



Government of
Northwest Territories

Package of Information Regarding
Policies on 2SLGBTQIPA+ Youth
in the Northwest Territories



NORTHERN **MOSAIC** NETWORK

February 1, 2024

Dear Honorable Ministers L. Semmler and C. Cleveland,

The Northern Mosaic Network is deeply concerned about the impact of Albert's new policies on 2SLGBTQIPA+ youth in the Northwest Territories, and on two-spirit, transgender and non-binary youth's access to gender affirming care. The Northern Mosaic Network's mission is to create a safer, more equitable Northwest Territories for 2SLGBTQIPA+ youth, adults, and families. We are calling on the the Government of the Northwest Territories to meet with Northern Mosaic Network and establish a plan to ensure the continuity of gender-affirming healthcare for two-spirit, transgender and non-binary youth in the NWT, and address concerns about how these policies will impact 2SLGBTQIPA+ people in the NWT.

On January 31st, the Government of Alberta announced a new set of policies targeting two-spirit, transgender and non-binary youth. These policies restrict, and in some cases completely block, access to gender affirming healthcare for youth; impose new restrictions on teaching about gender identity, sexual orientation, and sexuality in schools; force schools to disclose if a student changes their name or pronouns; and ban transgender women from competing in women's sports leagues.

Given this announcement, we are deeply concerned about the impact of some of these policies on the ability of two-spirit, trans, and non-binary NWT youth to access gender affirming care. According to the *Health care for transgender, non-binary, and gender nonconforming people: Guidelines for the Northwest Territories*, children and youth seeking gender affirming health care may be referred to specialty transgender care, such as pediatric endocrinology and adolescent medicine, outside of the Northwest Territories. In practice, this most often means specialists in Alberta. Given the Government of Alberta's new policies, we believe that Alberta is no longer a safe option for referral. We are asking the Government of the Northwest Territories to proactively identify safe options for referrals outside of the NWT, ensure healthcare practitioners are aware of these changes, and ensure the continuity of care for NWT families currently accessing care in Alberta by connecting them with the appropriate specialists in another jurisdiction.

We are also troubled by the policies directed at schools. Youth spend the majority of their time in schools and for youth living in precarious situations, schools can sometimes be the only safe space that they can access. As we have seen in other jurisdictions, forcing schools to disclose 2SLGBTQIPA+ students' identities to parents and caregivers negatively impacts 2SLGBTQIPA+ students' health, well-being, and access to secure housing.

We also know that limiting access to information about sexual orientation, gender expression and identity harms students. It prevents students from receiving accurate information about healthy relationships, their bodies, and their sexual health. This increases their risk of experiencing violence, engaging in high risk sexual behaviors, and developing health complications from unsafe sexual practices or using unsafe practices to express their gender. Restricting young people's access to information about sexual orientation, gender



NORTHERN **MOSAIC** NETWORK

identity and gender expression does not stop the process of self-discovery. Instead, it often causes young people to suffer unnecessarily because they don't have the knowledge or terminology to understand their own experience. This means that they experience more gender dysphoria, they are more likely to suffer from a range of mental health issues, they have increased suicidality, and they are more likely to engage in a range of high-risk behaviors.

We know that these policies do not directly apply to the NWT. However, we are concerned that the legitimization of these kinds of harmful and hateful policies will have spillover effects into the NWT. In light of these policies, and the growing anti-2SLGBTQIPA+ sentiments that we are seeing across the country, we ask that the GNWT publicly reaffirm their commitment to ensuring that NWT schools are safe places for all 2SLGBTQIPA+ students, as outlined in the GNWT's *Guidelines for Ensuring LGBTQ2S+ Equity, Safety, and Inclusion in Northwest Territories Schools*.

Based on the information that we've provided in this letter, we hope that you understand the urgency and importance of a clear and timely response to Alberta's new policies. We know that gender affirming healthcare is lifesaving. We know that having access to information about sexual orientation, gender identity, and gender expression empowers youth to make positive decisions for themselves. We know that when 2SLGBTQIPA+ youth are supported and affirmed in their identities, it allows them to feel included and safe in our communities. The Northern Mosaic Network's guiding vision is to create a safer, more equitable Northwest Territories for 2SLGBTQIPA+ youth and families. We invite you to collaborate with us on this issue, to ensure that your response to the Government of Alberta's new policies is guided by the lived experiences of 2SLGBTQIPA+ people in the NWT.

You can contact us via phone (867-444-7295) or email (ed@northernmosaic.net). We look forward to hearing from you.

Sincerely,

A handwritten signature in black ink, appearing to read 'Chelsea Thacker', written in a cursive style.

Chelsea Thacker
Executive Director

In collaboration with

Staff & Board of Directors of the Northern Mosaic Network



February 23, 2024

Chelsea Thacker
Executive Director
Northern Mosaic Network
5112 52 ST SUITE 213
YELLOWKNIFE NT X1A 1T6
Email: ed@northernmosaic.net

Dear Executive Director Thacker:

Addressing Policies Directed at Schools and Gender-Affirming Health Care Impact

Thank you for bringing forward Northern Mosaic's concern about the impact of Alberta's new policies on 2SLGBTQIPA+ youth in the Northwest Territories (NWT). We recognize that many NWT residents are concerned about access to health care services and the creation of safe spaces in schools for 2SLGBTQIPA+ children, youth and their families following the Government of Alberta's announcement of their plan to introduce policies that will impact these services and supports. The GNWT remains deeply committed to 2SLGBTQIPA+ rights. Anything that creates unsafe spaces and potentially harmful situations for 2SLGBTQIPA+ youth does not have a place in the NWT.

The Department of Health and Social Services (HSS) is reaching out to the Government of Alberta to seek clarity on what the proposed policies mean for NWT residents receiving out-of-territory referrals for transgender health care services. As we learn more, we will share additional information with the Northern Mosaic Network and with NWT residents. We can assure you that health care services for two-spirit, transgender, non-binary, and gender non-conforming individuals, including children and youth, will continue to be available to NWT residents of all ages.

While the *Health Care for Transgender, Non-Binary, and Gender Nonconforming People: Guidelines for the Northwest Territories* (**attached**) often references Alberta as the out-of-territory provider, it is not our only option for services. The Government of the Northwest Territories (GNWT) supports access to health care services that are respectful, dignified, and gender-affirming for two-spirit, transgender, non-binary, and gender non-conforming people. The location of these out-of-territory referrals depends on the necessary service and the availability of practitioners, but an alternative to Alberta will be arranged when needed. In the NWT, gender affirming health services are treated equally to any other insured health service, and we will provide medical travel benefits to NWT residents who must travel to access these services, including if residents must travel to a province other than Alberta.

.../2

HSS remains committed to ensuring that the *Health Care for Transgender, Non-Binary, and Gender Nonconforming People: Guidelines for the Northwest Territories* reflect emerging changes in the care of patients. Considering the proposed policy changes in Alberta, and similar movements elsewhere in Canada, HSS will be undertaking a review of these Guidelines and would be happy to collaborate with the Northern Mosaic Network in advancing this important work.

The GNWT values the safety and well-being of all residents and recognizes the vulnerable position of 2SLGBTQIPA+ children and youth, some of whom may rely on schools for safety and acceptance. The GNWT, values diversity in its school communities and recognizes the unique challenges experienced by 2SLGBTQIPA+ students, as well as individuals who may be perceived as 2SLGBTQIPA+, who come from 2SLGBTQIPA+ families, and those who work in solidarity with 2SLGBTQIPA+ communities (allies). The Department of Education, Culture and Employment (ECE) is committed to ensuring that student wellness and the development of a positive sense of identity are promoted and embedded in school experiences, programming, and environments.

In the NWT, legislation and regulations require schools and education bodies to recognize, support, and protect the rights of students, family members, and school staff under the [Human Rights Act](#), the [Education Act](#), [Safe Schools Regulations](#), which includes the [Territorial School Code of Conduct](#), and the [GNWT Harassment Free and Respectful Workplace Policy](#). The Territorial School Code of Conduct explicitly notes, schools and education bodies have a responsibility to ensure that all members of the school community are provided with a safe, positive, respectful, and caring environment, regardless of orientation, gender identity and gender expression. There is no room for harmful policies or practices based on hateful rhetoric and actions within our school systems.

ECE continues its commitment to the *Guidelines for Ensuring LGBTQ2S+ Equity, Safety, and Inclusion in Northwest Territories Schools (2020)* (**attached**) to provide a framework for establishing promising practices that foster the equity, safety, and inclusion of all members of the school community in NWT schools. In addition to providing a framework, the guidelines recommend, as a promising practice, that NWT schools should have active Genders and Sexualities Alliances and/or Gay-Straight Alliances (GSAs) and a GSA advisor.

Outlined in the guidelines, students in the NWT who wish to use pronouns other than masculine or feminine or who want to use gender-neutral or gender inclusive language (they/them) will be accommodated in NWT schools. ECE respects an individual's right to self-determination, which includes student confidentiality after a disclosure related to gender identity. Each person has the right to choose when, how, and to whom they disclose their sexual orientation, romantic orientation, gender identity and/or gender expression.

The guidelines support promising practices that increase equity, safety, and inclusion in NWT schools. ECE supports the promising practice to enable 2SLGBTQIPA+ students to have full, equitable and safe participation in curricular and extra-curricular activities in ways that are comfortable and in accordance with their gender identity and gender expression.

We value your continued advocacy to create a safer, more equitable NWT for 2SLGBTQIPA+ youth and families. We value the invitation from Northern Mosaic Network to collaborate on this matter. Our goal is to ensure the ongoing availability of gender-affirming healthcare and to make sure that individuals in the NWT who identify as 2SLGBTQIPA+ are informed about any possible impacts they may face. Additionally, we aim to shape the GNWT's response based on the lived experiences of 2SLGBTQIPA+ individuals in the NWT. Officials leading this work on behalf of ECE and HSS will be in touch with you in the coming weeks to arrange and to participate in a meeting to initiate these important discussions.

We hope this information reinforces the GNWT's dedication to being an ally and to fostering positive educational and healthcare environments that prioritize safety and inclusivity for all. As Ministers, we are committed to the health, wellness, and safety of all NWT residents, especially youth.

Please do not hesitate to reach out if you have any additional questions or concerns.

Sincerely,



Caitlin Cleveland
Minister
Education, Culture and Employment



Les Semmler
Minister
Health and Social Services

Attachments

c. Distribution List

Distribution List:

Sam Shannon
Acting Deputy Minister
Education, Culture and Employment

Jo-Anne Cecchetto
Deputy Minister
Health and Social Services

Shannon Barnett-Aikman
Assistant Deputy Minister, Education and Culture
Education, Culture and Employment

Sara Chorostkowski
Assistant Deputy Minister, Programs
Health and Social Services

Shawna Coleman
Director, Student Support and Wellness
Education, Culture and Employment



Guidelines for Ensuring

LGBTQ2S+

Equity, Safety and Inclusion
in Northwest Territories Schools

DEPARTMENT OF EDUCATION, CULTURE, AND EMPLOYMENT

Guidelines for Ensuring



Equity, Safety and Inclusion in Northwest Territories Schools

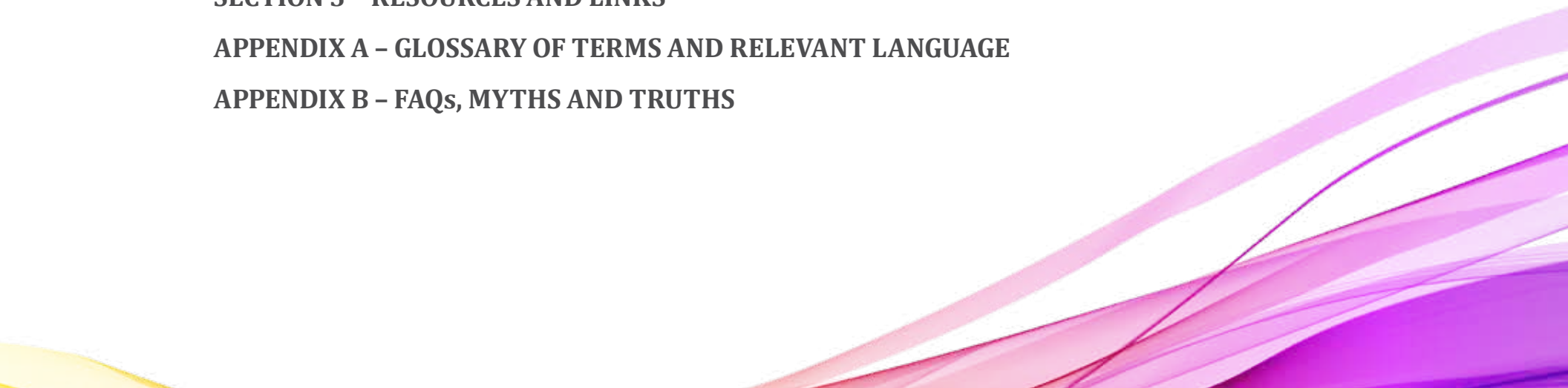
Acknowledgements

The Government of the Northwest Territories gratefully acknowledges the contribution of the following organizations and governments to the creation of this document. Their publications are widely available online for further reference.

