ethnic backgrounds. For example, fewer than 1% identified as Korean. More than 1 in 10 youth checked more than one response option (15%).

New Canadians

The majority of youth (91%) had been born in Canada. Similarly, 90% had lived in Canada for their whole lives. Approximately 2% of youth were recent immigrants (lived in Canada for two years or less).



ETHNIC OR CULTURAL BACKGROUND (NATIONAL SURVEY)

Gender Identity

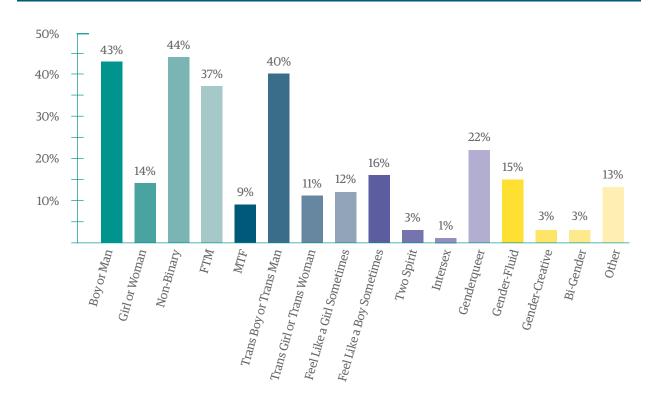
Youth were asked two questions about their gender. We also asked youth for feedback about the wording of the questions.

Question: What is your gender identity?

This gender identity question asked youth to select from a list of options with an additional writein response. Based on feedback from a similar question in 2014, we added new choices. We provided youth with 16 identities to select from and youth were able to select more than one option. Most youth (80%) selected more than one option. We also provided youth with the option to

write in a gender identity which was not included in the list of options. Several youth wrote in terms such as agender, questioning, and androgynous.

WHAT IS YOUR GENDER? (NATIONAL SURVEY)



Instead of listing options, it may be helpful to allow people to specify their gender. It's challenging to put gender into a box.

Ontario, Age 25

Question: Which best describes you?

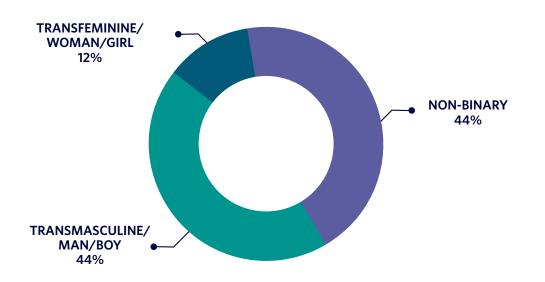
For this question, youth were asked to select the most accurate description among four options. Youth were most likely to identify as trans boys or men (44%), with 37% identifying as non-binary, 12% as trans girls or women, and 7% as not trans.

Of the 7% of youth who did not identify as trans, all indicated a non-binary identity in either the comments to this question or in other gender identity questions in the survey, therefore, we have included them in the non-binary category.

Youth in the Prairie Provinces were more likely than those in other provinces to identify as non-binary (51%).

The comments following this question suggest that some youth did not like the word "identify" in the response options. They felt using that word questioned the legitimacy of their gender identity.

WHICH GENDER IDENTITY BEST DESCRIBES YOU? (NATIONAL SURVEY)



WHICH GENDER IDENTITY BEST DESCRIBES YOU? (BY REGION)

	BC	AB	PRAIRIES	ON	QC	ATLANTIC
Transmasculine/ Man/Boy	42%	40%	44%	40%	48%	53%
Transfeminine/ Woman/Girl	15%	12%	5%	12%	14%	9%
Non-Binary	43%	48%	51%	48%	38%	38%

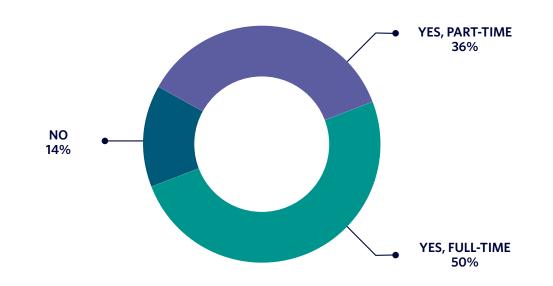
I identify as female sometimes, and as male other times, but mostly as agender. That's why I'm genderfluid. It changes.

Ontario, Age 24

Living In Felt Gender

Half of youth who took the survey (50%) reported that they were currently living in their felt gender all of the time, which is a significant increase from the 2014 survey. Approximately 14% of youth were not living in their felt gender at all in 2019, a decrease from 2014.

Trans and/or non-binary youth in British Columbia were more likely than those in other provinces to be living full-time in their felt gender (56%), while youth in the Prairie Provinces were most likely to be living in their felt gender part-time (44%).



ARE YOU CURRENTLY LIVING IN YOUR FELT GENDER? (NATIONAL SURVEY)

YOUTH LIVING IN THEIR FELT GENDER (BY REGION)



YES, FULL-TIME

YES, PART-TIME

NO



Photo by Belle Ancell Photography

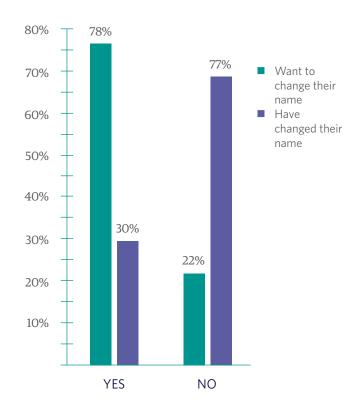
Legal Name

Many trans and/or nonbinary youth choose to change their legal name. The majority of 2019 survey participants said they wanted to change their legal name (78%), however 30% have done so. This is a significant increase of youth who had changed their name in 2014 (21%).

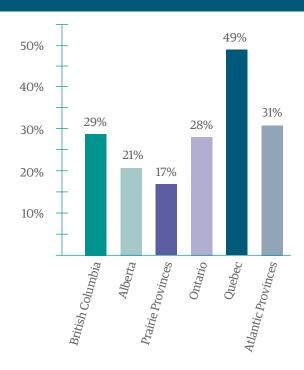
Youth in Quebec were more likely than youth in other regions to have changed their legal name (49%) while youth in the Prairie Provinces were least likely to have changed their name (17%).

Older youth between ages 19 to 25 were more likely to have changed their name (35%) than younger youth (21%). This may be because, in most provinces, youth must be the legal age of majority to change their name without parental consent.

HAVE YOU OR DO YOU WANT TO CHANGE YOUR LEGAL NAME? (NATIONAL SURVEY)



PERCENTAGE OF YOUTH WHO HAVE CHANGED THEIR LEGAL NAME (BY REGION)



Identification Cards and Records

The 2019 survey asked new questions about identification cards and records.

The majority of Canadian trans and/or non-binary youth who took this survey do not have their correct gender listed on identification cards and records. Birth certificates were most likely to list the wrong gender (73%), while student ID cards were least likely to list the wrong gender (41%). A number of youth did not know which gender was listed on their student records (13%). A large subset of youth (42%) did not have a driver's license.

Within each category of identification card/ document, youth in Quebec were more likely than in other provinces to have their correct gender listed. Youth in the Prairie Provinces were least likely to have their correct gender listed in most categories.

We also asked youth about the reasons their gender on their identification was inaccurate. The majority

of youth (58%) plan to change their gender details on identification cards and reports but have not yet tried to do so. Other common reasons include worry that changing the gender marker would put them at risk of harm or discrimination (39%), they cannot afford it (39%), their gender identity is not available (37%), and they do not know how to change it (33%). Approximately 5% of youth did not want to change their gender marker on identification cards and records.

Compared to youth from other provinces, youth from Ontario (46%) were more likely to worry that changing their gender marker would put them at risk of harm or discrimination, those from Atlantic provinces (8%) were more likely to have had requests denied, and those from the Prairie Provinces (55%) were more likely to be unable to afford it.

When asked about the consequences of their gender not matching their

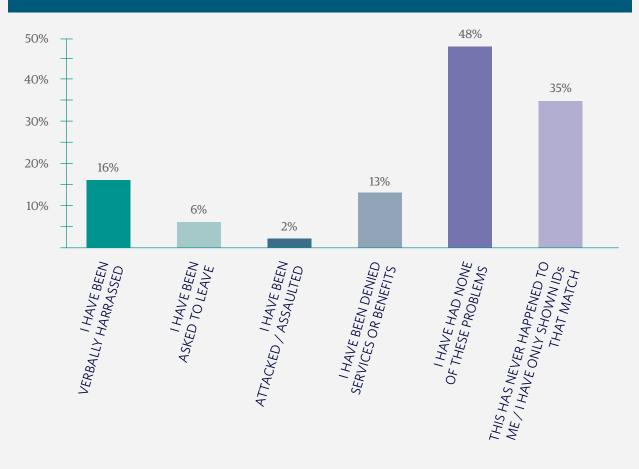
ID, most youth either had not experienced the listed outcomes (48%) or had only ever shown ID that matched their gender (35%). However, there were youth who, after showing ID with a name or gender that did not match their appearance, had been verbally harassed (16%), been denied services or benefits (13%), been asked to leave (6%) or been attacked/assaulted (2%).

Youth from Alberta were more likely than other provinces to have been denied services (14%) and those from Ontario were more likely to be asked to leave (9%). Youth from Atlantic Provinces and Alberta were more likely to have been attacked/ assaulted (3%). Youth from Alberta and Ontario were more likely than other provinces to have been verbally harassed (19%).



Photo by Zackary Drucker via The Gender Spectrum Collection

CONSEQUENCES OF ID NOT MATCHING GENDER IDENTITY OR EXPRESSION (NATIONAL SURVEY)



Home Life

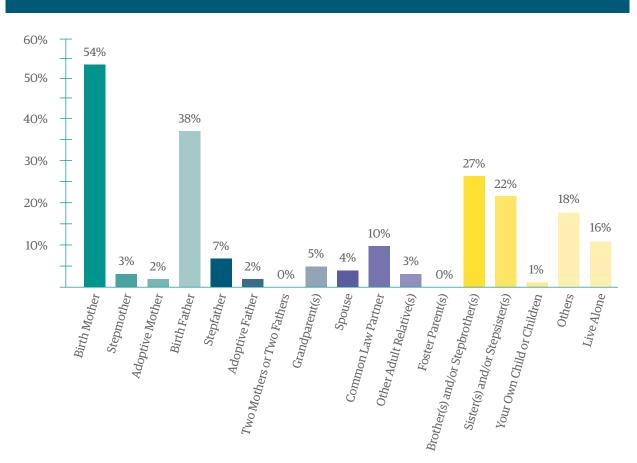
We asked trans and/or non-binary youth questions about their home life: who lives with them, how safe they feel at home, if they have experienced government care, and how many times they ran away from home in the past year.

Who They Live With

Over half of youth who took the survey (54%) told us that they live with their birth mother and more than a third (38%) live with their birth father. Many youth also live with brothers/ stepbrothers (27%) or sisters/stepsisters (22%). Approximately 11% of youth live alone and 1% live with their own children.

Approximately half of youth currently live in their parent's home while 39% live in a house or apartment either alone or with roommates. Although uncommon (less than 1% each), there are some youth who are squatting, couch surfing, living in transition housing, living in a safe house, or living on the street.

Youth in Quebec were more likely than other provinces to live alone (17%) whereas those in Alberta were more likely to live with a spouse (6%) and those in the Prairie Provinces were more likely to live with a common law partner (15%).



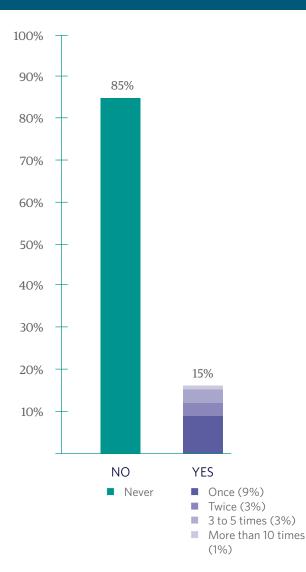
WHO LIVES WITH YOU? (NATIONAL SURVEY)

Running Away

Youth may run away because of conflict at home, abuse, feeling unsafe, or a combination of these factors. Most youth (85%) who took the survey had never run away, however approximately 15% had run away one or more times.

Youth in Atlantic Provinces (22%) were more likely to have run away at least once whereas youth in Quebec (10%) were least likely.

NUMBER OF TIMES YOUTH HAVE RUN AWAY FROM HOME (NATIONAL SURVEY)



66

"I was 'adopted' by my best friend's mom when I came out, so I call them my family now. For all intents and purposes, I live with my adopted mom and sister in a house. If it had not been for them I would have been in a much more dire situation." British Columbia, Age 20

"

Safe at Home

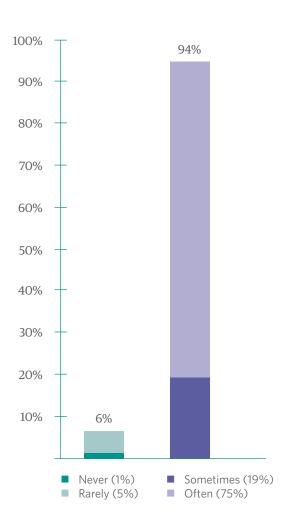
When asked how often youth felt safe inside their own home, 75% often felt safe, however 6% never or rarely felt safe. Youth who reported feeling less safe at home were more likely to have reported running away at least once in the past year. Those youth who reported feeling less connected to their families reported running away more often in the last year. Youth who said they had been physically or sexually abused were also more likely to have run away from home than those who had not been abused.

