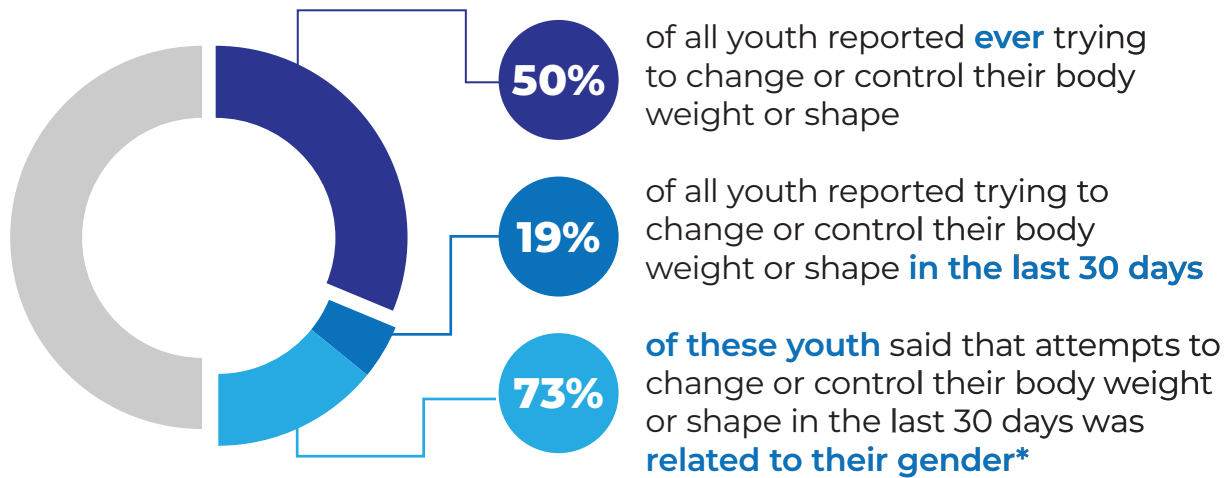


Behaviours to Change or Control Body Weight & Shape

Experiences of Trans and Non-Binary Youth Under Age 16 in Clinical Care

At the time of their first medical appointment at the clinic
(before receiving any hormonal suppression or gender-affirming hormones):



***What does this mean?**

Research has found that trans youth who try to change or control their body weight or shape may do so with the goal of aligning their body with their gender.





Transmasculine youth engaged in body weight or shape change & control behaviours in the last 30 days **significantly more** than transfeminine youth

Transmasculine youth were significantly more likely to use **dieting & exercise** than transfeminine youth

Of youth who tried to change or control their body weight or shape **98% were transmasculine** and **2% were transfeminine**



Among those who tried to change or control their body weight or shape in the past 30 days, the following were found to be significant predictors of severity (i.e., more behaviours and/or higher frequency of behaviours):

-  **HIGHER** psychological distress
-  **MORE** experiences of day-to-day discrimination over the past year
-  **LOWER** gender positivity¹ related to their body
-  **LOWER** school and family connectedness

Youth who tried to change or control their body weight or shape in the last 30 days did so by*:

**These behaviours can be harmful to health*

- 96%** dieting, fasting, eating less food
- 83%** exercising
- 28%** bingeing
- 25%** vomiting
- 16%** swallowing a pill or something else (for example, protein powder)

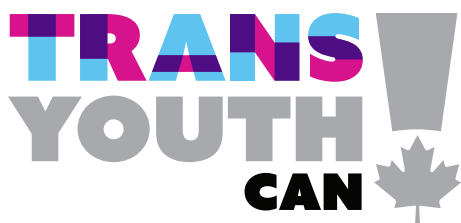
(Total will not sum to 100% as youth may engage in more than one behaviour)

On average youth were reporting **at least 2** of these behaviours in the past 30 days.

Youth who tried to change or control their body weight or shape in the last 30 days also engaged in **self-harm significantly more** than youth who didn't.

Youth using disordered eating behaviours as a coping strategy to deal with gender (and general) distress are at substantial risk for health complications and clinical eating disorders.

More attention, research, and careful screening is needed regarding weight or shape change or control behaviours and disordered eating.



Who are the participants in this study?

There are 174 youth and 160 parents/caregivers participating in the Trans Youth CAN! study. Youth aged 15 or younger and who had reached puberty were recruited at their first appointment after referral for blockers or hormones at one of 10 medical clinics across Canada (Vancouver, Calgary, Edmonton, Winnipeg, London, Toronto, Hamilton, Ottawa, Montreal, Halifax). Youth could also invite one parent or caregiver to participate. This data was collected between September 2017 and June 2019.

1- What is gender positivity? Check out the full measure on our website here: https://transyouthcan.ca/wp-content/uploads/2021/04/Gender-Positivity-Scale-vSHARE_EN-2021.pdf

Experiences of Parents of Trans and Non-Binary Youth Under Age 16 in Clinical Care

Parent Participants in the Study

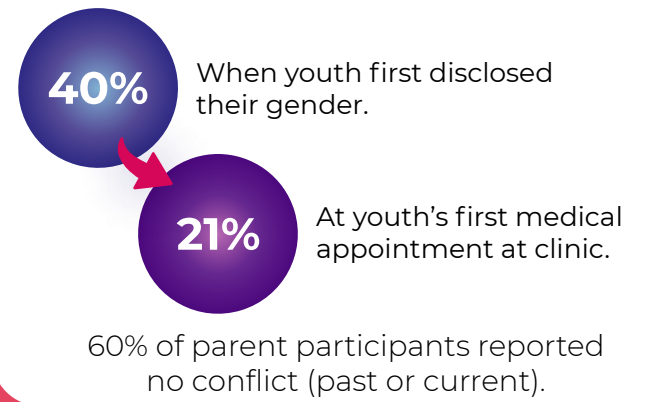
96%	Birth/adoptive parents
2%	Step-parents
< 1%	Foster parents
1%	Other parent figures (i.e. grandparents)
85%	Female parents/mothers
14%	Male parents/fathers
1%	Non-binary parents
64%	Have a spouse/partner living in the home
38%	Said there is a co-parent involved in the youth's life not living in the home

Proportion of Youth That Have ... in their Lives

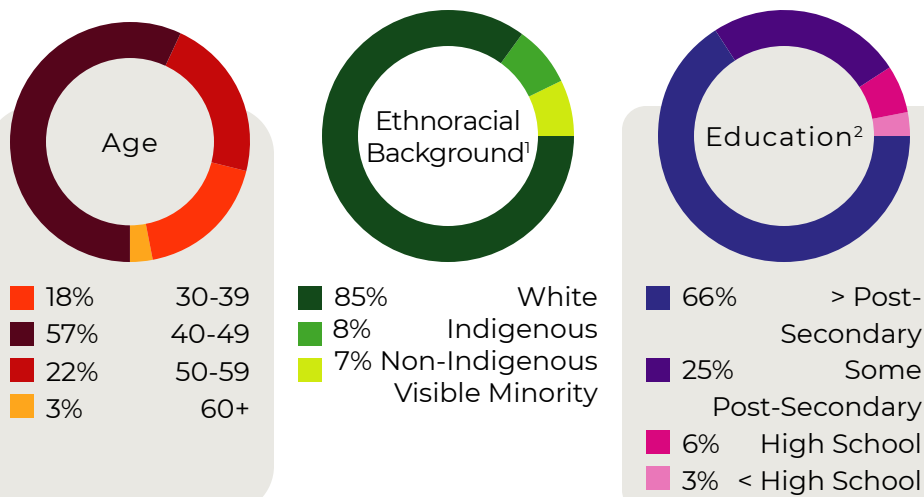
98%	Birth/adoptive parents
34%	Step-parents
3%	Foster parents
2%	Other parent figures (i.e. grandparents)
96%	At least one mother
85%	At least one father
# Of Parents Youth Have In Their Lives	
25%	3 + parents
61%	2 parents
13%	1 parent
<1%	0 parents