- Egale Canada
- Rainbow Coalition of Yellowknife
- Gender Spectrum
- Nova Scotia Department of Education
- Vancouver School Board
- Alberta Department of Education

Table of Contents

Acknowledgements	2
Table of Contents.....	3
SECTION 1 – INTRODUCTION	
Introduction	4
On Gender Identity and Expression, Romantic & Sexual Orientation, and Sex.....	5
Purpose and Objectives	6
Principles.....	8
Legislation and Regulations	9
SECTION 2 – PROMISING PRACTICES	
SECTION 3 – RESOURCES AND LINKS	
APPENDIX A – GLOSSARY OF TERMS AND RELEVANT LANGUAGE	
APPENDIX B – FAQs, MYTHS AND TRUTHS	



SECTION 1 INTRODUCTION

Introduction

On Gender Identity & Expression, Romantic & Sexual Orientation, and Sex

Purpose and Objectives

Principles

Legislation & Regulations

Introduction

A quality education system is one that is safe and inclusive for all. It focuses on the students and on developing the physical, emotional, social, intellectual and spiritual aspects of their lives within a positive learning environment. Creating learning environments that are safe and inclusive requires schools to implement evidence-informed strategies that ensure equity, sense of belonging, and the full participation of every member of the school community.

These guidelines serve to inform educators in the Northwest Territories (NWT) about promising practices that will help accomplish these goals. These are tangible, realistic ideas that can be incorporated into school environments of every size, and are adaptable to different cultural atmospheres.

On Gender Identity & Expression, Romantic & Sexual Orientation, and Sex

Gender identity is the personal sense of one's own gender; a person's internal experience. Each person has the right to determine their own gender identity, and no person's stated gender is less valid or true than another. Gender expression refers to how someone acts or presents their self to the world and can/may include behavior, mannerisms, chosen name(s) and/or pronoun(s), and appearance. Gender expression is external communication and may or may not reflect one's gender identity.

In this document, the term "gender identity" will be used to refer to someone's internal sense of being. "Gender expression" and "gender identity" are often used together with the understanding that the terms may be reflected very differently for individuals and in an attempt to capture the whole experience of the individual. When

"gender" is used as a standalone term in this document it is used to reference gender identity.

Sex refers to the classification of a person based on genitalia, yet it involves a variety of factors, including: chromosomes, hormones, primary and secondary sex characteristics (e.g., genitals, breasts, etc.). It is a social construct, like gender, which is assigned at birth to identify individuals as male, female, or for those whose sex is not easily categorized as male or female, intersex.

Sexual orientation is separate from one's gender identity, gender expression or sex. Where gender identity is about one's personal sense of one's own gender, sexual orientation refers to the persons one may be sexually attracted or drawn to: persons of the opposite sex or gender; the same sex or

gender; or, to more than one sex or gender. This may differ from one's romantic orientation, which refers to the persons one may be interested in being in a relationship with.

One's gender identity, gender expression, sexual orientation, romantic orientation, and sex are to be respected and treated with dignity.

In different cultures, sex, gender, and sexuality may be more integrated or less integrated. All information contained in this document should be balanced with cultural relevance, cultural safety, and open-mindedness for people of different backgrounds.

Purpose and Objectives

The Department of Education, Culture and Employment (ECE) values diversity in its school communities and recognizes the unique challenges experienced by lesbian, gay, bisexual, trans, queer, questioning, two-spirit, as well as individuals that may be perceived as LGBTQ2S+, come from LGBTQ2S+ families and those who work in solidarity with LGBTQ2S+ communities (i.e., allies) who may be targets of discrimination and bullying behaviours.

ECE is committed to ensuring that all members of the school community feel safe and included by the school community and within the school community.

To this end, ECE requires the establishment and maintenance of safe, positive, respectful and caring learning and working environments. All members of the school community, regardless of sexual orientation, romantic orientation, gender identity, gender expression, and sex must be welcomed and included in all aspects of education and school life and treated equitably with respect and dignity.


The purpose of these guidelines is to support Education Bodies and schools to establish promising practices that foster LGBTQ2S+ equity, safety and inclusion in all NWT schools and support the success of all students.

With this guideline ever-present it is expected that Education Bodies and schools will review and revise existing policies, procedures, and guidelines and create new ones as needed. The information in this document is expected to empower all members of the school community to be allies, inform professional learning opportunities and conversations, and support the revision of existing Safe School Plans and engagement in effective and collaborative communication with all members of the school community.



The objectives of these guidelines are to:

- Improve awareness and understanding that members of the school community who identify as, or are perceived to be, LGBTQ2S+ do not have the same lived experience, but face a unique set of challenges within schools and communities. This can include discrimination and harassment by peers, family, community and school staff;
- Provide proactive strategies that increase equity, safety and inclusion for LGBTQ2S+ members of the school community, increase internal assets and external resources to support resiliency;
- Establish effective and consistent policies that explicitly name homophobic, biphobic, transphobic, and gender-based discrimination, harassment and bullying as unacceptable to ensure that complaints of such nature are taken seriously and dealt with appropriately, and;
- Define appropriate behaviours and actions to prevent discrimination and harassment through education and professional development.



ECE is committed to ensuring that all members of the school community feel safe and included by the school community and within the school community.

Principles

The following 6 principles are essential to the implementation of the promising practices for LGBTQ2S+ equity, safety and inclusion established in this document:

LGBTQ2S+ Equity, Safety and Inclusion

- 1 Self-identification is the sole measure of an individual's orientation, gender identity, gender expression and/or sex.
- 2 All members of the school community, regardless of identified or perceived sex, orientation, gender identity and gender expression:
 - Are treated with dignity and respect;
 - Have the right to be open about who they are, including expressing their orientation, gender identity or gender expression without fear of consequences;
 - Have the right to privacy and confidentiality; and,
 - Are actively included in the collaborative decision-making processes that support members of the LGBTQ2S+ community within the school.
- 3 Members of the LGBTQ2S+ community have the right to have their unique identities, families, cultures and communities included, represented, valued and respected throughout the school environment.
- 4 All members of the school community share the responsibility for supporting students and staff and building a positive environment for members of the LGBTQ2S+ community within the school.
- 5 Homophobic, biphobic, transphobic and gender-based discrimination and bullying are demeaning to all members of the school community, and will not be permitted or tolerated.
- 6 School staff must consider each student's needs and concerns. An accommodation must be student-centered, individualized and appropriately implemented.

Legislation and Regulations

In the NWT, territorial legislation, policies and regulations are in place to recognize, support and protect the rights of students, family members and school staff. Education Bodies are expected to act in accordance with all territorial legislation, policies and regulations that support and protect the rights of all members of the school community. These guidelines have been developed to provide support to Education Bodies and to ensure compliance within the legislative framework.

The following territorial legislation and policies are in place to support and ensure that all members of the school community, including those who identify as or are perceived to be LGBTQ2S+, feel safe and are treated equitably, and with respect and dignity:

Person to Person harassment related to a prohibited ground of discrimination.



File complaint with Human Rights Commission.

The NWT Human Rights Act:

The NWT Human Rights Act provides every individual in the NWT the right to freedom from harassment that is related to their race, colour, ancestry, nationality, ethnic origin, place of origin, creed, religion, age, disability, sex, sexual orientation, gender identity, gender expression, marital status, family status, family affiliation, political belief, political association, social condition or pardoned criminal conviction.

Under section 14(1) of the NWT Human Rights Act, “no person shall, on the basis of a prohibited ground of discrimination, harass any individual or class of individuals...”. Under Section 29(1), individuals who feel they have been harassed may file a complaint with the Human Rights Commission.

Student or School Staff harassment



Conversation between parties,
escalated if necessary by reporting
to School Administration

The NWT Education Act:

The NWT also recognizes other types of harassment not covered by prohibited grounds under the NWT Human Rights Act. The NWT Education Act, which under section 69(2) asserts that in addition to the duties of a teacher, a principal and an acting principal shall (k) ensure, to the best of their ability, the safety of the students and school staff.

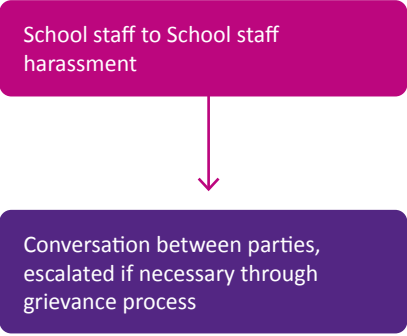
The NWT Territorial School Code of Conduct:

Under section 34(1) of the NWT Education Act the Minister shall establish, by regulation, a Territorial School Code of Conduct that promotes an equitable, safe and inclusive learning environment in the schools of the Northwest Territories. The Territorial School Code of Conduct lays out the responsibilities and rights of the school community.

The NWT Safe Schools Regulations:

Furthermore, Section 34.1 of the Education Act requires that education bodies ensure safe school plans are established in all schools, which, according to the Safe School Regulations, must include policies, guidelines, strategies and programming to eliminate bullying and promote healthy relationships. This includes the treatment of individuals based on their assigned sex at birth, sexual orientation, romantic orientation, gender identity or gender expression.

While schools and Education Bodies in the NWT create and maintain their own constructive policies on anti-bullying, it is mandated by law that these policies comply with the Safe Schools Regulations and Territorial School Code of Conduct.



School staff to School staff harassment

Conversation between parties, escalated if necessary through grievance process

The GNWT Harassment Free and Respectful Workplace Policy:

The GNWT's Harassment Free and Respectful Workplace Policy further recognizes the diversity of the NWT's public service and is committed to providing a work environment where every employee is treated with fairness, dignity and respect. The Policy applies to every employee in the GNWT, as well as volunteers and individuals or companies contracted by the GNWT. Schools that employ non-GNWT staff follow a similar workplace policy. This policy applies to workplace harassment that occurs at or away from the work place during or outside working hours within the context of the employment relationship, but does not apply to complaints from clients or the public.