Youth in Atlantic Provinces (10%) were more likely to never or rarely feel safe in their home than in other regions and youth in Quebec (81%) were more likely to often feel safe at home.



Photo by Zackary Drucker via The Gender Spectrum Collection

HOW OFTEN DO YOUTH FEEL SAFE IN THEIR HOME? (NATIONAL SURVEY)



Government Care

We asked youth whether they had ever experienced government care. Approximately 5% of youth had lived in a foster home, 6% had ever been in custody, and 4% had experienced living in a group home. Youth in Quebec were more likely than other provinces to have lived in a foster home (8%) or custody (8%) while youth in British Columbia (5%) and Alberta (5%) were more likely to have lived in a group home.

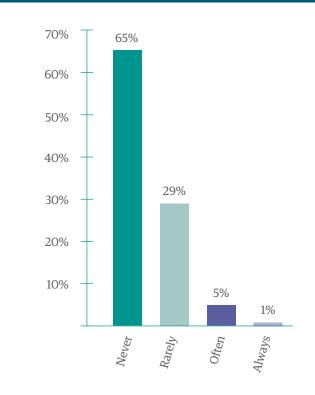
PERCENTAGE OF YOUTH WHO HAVE BEEN IN GOVERNMENT CARE (NATIONAL SURVEY)

Foster Home	5%
Group Home	4%
Custody Care	6%

Going to Bed Hungry

While a majority of trans and/or non-binary youth (65%) do not go to bed hungry, a large percentage (29%) of youth sometimes do, 5% often do, and 1% always go to bed hungry. Youth from Quebec (71%) were more likely to never go to bed hungry while youth from Prairie Provinces (4%) were more likely to always go to bed hungry.

HOW OFTEN ARE YOUTH GOING TO BED HUNGRY? (NATIONAL SURVEY)





School and Work

School is a place where most youth spend a large portion of their time, therefore school connectedness can be influential to youth development.

School Connectedness

What does school connectedness mean?

School connectedness is a way to measure youth experiences and feelings about their school. We asked survey participants to indicate how much they agreed or disagreed with statements about caring/respectful teachers and staff, safety, and happiness at school. By combining responses from these questions we can identify the level of school connectedness.

Trans and/or non-binary youth reported that they feel connected to their school with the majority of youth answering that they strongly agree or agree that they:

Feel they are part of their school

- Are happy to be at school
- Feel the teachers at school treat them fairly
- Feel safe in school
- School staff expect them to do well
- Teachers care about them
- Other school staff care about them

Feeling connected to school can have a positive relationship to mental health: trans and/or non-binary youth with higher levels of school connectedness were more likely to report good or excellent mental health.



Photo by Belle Ancell Photography



59% Feel like they are part of their school



64%
Are happy at
their school



64% Feel safe at school



73% Feel like their teachers care about them



84% Feel like their teachers treat them fairly





93% Feel that school staff expect them to do well **60%** Feel like other school staff care about them



School Plans

Educational goals give a sense of whether a young person sees a future for themselves. The majority of trans and/or nonbinary youth are currently attending school (66%), with the most common institutions being public high school (23%) and college/university/trades school (33%). Older youth (49%) were more likely than younger youth (9%) to not be attending school.

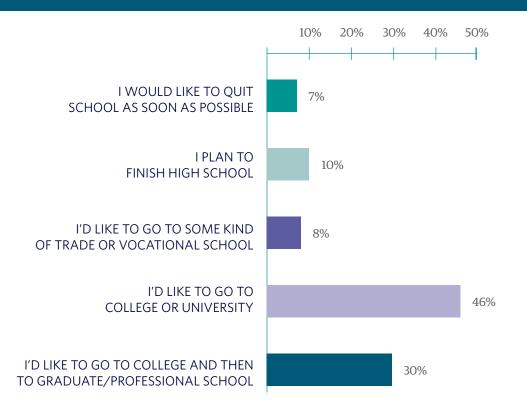
When asked about future school plans, the majority

of trans and/or non-binary youth said they plan to attend post secondary education, including college or university (46%), graduate/professional school (30%) or trade/ vocational school (8%). Approximately 7% would like to quit school as soon as possible and 10% plan to finish high school.

Youth in Quebec were more likely than other provinces to plan to attend graduate/ professional school (37%) or trade/vocational school (24%). Youth in British Columbia were more likely to plan to attend college/ university (52%) and youth in the Prairie Provinces were more likely to plan to finish high school (17%). Ontario had the highest rate of youth who would like to quit school as soon as possible (9%).



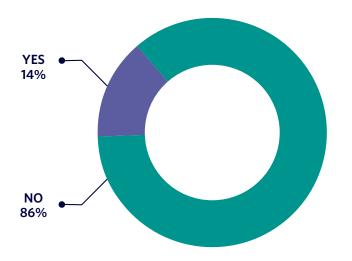
WHICH OF THESE BEST DESCRIBES YOUR SCHOOL PLANS? (NATIONAL SURVEY)



Changed Schools

While most trans and/or non-binary youth have not changed schools or started homeschooling because others in their school were not supportive, 14% of youth in Canada reported doing so. The Prairie Provinces had the highest rate (16%) of youth who changed schools or started homeschooling due to lack of support for their gender at school, and Ontario and Atlantic Provinces had the lowest rate (12%).

YOUTH WHO CHANGED SCHOOLS DUE TO LACK OF SUPPORT (NATIONAL SURVEY)



Employment

During the school year 43% of trans and/or nonbinary youth who took our survey do not work for pay, while 26% work more than 20 hours per week; this varied greatly by age. Among younger youth 63% do not work for pay, while 69% of older youth do work for pay.

Physical Health

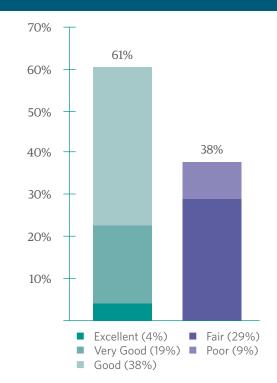
Trans and/or non-binary youth in Canada were asked to rate their physical health. Approximately 4% said their health was excellent, 19% said their health was very good and 38% said their health was good. Approximately 9% said their health was poor and 29% said it was fair.

Chronic Physical Health Conditions

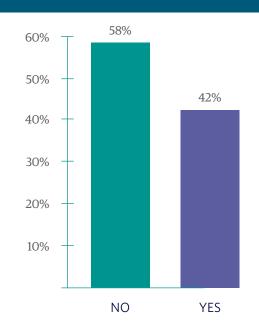
The majority of trans and/ or non-binary youth (58%) have not had chronic physical health concerns, however, 42% of youth have had a physical health condition or problem that has lasted 12 months or more. This is an increase from the 2014 survey where 34% of older youth said they had chronic health conditions or problems.

Youth from the Prairie Provinces (48%) were most likely to have chronic physical health conditions or problems and youth from Quebec (35%) were least likely.

SELF-REPORTED HEALTH STATUS (NATIONAL SURVEY)



NUMBER OF YOUTH EXPERIENCING CHRONIC PHYSICAL HEALTH CONDITIONS (NATIONAL SURVEY)



26

Sleep Habits

Sleep is essential for youth well-being. The National Sleep Foundation indicates youth need 8 to 10 hours of sleep per night.

According to our survey, the majority of trans and/ or non-binary youth (73%) are not getting enough sleep on weeknights, which means 27% of youth are getting the recommended 8 hours or more. Youth from the Atlantic Provinces (11%) were more likely to be getting 4 hours of sleep or less, while youth from Quebec (31%) were more likely to be getting at least 8 hours of sleep.

Trans and/or non-binary youth are getting more sleep on weekends than they are on weeknights. For instance, 24% are getting 10 hours or more, 19% are getting 9 hours, and 20% are getting 8 hours. However, 38% are getting 7 hours of sleep or less.

Youth from Alberta (64%) were more likely to be getting 8 hours of sleep or more on the weekends while youth from the Prairie Provinces (13%) were more likely to be getting 4 hours or less.

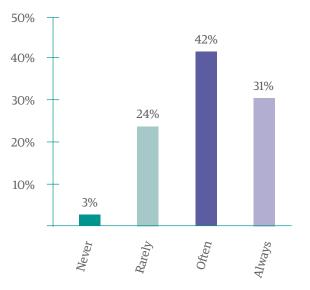
HOURS OF SLEEP ON AN AVERAGE WEEK OR WEEKEND NIGHT (NATIONAL SURVEY)



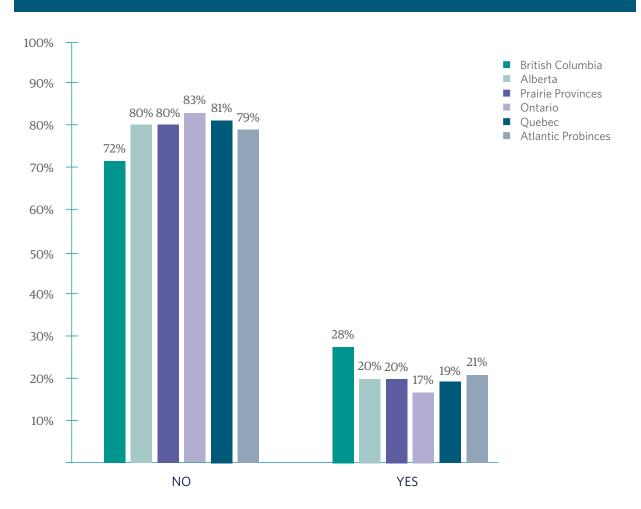
The majority of trans and/or non-binary youth are either always (31%) or often (42%) having trouble going to or staying asleep. Approximately 3% said never and 24% said rarely.

A large majority of trans and/ or non-binary youth (79%) do not wake up rested. Youth from Ontario (83%) were least likely to feel rested when they wake up.

HOW OFTEN YOUTH HAVE TROUBLE GOING TO SLEEP OR STAYING ASLEEP? (NATIONAL SURVEY)



DO YOUTH WAKE UP FEELING RESTED? (BY REGION)

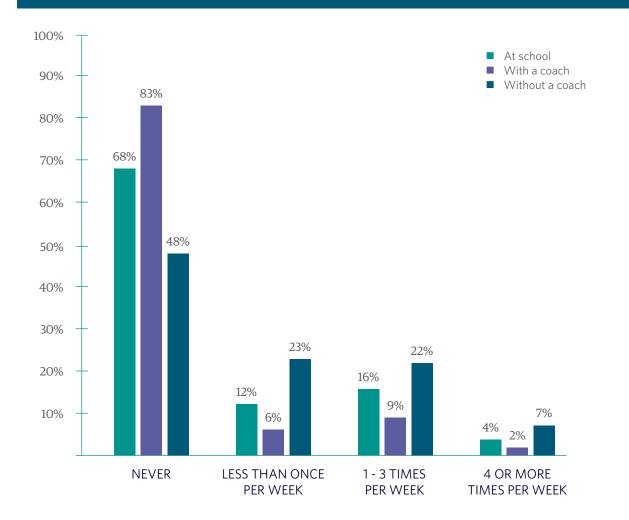


Physical Activities

Physical activities are important to promote health. Some trans and/or non-binary youth participate at least once a week in physical activities either at school (20%), with a coach (11%), or without a coach (29%). This suggests that most youth are not participating in physical activity.



Photo by Zackary Drucker via The Gender Spectrum Collection



HOW OFTEN ARE YOUTH PARTICIPATING IN SPORTS AND OTHER PHYSICAL ACTIVITIES? (NATIONAL SURVEY)

Injury Prevention

Injuries are a leading cause of death and health problems for young people worldwide, so it's important to know what trans and/or non-binary youth do to keep themselves safe and prevent injuries.

Wearing a Helmet

The majority of trans and/or non-binary youth always (40%) or often (20%) wear a helmet while riding a bike. Approximately 17% said they never wear a helmet, 17% said rarely, and 6% said they only wear a helmet when an adult makes them.

Youth from British Columbia (50%) were most likely to always wear a helmet while riding a bike, while youth from the Prairie Provinces (16%) were least likely to always wear a helmet.

Among youth who ride other vehicles such as ATVs, dirt bikes, motorcycles, and snow mobiles, 69% always wear a helmet, 11% often wear a helmet, 7% rarely wear a helmet, and 10% never wear a helmet.

Seatbelt in Cars

Most trans and/or non-binary youth (86%) always wear a seatbelt. Approximately 1% of youth said they never wear a seatbelt. Youth in Quebec (91%) were more likely than those from other provinces to always wear a seatbelt.