Parental Conflict Regarding Youth's Gender

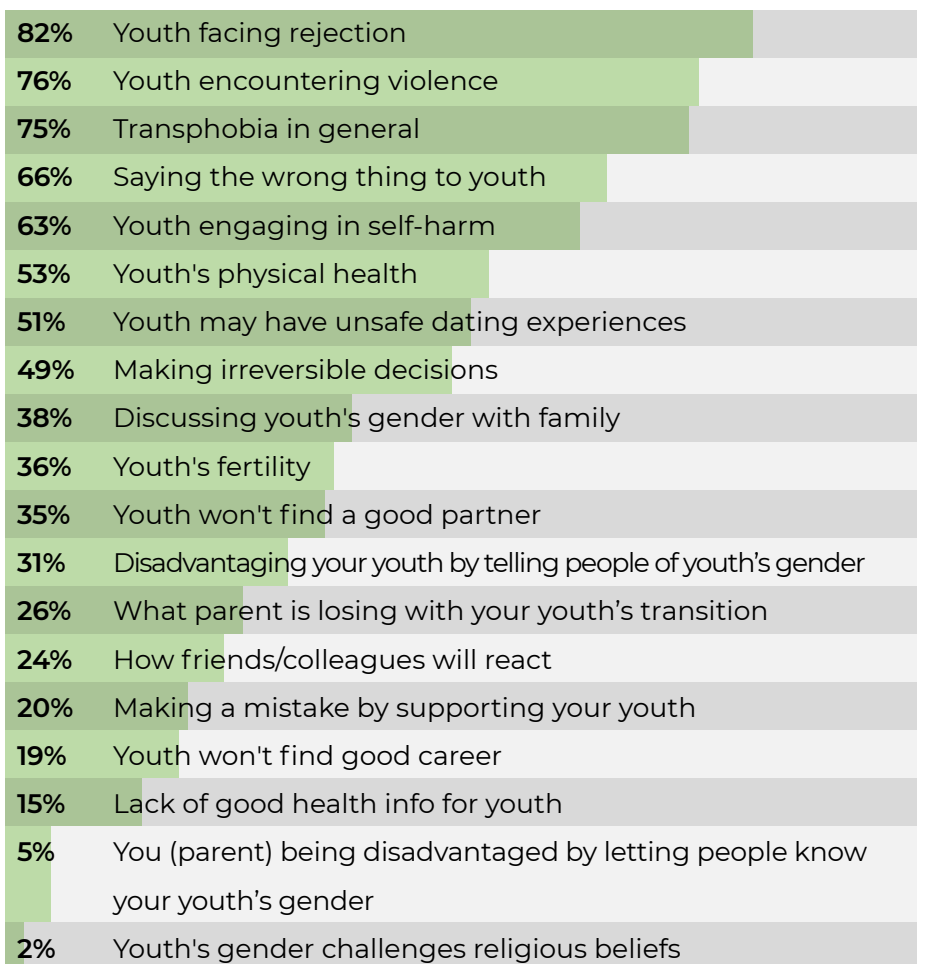
(% of parent participants who reported conflict with a spouse/partner or a co-parent)



Characteristics Of Parent Participants

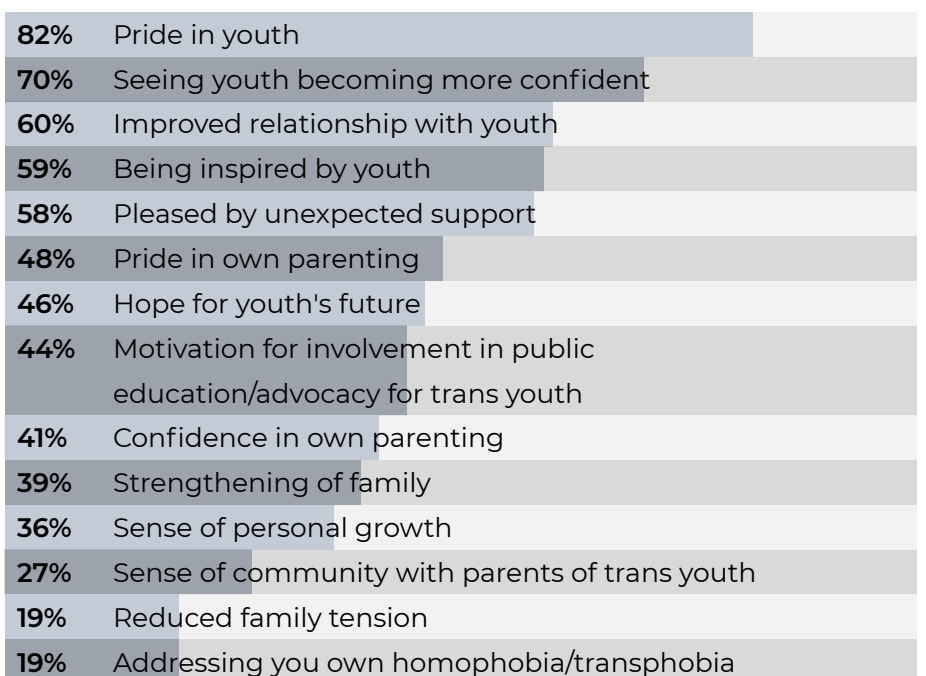


Parents' Worries About Youth's Gender*



<1% of parents had no concerns.

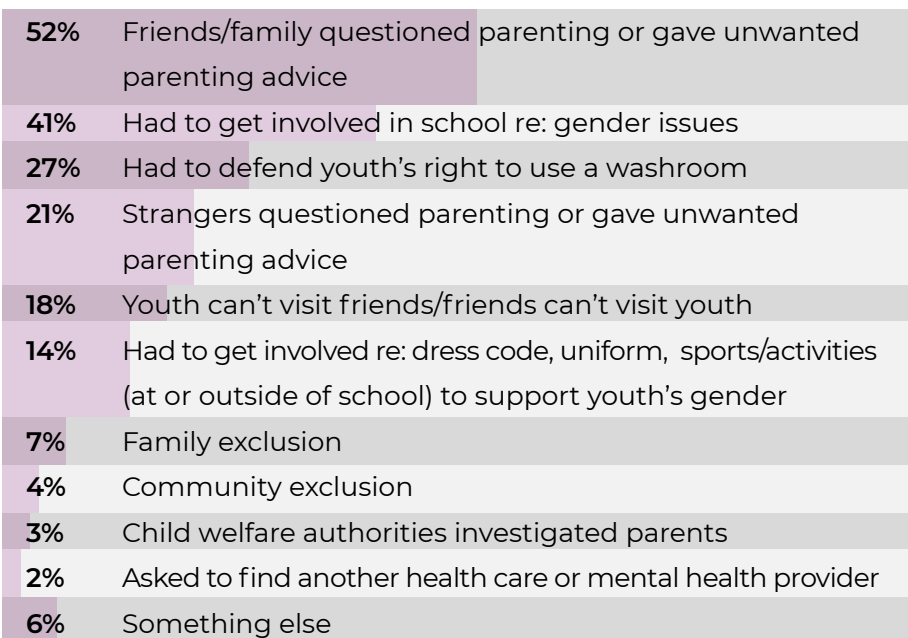
Parents' Positive Feelings About Youth's Gender*



97% reported **AT LEAST ONE** positive feeling from the checklist.

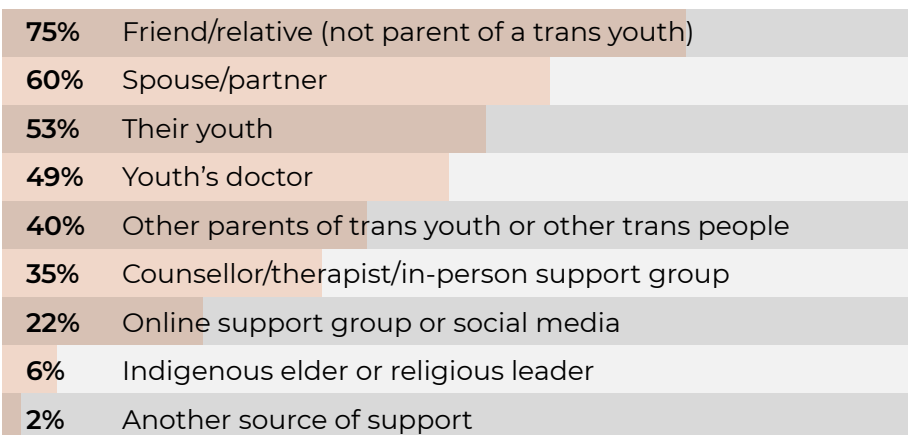
*Parents who had more worries didn't have fewer positive feelings. Most parents were found to have many worries AND many positive feelings.

External Stressors On The Families Of Trans Youth



70% of parents reported at least one external stressor.