**Please note: Many education bodies have their own specific policies and procedures that should be considered with regards to any concerns. School staff should reach out to their school administration to ensure they are aware of any other policy requirements that may apply to their circumstances.*

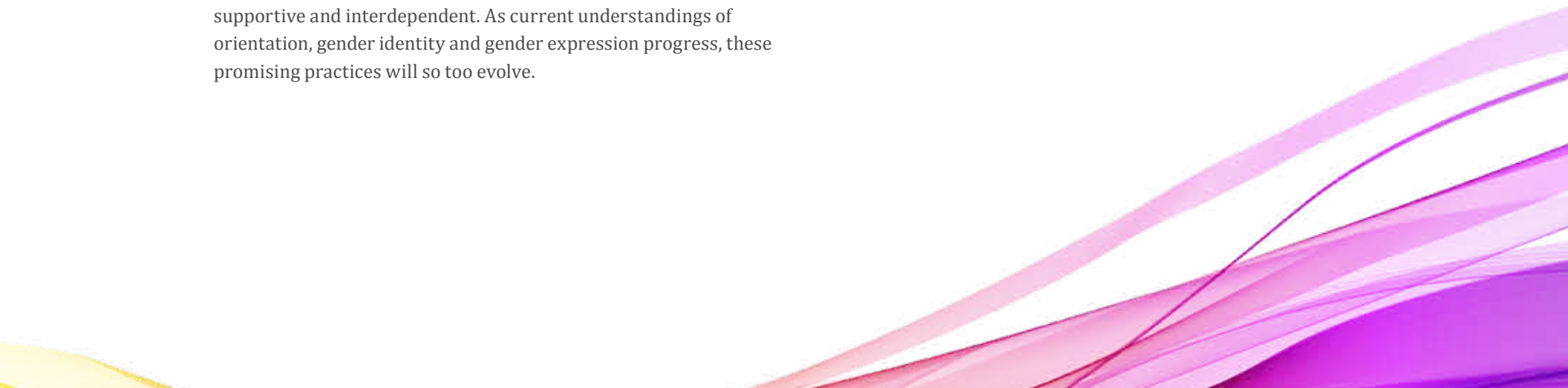
SECTION 2 PROMISING PRACTICES

Promising Practices

To foster the equity, safety and inclusion of all members of the school community in NWT schools, it is imperative that current research and promising practices are understood and observed. The following promising practices are most consistently identified in current research and educational literature as being effective and appropriate in supporting the equity, safety and inclusion of all members of school communities:

-
1. Provide supports that respond to all students' needs
 2. Respect an individual's right to self-determination
 3. Maintain school records in a way that respects privacy and confidentiality
 4. Ensure dress codes respect an individual's gender identity and gender expression
 5. Work towards eliminating gender-segregated activities
 6. Enable LGBTQ2S+ students to have full, safe and equitable participation in curricular and extra-curricular activities
 7. Provide safe access to washroom and change-room facilities
 8. Provide staff with professional learning opportunities to better understand, support and eliminate underlying prejudices towards members of LGBTQ2S+ communities
 9. Use a comprehensive, whole-school approach to promote healthy relationships, and to prevent and address bullying
 10. Ensure all students have the opportunity and ability to contribute to learning environments that respect diversity and nurture a positive sense of self
 11. Ensure all families are welcomed and supported as valued members of the school community
 12. Ensure adult members of the LGBTQ2S+ community in the school have a safe, respectful, and caring work environment
 13. Ensure that the school's Genders and Sexualities Alliance/Gay-Straight Alliance (GSA) Advisor is identifiable, visible, and known to students, staff, and school visitors
-

Each promising practice is a call-to-action which is mutually supportive and interdependent. As current understandings of orientation, gender identity and gender expression progress, these promising practices will so too evolve.



1. Provide supports that respond to all students' needs.

Within an inclusive educational environment, staff listen to a student's needs and concerns, and work together to identify and implement individualized evidence-informed supports such as, but not limited to, those outlined in these guidelines. These supports are intended to reduce or eliminate barriers and discrimination.

Evidence of this promising practice in action

- All students, including members of the LGBTQ2S+ community, feel comfortable to seek out a staff person to discuss their particular needs, interests and concerns.
- All staff are willing and able to actively listen to any student's concern, respect the student's privacy and confidentiality, and work collaboratively with others to identify and implement evidence-informed supports that will make a positive difference.
- School-based Support Teams collaborate and support school staff to meet the general needs of all students including members of the LGBTQ2S+ community.
- School-based Support Teams create plans to address the individual needs of a particular student as required, and with student consent, share them with others as appropriate.
- With student consent, all staff include information on student's name(s) and pronoun(s) (i.e., how they want to be referred to) in their substitute teacher plans, ensuring printed attendance lists contain the student's chosen name(s).
- Requests for supports are addressed on a case-by-case basis and solutions are evidence-informed and individualized to best meet the needs of the student making the request. Respecting the rights, interests and needs of the student is inherent in this process.
- If an issue arises about a student's full and equitable participation in school life, the issue is resolved in a collaborative manner that involves the student in the decision-making process.
- All staff have access to information about available community, cultural, or territorial resources and expertise. When needed, they help a student (or the student's family) identify and access relevant and appropriate resources and supports beyond the school. Students and/or families will be referred to programs that support members of the LGBTQ2S+ community.
- Staff support students in the establishment and naming of Gay-Straight Alliances/Genders and Sexualities Alliances, Queer-Straight Alliances, or similar student leadership and support groups.

2. Respect an individual's right to self-determination.

Each person has the right to choose when, how, and to whom they disclose their sexual orientation, romantic orientation, gender identity and gender expression. No member of a school community should disclose this personal information to others, including parent(s)/guardian(s), without the individual's explicit permission. Deliberately addressing a student or other member of the school community by the incorrect name(s) or pronoun(s) is a form of discrimination.

Evidence of this promising practice in action

- All members of the school community consistently use an individual's chosen name(s) (where it is different from their legal name) and pronoun(s) in ways that the individual has requested.
- The privacy of trans or gender nonconforming students is maintained, upheld, and respected.


Did you know?

Trans youth who had supportive adults (both inside and outside of their family) were four times more likely to report good or excellent mental health and were far less likely to have considered suicide. (Being Safe, Being Me: Results of the Canadian Trans Youth Health Survey, Veale et al., 2015).

3. Maintain school records in a way that respects privacy and confidentiality.

When required to use or report a student's legal name or sex designation, school staff adopt practices that avoid the disclosure of the student's gender identity or gender expression. For example, although a student may use certain pronouns at school, they may not use these same pronouns at home, and care must be taken to ensure that school documents, such as report cards, respect their privacy and safety. It is best practice to discuss this with each student and to never make assumptions.

Evidence of this promising practice in action

- When required to use or report a student's legal name, staff ensure that confidentiality is maintained and that information about the student's sexual orientation, gender identity, or gender expression is not disclosed without their consent.
 - When requested by the student, school staff ensure the consistent use of the student's chosen name(s) (if it is different from their legal name) on school-issued documents such as report cards and other school correspondence.
 - Staff ensure that students' requests for privacy and confidentiality are observed when preparing plans for substitute teachers.
 - As standard practice when creating student/staff lists, sex designations are not included beside individual names (e.g., male, female, intersex) or that gender is not a composite number for groupings (e.g., all the boys or girls in a classroom, etc.).
- 

4. Ensure dress codes respect an individual's gender identity and gender expression.

Any dress codes implemented by schools are gender-neutral and allow students the freedom to dress in a manner that they feel comfortable.

Evidence of this promising practice in action

- Schools and education bodies proactively review new or existing dress codes to ensure they are respectful and inclusive of the gender identities and gender expressions of all members of the school community.
- Gender-based rules are not used in dress codes.
- When cultural or traditional dress is appropriate, the student has the option to dress in the way they feel most comfortable.

Did you know?

The two school spaces most commonly experienced as unsafe by LGBTQ2S+ youth and youth with LGBTQ2S+ parents/guardians are places that are almost invariably gender-segregated: Physical Education change rooms and washrooms. Almost half (49%) of LGBTQ2S+ youth and more than two-fifths (42%) of youth with LGBTQ2S+ parents/guardians identified their Physical Education change rooms as being unsafe; almost a third (30%) of non- LGBTQ2S+ youth agreed.

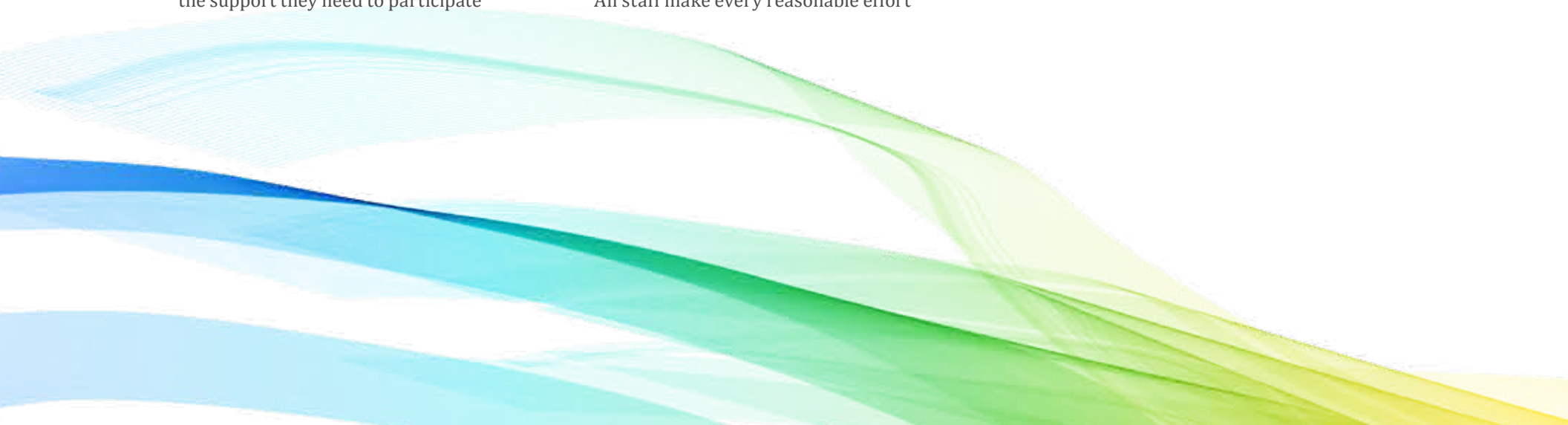
More than two-fifths (43%) of LGBTQ2S+ students and almost two-fifths (41%) of youth with LGBTQ2S+ parents/guardians identified their school washrooms as being unsafe; more than a quarter (28%) of non- LGBTQ2S+ students agreed.

**Data from Egale Canada Study "Every Class In Every School: Final Report on the First National Climate Survey on Homophobia, Biphobia, and Transphobia in Canadian Schools" (May 2011)*

5. Work towards eliminating gender-segregated activities.

Schools reduce the practice of segregating students by gender. In situations where students are segregated by gender; students are supported to participate safely in accordance with their gender identity and gender expression, or in whatever way maximizes their comfort and safety.

Evidence of this promising practice in action

- Schools eliminate or reduce the practice of segregating students by perceived gender. For example, courses or activities are not structured based on gender-specific roles such as “boys” versus “girls” in academic or athletic competitions.
 - In situations where students are segregated by genders, students have the support they need to participate safely in accordance with their gender identity and gender expression, or wherever they feel the most comfortable.
 - In cultural activities that traditionally have been segregated, staff and students work together to create a plan that allows for the safe and comfortable participation of all students.
 - Activities that involve the need for overnight or housing accommodations are addressed on a case-by-case basis. All staff make every reasonable effort to provide accommodations that are inclusive, respectful and acceptable for all students. These accommodations are barrier free (do not impose any additional expense or burden on the student).
 - Spaces for meaningful and safe connections between people of shared genders are created for safety, mutual support, and comfort, with the goal of inclusion.
- 

6. Enable LGBTQ2S+ students to have full, equitable and safe participation in curricular and extra-curricular activities.

School staff ensure that all students may participate in curricular and extra-curricular activities – including traditional activities, physical education, art, dance, and drama classes, and competitive and recreational teams – in ways that are comfortable and in accordance with their gender identity and gender expression. All students have the right to participate in school sponsored activities. It is the responsibility of the staff to ensure that the proposed activities are designed to be inclusive.

Evidence of this promising practice in action

- All students participate in all curricula in ways that are comfortable and supportive of their diverse orientations, gender identities and gender expressions.
- Resources are selected that represent inclusive language and diversity.
- Work towards eliminating classes organized by genders. If a human sexuality class is organized by genders, students are able to choose which class they participate in.
- All human sexuality classes, for all students, include LGBTQ2S+ content.
- In cultural activities that traditionally have been segregated by gender, staff, Elders, Indigenous leaders and students

work together to create a plan that allows for the safe and comfortable participation of all students.

- All students participate in extra-curricular activities in ways that are comfortable and supportive of their diverse sexual orientations, romantic orientations, gender identities, gender expressions and sex. For example, if sports teams are divided by genders, students are given the opportunity to participate on the team that best reflects their gender, and staff – with the student's permission – advocate with sporting organizations for this to be respected in tournaments, etc.
- Students are provided options for independent study to earn physical education credits, if it provides

an appropriate solution for their individual needs.

- Schools and education bodies have policies and procedures that ensure school curricular and extra-curricular activities are equitable, safe and inclusive for all students.
- Schools and education bodies identify and employ strategies for building the capacity of staff, coaches, and community volunteers in ensuring extra-curricular activities that are inclusive, respectful and safe for all students.

7. Provide safe access to washroom and change-room facilities.

All members of the school community have safe access to washroom and change-room facilities and or protocols that they are comfortable using and that correspond to their gender. This applies during school time and during school-related activities on and off school property (such as field trips and athletic events).