RATES OF HELMET AND SEATBELT USE BY YOUTH (NATIONAL SURVEY)

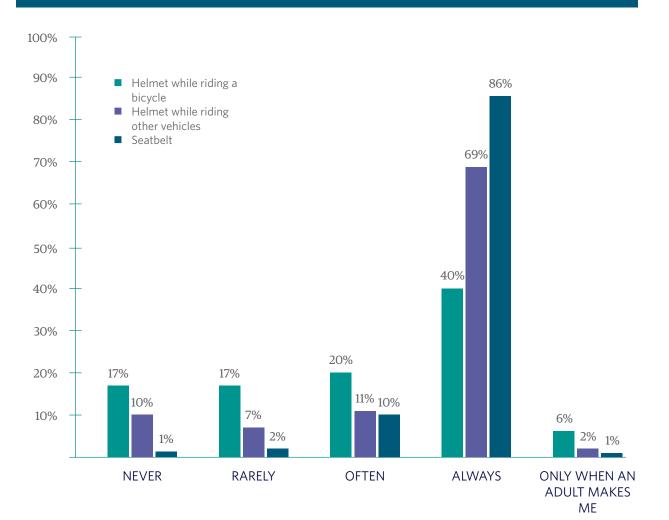




Photo by Martin Dee Photography

Driving and Cannabis

The majority of trans and/or non-binary youth (93%) said they have never driven a vehicle within an hour of using cannabis. A small percentage have driven a vehicle within an hour of using cannabis only once (2%) or at least eight times (3%).

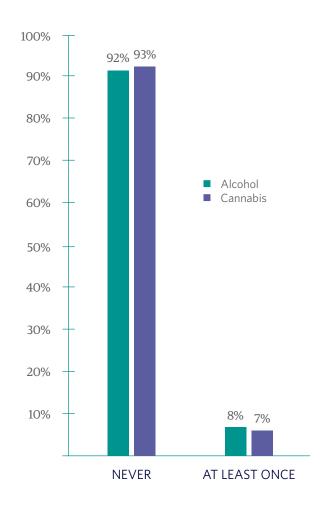
Youth from British Columbia (94%) and Quebec (94%) were more likely to have never driven a vehicle within an hour of using cannabis, while those from Prairie Provinces were more likely to have done so once (11%) or at least eight times (8%).

Driving and Alcohol

Similar to cannabis, the majority of trans and/or non-binary youth (92%) have never driven a vehicle within an hour of drinking two or more alcoholic drinks. However, 8% have done so at least once.

Youth from Ontario (96%) were more likely to have never driven a vehicle within an hour of having two or more alcoholic drinks, while those from Prairie Provinces were more likely to have done so once (6%) or twice (3%).

DRIVING A MOTOR VEHICLE WITHIN ONE HOUR OF ALCOHOL OR CANNABIS USE (NATIONAL SURVEY)

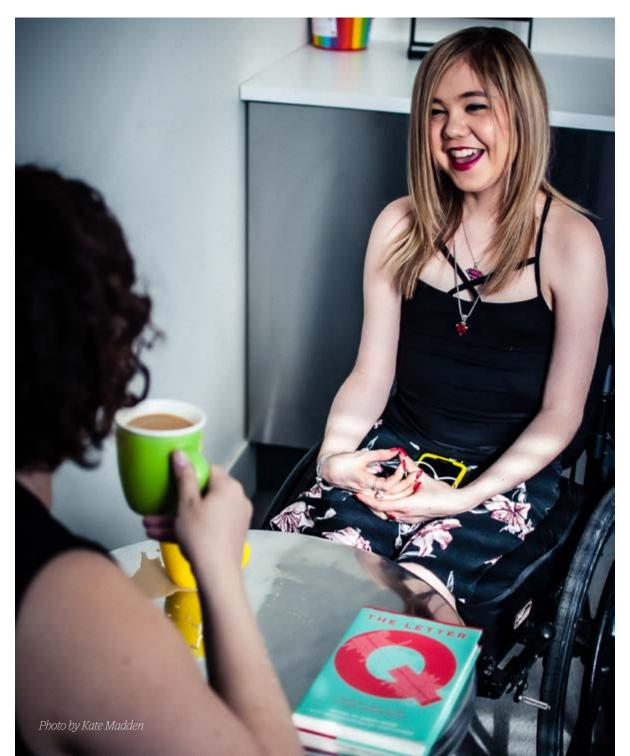




Health Care Access

Access to inclusive and gender-affirming health care is important for trans and/or non-binary youth, as they often face discrimination in these settings.

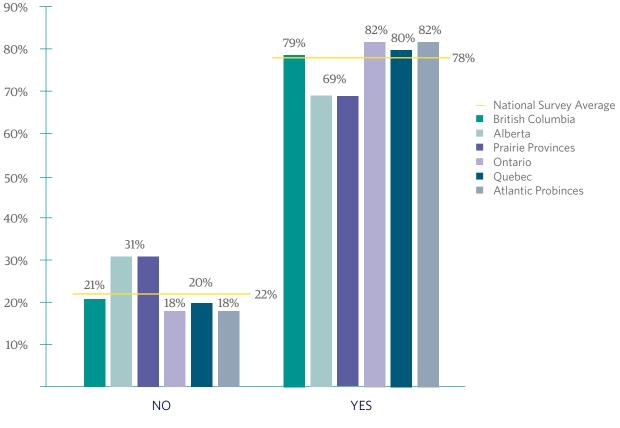
In addition to general health care, trans and/or non-binary youth may also access specific gender-affirming care, ranging from getting a prescription for hormones to gender-affirming surgery.



Primary Care Provider

A large majority of youth in our sample reported that they had a regular family nurse practitioner or doctor (78%). This number significantly increased from 2014 (70%). Trans and/ or non-binary youth in Alberta (69%) and Prairie Provinces (69%) were least likely to have a primary care provider. When youth were asked about whether their nurse practitioner or family doctor knew about their trans identity or experience, 64% of youth said their primary care provider knew, which is a significant increase from 2014 (53%). However, 19% felt "very comfortable" talking about their trans and/or gender affirming health care needs.

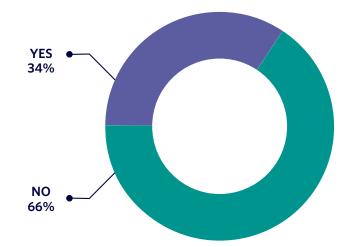
YOUTH WHO HAVE A REGULAR PRIMARY CARE PROVIDER (BY REGION)



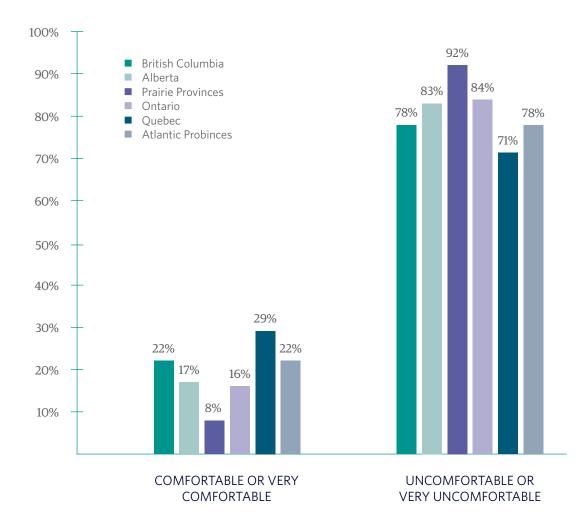
Walk-in Clinics

Walk-in clinics were accessed by a third of youth (34%) as their main source of primary health care. At these walk-in clinics, 36% of youth were "very uncomfortable" discussing their trans and/or gender affirming health care needs. Trans and/or non-binary youth from the Prairie Provinces (44%) were most likely to access primary care from walk-in clinics, however they were also more likely to feel uncomfortable or very uncomfortable (92%) discussing their gender affirming health care needs at walk-in clinics.

DO YOU ACCESS A WALK-IN CLINIC AS YOUR MAIN SOURCE OF PRIMARY HEALTH CARE? (NATIONAL SURVEY)



COMFORT DISCUSSING GENDER-AFFIRMING HEALTH CARE NEEDS AT WALK-IN CLINICS (BY REGION)



Access to Care

To know what improvements need to be made to primary health care and mental health services, it is important to understand what health services trans and/or non-binary youth are accessing or not.



Photo by Belle Ancell Photography

In the past 12 months, almost half of youth (43%) said they did not get physical health care they felt they needed. When youth were asked their reasons for not getting needed care, their main reasons were that they thought or hoped the concern would go away, that they were afraid of what the doctor would say or do, and/or that they had a previous negative experience.

Youth were also asked about accessing mental health services in the past 12 months, and 71% reported not accessing mental health services when they needed it. The most common reasons for not seeking mental health services were that they thought or hoped the concern would go away, that they were afraid of what the doctor would say or do, and that they had a previous negative experience.

REASONS FOR NOT ACCESSING NEEDED MEDICAL OR MENTAL HEALTH CARE (NATIONAL SURVEY)

	PHYSICAL HEALTH CARE	MENTAL HEALTH CARE
Didn't know where to go	30%	47%
Had no transportation	30%	24%
Didn't think I could afford it	28%	46%
Couldn't go when it was open	28%	19%
Parent or guardian would not take me	17%	14%
Afraid someone I know might see me	16%	21%
Didn't want parents to know	27%	36%
Afraid of what the doctor would say or do	51%	51%
Thought or hoped the problem would go away	75%	62%
The service is not available in my community	8%	14%
Had negative experience(s) before	48%	49%
Too busy to go	45%	42%

Hormone Therapy

Some youth may want access to hormone therapy to help affirm their gender. Getting access to a competent health care provider for prescription hormones can be a long journey, so some youth who want hormone therapy may still be waiting, and some may seek access to hormones without a prescription.

Almost half of youth (44%) reported ever taking hormones to affirm their gender, which is a significant increase from 2014 (34%). Youth from Quebec (51%) were most likely to report that they had taken hormones.

Trans and/or non-binary youth were most likely to receive their hormones through a prescription from a specialist (68%) or a family doctor/general practitioner (53%).

Youth who had never taken hormones were more likely

to report that they were not planning on taking hormones (20%), or that they were still deciding if taking hormones was right for them (36%). Other youth reported that they are having trouble finding a doctor to prescribe hormones for them, and some youth said unsupportive parents were the reason why they have not started hormones.

HAVE YOU EVER TAKEN GENDER-AFFIRMING HORMONES OR HORMONE BLOCKERS? (NATIONAL SURVEY)





Photo by Belle Ancell Photography

Non-prescribed hormone use

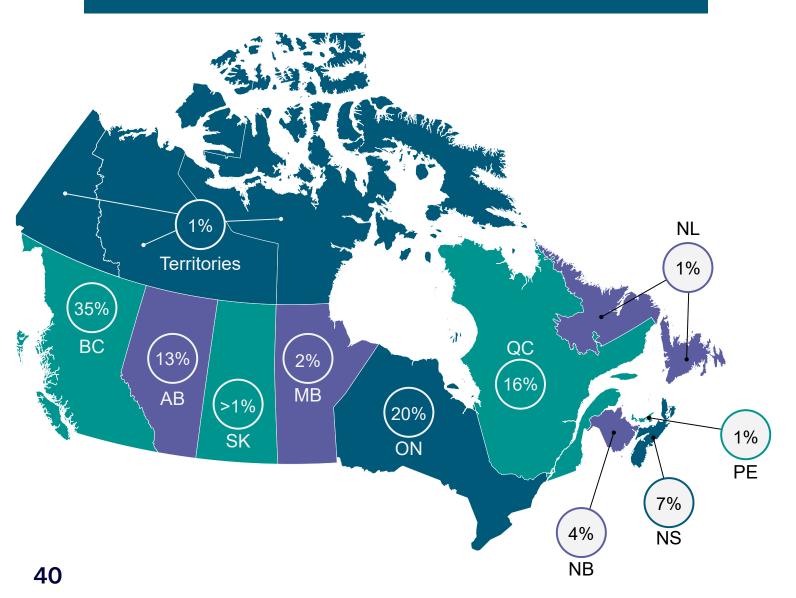
Having access to a health care provider to prescribe gender-affirming hormones can be difficult for some youth. Most youth reported receiving their hormones through a prescription from a health care provider, however, some youth take hormones without a prescription. A small number of youth reported that at some point in time, they had used hormones from a friend or relative (3%), an internet pharmacy (2%), or other sources (7%).

Surgery

Some trans and/or nonbinary youth may want to access gender-affirming surgeries. The steps that need to be taken to access gender-affirming surgeries vary by province and some provinces have more barriers than others. Gender-affirming surgeries usually require referrals to specially trained health care providers, who will conduct readiness assessments and provide detailed information in order to help them be prepared for surgery.

Almost a quarter of youth (23%) had completed their readiness assessment for gender-affirming surgery and 15% of youth had been referred for an appointment or were waiting for their appointment date to arrive. The majority of youth (56%) reported difficulty trying to get their referral for assessment. The most common province or territory where the assessments occurred were British Columbia (35%), Ontario (20%), and Quebec (16%).