Sources Of Support For Parents Of Trans Youth

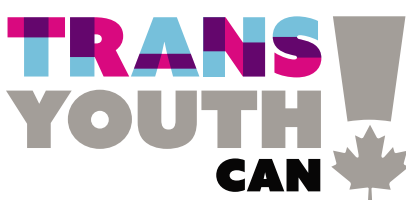


6% of parents had no sources of support.

Who are the participants in this study?

There are 174 youth and 160 parents/caregivers participating in the Trans Youth CAN! study. Youth aged 15 or younger and who had reached puberty were recruited at their first appointment after referral for blockers or hormones at one of 10 medical clinics across Canada (Vancouver, Calgary, Edmonton, Winnipeg, London, Toronto, Hamilton, Ottawa, Montreal, Halifax). Youth could also invite one parent or caregiver to participate. This data was collected between September 2017 and June 2019.

1 - Compared to the adult Canadian population: 5% Indigenous (<https://bit.ly/3sT4RFS>) and 22% visible minorities (<https://bit.ly/2YefJ2V>)
2 - Compared to the Canadian population aged 25-64: Less than highschool diploma (12%) | Highschool diploma (24%) | Post-secondary diploma/degree and above (51%) | (<https://bit.ly/3ohhyqH>)



Experiences of Trans and Non-Binary Youth on the Autism Spectrum Under Age 16 in Clinical Care

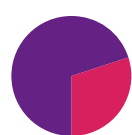
What is “Autism/The Autism Spectrum”?

Autism spectrum is an umbrella term that describes a wide spectrum of experiences or challenges. People are born autistic, and autism is a type of neurodiversity (diversity in the way brains work). A person on the autism spectrum may connect differently with others in the way they communicate, handle social situations, or perceive others, and may also have sensory sensitivities, or engage in repetitive behaviours.

Why “Autistic”?

We use the term ‘**autistic**’ here because this is the preferred term by autistic trans and gender-diverse youth from our community consultation committee, and it also aligns with what is generally understood within autistic community as respectful because it’s the preferred term for self-identification. However, we acknowledge the autistic community is large and diverse, and not everyone (including the youth reported on here from this study) will identify with this term, and we respect any other terms those on the autism spectrum use to self-identify.

There are 10 youth who were on the autism spectrum*:



7 Female/Girls
& 3 Male/Boys



All 10 were enrolled in school
(either public or private school)



2 identify as Indigenous
& 8 identify as White



All 10 were living with their
birth/adoptive family



4 youth come from
an immigrant family

Average age at enrollment (first medical appointment at gender clinic) is 13.5 years (from age 11 up to a maximum age of 15.9).

**Extracted from clinic medical records—not from survey self-report.
Diagnosis may not be confirmed.*



CAUTION: We want to share these results because data on autistic trans youth is so limited, BUT:

- 1) With only **10 autistic youth**, results should not be over-interpreted, and
- 2) Results are for autistic trans youth in clinical care and could differ from the larger group of autistic trans youth not in clinical care.

Most Common External Stressors Experienced by Families of Autistic Youth (as reported by youth)

1. Someone in youth’s family got involved with youth’s school regarding gender issues
2. Unwanted parenting advice from strangers
3. Someone in youth’s family had to get involved regarding a uniform dress code
4. Unwanted parenting advice from friend/family
5. Someone in youth’s family had to defend right to use washroom
6. Other family members no longer speak to youth’s family

Most Common Sources of Support for Autistic Youth

1. Parents
2. In-person friends
3. Other in-person peers (e.g., trans friends, non-trans friends, classmates)
4. Adult leaders (e.g., extracurricular leaders, coaches, and teachers)
5. Other family members (e.g., extended family and siblings)
6. Youth’s regular doctor (e.g., family doctor or pediatrician)
7. Online friends
8. Youth’s mental health provider
9. Community support (e.g., faith-based, cultural/ethnic, or LGBT2Q community)

Autistic Youth Living in Their Gender



10% - None of the time

30% - Some of the time

60% - All of the time

Autistic youth were living in their gender “**all of the time**” *less* than the other youth in the study, and autistic youth were living in their gender “**some of the time**” or “**none of the time**” *more* than the other youth in the study.

We did not find any significant difference* between autistic youth & the rest of the youth in the study for the following:

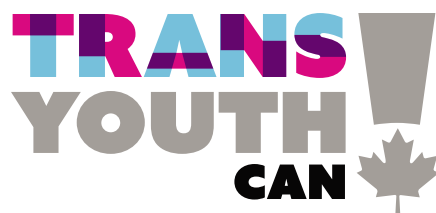
- Total months spent seeking hormone treatment
- Level of youth’s gender positivity¹ and gender distress²
- Level of youth’s overall social support, emotional/informational support, tangible support, affectionate support, and positive social interaction
- The number of different types of providers seen before gender clinic
- Whether youth participated in (or their parents considered having them participate in) conversion therapy
- Their ages through key milestones in their gender journey
- Parental support youth said they had for their gender identity and their gender-affirming medical care (when youth first disclosed their gender and currently)

**Note of caution: With only 10 autistic youth, these comparisons have low statistical power.*

Who are the participants in this study?

There are 174 youth and 160 parents/caregivers participating in the Trans Youth CAN! study. Youth aged 15 or younger and who had reached puberty were recruited at their first appointment after referral for blockers or hormones at one of 10 medical clinics across Canada (Vancouver, Calgary, Edmonton, Winnipeg, London, Toronto, Hamilton, Ottawa, Montreal, Halifax). Youth could also invite one parent or caregiver to participate. This data was collected between September 2017 and June 2019.

- 1 - What is Gender Positivity? Learn how we define and measure it here: <https://bit.ly/37irU3k>
- 2 - What is Gender Distress? Learn how we define and measure it here: <https://bit.ly/3rUvt9s>



Gender Distress & Gender Positivity

Experiences of Trans & Non-Binary Youth Under Age 16 in Clinical Care

What is GENDER DISTRESS?

Gender distress are the feelings of distress that youth can experience related to their gender not aligning with the sex they were assigned at birth. These feelings of distress can also be known as *gender dysphoria*, but gender dysphoria is a specific clinical diagnosis. Here we are talking about measuring the distress-related symptoms of gender dysphoria, but without making a diagnostic assessment, so we have labelled it "gender distress."

Trans and non-binary youth can experience gender distress related to their **social life** (e.g., *avoiding social situations where they can't express their gender; being hurt by being called the wrong name/pronouns; being expected to behave like their gender assigned at birth*).

Trans and non-binary youth can also experience gender distress related to **their body** (e.g., *wishing they were born in a different body; distress over periods/erections; disliking breasts/facial hair; disliking voice, not trusting what their body will do with age*).

We developed a measure to assess the gender distress-related symptoms in youth, including those who do not identify within the gender binary. The measure has a total score, and two subscales: Gender Distress – Social, and Gender Distress - Body.

[Find The Full Measure Here¹](#)

What is GENDER POSITIVITY?

Gender positivity are the positive feelings (such as pride, validation, and enjoyment) youth can experience related to their gender. Gender positivity (or feeling positive about your gender) is not the opposite of distress, and *low gender distress* does not necessarily mean that youth feel positively about their gender.

Trans and non-binary youth can experience positivity related to their **social life** (e.g., *feel accomplishment in expressing gender; feeling validated when treated like their gender in public; being happy that they are seen on the outside for who they are on the inside*).

Trans and non-binary youth can also experience positivity related to **their body** (e.g., *feeling accomplishment in expressing gender; feeling validated when treated like their gender in public; being happy that they are seen on the outside for who they are on the inside*).

We developed a measure to assess the positive feelings youth experienced related to their gender, applicable to trans and non-binary youth. The measure has a total score, and two subscales: Gender Positivity – Social, and Gender Positivity - Body.

[Find The Full Measure Here²](#)

At The Time Of Their First Medical Appointment At Clinic, How Were Youth Feeling?



What are these graphs?

A box-and-whisker plot lets us compare gender distress and positivity across groups. Half a group is above and half below the middle line (median), the 'x' is the average (mean), and the ends of the boxes show the 25th and 75th percentiles. Gender distress and gender positivity scores can range from 1 (low) to 5 (high).