Evidence of this promising practice in action

- Students are able to access washrooms and change-room facilities that are aligned with their gender identity. This may include a choice of options such as a private area within the common change-room area
- Strategies are in place to ensure that clear behaviour expectations are communicated and understood by all students and members of the school community, and that washrooms and change-rooms are adequately supervised.
- Schools provide an easily accessible, non-gendered, single-stall washroom for use by any member of the school community who desires increased privacy, regardless of the reason. When possible, schools have more than one non-gendered washroom for use.
- The use of a non-gendered, single-stall washroom is a matter of choice for any member of the school community, and not a compulsory requirement for any person.
- A student who objects to sharing a washroom or change-room with a student who is trans or gender nonconforming is offered an alternative facility. (This scenario also applies when a parent or other caregiver objects to shared washroom or change-room facilities on behalf of their child.)
- When travelling for competitions or events at another school, staff ensure there are appropriate accommodations for all students for changing, showering, or washroom facilities. When staff make these arrangements, they take care to maintain the student's confidentiality.

8. Provide professional learning opportunities to better understand, support, and eliminate underlying prejudices towards members of LGBTQ2S+ communities.

All members of the school community are educated in LGBTQ2S+ equity, safety and inclusion, including strategies for eliminating homophobic, biphobic, and transphobic bullying, using gender-inclusive language, and addressing gender and identity based stereotypes.

Evidence of this promising practice in action

- Schools and education bodies provide targeted professional learning that uses evidence-informed research and promising practices that reflect actual knowledge and lived experience of members of LGBTQ2S+ communities, and creates mutual respect and understanding.
- Teachers identify and use learning resources and instructional approaches that are evidence-informed, inclusive and respectful of LGBTQ2S+ communities that are embedded in everyday teaching.
- Staff work collaboratively to identify and address discriminatory attitudes and behaviours that create barriers to members of LGBTQ2S+ communities.
- Schools and education bodies develop and maintain mutually supportive relationships with LGBTQ2S+ organizations who can share resources and expertise that foster diversity and nurture a sense of belonging and a positive sense of self.
- School community members (such as parents, guardians, volunteers) have access to learning supports to build their knowledge about LGBTQ2S+ issues.

9. Use a comprehensive, whole-school approach to promote healthy relationships and to prevent and address all forms of bullying.

Healthy relationships are a focus for the entire school community. According to the Territorial School Code of Conduct, incidents of bullying are not tolerated or taken lightly, and every adult within the school community will take the time to assist in an appropriate time frame.

Evidence of this promising practice in action

- Staff use comprehensive, whole-school approaches to foster social-emotional learning and healthy relationships to reduce the likelihood of bullying behaviour, including homophobic, biphobic, and transphobic bullying.
- Building healthy relationships is accomplished by focussing on helping students learn how to resolve conflicts and issues peacefully, develop empathy, and contribute to safe, respectful and caring learning environments that foster a positive sense of self.
- All adult members of the school community, including parents/guardians and families, understand and support the Territorial School Code of Conduct, as well as any local policies and procedures evolving from it.
- The comprehensive, whole-school approach includes relationships on sport and intramural teams. All team captains take the You Can Play Captain's Challenge to lead their teams in respectful and inclusive sports play.
- Schools have clear reporting procedures for bullying behaviours and an anonymous reporting mechanism to ensure all members of the school community feel safe reporting incidents of bullying.
- All complaints of discriminatory and bullying language and behaviours are taken seriously, documented and dealt with in a timely and effective manner.
- Support is provided to all students impacted by bullying behaviours and to those who engage in bullying behaviours.
- All staff lead by example.

10. Ensure all students have the opportunity and ability to contribute to learning environments that respect diversity and nurture a positive sense of self.

Students are empowered with knowledge and influence within their school to lead change and are supported in the formation and activities of student-led groups such as Genders and Sexualities Alliances/ Gay-Straight Alliances. (GSAs)

Evidence of this promising practice in action

- Every school has a clearly designated GSA Advisor; a staff member who is responsible for supporting students who wish to participate in, or organize, a GSA. If there is no staff member capable of taking on this role, the principal will approach the community to give a community member the opportunity to nominate themselves to oversee the facilitation of the GSA.
- Students are supported to establish a student organization or lead an activity to promote a respectful and safe learning environment that promotes diversity. Supports for these groups are equitable in access to space, time, resources and staff support.
- Students have a clear understanding of the behavioural expectations in their school and demonstrate accountability for their own behaviour.
- Students treat all members of the school community with respect, compassion and kindness.
- Students understand the definition of bullying behaviour.
- Students refrain from bullying behaviour and the use of derogatory or discriminatory language, both in school, outside of school and online.
- Students do not watch, participate in, encourage, or act as bystanders to the bullying behaviour of others. Students demonstrate ally behaviour.
- Students report bullying behaviour they see or experience (including online bullying) to an adult in the school and/or through the school's anonymous reporting mechanism.
- All members of the school community understand what it means to be an ally, and demonstrate and/or model working in solidarity with marginalized groups.
- The school community provides multiple and meaningful ways for students to learn more about the LGBTQ2S+ community through activities such as peer mentoring, service learning and volunteering.

11. Ensure all families are welcomed and supported as valued members of the school community.

The school is a safe and welcoming space for parents, guardians, caregivers and other family members who are part of the LGBTQ2S+ community, ensuring that non-gendered, inclusive language is used in all oral and written school communication, and that all families are promoted in schools.

Evidence of this promising practice in action

- School documentation, websites, letters, and other forms of communication use inclusive language (e.g., parent(s)/guardian(s), caregiver(s), families, partners, “student” or “their” instead of Mr., Ms., Mrs., mother, father, him, her, etc.). All staff use inclusive language to ensure all family types feel welcome.
- Staff use appropriate language to acknowledge and communicate with families. If unsure of the appropriate language, they ask the family for guidance (e.g., how children refer to their parent(s)/guardian(s) and/or their partners).
- When organizing school-supported student, family or community events, staff ensure activities are designed in ways that are inclusive and respectful of LGBTQ2S+ communities.
- According to established confidentiality policies, all staff respect the privacy and confidentiality of all students, parents/guardians, and families. Discussions are held in appropriate professional settings.
- Staff and administration are comfortable addressing questions about different opinions regarding LGBTQ2S+ issues, and do so respectfully while supporting students of the LGBTQ2S+ communities. Staff are willing to attend professional learning opportunities when offered, do research and follow up when required.
- Family members are able to access washrooms that are congruent with their gender identity and/or schools have a non-gendered washroom available if people desire more privacy.

12. Ensure adult members of the LGBTQ2S+ community in the school have a safe, respectful, and caring work environment.

The school community is an inclusive community that respects, supports and values diversity, and fosters a sense of safety and belonging. According to the Territorial School Code of Conduct, the school administration will ensure timely, sensitive and effective responses to incidents of harassment, bullying or discrimination towards staff.

Evidence of this promising practice in action

- Staff are supported to serve as a GSA Advisor, or advisor for any other voluntary student organization intended to promote a safe and respectful learning environment that respects diversity.
- School and education body leaders' support and value diversity of all staff.
- Staff who are members of the LGBTQ2S+ community feel comfortable to seek out other colleagues and superiors to discuss their particular needs and concerns at the school.
- Staff work collaboratively to identify and implement evidence-informed supports that will make a positive difference for their colleagues that identify as members of the LGBTQ2S+ community.
- Staff respect the privacy of individual staff members and ensure confidentiality as it relates to any staff who identify as members of the LGBTQ2S+ community.
- Requests for support are addressed on a case-by-case basis and solutions are individualized to best meet the needs of the staff member making the request.
- School and education body leaders communicate and model expectations. All members of the school community are expected to interact in respectful ways and discriminatory language or harassing behaviour is not acceptable.
- Incidents of harassment, bullying or discrimination of school staff who identify as or are perceived to be members of the LGBTQ2S+ community by any member of the school community are taken seriously, documented and addressed in a timely and effective manner.
- Staff consistently use gender-inclusive language (e.g., partner, spouse) and plan inclusive school events that involve all families and staff.
- Staff have appropriate conversations related to LGBTQ2S+ issues, as well as other diversity, equity and human rights issues that are discussed in the workplace.

13. Ensure that the school's GSA Advisor is identifiable, visible, and known to students, staff, and school visitors.

The GSA Advisor is the school staff member who is responsible for supporting students who wish to participate in, or organize, a GSA in their school. The presence and purpose of the GSA Advisor is well-advertised within the school community. Advertising the GSA Advisor's role occurs along with other roles in the school.

Evidence of this promising practice in action

- Students and staff are aware of the school's GSA Advisor and have the opportunity to approach this person if desired.
- There are visible identifiers of LGBTQ2S+ affirmation and celebration in the school, such as rainbow flags, posters or stickers.
- Students are aware of their right to approach the GSA Advisor to address personal concerns, or to initiate or participate in a GSA.
- Members of the school community use the GSA Advisor as a knowledgeable and trusted resource within the school community.

Did you know?

Students from schools with GSAs are much more likely to agree that their school communities are supportive of LGBTQ2S+ people, are much more likely to be open with some or all of their peers about their sexual orientation and/or gender identity and are more likely to see their school climate as becoming less homophobic.

**Data from Egale Canada Study "Every Class In Every School: Final Report on the First National Climate Survey on Homophobia, Biphobia, and Transphobia in Canadian Schools" (May 2011)*

SECTION 3 - RESOURCES

Resources to support the implementation of these Guidelines

Resource Provider	Contact	Contact Information
Schools	Administration Gay-Straight Alliances (GSAs) Guidance Counsellors Child and Youth Care Counsellors Teachers	According to individual schools
Education Bodies	Superintendent Regional Inclusive Schooling Coordinator	According to individual authority
Department of Education, Culture and Employment	Inclusive Schooling and Student Support Coordinator Health and Wellness Coordinator Mental Health Coordinator	867-767-9342
Community	NWT Human Rights Commission Rainbow Coalition of Yellowknife	867-669-5575 867-444-RCYK (7295)

The following documents are available through these links on the ECE website:

- Gender-Inclusive School Dress Code: https://www.ece.gov.nt.ca/sites/ece/files/resources/resource_sample_gender_inclusive_dress_code.pdf
- Why Your School Should Have a Gay-Straight Alliance (GSA): https://www.ece.gov.nt.ca/sites/ece/files/resources/resource_why_should_your_school_have_a_gsa.pdf
- Gender Support Plan Example: https://www.ece.gov.nt.ca/sites/ece/files/resources/resource_gender_support_plan_example.pdf
- An Appendix of FAQs as well as Myths and Truth is included in the document.
- There is a link provided to the Safe School Regulations which includes the Territorial School Code of Conduct, a useful resource to display prominently throughout NWT Schools.