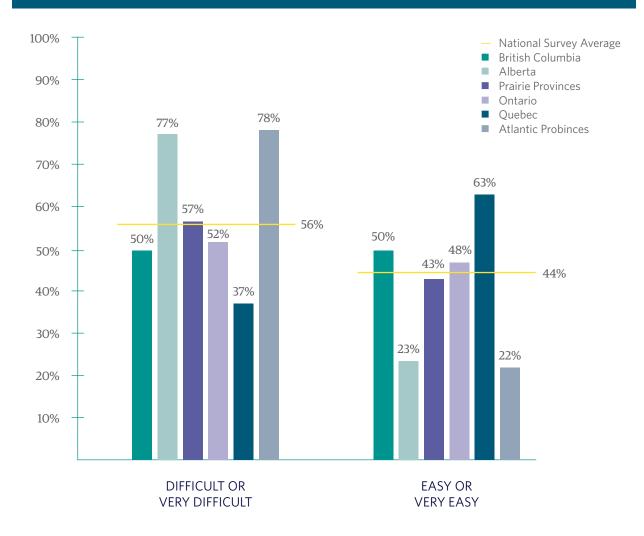
PERCENTAGE OF SURGERY READINESS ASSESSMENTS REPORTED IN EACH REGION



Some youth learned whether or not they were approved for surgery right away at the appointment (27%) but 14% had been waiting for six or more months, and 19% were still waiting to hear.

Among those who had completed readiness assessments for genderaffirming surgeries or procedures (311 youth, or 23% of the participants), the most common types of surgeries youth had were chest surgery (95%), vaginoplasty (30%), and hysterectomy or oophorectomy (24%). Approximately 4% reported phalloplasty and 2% reported metoidioplasty. The same 311 trans and/or nonbinary respondents were also asked what type of surgeries they would like to have in the future. Youth were most likely to report wanting a hysterectomy or oophorectomy (60%), chest surgery (58%), and vaginoplasty (46%).

HOW DIFFICULT WAS IT FOR YOU TO ACCESS A SURGERY READINESS ASSESSMENT? (BY REGION)



Mental health

Mental health is important to understanding overall well-being. We asked youth about emotional well-being, stress, depression, anxiety, happiness, self-harm, and suicide.

Self-reported Mental Health

Most trans and/or nonbinary youth reported their mental health as poor (45%) or fair (39%) while 16% of youth rated their mental health as excellent or good. This is a significant decrease from the 2014 survey (24%).

Mental Health Conditions

Contrary to physical health, the majority of trans and/or non-binary youth (88%) indicated having a chronic mental health condition, such as depression or anxiety. Youth from the Prairie Provinces (94%) were more likely to experience a chronic mental health condition whereas youth from Quebec (78%) were least likely. In the Prairie Provinces, no youth rated their mental health as excellent. Youth in these provinces were also most likely to rate their mental health as fair (57%). Youth in Ontario were more likely to rate their mental health as

poor (50%), and youth in Quebec were more likely to rate their mental health as good (17%) or excellent (5%).

100% 96% National Survey Average 89% British Columbia 90% 86% Alberta 83% 84% **Prairie Provinces** 82% Ontario 78% 80% Quebec Atlantic Provinces 70% 60% 50% 40% 30% 22% 18% 20% 14% 16% 11% 10% 4% EXCELLENT/GOOD FAIR/POOR

SELF-REPORTED MENTAL HEALTH STATUS (BY REGION)

Emotional Well-being

We asked youth several questions about their happiness, relationships, sense of belonging, and interest in life. During the past month, 31% of youth never felt they had something important to

Emotional Distress

We asked youth several questions about how they felt over the past 30 days. Some of the questions were related to anxiety and depression, such as "Have you felt restless or fidgety?" or "Have you felt so depressed that nothing could cheer you up?" When combining the measures, young people's scores ranged from 0 to 24, but the average overall score was 14, which is just above the measure's cut-off (13) for severe emotional distress. This means that 63% of youth reported severe emotional distress.

There are factors we asked about that help explain the high rates of severe emotional distress. Youth who reported violence exposure such as bullying and sexual harassment were more likely to report higher emotional distress. contribute to society, 22% were never satisfied with life, and 3% never felt happy.

There are also protective factors that helped buffer the likelihood of severe emotional distress. For example, youth who felt safe in their own home, who had their legal name changed, who felt connected with their family, and who felt safe at school, were all less likely to report severe emotional distress.



Photo by Belle Ancell Photography

Self-harm

More than half of trans and/or non-binary youth who took our survey told us that they have hurt or injured themselves on purpose without wanting to die within the past year. Approximately 18% of youth had hurt or injured themselves once or twice and 14% had done so 20 or more times.

Youth in Prairie Provinces (39%) were more likely to have never self-harmed, whereas youth in Atlantic Provinces (20%) were more likely to have self-harmed 20 or more times.

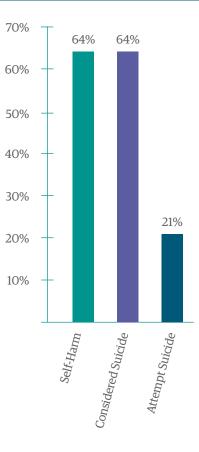
Suicide

Almost two-thirds (64%) of youth have seriously considered suicide within the past year, and 21% of all youth in our sample have attempted suicide. Youth who reported violence exposure such as bullying and sexual harassment were more likely to report considering suicide. However, youth who felt safe in their own home, who felt connected with their family, and who felt safe at school, were less likely to report considering suicide.

Youth in Atlantic Provinces were most likely to report attempting suicide in the past year (30%), while youth in Ontario (19%) and Alberta (19%) were least likely to report a suicide attempt.

Losing a friend or family member to suicide can increase the risk of suicidal thoughts and attempts among young people. Approximately one third of trans and/or non-binary youth (36%) have personally known someone who died by suicide.

RATES OF SELF-HARM AND SUICIDE IN THE PAST YEAR (NATIONAL SURVEY)

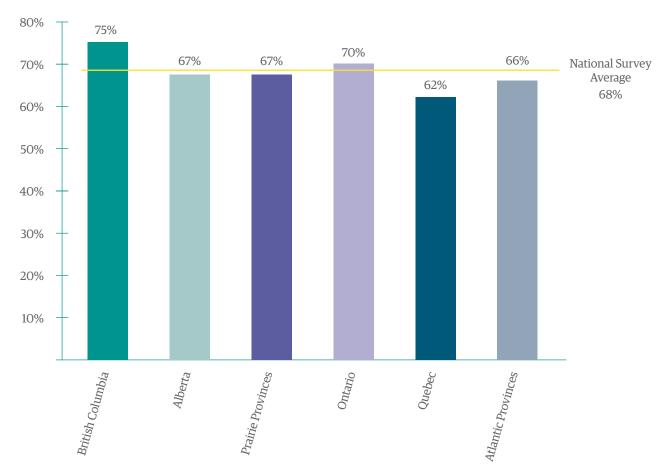


Something You Are Good At

The majority of youth (68%) could think of something they were good at. Some of the things they identified they are good at include:



CAN YOU THINK OF SOMETHING YOU ARE GOOD AT? (BY REGION)



Substance use

Tobacco

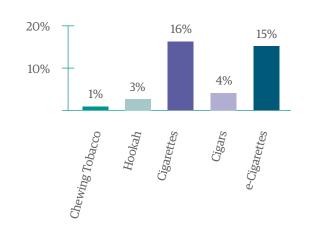
Most trans and/or non-binary youth reported they had not smoked cigarettes (84%) or e-cigarettes (85%) in the past 30 days. Youth in Prairie Provinces were most likely to have smoked cigarettes (27%) or e-cigarettes (21%) in the past 30 days.

Youth were most likely to start smoking cigarettes at age 17 or older (39%). Youth from Ontario (20%) were more likely than other provinces to have started smoking cigarettes at age 12 or younger.

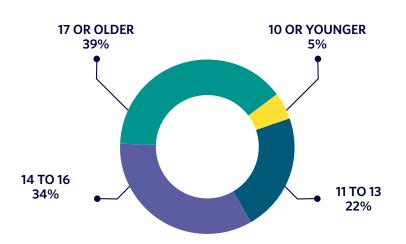
When asked about efforts to quit smoking within the past year, the majority of youth either did not smoke in past year (54%) or smoked but never tried to quit (21%). However, 10% of youth said they tried to quit once and 8% tried to quit twice.

Youth in Ontario were least likely to have smoked in the past year (67%) and youth in Quebec were most likely to have smoked without trying to quit (28%). More youth in the Prairie Provinces (20%) said they tried to quit twice in the past year, and youth in the Atlantic Provinces (5%) were more likely to have tried to quit five or more times.

TOBACCO USE IN LAST 30 DAYS (NATIONAL SURVEY)



AGE OF FIRST CIGARETTE (NATIONAL SURVEY)



SMOKING CESSATION (NATIONAL SURVEY)

54% Did not smoke in past 12 months 21% Smoke, but never tried to quit 25% Tried to quit at least once

Alcohol

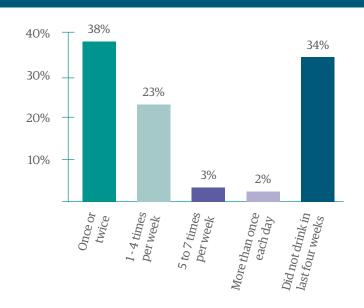
While 1 in 3 trans and/or non-binary youth did not drink alcohol in the past month, the majority did (66%). Approximately 38% drank once or twice in the past month, and 17% drank once or twice each week.

Youth from Ouebec were more likely than other provinces to report using alcohol in the past month (69%), however they were also most likely to say they drank only once or twice in the past month (42%). Youth in British Columbia (20%) were more likely to have drunk alcohol once or twice each week, and youth from the Atlantic Provinces (3%) were more likely to say they drank alcohol more than once per day.

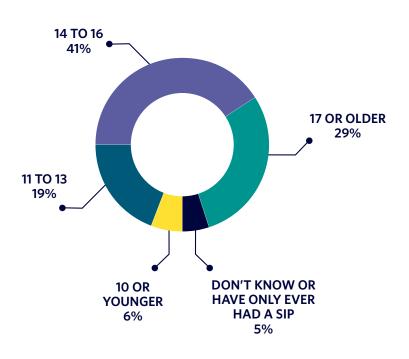
Among youth who drank alcohol in their lifetime, the majority (70%) did not start drinking until they were at least 14.

Youth in British Columbia (22%) were more likely than other provinces to start drinking alcohol at age 18 or older. Although first drinking alcohol at very young ages is relatively rare, 5% of youth in the Atlantic Provinces reported to first drinking alcohol at age 8 or younger, which was higher than in other provinces.

ALCOHOL USE IN LAST 30 DAYS (NATIONAL SURVEY)



AGE OF FIRST ALCOHOL USE (NATIONAL SURVEY)



Binge drinking is defined as having five or more drinks of alcohol on the same occasion.

Among youth who drank alcohol in their lifetime, the majority (70%) said they did not binge drink in the past 30 days. Approximately 20% reported binge drinking once or twice, and 10% did so three or more times.

Youth in Prairie Provinces (32%) were most likely to report binge drinking in the past 30 days, however, those who did were more likely than other provinces to have done so only once (21%). Youth in Atlantic Provinces (72%) were least likely to report binge drinking in the past 30 days, but those who did were more likely than youth from other provinces to report binge drinking five or more times (7%).

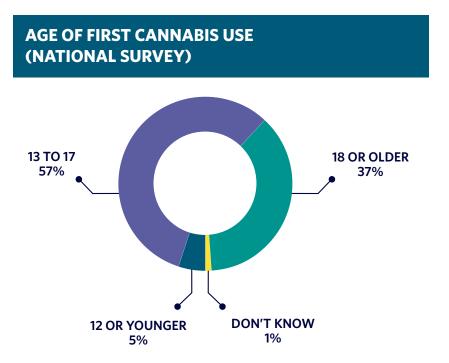
30%

of youth binge drank in the past 30 days.

Cannabis

The majority of youth (56%) have used cannabis at some point during their life. Among youth who have ever used cannabis, 34% have used in the last 30 days. Most youth (64%) were 16 years or older when they first tried cannabis.

Youth were also asked the reasons why they last used cannabis: 47% reported stress, 34% felt down or sad, 50% wanted to have fun, and 26% wanted to try it. Among the youth who have a driver's license (47%) only 7% have ever driven a vehicle within an hour of smoking cannabis.



It helps me cope healthily with anxiety instead of resorting to self-harm and other bad behaviours.