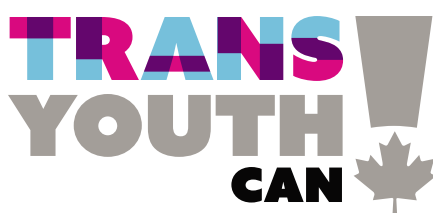
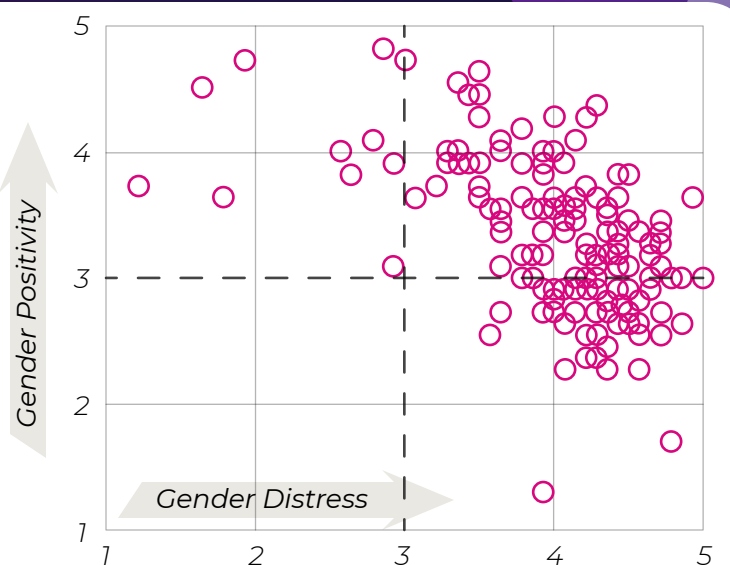
HIGHER gender distress was found to be associated with...

- Older age at first medical appointment at clinic
- Transmasculine youth (compared to transfeminine youth)

Gender positivity was not found to be associated with youth's age or gender.

Positivity is not the lack of distress, and distress is not the lack of positivity.

We found most youth were high on BOTH gender positivity and gender distress.



Who are the participants in this study?

There are 174 youth and 160 parents/caregivers participating in the Trans Youth CAN! study. Youth aged 15 or younger and who had reached puberty were recruited at their first appointment after referral for blockers or hormones at one of 10 medical clinics across Canada (Vancouver, Calgary, Edmonton, Winnipeg, London, Toronto, Hamilton, Ottawa, Montreal, Halifax). Youth could also invite one parent or caregiver to participate. This data was collected between September 2017 and June 2019.

1 - <https://bit.ly/3dUj8w9>

2 - <https://bit.ly/2SRkFvA>

Immigrant Families

Experiences of Trans and Non-Binary Youth from Immigrant Families Under Age 16 In Clinical Care

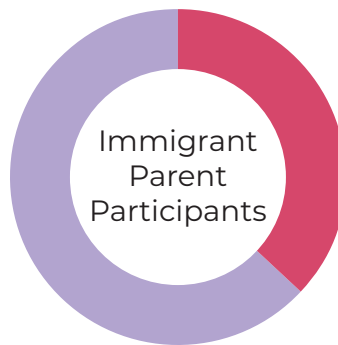
Ethnoracial Background¹



16% Visible minorities which include (youth can be more than 1):
 8% Black Canadian/African American
 8% East Asian
 4% Latin American
 3% Southeast Asian
 2% Black Caribbean
 2% Black African

37% Visible minorities which include (parents can be more than 1):
 12% Latin American
 10% Middle Eastern
 9% Black Canadian/African American
 7% Southeast Asian
 3% Black African

63% White

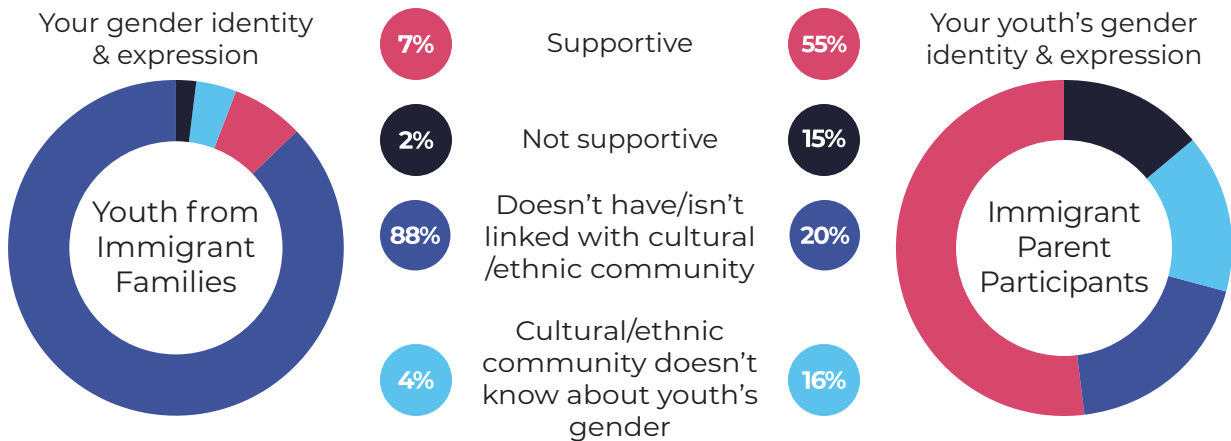


29% of youth in the study are from families with immigrant parents
 4% of youth in the study are immigrants to Canada
 100% of these youth are living with a family
 All stats and info throughout are from youth & parents from immigrant families

99% English or French is the 1st language spoken at home
 38% speak more than one language at home
 Other languages spoken include a range of languages from Eastern & Western Europe, West Africa, South Asia, East Asia, Scandinavia, and the Caribbean

Participants had to speak English or French to participate, so native English and French speakers are likely over-represented in our sample.

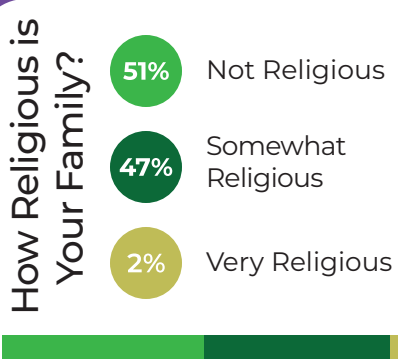
How Supportive is Your Cultural/Ethnic Community of...



We found a similar pattern for the support from their religious/faith-based community.

Top Sources Of Support For Youth From Immigrant Families:

90%	Parent(s)
83%	In real life friends
73%	Non-trans friends
53%	Extended family
51%	Trans friends
50%	Mental health provider
2%	Cultural/ethnic community or their religious/faith-based community



Our findings show that youth and parents from immigrant families have different needs and supports when it comes to their ethnic/cultural and religious/faith-based communities.
 15% of youth avoided community or religious institutions for fear of being outed, read as trans, or harassed
 We found no significant difference in how religious immigrant and non-immigrant families are.

Top Sources Of Support For Immigrant Parents Of Trans Youth:

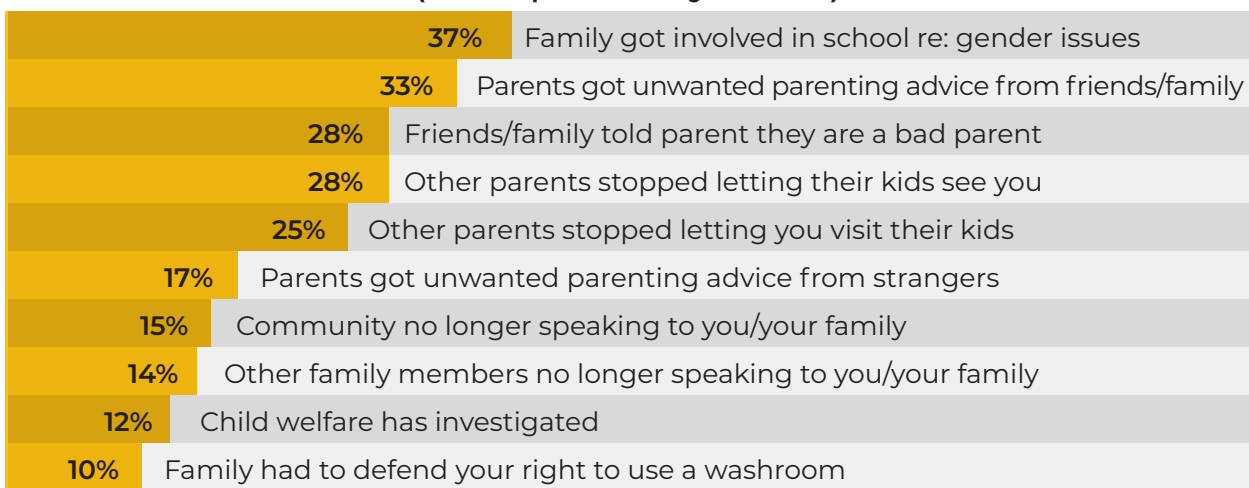
78%	Friend/relative who is not a parent of trans youth
76%	Spouse/Partner

We found **no significant difference** between youth from immigrant and non-immigrant families:

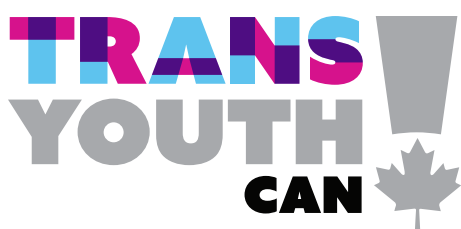
- % of youth who are living in their gender
- Youth's ages through their gender journey & their pathways to care
- Youth living in low income homes³ & food insecurity in the last 12 months
- Youth having a stable place to live & family composition (siblings & extended family)
- Gender-related support from parents or family youth said they had
- Day-to-day discrimination youth experienced

It is important to remember that this group of youth are the ones who are receiving clinical care, and this does not reflect possible differences in the broader community of trans youth. Our findings raise several questions about barriers to care, including for families with low income, lower levels of education, and immigrants.