Teacher Learning: General

- Rainbow Coalition of Yellowknife: An outreach organization based in Yellowknife that works to support 2SLGBTQQIPAA+ youth in the Northwest Territories. The Rainbow Coalition also develops resources and provides training across the NWT. <https://www.rainbowcoalitionyk.org/resources/>
- The Canadian Centre for Gender and Sexual Diversity (CCGSD) provides resources and services to uplift gender and sexual minorities: <http://ccgsd-ccdgs.org/> (also available in French).
- GSA Advisor Handbook from the CCGSD: <http://ccgsd-ccdgs.org/wp-content/uploads/2018/03/AdvisorsHandbook-optimized.pdf>
- New Brunswick LGBTQ Inclusive Education Resource: <https://www2.gnb.ca/content/dam/gnb/Departments/ed/pdf/K12/LGBTQ/2-GSAGuideForMiddleAndHighSchools.pdf> (also available in French).
- BC SOGI (Sexual Orientation and Gender Identity) 123: Professional development videos and presentations for educators: <https://bc.sogieducation.org/pro-d/> (some resources in French).
- Pride Education Network, BC resources for educators to support inclusive, respectful environments for all students, staff and families: <http://pridenet.ca/staff-resources>
- The Every Teacher Project (Egale Canada) investigated the perspectives of Canadian educators on the safety and inclusion of LGBTQ students and topics in schools- read the final report: <https://egale.ca/every-teacher-project/>
- Two Spirits, One Voice is a community-based initiative that seeks to bolster supports for persons that identify both as LGBTQ and Indigenous –Two Spirit people: <https://egale.ca/portfolio/two-spirits-one-voice/>
- The My GSA.ca Equity and Inclusive Education Resource Kit (Egale Canada) was designed to provide everyone in the school with information required to support the creation and maintenance of safer and more inclusive school communities: <https://egale.ca/portfolio/mygsa/>
- GLSEN Safe Space Kit and Resources : <https://www.glsen.org/safespace>
- Pronouns : <https://www.glsen.org/article/pronouns-resource-educators>
- Gender Spectrum: Provides an array of education focused resources designed to help support gender inclusive schools and classrooms welcoming all children and teens. <https://www.genderspectrum.org/resources/education-2/>
- Trans 101 Series (Chase Ross): <https://www.youtube.com/watch?v=VRH0pwENbx8&list=PL7SgbxvTR7N5-jYeT2Coj99qnRQTIArKP>
- You Can Play Captain's Challenge: <https://action.youcanplayproject.org/page/s/take-the-captains-challenge>

Legislation and Policies

- Northwest Territories. 2016. *Human Rights Act*. <https://www.justice.gov.nt.ca/en/files/legislation/human-rights/human-rights.a.pdf>
- Northwest Territories. 2017. *Education Act*. <https://www.justice.gov.nt.ca/en/files/legislation/education/education.a.pdf>
- Northwest Territories. 2016. *Education Act Safe Schools Regulations*. (Includes Territorial School Code of Conduct) <https://www.justice.gov.nt.ca/en/files/legislation/education/education.r55.pdf?t1564506049671>

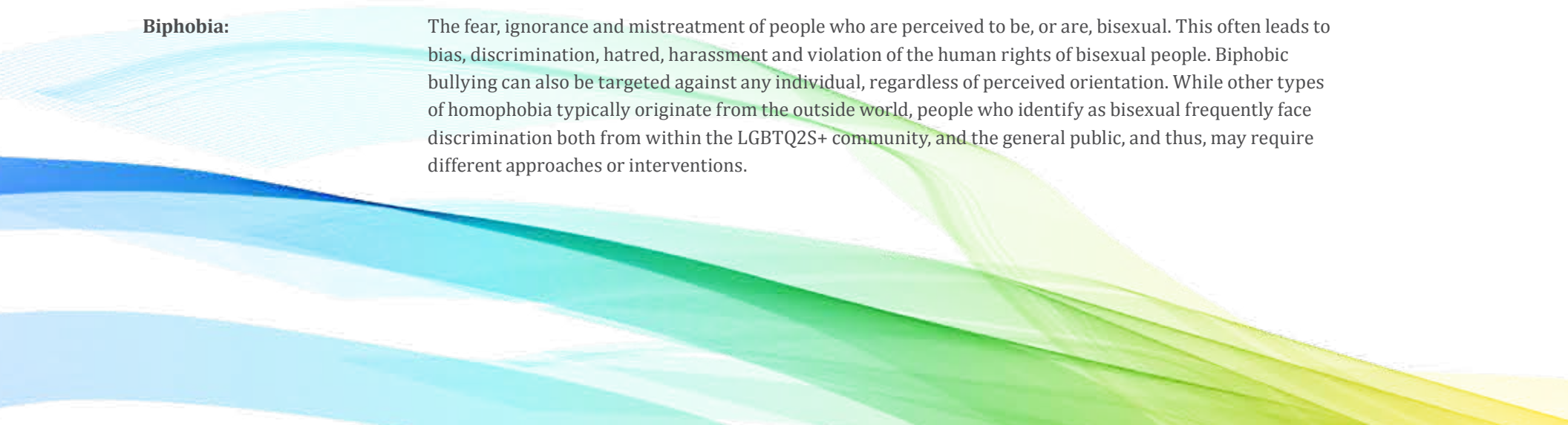
Support Information

- Rainbow Coalition of Yellowknife: An outreach organization based in Yellowknife that works to support 2SLGBTQQIPAA+ youth in the Northwest Territories. The Rainbow Coalition also develops resources and provides training across the NWT. <http://www.rainbowcoalitionyk.org/>
- Fostering Open eXpression among Youth (FOXY): A revolutionary program for young women and gender diverse youth that promotes mental and sexual health and healthy relationships across the North. <https://arcticfoxy.com/>
- Strength, Masculinities, and Sexual Health (SMASH): A program for young men and gender diverse youth that educates about sexual and mental health and helps youth define their own masculinity. <https://arcticmash.ca/>

APPENDIX A

GLOSSARY OF TERMS AND RELEVANT LANGUAGE

Ally/Allies:	A person who supports equal civil rights, gender equality, LGBTQ2S+ social movements, and challenges homophobia, biphobia and transphobia. Allies can be both within and beyond the community (e.g., gay cisgender men can work in solidarity with trans men).
Asexual:	A person who does not typically experience physical attraction. People who are asexual can be any gender.
Aromantic:	Aromantic is a term for a person who experiences little or no romantic attraction to others. People identifying as aromantic can also experience romance in a way otherwise disconnected from normative societal expectations (for example due to feeling repulsed by romance, or being uninterested in romantic relationships).
Biphobia:	The fear, ignorance and mistreatment of people who are perceived to be, or are, bisexual. This often leads to bias, discrimination, hatred, harassment and violation of the human rights of bisexual people. Biphobic bullying can also be targeted against any individual, regardless of perceived orientation. While other types of homophobia typically originate from the outside world, people who identify as bisexual frequently face discrimination both from within the LGBTQ2S+ community, and the general public, and thus, may require different approaches or interventions.

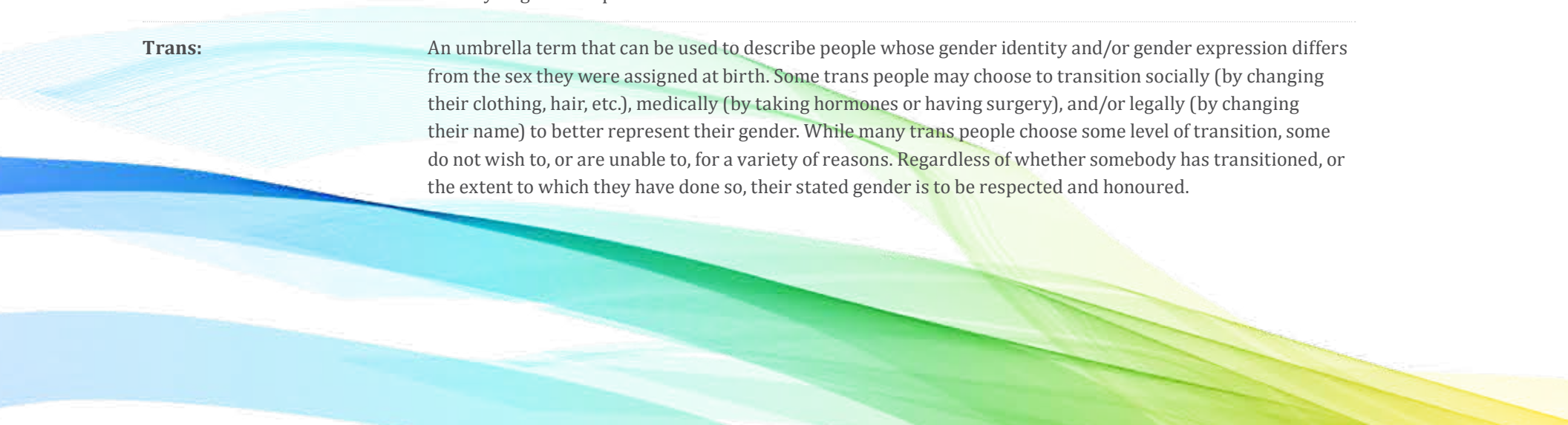



Bisexual:	Bisexual is a term that may describe a person who is attracted to two or more genders – typically, their own, and at least one other gender.
Cisgender:	A term referring to a person whose gender or gender expression is consistent with the sex they were assigned at birth.
Deadname:	a term that refers to when someone incorrectly uses a person’s given name rather than their chosen name. This may happen frequently to people who are socially transitioning and no longer go by their legal name.
Gay:	A person who is attracted to someone of the same gender as themselves. This word can be applied to all genders.
Gender:	Gender refers to a person’s internal sense of being a boy/man, a girl/woman, both, neither, or somewhere in between. It is an internal experience that cannot be determined by others. Gender is a socially constructed concept of identity based on roles, behaviours, activities, and appearance such as masculine, feminine, androgynous, etc. It is not the same thing as a person’s sex assigned at birth, and may not be consistent with how they are perceived by others. Gender and gender identity can be used interchangeably.
Gender dysphoria:	A persistent feeling of dissonance between one’s gender and anatomical or sex assigned at birth. Gender dysphoria often causes significant stress and discomfort. It is important to note that not all trans folks experience gender dysphoria.
Gender expression:	Gender expression refers to how someone presents their gender to the people around them (for example, through clothes, hairstyle, mannerisms, etc.). Gender nonconforming people have a gender expression that differs from what is expected for their “perceived” gender or sex assigned at birth.
Gender fluidity:	The fluctuation of a person’s gender identity and/or expression between more than one gender or between having a gender and not having one. This fluctuation can occur daily or between different contexts. Every person’s experience is unique.

Gender identity:	A person's internal sense of being boy/man, girl/woman, both, neither, or somewhere in between. This is not the same thing as a person's sex assigned at birth, and may not be consistent with how they are perceived by others. Gender identity refers to internal experience that cannot be determined by others. Gender identity and gender can be used interchangeably.
Gender nonconforming:	A term that often refers to people who express gender in ways that differ from societal expectations of the sex and gender assigned to them at birth. The term genderqueer can also be used as a self-selected identifier by some individuals. For the purposes of this, and other accompanying documents, gender nonconforming people are included under the term trans.
GSA:	A term used for Genders and Sexualities Alliances and/or Gay-Straight Alliances. These are student-run organizations, typically in a high school or middle school, which provide a safe place for LGBTQ2S+ students (or those who are perceived as such), and sometimes allies, to meet, socialize, explore hobbies/interests, support each other, and talk about issues that are meaningful to them. GSAs can also function as educational and/or activist clubs.
Homophobia:	The fear, ignorance and mistreatment of people who are, or are perceived to be, lesbian or gay. This often leads to bias, discrimination, hatred, harassment and violation of the human rights of lesbian or gay people. Homophobic bullying can also be targeted against any individual, regardless of perceived orientation.
Intersex:	A general term used for a variety of conditions in which a person is born with reproductive or sexual anatomy that does not seem to fit the typical definitions of female or male.
Lesbian:	A woman who is attracted to other women.

LGBTQ2S+:	An acronym that in this case stands for lesbian, gay, bisexual, trans, queer/questioning, and Two-Spirit. The plus sign (+) indicates the inclusion of all orientations, gender identities and gender expressions. There is a wide range of other terms often included in this acronym such as asexual, intersex and pansexual, and this acronym tends to vary depending on the source.
Microaggression:	A term used for brief and commonplace daily verbal, behavioural, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative prejudicial slights and insults toward any minority or “othered” group.
Non-Binary:	A term for an individual who’s gender is outside of society’s normative gender binary and who do not identify as exclusively male or female.
Orientation:	Orientation refers to a person’s physical or romantic attraction towards a particular gender. Orientations can include gay, lesbian, heterosexual, bisexual, asexual, pansexual, etc. It is important to remember that orientation and gender are separate.
Pansexual:	Individuals who experience attraction to others regardless of their gender.
Perceived as LGBTQ2S+:	Someone who is treated as, or believed to be, LGBTQ2S+, regardless of whether they are or not.
Pronouns:	The words one uses to refer to themselves and how they would like others to refer to them (e.g. he/him/his; she/her/hers; they/them/theirs; xe, xem, xyr; Mrs. Ms. Mr. Mx, etc.). An individual may use a variety of pronouns (e.g. she/her/hers and they/them/there, etc.) or are okay with being referred to using any pronoun.