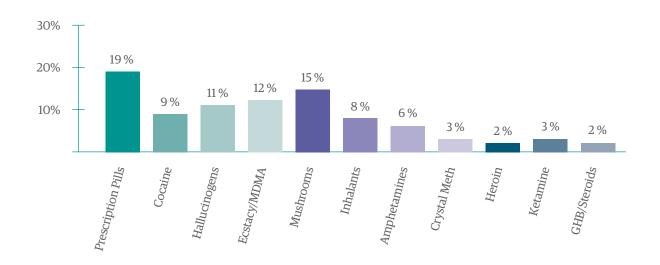
Alberta, Age 17

Other Substances

We asked youth about other types of substances they had used in their lifetime. For each substance, the majority of youth had never tried them. The most common substances that were tried at least once were prescription pills without doctor's consent (19%), mushrooms (15%), and ecstasy/MDMA (12%). Heroine (2%) and GHB/ steroids (2%) were the least likely substances used among youth who took the survey.

Trans and/or non-binary youth in the Prairie Provinces were more likely than their peers in other provinces to have tried prescription pills without a doctor's consent (31%), and 15% had done so three or more times. They were also more likely to have tried cocaine (15%), inhalants (10%). Youth in Quebec were more likely to have tried ecstacy/MDMA (17%), amphetamines (13%), ketamine (4%), or GHB (4%) but less likely to have taken prescription pills without a doctor's consent (16%). Youth in British Columbia were more likely than other provinces to have tried hallucinogens (16%), mushrooms (19%), or heroine (3%).

YOUTH WHO HAD EVER USED THE FOLLOWING SUBSTANCES (NATIONAL SURVEY)





I have Crohn's and have had back surgery recently. I use CBD oil occasionally to manage my pain.

New Brunswick, Age 25

Consequences of Alcohol/Drug Use

We asked youth about negative consequences they had experienced as a result of their alcohol and/or drug use. The majority of youth had either not experienced these consequences (44%) or had not used alcohol or drugs (28%) in the past year. Similar to 2014, the most common negative consequences were being told they did something they couldn't remember (18%), passing out (14%), or family arguments (8%). In 2019, getting injured (9%) and having sex when they didn't want to (8%) were also among the negative outcomes of alcohol and drug use. The least common negative outcomes were getting in trouble with the police (2%) and having to seek treatment for alcohol or

drug abuse (2%).

Youth in the Atlantic Provinces were least likely to have used alcohol or drugs in the past year (34%).

Youth in the Prairie Provinces were most likely to have passed out (23%) or been injured (10%) as a result of their alcohol and/ or drug use. Youth in these provinces, however, did not report some of the other consequences: none of them had overdosed, been treated for alcohol/drug abuse, or reported they had gotten in trouble with police, and they were less likely to indicate changes in school work/grades (4%) or arguments with family members (6%).

Youth in Quebec were more likely to report they had

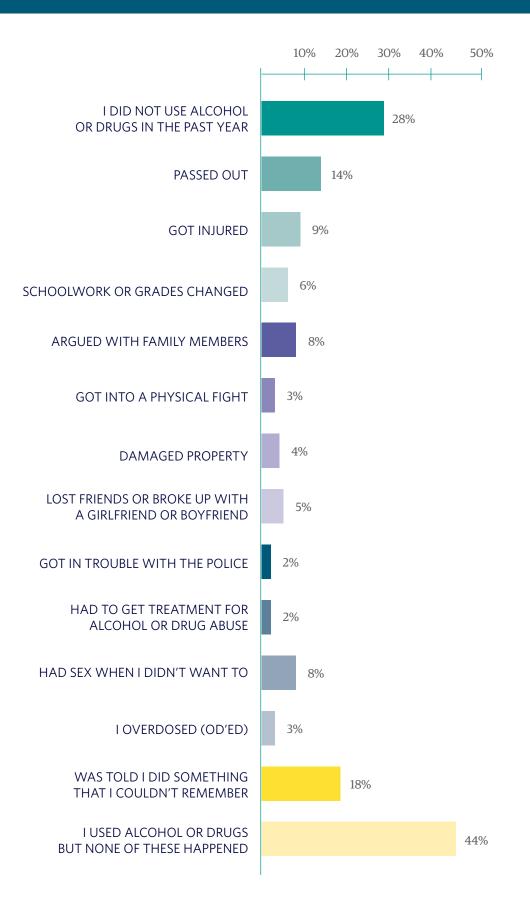
used alcohol or drugs but not experienced negative consequences than youth in other provinces. They were less likely to have gotten into a physical fight (1%), lost friends/ relationships (2%), or been told they did something they couldn't remember (16%). Conversely, they were more likely to have changes in schoolwork/ grades (8%), damaged property (8%), or sex when they didn't want to (10%).

I tried [marijuana] yesterday for the first time in a safe space to see if I would enjoy it in a party setting. I don't plan on smoking it again."

"

Alberta, Age 17

YOUTH REPORTED THE FOLLOWING HAD HAPPENED BECAUSE THEY WERE DRINKING OR USING DRUGS (NATIONAL SURVEY)



Sexual Health

Sexual health is an important area where all young people need access to accurate information for healthy relationships and healthy choices. Trans and/or non-binary youth across Canada may not have access to sexual health and education classes in their schools that appropriately address their identities, behaviours, and experiences. The majority of youth who took the survey reported they had oral sex (60%). More than half said they had given oral sex (57%) and/or received

oral sex (54%). Among youth who had ever had oral sex, 80% said it was within the past year.

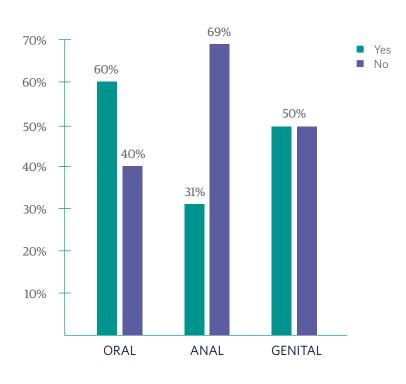
About 31% of youth reported ever having anal sex. Youth in British Columbia were the most likely to report anal sex (34%) and the Atlantic Provinces were the least likely (28%). Among the youth who ever had anal sex, 68% had anal sex in the past year.

The survey asked about sex with wording to be

both clear and respectful of trans and/or non-binary youth's bodies. Specifically, we asked, "Have you ever had genital sex (i.e. vagina or front hole sex)?" Youth who responded "yes" were also asked if they were ever the receptive or penetrative partner during genital sex.

Half of youth reported having ever had genital sex. Among these youth, 66% reported being a receptive partner and 40% an insertive partner.

YOUTH WHO HAVE EVER HAD THE FOLLOWING SEXUAL EXPERIENCES (NATIONAL SURVEY)



In addition to asking youth about their sexual experiences, we also asked how old they were the first time they had sex. Among youth who have had sex, 44% were 17 or older the first time. The majority of youth also said their first partner was 17 or older.

We asked youth who have ever been sexually active how many partners they have had in their lifetime, and 24% reported one partner, 15% two partners, and 60% had three or more partners. Among youth who had ever had sex, 21% used drugs or alcohol the last time they had sex.

AGE AT FIRST SEX (NATIONAL SURVEY)



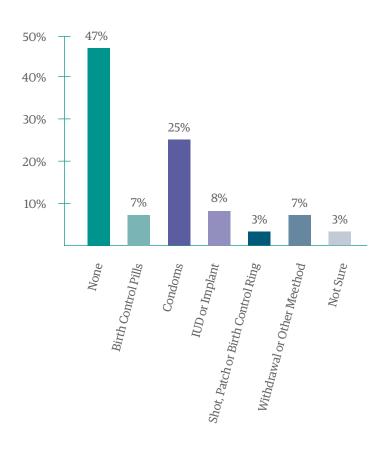


Photo by Martin Dee Photography

Contraceptive Use At Last Sex

The majority of youth (68%) and their sexual partner(s) did not use a condom or other latex barrier the last time they had sex. In addition, 47% of youth did not use any method to prevent pregnancy the last time they had sex. Among youth that did use a method to prevent pregnancy, condoms were the most common (25%) and shots, patches, and rings were least common (3%).

METHOD OF CONTRACEPTION USED AT LAST SEXUAL EXPERIENCE (NATIONAL SURVEY)





Pregnancy

Among youth who had ever had sex, 3% reported ever getting someone pregnant or being pregnant. Older youth were more likely than younger youth to report being pregnant or causing a pregnancy.



Photo by Belle Ancell Photography

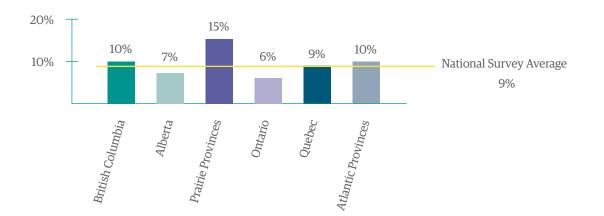
Sexually Transmitted Infections (STI)

We asked youth if they had ever been told by a doctor or other health care provider that they had an STI, and 4% said yes.

Trading Sex for Money or Other Things

We asked youth if they have ever traded any type of sexual activity for money, food, shelter, drugs, or alcohol, and 9% said yes. Youth in the Prairie Provinces (15%) were most likely to trade sex. In Canadian and international law, a youth under age 18 who trades sexual activities for money or other things like shelter is being sexually exploited. About 5% of youth under the age of 18 reported ever trading sex.

YOUTH WHO HAVE TRADED SEX FOR MONEY, FOOD, SHELTER, DRUGS OR ALCOHOL (BY REGION)



Safety, Discrimination, and Violence

Violence can greatly influence young people's health.

Trans and/or non-binary youth are at an increased risk of experiencing violence. The following section describes what trans and/or non-binary youth said about their experiences of safety, discrimination, and violence in Canada.

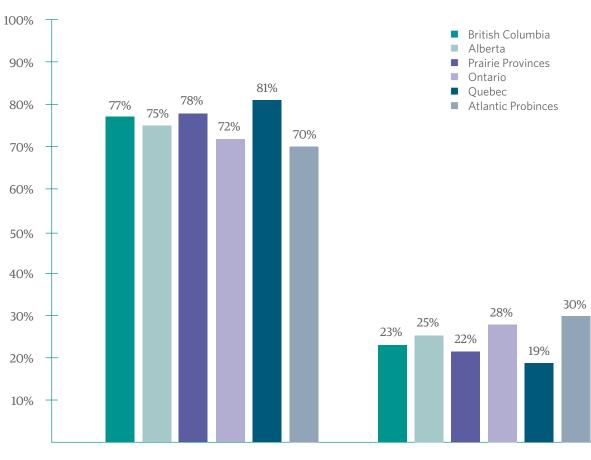


Photo by Zackary Drucker via The Gender Spectrum Collection

Safety and Violence at Home

Approximately 25% of youth did not often feel safe in their own home. In the past year, 10% of youth reported they had experienced physical violence by a family member, and 17% of youth said they had witnessed violence in their family.

HOW OFTEN YOUTH FEEL SAFE INSIDE THEIR HOME (BY REGION)



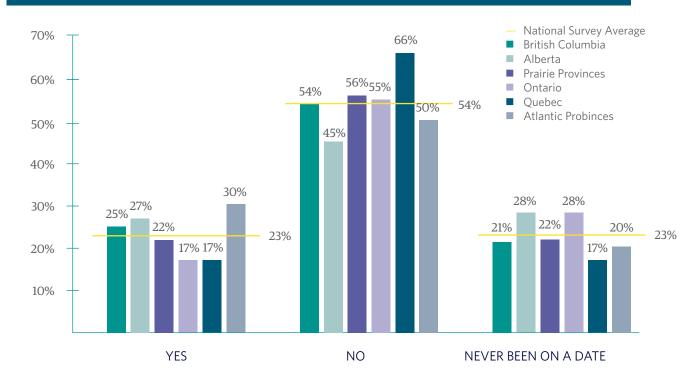
OFTEN

NEVER/RARELY/SOMETIMES

Romantic Relationships and Dating Violence

Dating violence is commonly experienced by youth, and trans and/or non-binary youth are also at risk for dating violence. Most youth reported having been on a date before (63% younger youth, 85% older youth). Among those who have been in a dating relationship, 30% had been physically hurt by a date. That number is higher than the 27% of youth who experienced dating violence in 2014.

Physically hurt includes being shoved, slapped, hit, kicked, or forced into any sexual activity.

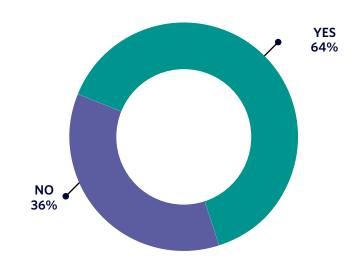


YOUTH WHO HAVE BEEN PHYSICALLY HURT BY A DATE NATIONALLY AND BY REGION

Safety at School

Young people who feel unsafe at school may have difficulty learning. We asked youth how often they felt safe in various parts of the school, with a range of "never, "rarely," "sometimes," "often," and "always." Among trans and/or non-binary youth who said they were currently attending school, 52% always felt safe in the library, 29% always felt safe in their classroom, 29% always felt safe getting to and from school, 13% always felt safe in the washroom, and 7% always felt safe in changing rooms.