Top 10 External Stressors On Immigrant Families (As Reported by Youth):



63% of youth from immigrant families reported **AT LEAST ONE** external stressor on the family



Who are the participants in this study?

There are 174 youth and 160 parents/caregivers participating in the Trans Youth CAN! study. Youth aged 15 or younger and who had reached puberty were recruited at their first appointment after referral for blockers or hormones at one of 10 medical clinics across Canada (Vancouver, Calgary, Edmonton, Winnipeg, London, Toronto, Hamilton, Ottawa, Montreal, Halifax). Youth could also invite one parent or caregiver to participate. This data was collected between September 2017 and June 2019.

1 - Based on Statistics Canada categories.
 3 - <https://bit.ly/38KqMXL>

2 - Based on self-report of ethnoracial background.

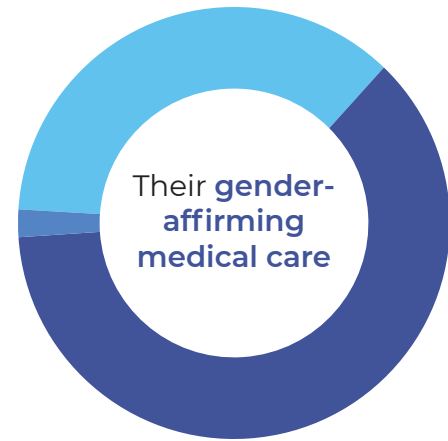
Parental Support

Experiences of Trans and Non-Binary Youth Under Age 16 in Clinical Care

What youth say about their parents' support for:



62% All Parents Very Supportive
38% Moderate or Mixed Support
0% All Parents Unsupportive



60% All Parents Very Supportive
38% Moderate or Mixed Support
2% All Parents Unsupportive

60% Among youth who have asked their parents or caregivers to use a different pronoun, 60% of youth say **all** their parents **always** use their pronouns.

92% 92% of youth say that at least one parent is a source of support.

Youth whose parents were all very supportive had **LESS** gender distress¹ than youth who have moderate/mixed support from parents.

15% About 15% of youth rate their parents' support **more positively** than parents rate their own support.

20% About 20% of youth rate their parents' support **more negatively** than parents rate their own support.

Less Than 10%

Less than 10% of youth and parents say addressing their youth's gender had a negative impact on the family. About **half of youth** and parents said say addressing their youth's gender has a **positive impact** on their family.

56% 56% of youth feel their family understand them.

82% 82% of youth feel their family cares about their feelings.

We found **NO DIFFERENCE** in the support parents gave to their youth between:

- White vs Visibility Minority (& Indigenous) parents
- Immigrant vs Non-Immigrant parents
- Parents Above vs Below the low-income measure cut off²
- Very Religious vs. Non-Religious parents

WHAT ONE THING YOUTH SAY THEY NEED FROM THEIR PARENTS

TRUST

HUGS

SUPPORT

RESPECT

UNDERSTANDING

LOVE

PRIVACY

PATIENCE

FREEDOM

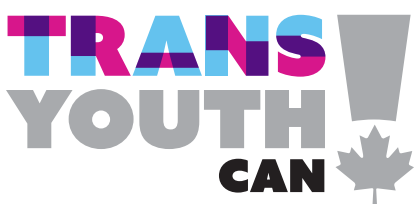
ADVOCACY

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1 - What is gender distress? Learn how we define and measure it here: https://transyouthcan.ca/wp-content/uploads/2019/03/Gender-Distress-Scale-vSHARE_EN.pdf

2 - <https://www150.statcan.gc.ca/t1/tb1/en/tv.action?pid=1110023201>



Pathways to Gender-Affirming Medical Care

For Trans & Non-Binary Youth Under Age 16

While Individual Pathways Varied, Average Age When Youth...



For this context, 'gender clinic' refers to **medical clinics** providing gender-affirming medical care (e.g., puberty suppression/hormones) for youth

13 - 14 Months

Youth spent an average of 13 to 14 months seeking hormone treatment

269 Days

Youth waited an average of 269 days from the time of referral to their first medical appointment at gender clinic

Factors found to be associated with **older ages**, a **longer** time seeking hormones or a **longer** wait time for 1st medical appointment at gender clinic included*:

- Youth identifying as Indigenous
- History of self-harm and/or suicidality
- Seeing more types of providers before gender clinic
- Experiencing more day-to-day discrimination²

*Sociodemographic factors were **NOT** found to be associated with appointment **WAIT TIMES**

Factors which **did not** affect youth's ages through care, time spent seeking hormones or wait times included:

- Sex assigned at birth or reported gender
- Belonging to an immigrant family
- Being from a low-income home¹
- Parental conflict about youth's gender
- White ethnoracial background
- Being on the autism spectrum

Providers Seen Before Coming to Youth Gender Clinic

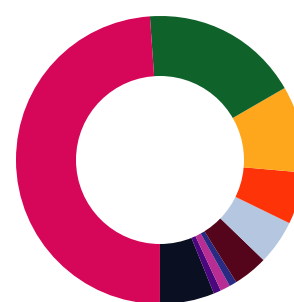
On average youth saw 3 different types of providers, and up to 8 types, to discuss their gender before their first visit at the youth gender clinic.

The types of providers youth saw (will not sum to 100% as youth may have seen multiple providers):

69%	Family doctor
41%	Psychologist
34%	School counsellor
34%	Another type of counsellor
29%	Pediatrician
21%	Psychiatrist
18%	Community group
9%	Adolescent medicine specialist
5%	Endocrinologist
4%	Nurse practitioner
1%	Indigenous elder
<1%	Religious leader
<1%	Another type of provider not listed
3%	Saw no other providers about gender

Note: A psychologist/psychiatrist assessment is required at 4/10 gender clinics in this study before blockers/hormones are prescribed.

Youth Were Referred to the Youth Gender Clinic by:



50%	Family doctor
18%	Pediatrician
10%	Psychiatrist
6%	Self-referral ³
5%	Social worker
4%	Psychologist
<1%	Nurse practitioner
<1%	School counsellor
<1%	Adolescent medicine specialist
6%	Other

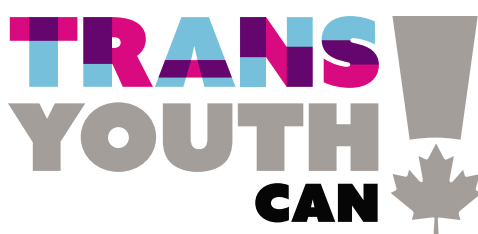
9%

of youth had participated in some kind of conversion therapy before coming to the gender clinic

9%

Another 9% of parents considered having their youth participate

Conversion therapy for those under 18 years old is banned in Manitoba, Nova Scotia, Ontario, PEI, Vancouver, Calgary, and Edmonton (as of February 2021).



Who are the participants in this study?

There are 174 youth and 160 parents/caregivers participating in the Trans Youth CAN! study. Youth aged 15 or younger and who had reached puberty were recruited at their first appointment after referral for blockers or hormones at one of 10 medical clinics across Canada (Vancouver, Calgary, Edmonton, Winnipeg, London, Toronto, Hamilton, Ottawa, Montreal, Halifax). Youth could also invite one parent or caregiver to participate. This data was collected between September 2017 and June 2019.