Queer:	An umbrella term (often used in place of the LGBTQ2S+ acronym) used to describe individuals who identify as being part of sexual and gender diverse communities (e.g. lesbian, gay, transgender). This term was historically used as a slur but has been reclaimed by LGBTQ2S+ communities. The use of this term must be self-selected and is not to be used as an identifier; an individual can self-identify as queer, but people shouldn't label others as queer because that can be derogatory and offensive.
Questioning:	Is a process of exploring one's gender identity, gender expression, sexual orientation or sexual identity. Some people may be unsure, still exploring or have concerns about applying social labels to themselves for various reasons.
School community:	The school community consists of all individuals who are connected to and invested in the school including students, parent(s)/guardian(s), Elders, school staff, community leaders and community members.
Sex:	A classification based on genitalia, yet it involves a variety of factors, including: chromosomes, hormones, primary and secondary sex characteristics (e.g., genitals, breasts, etc.). It is a social construction, like gender, which is assigned at birth to identify individuals as male or female. For those whose sex is not easily categorized as male or female see Intersex.
Self-determination:	An individual's self-determination is the sole measure of their sexual orientation, romantic orientation, gender identity or gender expression.
Trans:	An umbrella term that can be used to describe people whose gender identity and/or gender expression differs from the sex they were assigned at birth. Some trans people may choose to transition socially (by changing their clothing, hair, etc.), medically (by taking hormones or having surgery), and/or legally (by changing their name) to better represent their gender. While many trans people choose some level of transition, some do not wish to, or are unable to, for a variety of reasons. Regardless of whether somebody has transitioned, or the extent to which they have done so, their stated gender is to be respected and honoured.



- Transphobia:** Fear, ignorance and mistreatment of people who are, or are perceived to be, trans or gender nonconforming. This often leads to bias, discrimination, hatred, harassment and violation of the human rights of transgender or gender nonconforming people. Transphobic bullying can also be targeted against any individual, regardless of perceived gender expression.
-
- Transition:** A term most commonly used to refer to someone transitioning from the gender matching the sex they were assigned at birth to another gender. Transition often consists of a change in style of dress and selection of a new name and pronoun(s). Transition may, but does not always, include legally documenting the name change and/or a medical component such as hormone replacement therapy and/or surgery. There is no “correct” way to transition, as transitioning is unique to every person and is often an ongoing process.
-
- Two-Spirit:** An Indigenous term that can refer to an orientation that is attracted to more than one gender (see: bisexual, pansexual) or it can refer to the embodiment of both masculine and feminine spirits, and some individuals may even use this term to refer to both their orientation and their gender, all while incorporating a spiritual element. It is a standalone identity, not an Indigenous term for gay or lesbian and not all Indigenous people who are queer and/or trans identify as two-spirit. It should also be noted that not all Indigenous cultures have two-spirit people in their culture or traditions.
- 

APPENDIX B

FAQS, MYTHS AND TRUTHS

Effective communication is critical to ensure that facts are being shared, and myths are debunked. Inaccurate information about the LGBTQ2S+ community is prevalent because of the contentious place they have historically held in society. This section contains some frequently asked questions as well as some commonly held myths and attempts to address them. You are encouraged to explore and research this topic further; the list of resources that have been provided with the Guidelines is a good place to start.

Frequently Asked Questions

What is LGBTQ2S+? What does the acronym stand for? What is the + all about?

LGBTQ2S+ is an acronym that includes: lesbian, gay, bisexual, transsexual, transgender, queer, questioning, two-spirit and plus (+). The + is an inclusive and intentional way to represent different identities and experiences. It would be impossible to include all the ways people identify using an acronym, the + stands in as an inclusive term. It is important to note that this acronym has variations depending on the socio-political context it applies to geographically.

What's the difference between gender identity, gender expression and orientation?

Gender identity is who we know ourselves to be, in terms of the society in which we live. Gender expression refers to how someone acts or presents their self to the world; it may or may not reflect one's gender identity. Our orientation is who we are attracted to, either romantically, sexually, both or neither.

Who can I tell if I think (or know) that somebody is gay or trans? Who else has a right to know?

You can tell no one. If a person has come out to you about their gender identity or sexual orientation, they have shared something very personal with you. If you have been entrusted with this information, keep it to yourself. If you accidentally came across this information, assume that the person did not want you to know about it, and their privacy should be respected.

An individual's information should never be shared without their explicit consent.

I'm all for people having rights, but this is just so complicated. Why can't it just be gay-straight again?

It has never been simple. Gay-straight labeling left many marginalized individuals without the language or space to be their authentic selves. As the understandings of gender, sexuality, bodies, and the whole-person inside of them evolve, we're learning that these things are complex.

There is a lot to learn, but the most important thing is to treat each person with respect and dignity– by using the names, pronouns, genders, and other identifiers that they choose. Each person is an expert on themselves, and listening to them is the best way to know what to say!

By showing all people acceptance and respect, we make our society more welcoming to everybody.

What if other students have privacy concerns about using a restroom with a trans student?

Any student who feels uncomfortable sharing facilities should be allowed to use another, more private facility (like a bathroom in an office), but a trans student should never be forced to use alternate facilities to make other students comfortable.

The conversation surrounding this situation should encourage respect and acceptance with reference to the NWT Territorial School Code of Conduct.

What about trans students and overnight field trips or activities?

Making sure that a trans student has access to both the educational opportunity, and the social engagement of field trips can require advance planning for things like room assignments, chaperones, and showers.

Schools have the responsibility to set clear expectations about boundaries and privacy during overnight activities. Being explicit about these expectations is important and will improve all students' experiences.

A trans student's comfort level will largely dictate the manner in which related issues are addressed. If students are to be separated by gender, the trans student should be allowed to room with peers based on their gender identity, although they may prefer a solo room or another alternative. The school should try to honour these requests and make adjustments to prevent the student from being marginalized because of alternative arrangements, while ensuring the privacy of the student.

If showering facilities are communal, the school should identify any single-stall or private shower facilities that may be used by students. Recognizing that a number of students will likely prefer privacy when showering, the school may consider creating a schedule to accommodate everybody's wishes for privacy.

What if a student who identifies as male claims to be female just so he can enter the girls' facilities?

Restrooms and locker rooms can be a source of discomfort for everybody – not just trans students, and it's incumbent on the school officials to ensure that all students feel safe and are safe in all school facilities. In schools that allow students access to the facilities that accord with their gender identities, this has not been an issue. If male students do enter female facilities without permission, such behavioural issues are unrelated to, and likely existed long before schools gave trans students access to the facilities that match their gender identities. More importantly, giving trans students access to restrooms and locker rooms based on gender identity does not hinder the school's ability to address and prevent inappropriate student behaviour.

What if a trans or gay student doesn't have the support of their family?

Unfortunately, LGBTQ2S+ youth experience high levels of family rejection. Schools can play a critical role in alleviating the psychological distress caused by family rejection. The school environment may be the only place where a trans or queer student feels safe being themselves.

In these situations, a trans student may seek out an administrator or educator for support. The educator should always ask whether the student's family is accepting to avoid inadvertently putting the student at risk when discussing the student with parent(s) and guardian(s). School staff should provide a safe supportive environment for the student, regardless of the student's home situation.

How do I respond to negative reactions about a student who is transitioning or coming out?

The student is undergoing a very transformative personal experience. Educators and allies should be prepared for genuine, innocent confusion, hostility, fear, or resistance to change. Ensuring that the student's safety and privacy are respected is a priority. In the NWT, territorial legislation, policies and regulations are in place to recognize, support and protect the rights of students, family members and school staff. Referring to The NWT Territorial School Code of Conduct and reminding others of the Safe and Caring School Regulations while respecting the needs of all will reinforce the school's commitment to supporting members of the LGBTQ2S+ community and demonstrate ally behavior.

LGBTQ2S+ Myths and Truths

MYTH: If a young person is talking about being trans, it's probably just a phase.

Truth: All members of the school community share the responsibility for supporting students and staff and building a positive environment for LGBTQ2S+ members of the school community.

Adolescence is by definition a time of identity exploration. Providing a safe and inclusive space for young people to be who they are and to grow into whom they will become is a responsibility.

Research demonstrates that most children know their gender identity between the ages of 2-5 years old. Some children may know very early that the gender they were assigned at birth is not correct for them; some may not know this until much later in life. And for some people, their gender identity, gender expression, romantic orientation, and sexual orientation may change several times over the course of their lives.

Many people, at some point, experience some type of fluctuation in their gender and/or sexuality. Even if an orientation or component of identity doesn't end up being permanent, it should be validated and honoured as real.

MYTH: Bisexuality isn't real – a person is either gay or they're not.

Truth: Bisexuality is an identity that may describe a person who is attracted to two or more genders – typically, their own, and at least one other gender. Many bisexual people experience discrimination both from the general public and from within the LGBTQ2S+ community.

MYTH: Trans girls shouldn't be allowed on girls' sports teams.

Truth: It is critical that schools allow trans students to participate where they feel comfortable, and assist the teams and coaches in making accommodations to allow full participation.

MYTH: Coming out only happens once.

Truth: When LGBTQ2S+ folks come out, or disclose their sex, orientation, or gender identity, they frequently have to do so multiple times, and perhaps in multiple ways. A person may have to independently come out to their family, friends, co-workers, religious community, and others, and may anticipate differing levels of acceptance and understanding when doing so.

Because of the nature of coming out, it is critical to allow a person to do so themselves, without interference or pressure. People need to be treated with dignity and respect and have the right to privacy and confidentiality.

MYTH: If people want to transition, they need surgery and a legal name change before it's official.

Truth: There are many factors that affect whether a person transitions and many ways in which a person can transition: socially, medically, and/or legally. Trans folk do not have to transition in any of these domains. Surgery and legal name change may be part of one's transition, however, neither are mandatory, nor is there a requirement for an official label when creating safe spaces.

A person may be facing resistance from family or friends; religious or cultural pressures; physical threats; financial difficulties; challenges navigating a bureaucratic system; or a belief that what they want is not possible. In creating safer spaces for trans, non-binary, gender nonconforming and gender diverse people, educators need to respect the path that each student is taking, and the fact that no two paths will look the same.

MYTH: There aren't very many LGBTQ2S+ people in the Northwest Territories, and if there were at my school, I'd know.

Truth: There are LGBTQ2S+ folks everywhere – in every community, province, territory, and country. These people may choose to stay silent about their sex, orientation, and/or gender identity because of a fear of discrimination or violence. Even if you think there are no students who identify as LGBTQ2S+ in your school, statistically, there are at least a few.

When LGBTQ2S+ topics are taught in schools, students are frequently exposed for the first time to these concepts, and may learn only then that they identify with some of these words and ideas and that they are not alone. Approaching these conversations with respect, openness, acceptance and affirmation can establish a relationship of trust, as well as set the stage for all students to treat each other with kindness and respect.

By creating safe and respectful spaces within the school community everyone benefits, including members of LGBTQ2S+ communities.

MYTH: Members of LGBTQ2S+ communities can be cured or fixed with special therapies and interventions.

Truth: There is nothing wrong with members of LGBTQ2S+ communities. Much of the misinformation and justification for the mistreatment of members of LGBTQ2S+ communities have been set in historical attitudes that claim to be grounded in science. Modern science is clear that there is nothing wrong with a person who identifies as LGBTQ2S+.

Discussions, interventions and therapies that promise to “recondition”, “fix” or “change” LGBTQ2S+ people are extremely harmful, and frequently leave unwilling participants traumatized, and mentally and physically injured. These have no place in creating safe and inclusive spaces for members of LGBTQ2S+ communities. LGBTQ2S+ folks often seek therapy and counseling, to help develop coping strategies to live in a society that largely does not value or acknowledge their individual experiences and struggles.

MYTH: If you're confused about LGBTQ2S+ issues, you should ask your gay or trans friends to explain it all to you.

Truth: LGBTQ2S+ people are frequently put in the position of having to be a teacher for their non-LGBTQ2S+ friends. These topics should be treated carefully and with respect.

Never make assumptions about somebody's gender, pronouns, sex or orientation. Do your own research before asking LGBTQ2S+ folks to educate you about more general topics and questions. There are resources available for people with a desire and willingness to learn about sex, orientation, gender identity and gender expression. Creating a foundation of knowledge will make conversations more respectful.

MYTH: The word "queer" is an umbrella term for all LGBTQ2S+ people.