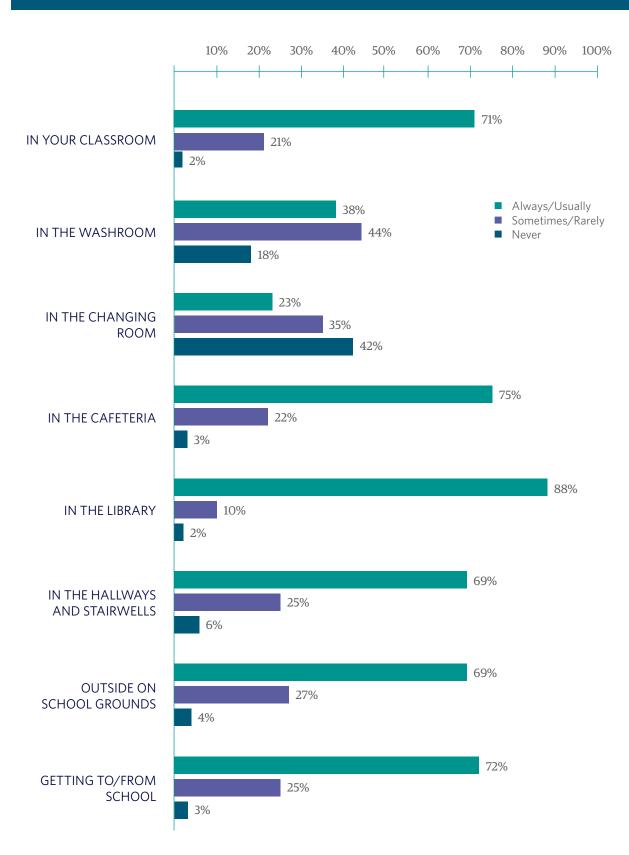
DO YOU FEEL SAFE AT SCHOOL? (NATIONAL SURVEY)



Safety and Violence in the Community

In addition to safety in school, at home and in relationships, we asked youth about their experience with safety in their community. Most youth said they feel safer in their neighbourhood during the day (68%) rather than at night (29%). More than a third (35%) of youth reported being physically threatened or injured in the past year. Furthermore, 66% had been bullied, taunted, or ridiculed; and 9% had been threatened with a weapon.

HOW OFTEN DO YOU FEEL SAFE IN THE FOLLOWING LOCATIONS AT SCHOOL? (NATIONAL SURVEY)



Sexual Violence

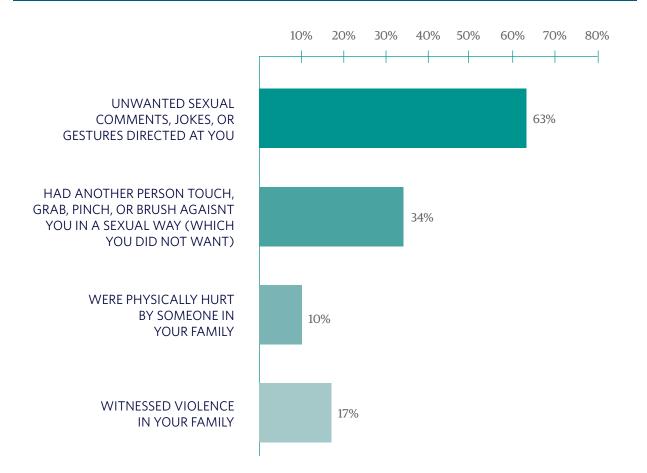
We asked youth about their experience with sexual harassment and other sexual violence.

The majority of trans and/or non-binary youth (63%) reported they had experienced verbal sexual harassment in the past year, that is, unwanted sexual comments, jokes, or gestures directed at them. More than a third of youth (34%) said they had experienced physical sexual harassment, e.g., being touched, grabbed, pinched, or brushed against in a sexual way that they did not want.

Sexual abuse in our survey was defined as when anyone, including a family member, touches you in a place you did not want to be touched or does something to you (or made you do something to them) sexually that you did not want. Almost half of youth (46%) reported they had been sexually abused. Approximately 14% had been sexually abused by an older or stronger member of their family, and 31% by an adult or other person outside their family.

Sexual assault is a serious form of violence. More than a quarter of youth who took the survey (28%) reported being physically forced to have sex when they did not want to, which is a significant increase from 2014 (23%).

SEXUAL AND FAMILY VIOLENCE (NATIONAL SURVEY)



Cyber Safety and Cyberbullying

Violence does not only occur in person. In a world with increasing technology use and limited regulation, cyberbullying has become an important concern. More than 1 in 3 trans and/ or non-binary youth (40%) said they have been asked for personal information (e.g. address or last name) over the internet in the past year, 39% said they had felt unsafe online and 31% said they had been cyberbullied. Youth in Ontario (25%) were least likely to report having been cyberbullied and youth in the Atlantic Provinces (37%) were most likely.

YOUTH WHO HAVE EVER FELT UNSAFE ONLINE OR EXPERIENCED CYBERBULLYING (NATIONAL SURVEY)

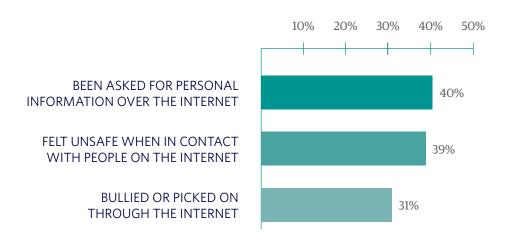


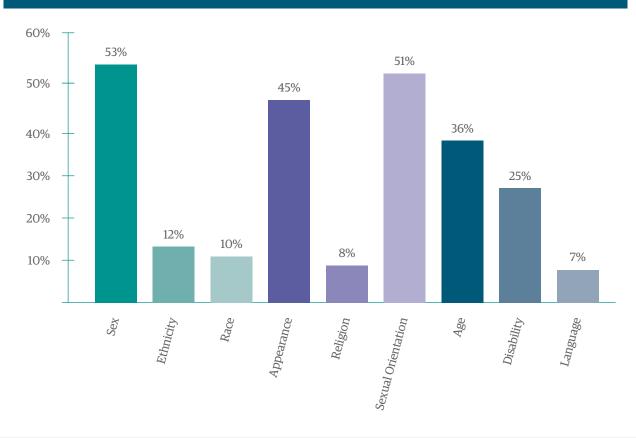


Photo by Belle Ancell Photography

Discrimination

We asked youth if they had experienced discrimination in the past year for different reasons. Youth were most likely to report they had experienced discrimination because of their sex (53%), sexual orientation (51%), physical appearance (45%), or age (36%).

IN THE PAST YEAR, HAVE YOU EXPERIENCED DISCRIMINATION OR BEEN TREATED UNFAIRLY BY OTHERS IN CANADA BECAUSE OF... (NATIONAL SURVEY)



66

I received discrimination while seeking help for my suicidal ideation, because of my mental illness. I have bipolar disorder and the doctor assumed that I was simply attention seeking instead of genuinely suicidal.

Ontario, Age 17

Washroom Comfort

Research has consistently identified washrooms as a place of discomfort for trans and/or non-binary youth.

We asked youth how comfortable they felt when using the men's and women's restrooms in public places over the past 12 months. A majority (69%) of youth never or rarely felt comfortable in women's washrooms, and 65% of youth never or rarely felt comfortable in men's washrooms. Approximately 12% of youth often felt comfortable in the women's public washroom and 14% of youth often felt comfortable in the men's public washroom.

Youth in Quebec were most likely to feel comfortable in men's public washrooms (20%) and least likely to feel comfortable in women's public washrooms (10%).

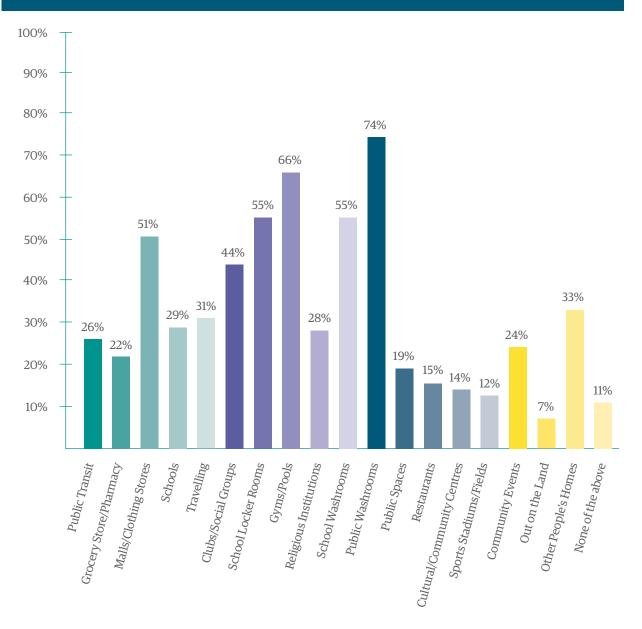


Photo by Zackary Drucker via The Gender Spectrum Collection

Avoiding Situations for Safety

Trans and/or non-binary youth may avoid certain situations or areas of school or the community in order to protect themselves from potential harassment. Our survey asked youth if they had ever avoided 19 locations or situations for fear of being harassed, being seen as trans, or being outed. The most commonly avoided location was public washrooms (74%), followed by gyms or pools (66%), school washrooms (55%), and school locker rooms (55%). The least avoided location was being out on the land (7%) followed by sports stadiums or sports fields (12%). All provinces and territories reported public washrooms as the most commonly avoided location, and being out on the land as the location least likely to be avoided for safety reasons.

AVOIDANCE OF LOCATIONS DUE TO FEAR OF HARASSMENT OR HARM (NATIONAL SURVEY)



66

Supportive Relationships

Supportive relationships from family, school, and the community are beneficial for all youth, and are also important protective factors for trans and/or non-binary youth. We explored several different kinds of supportive relationships in the survey.

Helpful Support

We also asked youth how helpful the people they asked for help were. Friends were most likely to be identified as helpful (88%) followed by mental health counsellors (77%), and youth workers (76%). The Prairie Provinces were least likely to find friends helpful (75%) and youth in Ontario were most likely to find friends helpful (92%).

PERCENTAGE OF SUPPORT PEOPLE WHO YOUTH REPORTED WERE HELPFUL (NATIONAL SURVEY)

Friend	88%
Family member	65%
A friend's parent	67%
Teacher	72%
Indigenous worker	40%
School counsellor	62%
Other school staff	60%
Youth worker	76%
Mental health counsellor	77%
Social worker	64%
Doctor	73%
Nurse	73%
Telephone helpline	51%
Indigenous elder	63%
Sports coach	69%

Support Available When Needed

Having support when it is needed is important for youth well-being. Most or all of the time, the majority of youth have someone they can count on to listen when they need to talk (56%), someone to confide in or talk to about their self or their problems (53%), and someone to love them or make them feel wanted (51%).

SUPPORTS THAT ARE AVAILABLE TO YOUTH WHEN THEY NEED THEM, ALL OR MOST OF THE TIME (NATIONAL SURVEY)

Someone to help you if you were confined to bed	
Someone you can count on to listen to you when you need to talk	
Someone to give you advice about a crisis	45%
Someone to confide in or talk to about yourself or your problems	53%
Someone who hugs you	50%
Someone to get together with for relaxation	39%
Someone to prepare your meals if you were unable to do it yourself	49%
Someone whose advice you really want	40%
Someone to do things with to help you get your mind off things	43%
Someone to help with daily chores if you were sick	40%
Someone to share your most private worries and fears with	41%
Someone to turn to for suggestions about how to deal with a personal problem	44%
Someone to do something enjoyable with	50%
Someone who understands your problems	38%
Someone to love you and make you feel wanted	51%

Family Connectedness

Relationships with family can be influential for youth well-being. We asked trans and/or non-binary youth several questions about their relationships with their parents or guardians.

Youth were asked how much they think their mother figure and father figure (or the person they consider like a mother or father) cares about them. Youth reported their mother figure cared about them more. Half of youth (50%) reported that their mother figure cared very much about them, while 36% of youth reported their father figure cared very much about them. In 2014, youth also reported that their mother figure cared more about them than their father figure.

We also asked youth how satisfied they were with their relationships with their mother and father figures. Youth reported that they were more satisfied with their relationships with mother figures than father figures. Approximately 1 in 4 youth (24%) strongly agreed they were satisfied with their relationship with their mother figure, and about 1 in 7 youth (14%) strongly agreed they were satisfied with their relationship with their father figure.



Photo by Disabled and Here

Using Correct Name and Pronouns

We asked youth which people in their everyday life they have asked to use their correct name or pronouns. Youth most commonly asked their trans friends (92%) followed by their non-trans friends (84%) to call them by their correct name or pronouns. This is a significant increase from the 86% of youth who asked their trans friends and 78% of youth who asked their non-trans friends in 2014.