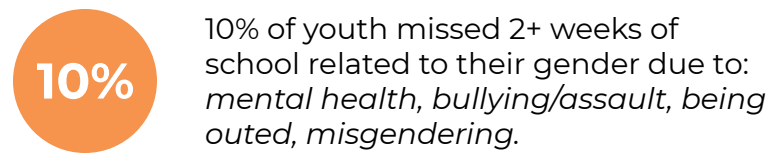
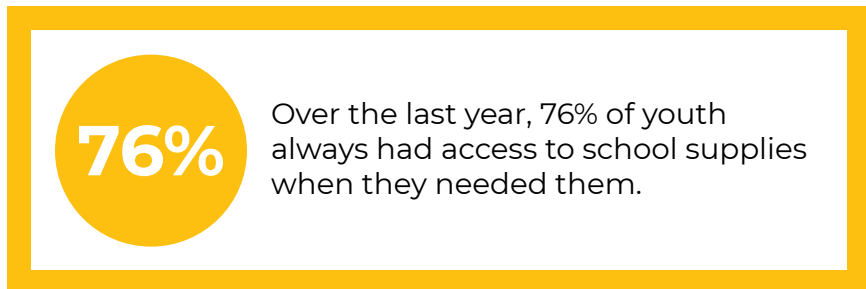
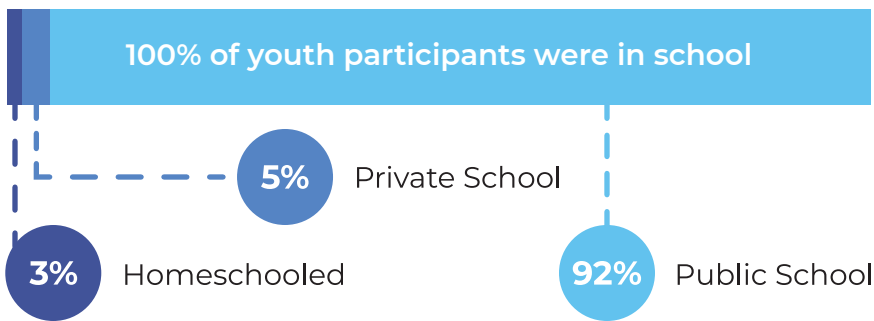
1 - <https://doi.org/10.1016/j.socscimed.2018.12.016>

2 - <https://www150.statcan.gc.ca/t1/tbl/en/tv.action?pid=1110023201>

3 - Only 3 out of 10 gender clinics in this study accept self-referral

School Experiences

Experiences of Trans and Non-Binary Youth Under Age 16 in Clinical Care

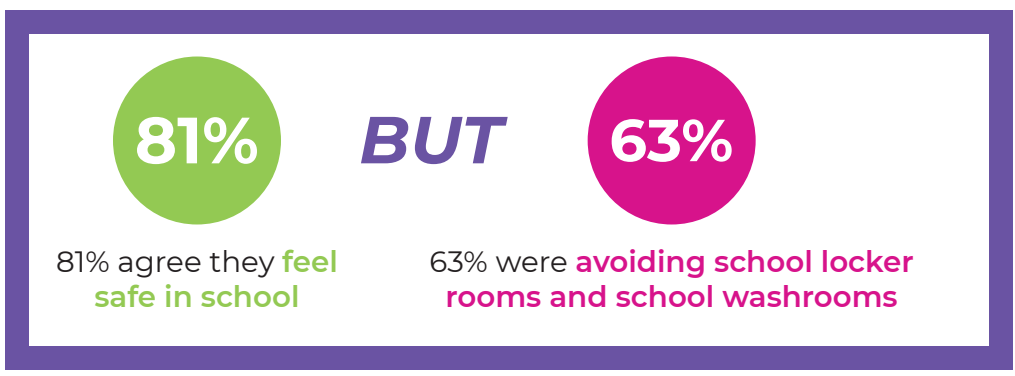
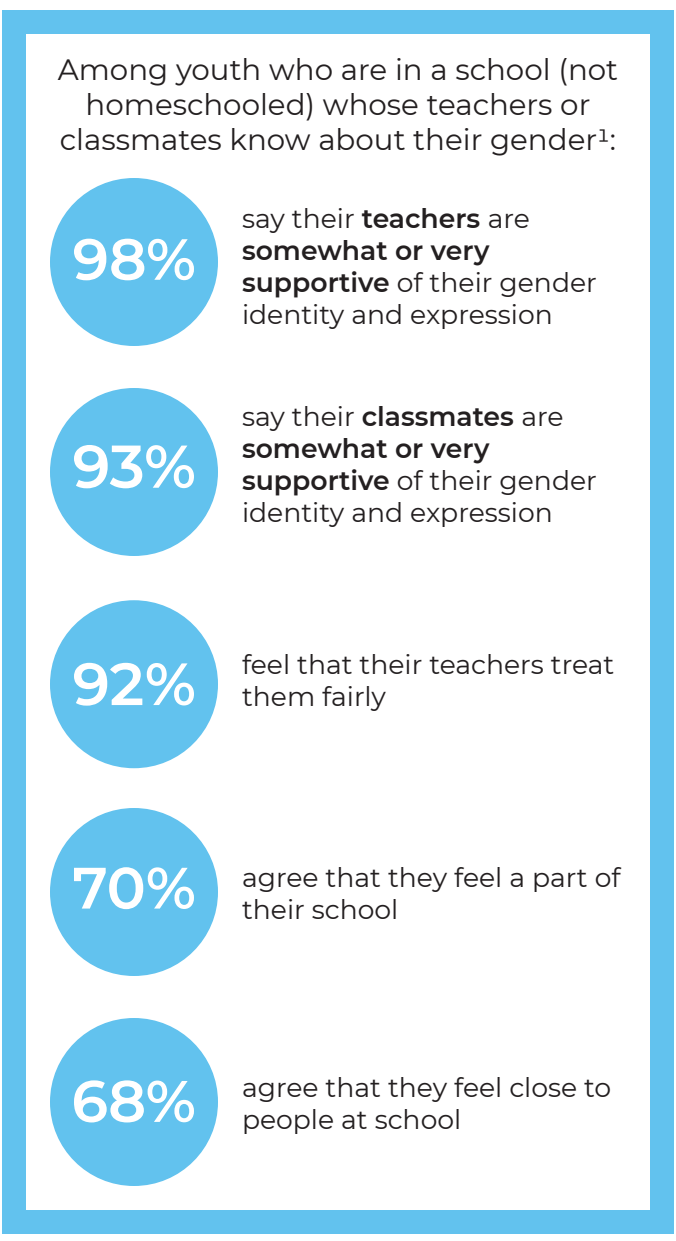
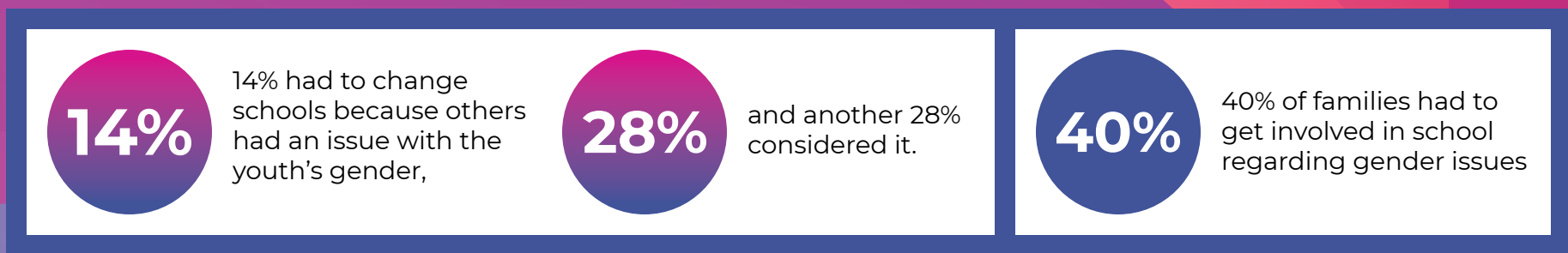


“ I was getting misgendered at school and having panic attacks.