Truth: The word "queer" was used as an anti-gay slur starting in the 1960s, and is still sometimes used that way today. Many people within LGBTQ2S+ communities have reclaimed it, and use it as an identifier for themselves. Many folks, however, especially older men within LGBTQ2S+ communities, still find it derogatory and discriminatory, and would never use it in reference to themselves. All members of the school community share the responsibility for supporting students and staff and building a positive environment for LGBTQ2S+ members of the school community. Ally behavior includes taking responsibility to learn about appropriate language and create respectful spaces to encourage respectful communication and allow for growth and learning.

MYTH: If someone is religious, it's their right to discriminate against LGBTQ2S+ people.

Truth: Every person has a right to live with human dignity, and to be treated with respect. There is no right to treat people with anything less than respect and dignity. When LGBTQ2S+ people receive equitable treatment at school, this does not impact someone's right to be faithful on an individual level. When LGBTQ2S+ people are treated as less than or discriminated against, their human rights are being infringed on.

Ally behavior would refer individuals to the NWT Territorial School Code of Conduct, the NWT Human Rights Act, and the GNWT's Harassment Free and Respectful Workplace Policy to highlight the principles of the LGBTQ2S+ Guidelines and the commitment to create safe and respectful spaces for all, particularly members of LGBTQ2S+ communities.



Government of
Northwest Territories



**HEALTH CARE FOR TRANSGENDER, NON-BINARY, AND
GENDER NONCONFORMING PEOPLE:
GUIDELINES FOR THE NORTHWEST TERRITORIES ('NWT')
Effective: December 21, 2020**

Contents

Health Care for Transgender, Non-Binary, and Gender Nonconforming People: Guidelines for the Northwest Territories	3
Acknowledgements	3
Purpose	3
Guiding Document	4
Definitions	4
Commitment to Cultural Safety	6
Health Care Provider Responsibilities	7
Privacy and Confidentiality	8
Diagnosis of Gender Dysphoria	9
Children and Youth	9
Endocrine Therapy (Hormone Therapy)	10
Requirements for Gender Affirming Surgeries	10
Assessment for Gender-Affirming Surgeries	11
Breast/Chest Surgery: Augmentation or Mastectomy	12
Genital Surgery	13
NWT Health Care Plan	14
Additional Resources and Support	14
Appendix A: Transgender, Non-Binary, and Gender Nonconforming Care Process Map	15

Health Care for Transgender, Non-Binary, and Gender Nonconforming People: Guidelines for the Northwest Territories

As the care of patients with gender dysphoria is constantly evolving, the Department of Health and Social Services will work to keep the *Health Care for Transgender, Non-Binary, and Gender Nonconforming People: Guidelines for the Northwest Territories* as current as possible.

Our goal is to ensure the Guidelines reflect emerging changes in the care of patients by regularly updating the document. As a health care provider and the intended audience for this information, we welcome any suggestions you, your patient, or their families have on the Guidelines.

Acknowledgements

The Department of Health and Social Services would like to thank all those who contributed to the development of these Guidelines, with special consideration to:

- Amanda St.Denis, Workforce Diversity Officer and Parent/Patient Advocate,
- Dr. Fiona Aiston, Family Physician,
- Dr. Neil Hagen,
- Dr. Sarah Cook, former Territorial Medical Director,
- Kristin Richardson, NP, and the
- Rainbow Coalition of Yellowknife.

Purpose

Transgender, non-binary, and gender nonconforming people have the right to respectful, dignified, gender-affirming health care in the NWT. The purpose of the *Health Care for Transgender, Non-Binary, and Gender Nonconforming People: Guidelines for the Northwest Territories* is to establish a clear referral process for transgender, non-binary, and gender nonconforming health care services for NWT residents.

Transgender, non-binary, and gender nonconforming people are an underserved population who continue to face societal stigma and discrimination in many areas including health care settings. They are disproportionately affected by poverty, homelessness, unemployment, and health problems such as depression, anxiety, obsessive-compulsive and phobic disorders, substance use disorders, and HIV. Indigenous peoples who identify with the LGBTQ2S+ community may face added barriers due to racism, sexual orientation, and gender discrimination.

The referral processes may be difficult for some patients, and it is important patients feel safe and comfortable speaking to their health care provider. Health care providers are uniquely well positioned to address these health disparities and increase access to gender-affirming health care.

Guiding Document

Transgender, non-binary, and gender nonconforming care in the NWT should, to the extent possible, align with the most current version of the World Professional Association for Transgender Health ('WPATH') *Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People*.

While titled "Standards of Care", this document is actually a consensus-based guideline. It is intended to be flexible in order to meet the diverse health care needs of transgender, non-binary, and gender-nonconforming people.

Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People can be found here: www.wpath.org/publications/soc.

Helpful and user-friendly guidelines to support primary care practitioners in the provision of care for transgender, non-binary, and gender nonconforming patients are available from other jurisdictions in Canada, including:

- Trans Care BC: www.phsa.ca/transcarebc/Documents/HealthProf/Primary-Care-Toolkit.pdf
- Rainbow Health Ontario: www.rainbowhealthontario.ca/TransHealthGuide/index.html
- Alberta's Toward Optimized Practice: <https://top.albertadoctors.org/CPGs/Pages/Transgender-Health-Care.aspx>

Definitions

Assessment for Surgery

The assessment prepared by a clinical expert, which provides documentation of diagnosis, treatment, or other aspects of a patient's history to support the identification or diagnosis of gender dysphoria and recommendation for surgery.

Clinical Expert

Clinical experts who are primary care practitioners may diagnose and provide the appropriate assessments prior to gender affirming care.

Clinical experts who are not primary care practitioners may identify or confirm the diagnosis of gender dysphoria and provide appropriate assessments prior to gender affirming care.

A clinical expert can be a “Medical Practitioner” registered and licenced under the NWT’s *Medical Professions Act*, a “Nurse Practitioner” or “Registered Nurse” registered and licenced under the NWT’s *Nursing Profession Act*, a “Psychologist” registered and licensed under the NWT’s *Psychologists Act*, or a “Registered Social Worker” registered and licensed under the NWT’s *Social Work Profession Act* with the appropriate expertise and competency to identify gender dysphoria.

A primary care practitioner can be a clinical expert.

Gender-affirming health care

Health care according to a patient’s goals and can involve many different aspects of their social, medical, and surgical care. This includes the assessment, referral, diagnosis (primary care practitioners) or identification/confirmation of diagnosis (non-primary care practitioners), and treatment of the patient and their family.

Gender Dysphoria

Distress that is caused by a discrepancy between a person’s gender identity and that person’s sex assigned at birth (and the associated gender role or primary and secondary sex characteristics).

Health Care Provider

Any person delivering care to a patient. This includes, but is not limited to, primary care practitioners, clinical experts, registered nurses, community health workers, and home support workers.

Surgery

Gender affirming surgical care involves procedures to change primary sex characteristics so they correspond with a person’s identity and may include chest or breast surgery, gonadectomy, genital reconstruction, and a range of other procedures, including tracheal shave and facial surgery.

Many types of surgeries exist and, depending on the facility and surgeon(s) involved, the surgeries may differ slightly.

Breast/Chest Surgery: Augmentation or Mastectomy

Surgical procedure to augment the breast/chest (augmentation mammoplasty) or surgical procedure to remove breast tissue (subcutaneous mastectomy). The mastectomy may spare the skin, nipple, and areola (nipple-sparing subcutaneous mastectomy).

Metoidioplasty

Metoidioplasty can include a range of procedures, including:

- the creation of a phallus through the lengthening of the clitoris (clitoral release)

- the possibility of lengthening the urethra (neourethra)
- the possibility of closing the vaginal cavity (vaginectomy)
- the creation of a scrotum (scrotoplasty and the insertion of testicular implants) or a bifid scrotum (insertion of the testicular implants into the labia majora of the vulva).

Phalloplasty

Surgical procedure that creates or repairs the phallus, glans, and scrotum, and may include all or parts of the closure of the vaginal cavity, insertion of penile and testicular implants, and usually includes lengthening of the urethra.

Vaginoplasty

Surgical procedure to create or repair the vagina and vulva, and may include the removal of the penis, scrotal sac, and testes.

Primary Care Practitioner

An NWT medical practitioner or a nurse practitioner who provides ongoing care for the patient.

NWT Health Care Plan

Covers the cost of medically necessary health services for NWT residents who have a valid NWT Health Care Card.

Transition

Gender transition is a lifelong process. Although gender identity and gender expression are often similar, they do not always match. A person may express gender in a way that is different from how they feel. This may include social transition, such as new names, pronouns, and clothing and/or may include medical transition, such as hormone therapy and surgery.

Commitment to Cultural Safety

Indigenous peoples who are part of the transgender, non-binary, and gender nonconforming communities may face added barriers due to racism, sexual orientation, and gender discrimination.

A culturally safe health care system for Indigenous peoples benefits all Northerners, including the transgender, non-binary, and gender nonconforming communities. Cultural safety is an outcome where Indigenous peoples feel safe and respected, free of racism and discrimination, when accessing health and social services programs and services. An important feature of cultural safety is understanding that a legacy of colonialism, including racism in health and social services, influences Indigenous health outcomes and access to care and services.

Indigenous residents have expressed that relationship-based care is a priority, meaning that clients want trusting, caring and ongoing relationships with their health care providers. Relationship-based care is an approach that puts the needs of clients and families first and results in a health and social services system that prioritizes relationships while removing barriers to achieving those relationships.

The Department of Health and Social Services recognizes that building long-term relationships between patients/clients, practitioners, and staff makes a difference to both patient/client experiences in health and social services and health outcomes.

Individuals who identify as what Western society calls “*transgender*” have been found in essentially every population and culture around the world. Indigenous populations, however, have expressed their gender identities in ways which are somewhat distinct from other cultures. The term “Two-Spirit” is a blanket term that refers to the complex relationship between Indigenous culture, and gender and/or sexual orientation. There are historical records and teachings of Two-Spirit people existing in First Nations, Métis, and Inuit cultures across Turtle Island (North America). This diversity once had a well-accepted place within Indigenous societies. Gender was not based on sexual activities or practices, but rather reflected the sacredness that comes from being different. Many individuals from First Nations, Métis, and Inuit cultures have been adversely affected by rigid views on gender identity expressed within Western society religious beliefs. Many historical records were lost, and impacts of colonialism prevent many cultures from being able to celebrate their Two-Spirit histories. However, in recent years across Turtle Island, there has been a resurgence of First Nations, Métis, and Inuit cultures reclaiming Two-Spirit identity and teachings.¹

Health Care Provider Responsibilities

Health care providers are expected to:

- Practice relationship-based care. Relationship-based care is an approach that puts the needs of patients and their families first, and includes honouring Indigenous knowledge, wisdom, and diversity of the North.
- Practice gender-affirming health care. Gender-affirming health care includes respecting an individual’s right to self-determine their gender identity and maintaining a gender-affirming approach, including using chosen names and pronouns when interacting with, on behalf of, referring, or when charting on the individual.
- Practice trauma-informed care. Trauma-informed care includes being mindful of societal, community, and interpersonal trauma that transgender, non-binary, and

¹ The above paragraph was adapted with permission from Trans Care BC Provincial Health Services Authority. Further information is available at:

<http://www.phsa.ca/transcarebc/Documents/HealthProf/Primary-Care-Toolkit.pdf>

gender nonconforming patients experience within and outside the health care system.

- Recognize how unconscious bias may influence patient treatment. Unconscious bias is a natural, universal method of cognitive processing and can lead to false assumptions and negative outcomes. There is increasing evidence that unconscious bias leads to negative outcomes for minority groups in healthcare settings. This in turn contributes to health disparities, in which certain groups experience inequalities in the provision of and access to healthcare. Acknowledging that unconscious bias exists is an important first step to overcoming it. Here are some additional strategies to manage unconscious bias so as not to undermine a patient/client treatment:
 - Recognize your own stereotypical thinking
 - For example, how does the way a patient/client's physical appearance (manner of dress, makeup or no makeup, hairstyle, etc.) influence your perception of them?
 - Replace biases and assumptions with facts
 - What quick conclusions did you jump to upon first meeting this person? Is that a fair assumption based on facts or simply your opinion based on your past experiences?
 - Understand the individual more clearly through open-ended questions and dialogue
 - Building a relationship with each patient/client will assist in interacting with and providing care for the patient/client in an individualized and specific manner working towards care equity.
 - Try to use language that they are using to talk about their transition, their bodies, and their relationship to their gender.
 - Increase the opportunities for positive interactions and contact
 - Encourage patients to build rapport with health care providers when they're not only at their most vulnerable so that health care providers can get a clear sense of their patient/client's full humanity.
 - Seek out training opportunities such as cultural awareness or motivational interviewing training.
 - Many of these training opportunities can be found on the GNWT's Training Calendar and may also be available on request.