HAVE YOU ASKED ANY OF THE FOLLOWING PEOPLE TO CALL YOU BY A DIFFERENT NAME OR PRONOUN, ONE WHICH REFLECTS YOUR GENDER IDENTITY? (NATIONAL SURVEY)

	DO NOT PLAN TO ASK			N TO SK	HAVE ASKED	
	2014	2019	2014	2019	2014	2019
My parents	24%	17%	16%	12%	60%	71%
My sibling(s)	22%	15%	22%	14%	56%	71%
My spouse of partner(s)	13%	8%	6%	6%	81%	86%
My child(ren)	55%	56%	26%	16%	19%	28%
My extended family	39%	33%	25%	19%	36%	48%
My roommates	25%	20%	13%	12%	62%	68%
My trans friends	6%	2%	8%	6%	86%	92%
My non-trans friends	8%	5%	14%	11%	78%	84%
My church/temple/mosque	68%	58%	13%	11%	19%	31%
My cultural community	48%	41%	15%	14%	37%	45%
My co-workers	33%	26%	20%	15%	47%	59%
My employer	34%	28%	19%	13%	47%	59%
My supervisor/boss	35%	28%	17%	12%	48%	60%
My teachers	25%	20%	20%	12%	55%	68%
My school	30%	21%	20%	13%	50%	66%
My classmates	24%	22%	24%	13%	52%	65%

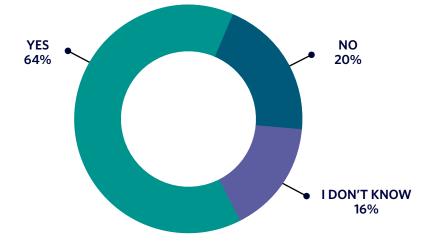
*Not all of these percentage differences are statistically significant.

Positive Role Model

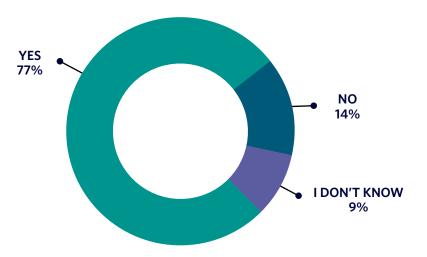
Having someone to look up to as a positive role model is beneficial during adolescence. Until recently, there have been very few, if any, trans role models for trans and/or non-binary youth to look up to. When youth were asked if there were any trans and/or nonbinary people who they really want to be like, 64% of youth said yes. Youth in British Columbia were least likely (58%) and youth in the Atlantic Provinces were most likely (72%) to report that there were trans and/or nonbinary people they want to be like.

More than 3 out of 4 trans and/or non-binary youth (77%) reported there were trans and/or non-binary people who they admire or look up to. Youth in the Prairie Provinces were the least likely (74%) and those in Alberta were most likely (82%) to report having a trans and/or nonbinary person who they admire.

THERE ARE TRANS OR NON-BINARY PEOPLE WHO I REALLY WANT TO BE LIKE (NATIONAL SURVEY)



THERE ARE TRANS OR NON-BINARY PEOPLE WHO I ADMIRE OR LOOK UP TO (NATIONAL SURVEY)



Conclusions and Recommendations

This report provides an informative glimpse into the health and well-being of trans and/or non-binary youth across Canada. While there are several positive changes in the past five years, the survey results illustrate some significant concerns. For instance, many youth are experiencing:

- Violence in their personal relationships, within their family, and/or in their community
- Barriers to supportive mental and physical health care
- High levels of emotional distress
- Avoidance of public places out of fear of discrimination

However, there are also signs of progress. Compared to our 2014 survey, more youth reported:

- Accessing hormones to affirm their gender
- Living in their felt gender full-time
- Legally changing their name
- Asking people in their lives to use their correct name and pronouns

We still have a ways to go to ensure that trans and/ or non-binary youth are equally supported to reach their full potential as adults. We offer a number of key recommendations informed by the survey results and feedback from our trans and/or non-binary youth advisory groups across Canada.



Eliminate Disparities Between Provinces

Youth in our advisory groups strongly emphasized the need to address inequities youth experience across all provinces and territories. Survey results show that in most areas of health, there are also some disparities between provinces and territories. Many of these disparities appear to be due to marked differences in provincial policy across the country. For example, gender affirming surgeries and hormones vary in terms of coverage, cost, and access across provinces and territories.

Trans and non-binary youth deserve equitable access to resources to help them grow and thrive, including but not limited to, gender affirming health care, safe schools, and supportive networks for themselves and their families. Despite protection for trans and/ or non-binary youth in provincial human rights codes, the Canadian Human Rights Act, and the Canadian Charter of Rights and Freedoms, discrimination on the basis of gender identity and gender expression persists. Provinces and territories should work toward ensuring:

- Equitable coverage for gender affirming health care, surgery, and hormones
- Safe and welcoming schools
- Access to affirming legal documents and identification
- Protection from discrimination and violence

Knowledgeable and Accessible Health Care Services

There are significant barriers faced by trans and/or non-binary youth in accessing health care. Our advisory groups stressed the importance of health care workers who are knowledgeable about trans and/or non-binary care, and access to timely gender affirming care, but our survey data shows more work is needed. Many youth reported missing needed physical or mental health care, and were uncomfortable disclosing or discussing their trans and/ or non-binary identities with health professionals.

Health care providers and clinics should work with trans and/or non-binary communities to ensure adequate and timely access to gender-affirming health care. Professionals from all health care disciplines who work with youth need opportunities to improve their competency in providing care that meets the professional standards of care from the World Professional Association for Transgender Health (WPATH). This should include general education about gender identity and barriers in accessing health care, as well as disciplinespecific training.

Safe Washrooms and Public Spaces

Youth advisories emphasized the need for access to safe washrooms. and public spaces—a need that is clearly substantiated in our data. The majority of youth reported avoiding various public places such as gyms or pools, school locker rooms, and malls or clothing stores for fear of being harassed or outed. The most avoided public location was public washrooms. This holds true in all regions of Canada.

Research shows that inclusive policies allowing people access to washrooms that best match their gender identity increases perceived safety and improves mental health outcomes. Laws and policies alone will not protect our trans and/ or non-binary youth. We also need increased public awareness and a society that values the dignity of trans and/or non-binary vouth.



Photo by Belle Ancell Photography

Inclusive and Comprehensive Sex Education

The youth advisories were clear and consistent in their request for inclusive sex education across Canada. Most youth who took the survey reported being sexually active. They deserve relevant and accurate sex education, where they can see themselves in the curriculum.

We recommend that sex education courses in all

provinces and territories align with the most recent federal guidelines on sexual health education and include information specific to the needs of gender and sexual minorities, and are taught by instructors who are knowledgeable about gender and sexual minority people. Furthermore, in order to provide equal education and resources for trans and/or non-binary youth and to normalize

diverse experiences of sexuality and gender for all students, sex education classes should not to be segregated by gender.



Limitations and Suggestions for Future Research

All research has limitations in how it can be used and can lead to suggestions for new research. Our study has the following limitations to be aware of.

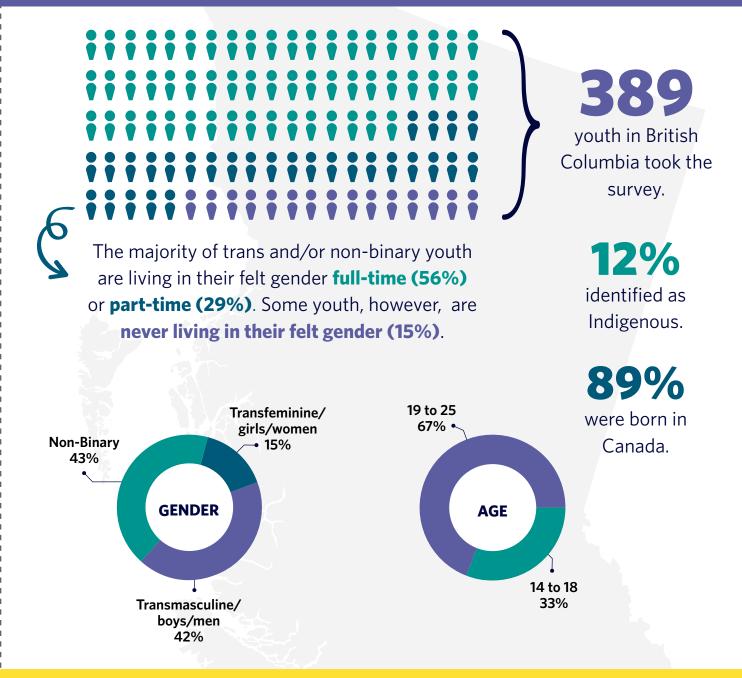
- 1. Youth in our sample were predominantly white, and so findings may not adequately reflect the lives and experiences of trans and/or non-binary youth who are Black, Indigenous, or from other cultural groups. Future research should focus specifically on their lives, and be conducted in partnership with their communities. This may require different research methods.
- 2. Our survey data are cross-sectional (only collected at one time point) and so cannot determine cause and effect. Additional studies with trans and/or non-binary youth will benefit from longitudinal studies to measure change over time.
- 3. Likewise, although our study is large and includes youth from all across Canada, the survey was conducted only online, and was not population-based. Youth who do not access the internet, or did not know about the survey, may be different from those who participated. Population studies in Canada should include measures of gender identity to allow trans and/or non-binary youth to be visible, and their experiences included.

Next Steps

This report is the first set of analyses from the information provided by 1,519 trans and/or non-binary youth across all provinces and territories in Canada. Additional regional reports are planned, as well as more in-depth analyses of the data, comparison to population level data, academic manuscripts, youth focused resources, webinars, and fact sheets.

Please check our website for regular updates (saravyc.ubc.ca) or email us if you have questions (saravyc@nursing.ubc.ca). Regional Information Sheets

BRITISH COLUMBIA FACT SHEET



When I was about 13, my mom was explaining about what some transgender women go through to feel better in their bodies, including surgery. I realized and told her that if there was a surgery to turn me into a boy, I would want to do that.



🕑 🗊 @saravyc 🛛 🤀 saravyc.ubc.ca

99

CANADIAN TRANS & NON-BINARY YOUTH HEALTH SURVEY 2019 BRITISH COLUMBIA FACT SHEET

Key Findings







42% feel that their parents care about them very much.



80% use a different name or pronoun from the one given at birth in everyday life.



75% did not use a condom or latex barrier the last time they had sex.

66

I started feeling disconnected from my body as soon as puberty really started to kick in. I only heard the term "transgender" at the age of 15 and realized it fit me.



Recommendations

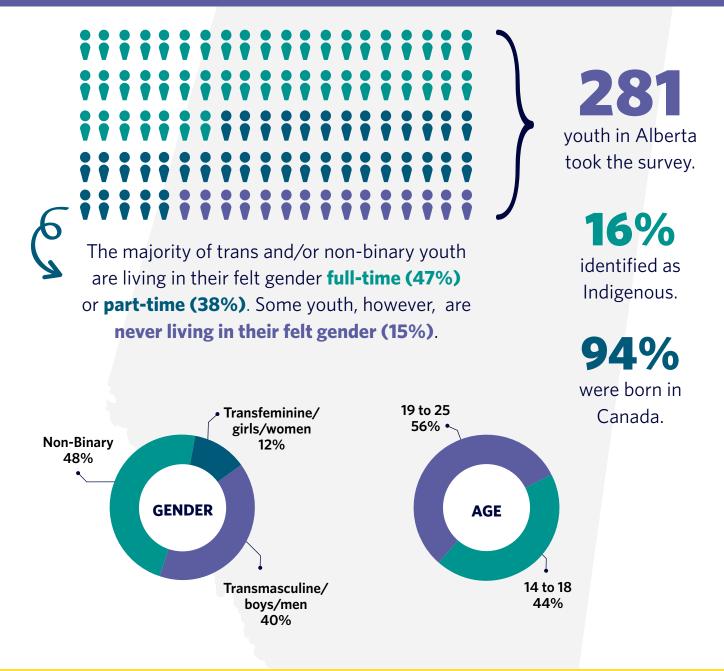
Develop trans and/or non-binary resources for doctors, parents, and trans youth to increase competency instead of only for policy makers.

Promote recognition of chosen name and pronouns, such as access to legal name change, correct pronouns on prescriptions and during appointments, and a field to indicate pronouns on forms (e.g. doctor's office, schools, pharmacy, etc.).

Implement sexual and gender minority sex education in school systems, not segregated by gender, to normalize and provide education and resources for queer and trans folks.



ALBERTA FACT SHEET



66

Gender affirming care is a human right. It is not an option. We deserve better access and care.



"

Key Findings



77% have avoided public washrooms for fear of being harassed, being read as trans, or being outed.



58% are not comfortable talking with their health practitioner about their trans and/or gender affirming health care needs.



66% do not feel safe in school washrooms.



31% do not have a family doctor or nurse practitioner.

Recommendations

66

"It's not fair, that on a daily basis, we have to think about how safe we are, or will we be, when accessing public spaces."



Reduce fear and anxiety by improving access and reducing barriers to physical spaces such as washrooms.

Implement inclusive and mandatory sexual health education taught by instructors with gender and sexual minority competency.