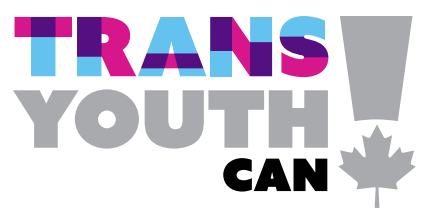
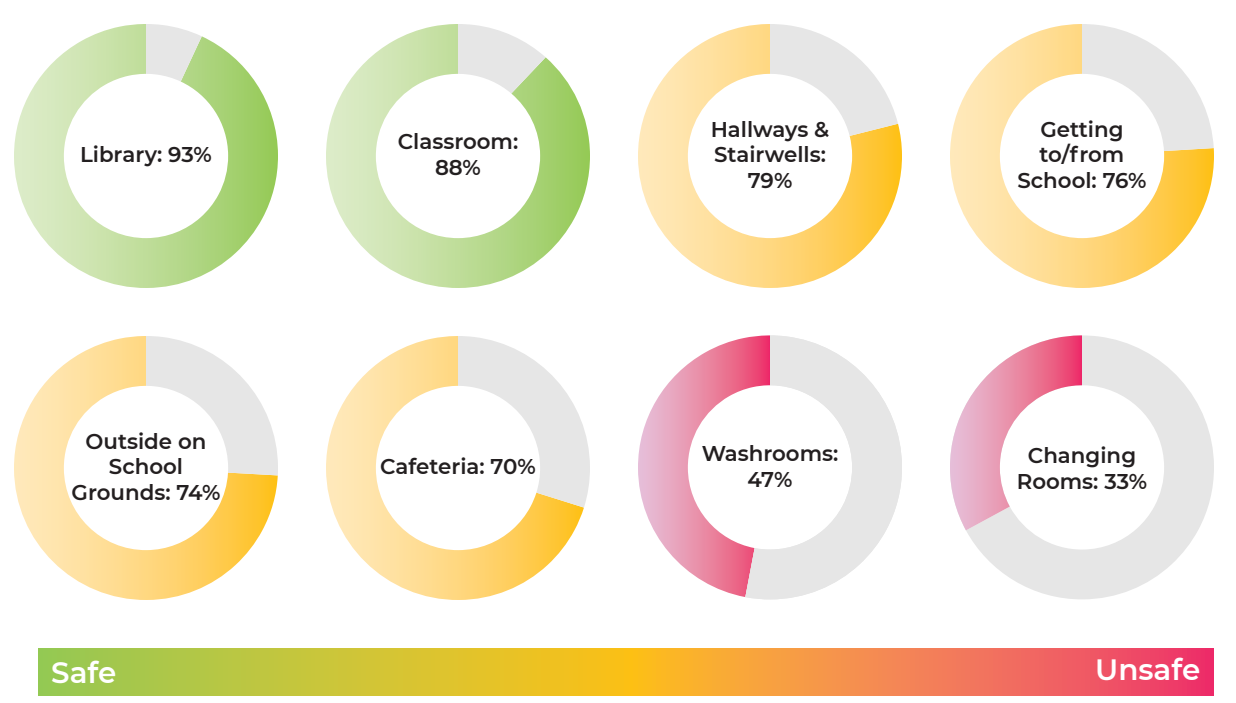
A transphobic student in [my] class assaulted [me] physically, and then [the] teachers took the transphobic student's side.

When I first came out, I did not want to go to school as I was afraid of what kids would say as teachers had already told kids what my new pronouns were.

”



Safety at School: Percentages Of Youth Who Felt SAFE In The Following Places



1 - For 2.7% of youth, classmates don't know about their gender; for 12.1% of youth, teachers don't know about their gender.

Who are the participants in this study?

There are 174 youth and 160 parents/caregivers participating in the Trans Youth CAN! study. Youth aged 15 or younger and who had reached puberty were recruited at their first appointment after referral for blockers or hormones at one of 10 medical clinics across Canada (Vancouver, Calgary, Edmonton, Winnipeg, London, Toronto, Hamilton, Ottawa, Montreal, Halifax). Youth could also invite one parent or caregiver to participate. This data was collected between September 2017 and June 2019.

Self Care & Coping

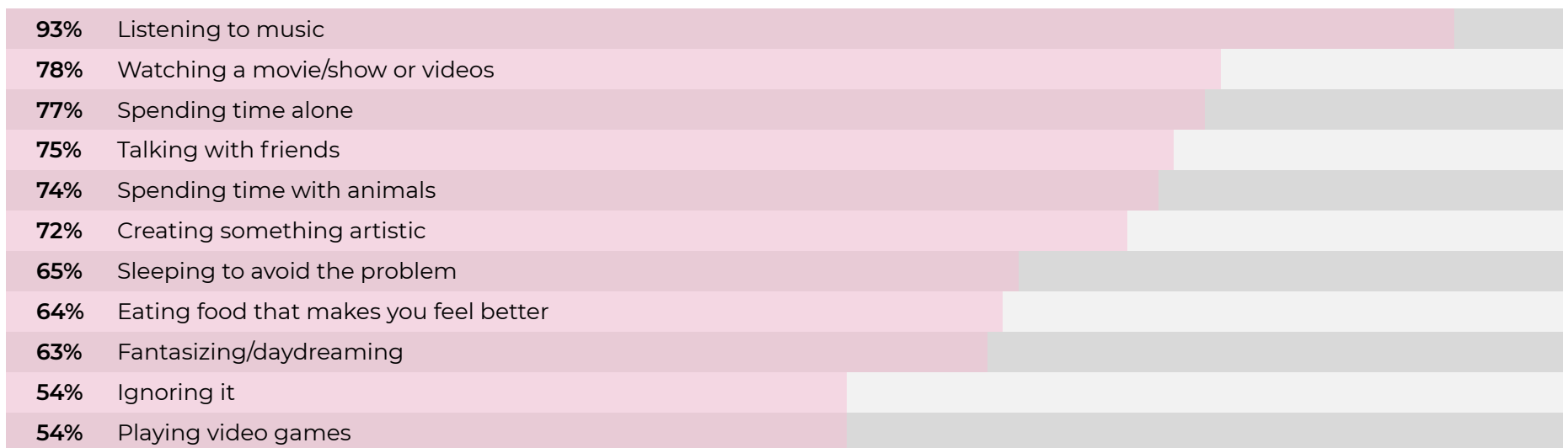
Experiences of Trans & Non-binary Youth Under Age 16 in Clinical Care



- 60% of youth said there is an LGBTQ+ youth group in their community
- 55% of those youth attended it
- 66% of attendees said it was at least somewhat useful
- 45% did not attend because they...
 - 38% didn't want or need to, or weren't interested
 - 13% didn't want to be outed
 - 16% had social anxiety or were nervous
 - 20% were too busy
- 39% of youth accessed online groups for trans, non-binary, two-spirit or LGBT youth "Amino Apps" communities (for trans or LGBTQ+ youth) were the most recommended

We found no difference between transmasculine and transfeminine youth in support group attendance or use of online groups.

Strategies Youth Use MOST Often To Cope With Stress:



Transmasculine youth used more types of coping strategies than transfeminine youth, particularly individual strategies like spending time alone, journaling, or sleeping.

11%

of youth used marijuana in the last month to deal with general stress

5%

of youth used it to deal with gender-related stress

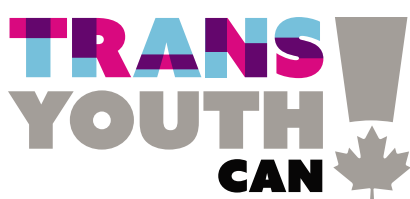
Places Youth Are Avoiding To Prevent Harassment Or Being Outed:

All Youth	Transfeminine Youth	Transmasculine Youth
81% Washrooms or locker rooms	57%	86%
68% Gyms, pools, or sports venues	35%	76%
46% Stores or restaurants	30%	50%
39% Schools	21%	43%
39% Other people's homes	11%	46%
34% Social groups or community events	6%	40%
27% Public transit or travelling	9%	30%
22% Community or religious institutions	2%	26%
20% Public or outdoor spaces	9%	22%
14% Avoiding no spaces	39%	9%

Transmasculine youth were found to be avoiding overall **TWICE** as many **TOTAL** types of places on average compared to transfeminine youth (about 4 types vs 2).

AND we found that transmasculine youth were avoiding **EACH PLACE** on this list more frequently than transfeminine youth.

*91% of transmasculine youth were living in their gender all of the time, compared to only 60% of transfeminine youth. A higher likelihood for transphobia against youth living in their gender may be why transmasculine youth were found to be avoiding more spaces.