Privacy and Confidentiality

As with any other health service, the collection, use, and disclosure of personal information or personal health information related to transgender, non-binary, and gender nonconforming care must adhere to existing privacy legislation, standards, and policies.

Diagnosis of Gender Dysphoria

The diagnosis of gender dysphoria can be made by a primary care practitioner. In order to diagnose a patient with gender dysphoria, the primary care practitioner must have extensive experience or formal training in gender care, particularly as it relates to meeting the mental health care needs of transgender, non-binary, and gender nonconforming individuals.

A primary care practitioner who does not have extensive experience or formal training in gender care may refer the patient to a clinical expert to confirm the diagnosis. NWT patients do not need to be diagnosed with gender dysphoria by a psychiatrist. A clinical expert can manage the assessment and management of mental health needs of most transgender, non-binary, and gender nonconforming patients. However, a patient can be referred to a psychiatrist by a clinical expert or primary care practitioner, if clinically indicated.

The NWT currently follows the *Trans Primary Care Initial Assessment Tasks*, which includes an assessment checklist. This tool can be found here:

<https://www.rainbowhealthontario.ca/TransHealthGuide/gp-initialassess.html>.

As additional support for primary care practitioners, the *Transgender Health In Primary Care, Initial Assessment*, developed by the Accelerating Change Transformation Team (Alberta Medical Association) can serve as helpful tool for health care providers who are seeing transgender, non-binary, and gender nonconforming patients for various reasons in a range of clinical contexts. This tool can be found here:

<https://top.albertadoctors.org/CPGs/Pages/Transgender-Health-Care.aspx>.

Children and Youth

There are differences in the assessment and management of gender dysphoria in transgender, non-binary, and gender nonconforming children or youth who have not completed puberty, compared to adults. In children or youth, rapid development is associated with rapid change and fluidity of outcomes. In particular, there are complex decisions regarding diagnosis of gender dysphoria, whether to initiate hormones, or initiate puberty blocking hormones, and decisions regarding the role of formal parental or patient consent.

It is recommended that transgender, non-binary, and gender nonconforming children and youth in the NWT be referred to the general pediatric service at Stanton Territorial Hospital. Pediatrics will provide support and care to transgender, non-binary, and gender nonconforming children and youth, in partnership with other clinical experts in the NWT and the patient's primary care practitioner. Together, a connection with speciality transgender care, such as pediatric endocrinology and adolescent medicine, outside of the NWT can be facilitated.

It is important to remember that transgender, non-binary, and gender nonconforming children and youth are still experts in their transition and their experience. While there are

steps that parents need to provide consent for, it is imperative that transgender, non-binary and gender nonconforming children and youth feel heard and respected during this process. They will eventually grow to be adults that will have full control of their own health care and establishing positive relationships and trust with health care providers in an early stage will significantly aid in maintaining a quality health care regimen.

Endocrine Therapy (Hormone Therapy)

Generally, hormone therapy needs can be met within the NWT without the need to refer to an endocrinologist. Usually a clinical expert would assess the patient and initiate hormone therapy as needed.

Guidelines and protocols that can be referenced are the same as those identified under 'Diagnosis of Gender Dysphoria':

- The *Trans Primary Care* tools:
<https://www.rainbowhealthontario.ca/TransHealthGuide/gp-initialassess.html>
- The Transgender Health In Primary Care tool:
<https://top.albertadoctors.org/CPGs/Pages/Transgender-Health-Care.aspx>.

If needs cannot be met in the NWT, the primary care practitioner or clinical expert may make a referral to an out-of-territory practitioner, typically an endocrinologist in Alberta.

Requirements for Gender Affirming Surgeries

The criteria for all gender-affirming surgeries are:

- Persistent, well-documented gender dysphoria;
- Assessment(s) provided by clinical expert(s);
- The patient has the capacity to make fully informed decisions and expressly consent to the treatment or procedure (i.e. the patient understands the procedure and associated risks, and has an aftercare plan);
- Social, medical, and mental health care needs have been assessed and appropriate treatment and referrals are followed or completed. A plan of care is in place for identified needs;
- If significant medical or mental health condition exist, it must be reasonably well controlled for breast/chest surgery and well controlled for genital surgery;
- Having a valid NWT Health Care Card; and
- Being age of majority, which is 19 years of age in NWT.

Note: Age is not an eligibility criterion for breast/chest surgery. In some cases, a clinical expert and the patient's surgeon may deem a patient under the age of 19 years clinically appropriate for breast/chest surgery.

For patients seeking breast surgery, it is generally recommended (but not required) to have a full 12 months of appropriate hormone therapy in order to maximize breast growth to support best surgical results.

Additionally, in accordance with the World Professional Association for Transgender Health ('WPATH') *Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People*, genital surgery also requires:

- 12 continuous months of hormone therapy as appropriate to the patient's gender goals; and
- 12 continuous months of fully living in a gender role that is congruent with the patient's gender identity.

It should be noted, however, that referrals to some clinics can have significant wait times, depending on the surgical procedure and, for example, the status of the COVID-19 pandemic. The primary care practitioner and the patient will need to assess this 12-month guideline on a case-by-case basis.

Assessment for Gender-Affirming Surgeries

Depending on the type of surgery, one or two formal assessments are required.

- One assessment is generally required for breast surgery. This assessment must be completed by a qualified primary care practitioner. This assessment can be completed by the patient's primary care practitioner if considered a clinical expert.
- Two assessments are required for genital surgery. One of these assessments must be from a qualified primary care practitioner. This assessment can be completed by the patient's primary care practitioner if considered a clinical expert. The second assessment can be provided by any other clinical expert.

These assessments by clinical experts can be made by virtual care.

At a minimum, an assessment must include the following:

1. The patient's general identifying characteristics (general demographic information, such as how the patient is expressing themselves in how they appear);
2. Results of the patient's psychosocial assessment, including any diagnoses (Note: this assessment can be completed by a clinical expert);
3. The duration of the clinical expert's relationship with the client, including the type of evaluation and therapy or counseling to date;
4. An explanation that the criteria for surgery have been met, and a brief description of the clinical rationale for supporting the patient's request for surgery;
5. A statement about the fact that informed consent has been obtained from the patient;

6. A statement that the clinical expert is available for coordination of care and welcomes a phone call to establish this.

Once a patient has the necessary assessment(s) and meets the criteria, as per WPATH's *Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People*, for the requested surgery, the patient can be referred to the appropriate surgical provider. Further information relating to specific surgeries is provided below.

Breast/Chest Surgery: Augmentation or Mastectomy

With the necessary assessment, a patient can be directly referred by their primary care practitioner or clinical expert for breast surgery. Breast surgery is not performed in the NWT due to existing capacity and specialized surgical techniques.

Primary care practitioner referrals can be made to plastic surgeons in Alberta, the Clinique de Chirurgie (Montreal), the McLean Clinic (Mississauga, ON), to a surgeon via the Gender Program at the University of Alberta Gender Clinic (Edmonton), or elsewhere. However, some of these facilities do not accept the publically funded rates, and they bill patients directly. Patients will not be reimbursed for private surgery rates. For this reason, we generally recommend patients be referred to Alberta plastic surgeons who accept the Interprovincial / Territorial Reciprocal Billing Agreement rates (i.e. they bill according to the Alberta Schedule of Medical Benefits, which is the Alberta equivalent of the NWT Tariff).

Breast surgery for transgender, non-binary, and gender nonconforming patients is considered a medically necessary health service, in similar clinical circumstances as it is for non-transgender, non-binary, and gender nonconforming ('cis') patients.

A mastectomy is covered by the NWT Health Care Plan, at pre-determined publically funded rates.

Breast augmentation is covered by the NWT Health Care Plan only when medically necessary, such as when there is breast aplasia (failure to respond to appropriate hormone therapy) or a congenital breast abnormality. Only few patients will fulfil these eligibility criteria. Breast augmentation for any other indication is not covered in the NWT. These same criteria are present across Canada and apply equally to cis and transgender women.

Patients diagnosed with gender dysphoria are eligible for breast surgery in the context of male-to-female gender reassignment, if the following criteria are met:

- negligible breast development despite adequate hormone therapy for a least one year; or
- hormone therapy is medically contraindicated.

For tools to facilitate discussion of transition-related breast/chest surgery between primary care practitioners and patients, please see the document titled:

- *Feminizing Chest Surgery—Summary for Primary Care Providers*; and
- *Masculinizing Chest Surgery—Summary for Primary Care Providers*.

These tools can be found here:

<https://top.albertadoctors.org/CPGs/Pages/Transgender-Health-Care.aspx>.

Genital Surgery

With the two independent assessments described above, a patient can be directly referred by their primary care practitioner for genital surgery. Prior approval from the Department of Health and Social Services is required.

The NWT does not have the capacity available for genital surgeries. At this time, gender affirming surgery is currently performed at the Centre Metropolitain de Chirurgie, a private clinic in Montreal. Patients may be referred for care in another province if the necessary expertise and capacity are available there. Genital surgery is not funded out-of-country.

Vaginoplasty, metoidioplasty or phalloplasty are covered by the NWT Health Care Plan for patients who, in consultation with their primary care practitioner, consider genital surgery an essential component of their gender transition. There are some variations of this surgery, such as clitoral release, which are also funded.

If the genital surgery chosen by a patient is performed in stages, then the medically necessary stages of that selected genital surgery are also covered.

A hysterectomy, including removal of the cervix, must be performed at least six months before a vaginectomy. This surgery is covered by the NWT Health Care Plan. This surgery may be performed out-of-territory even though it is a procedure that can be performed in the NWT.

The necessary surgeries to treat any complications related to general surgeries are also covered by the NWT Health Care Plan, on a case-by-case basis. Complications may be treated in the NWT, Alberta, or at the Clinique de Chirurgie in Montreal, as required.

For tools to facilitate discussion of transition-related genital surgery between primary care practitioners and patients, please see the document titled:

- *Vaginoplasty—Summary for Primary Care Providers*;
- *Metoidioplasty—Summary for Primary Care Providers*; or
- *Phalloplasty—Summary for Primary Care Providers*.

These tools can be found here: <https://top.albertadoctors.org/CPGs/Pages/Transgender-Health-Care.aspx>.

NWT Health Care Plan

If surgeries are performed in multiple stages, they are only covered by the NWT Health Care Plan as long as the patient continues to have a valid NWT Health Care Card.

The following are not covered by the NWT Health Care Plan:

- The cost of outpatient medications, equipment/supplies (i.e. dressings, dilators), meals, accommodations, and personal expenses.
- Transgender, non-binary, and gender nonconforming care services provided outside of Canada, including any reimbursement for treatments or services received outside of Canada.
- Procedures that are not considered medically necessary, such as chest contouring, facial feminization, tracheal shave and voice pitch surgery, psychotherapy, massage therapy, or fertility preservation techniques.
- Non-medical interventions required prior to, or following, genital surgery including, but not limited to, liposuction, lipofilling, electrolysis, or laser hair removal.
- Surgery to correct congenital or acquired disorders of the reproductive system.
- Cosmetic procedures arising from the original surgery to improve appearance.

Additional Resources and Support

For additional resources and supports, please visit:

Department of Education, Culture and Employment, Income Assistance Program:
www.ece.gov.nt.ca/en/services/income-security-programs/income-assistance

The Income Assistance Program provides financial assistance to northerners to help meet basic and enhanced needs.

Rainbow Coalition of Yellowknife: www.rainbowcoalitionyk.org

An outreach organization based in Yellowknife that works to support 2SLGBTQQIPAA+ youth in the Northwest Territories.

NWT Housing Corporation, Programs and Services: www.nwthc.gov.nt.ca/en/services

List of housing programs and services available to NWT residents

Trans Care BC: www.phsa.ca/transcarebc/

Trans Care BC supports the delivery of equitable and accessible care, surgical planning, and peer and community support for Trans people across the province—Trans Care BC has many education resources on their website.

Appendix A: Transgender, Non-Binary, and Gender Nonconforming Care Process Map