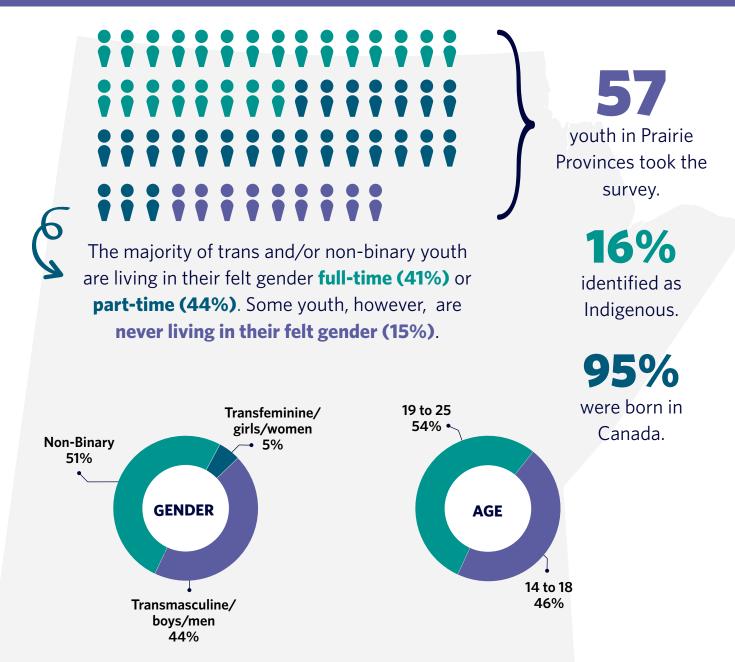
Develop resources to improve knowledge for health care professionals to provide more accessible gender affirming care and surgeries.

> Youth said they shouldn't be the ones responsible for educating professionals.



🕑 f @saravyc

PRAIRIE PROVINCES FACT SHEET



66

My gender does match my physical body and it always has. How people interpret my gender identity based on gender norms and stereotypes does not match my gender identity. I first realized that how people perceive my gender was different than my actual gender was when I was 16.



🕑 🖪 @saravyc 🕀 saravyc.ubc.ca

Key Findings

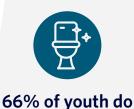


87% have experienced discrimination based on their sexual orientation.



94% have an emotional or mental health concern that has lasted at least 12 months.

SELF-RATED MENTAL HEALTH



not usually feel

safe in school

washrooms.

Good

4%

Fair/Poor

96%

No youth self-rated their mental health as 'excellent'.

Recommendations

Gender neutral washrooms in schools are integral to the safety and dignity of trans and/or non-binary youth.

Competent, accessible, and low-cost mental and emotional health services are needed for trans and/or non-binary youth.

Decrease transphobia and homophobia through public education campaigns. Law enforcement should take reports of homophobia and transphobia seriously.

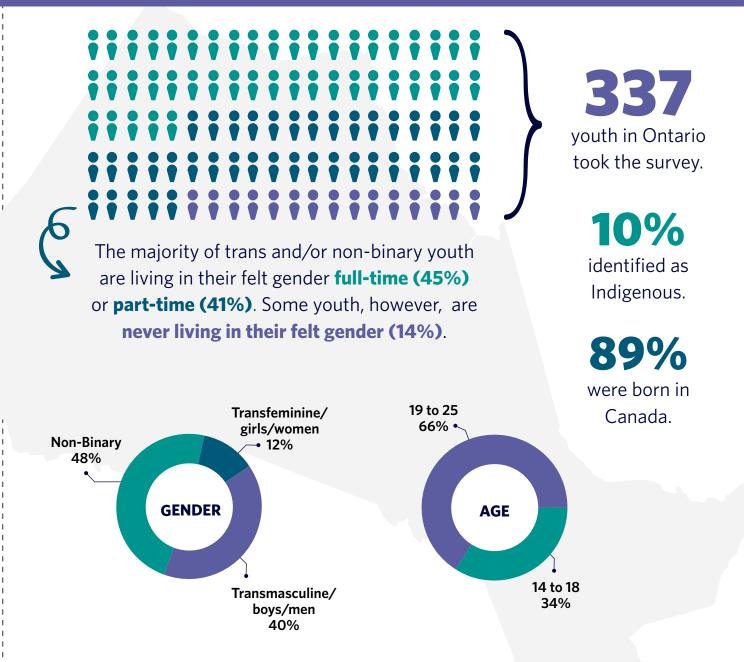


Because I'm Native, people do not take my transness seriously, and insist that I am two spirited.





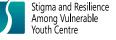
ONTARIO FACT SHEET



66

Gender is complex and includes a lot of unspoken elements within it. I have identified as non-binary in the past and believe I am much more than & rather different from the average definition of a woman. This does not change that I am a woman though.





🕑 🗊 @saravyc 🕀 saravyc.ubc.ca

"

Key Findings



73% needed mental health services in the past year but did not get care.

Of the 73% who did not seek mental health care, 35% said it was because they didn't want their parents to know.



72% do not feel their family cares about their feelings.



84% never participated in physical activities with a coach outside of school.



87% do not feel comfortable discussing their trans and/or gender affirming health care needs with a health practitioner they do not know.

66

Around age 3 or 4, I knew I was a boy, but people tell you no so you forget. At age 15, I came out to my family as trans after learning of experiences like mine.

"

Recommendations

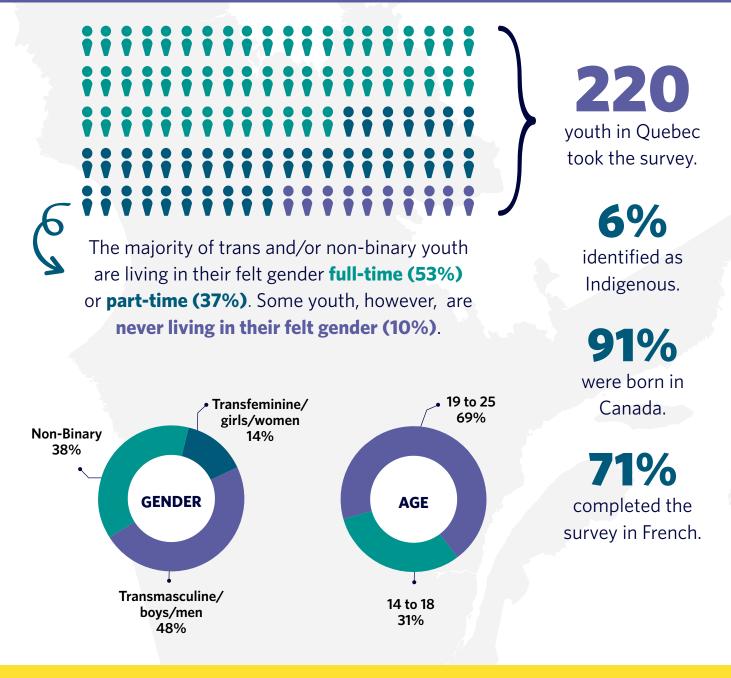
Implement knowledgeable, affirming, and accessible health care services and providers.

Develop public education on the importance of using the correct pronouns and chosen names, including the consequences of not doing so.

Improve outreach and support for families to help them understand their trans and/or non-binary youth and to help youth feel safe at home.



QUEBEC FACT SHEET



66

I never felt that my gender didn't match my body. My body is mine. My gender doesn't match the sex I was assigned at birth. It's not the same thing.



22

Key findings



15% had to change schools due to lack of support for their gender identity.



70% have avoided public restrooms for fear being harrassed, read as trans, or outed.



(+Ÿ

62% could not think of anything they are really good at.

This suggests possible lower mental health and self-esteem. 46% are comfortable talking to their healthcare practitioner about being trans or non-binary.

66

Well-being at school has a great influence on entering adult life. It's important to make efforts to make it happen in school, not to feel marginalized.



Recommendations

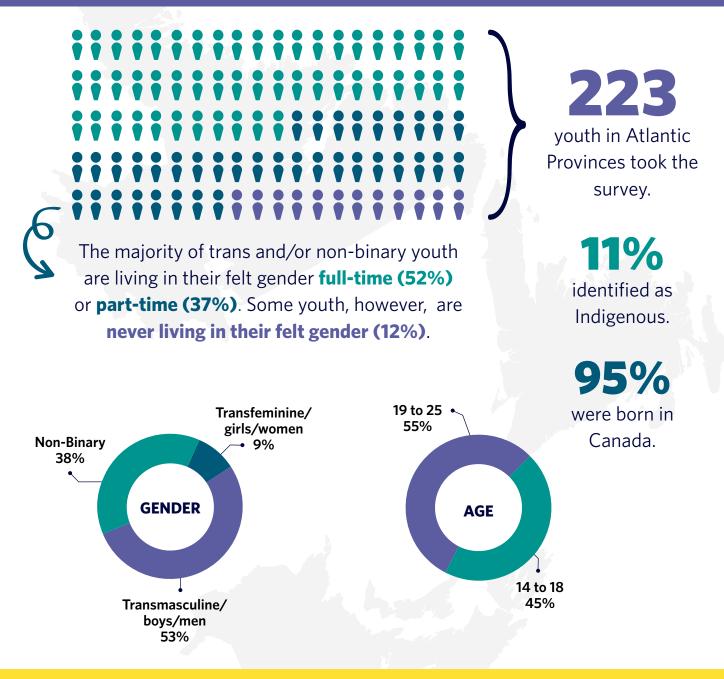
Train school staff to help students and teachers navigate and adapt to gender identity.

Create mental health programs for trans youth in emotional distress and have less centralized and more visible safe spaces.

Urgent and important need for gender neutral restrooms and locker rooms.



ATLANTIC PROVINCES FACT SHEET



66

I feel like I'm not alllowed to identify as a boy because I don't look like one, but I do prefer to be called male pronouns and I hate female ones.



99

CANADIAN TRANS & NON-BINARY YOUTH HEALTH SURVEY 2019 ATLANTIC PROVINCES FACT SHEET

Key Findings



22% have run away from home.



30% attempted suicide in the past year.



71% needed emotional or mental health services in the past year but did not get them.



57% have experienced discrimination in Canada based on their sex.

66

I have been told that in order for my hysterectomy to be covered by my provincial health plan, my gender must be listed as female on my government ID, otherwise I will have to pay the cost myself.

"

Recommendations

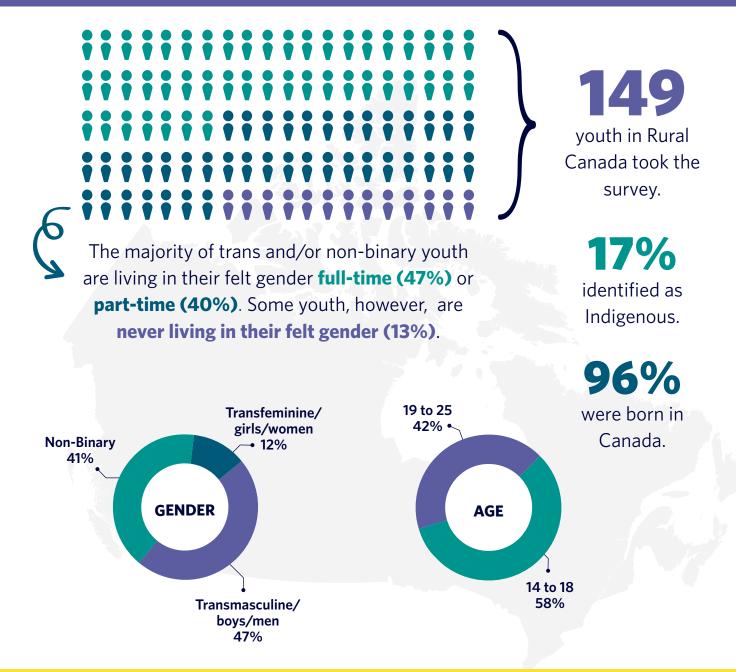
Implement accessible and knowledgeable mental and physical health care services and providers.

Provide support and education for families to help them understand their trans and/or non-binary youth and to help youth feel safe at home.

Develop training for teachers, school counsellors, and administrators on gender identity development and gender-affirming approaches to make schools a safer place for all youth.



RURAL FACT SHEET



66

I identify as male, and outside the gender binary, primarily. Gender isn't necessarily one or the other, it can be a blend of all types of feelings.



🕑 🗊 @saravyc 🕀 saravyc.ubc.ca

??

Key Findings



39% have expereinced cyber bullying in the past year.



60% have never taken hormones to affirm gender.



19% smoked a cigarette in the past month.



42% did not get physical health care when needed because they did not want their parents to know.



14% did not get medical help when needed because the service is not avaliable in their community.

"

Wait times for access to hormone therapy are long and most of the time one doesn't know who to see and where to go to start.

77



Recommendations

Increase trans and/or nonbinary competency for medical professionals in rural areas.

Develop robust online services to help link trans and/or non-binary youth with services and information relevant to their area.

Provide and/or improve transportion options from rural areas to places where youth can access resources, doctors, and support groups.



RESULTS OF THE CANADIAN TRANS AND NON-BINARY YOUTH HEALTH SURVEY



Stigma and Resilience Among Vulnerable Youth Centre

UBC

THE UNIVERSITY OF BRITISH COLUMBIA