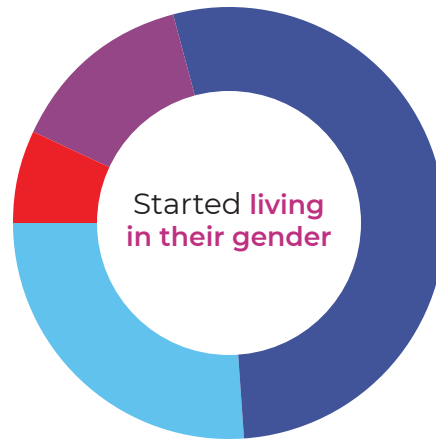
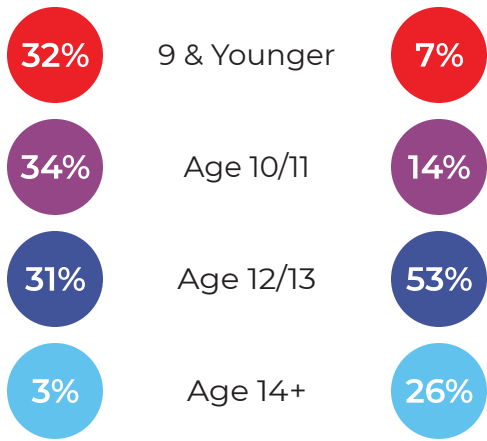
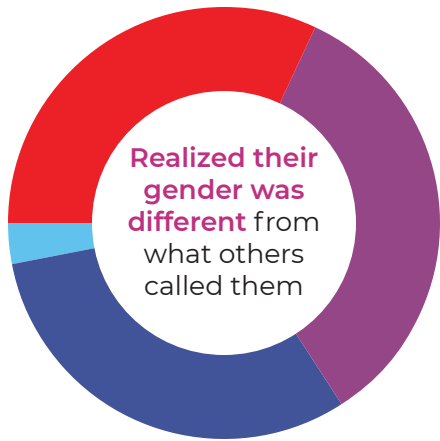
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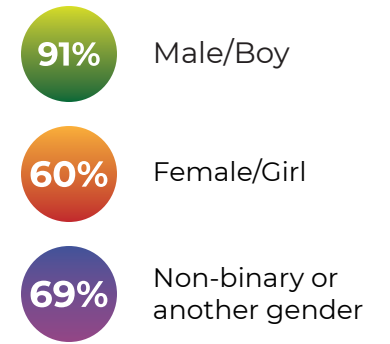
Who are the People Served by Canadian Trans Youth Clinics?

Characteristics Of Trans And Non-Binary Youth Under Age 16 In Clinical Care

Age That Youth...

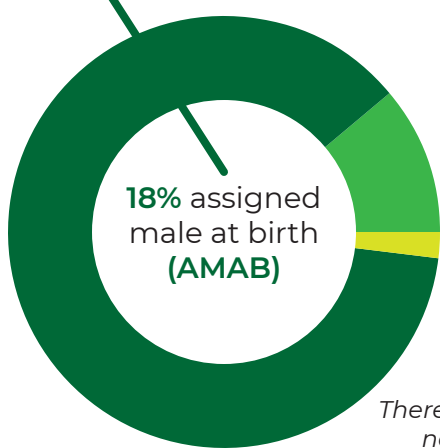


Youth living in their gender *all of the time*:

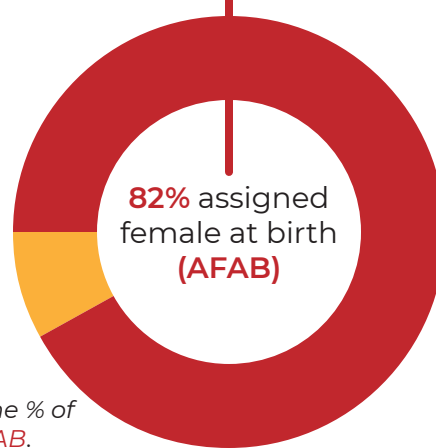
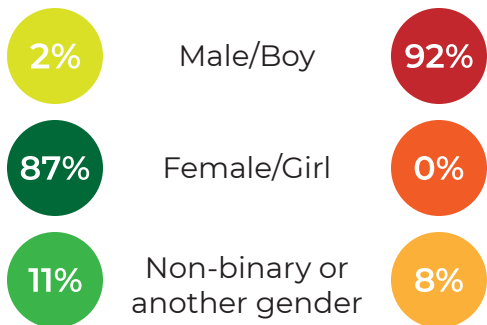


Sex Assigned At Birth:

This is similar to what was found for these ages in a national community survey¹



Their Gender Identity:

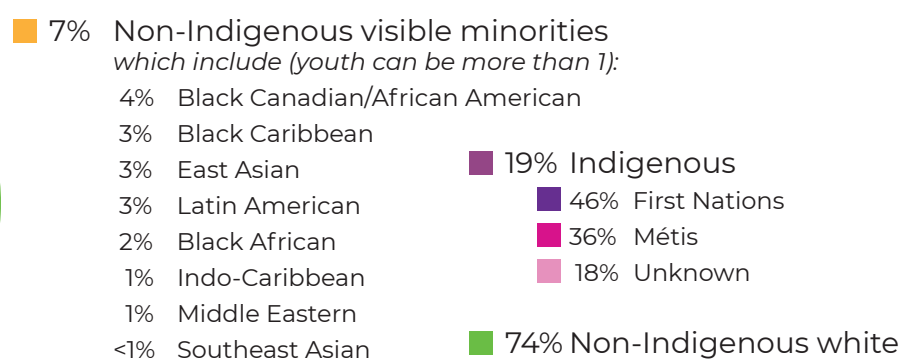


There was no statistically significant difference in the % of non-binary youth between those AMAB and AFAB.

Other words youth use to describe their gender:

Garçon féminin
 Non-binary boy
 Androgynous
 Demiboy
 Cis but questioning
 Flamboyant
 Genderfluid
 Neither gender
 Genderqueer
 In the middle of male and female

Ethnoracial Background



Compared to the Canadian population: 5% Indigenous² and 27% visible minorities³

4% of youth were immigrants to Canada

29% of youth had 1+ immigrant parents

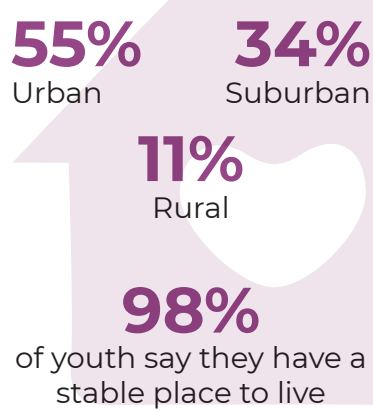
Compared to 22% of the Canadian population⁴

2/3

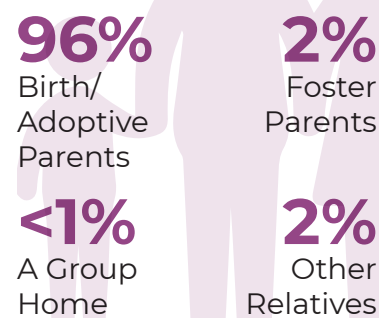
of youth had at least one other type of diagnosis, other than *gender dysphoria* including⁵ (youth can have more than 1):

- 45% Anxiety disorder
- 35% Depression/mood disorder
- 23% ADHD
- 6% Autism Spectrum
- 5% Learning or developmental disability

Where Are Youth Living?



Youth Are Living With...

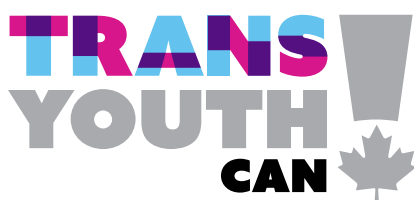


27% of youth live in low income household⁶

Compared to 17% of all Canadians under 18 years old⁷

14% of youth experienced food insecurity in the last 12 months

Compared to 17% of all Canadians under 18 years old⁸



Who are the participants in this study?

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1 - <https://bit.ly/3naRmha>

2 - <https://bit.ly/3ftMXDe>

3 - <https://bit.ly/3kZTZB2>

4 - <https://bit.ly/39dNZ5a>

5 - Includes a wide variety of mostly physical health like asthma, neurologic or gastrointestinal (GI) disorders; and some mental health like substance use or developmental disorders (less than 3%)

6 - <https://bit.ly/36lQICQ>

7 - <https://bit.ly/38xp6kE>

8 - <https://bit.ly/2UhsMPa>