

Queering the Sustainable Development Goals in Canada

Not Leaving LGBTQI2S Communities Behind

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Executive Summary

The United Nations' Sustainable Development Goals (SDGs) were generated during the 2012 United Nations Conference on Sustainable Development, under the professed theme that sustainable development should "Leave No One Behind". This was reiterated within the Ministerial Declaration from the 2017 High-Level Political Forum on Sustainable Development which emphasises the importance of "putting the furthest behind first" (Ministerial Declaration, 2017). Despite this emphasis on inclusion, Canada has not meaningfully incorporated lesbian, gay, bisexual, trans, queer, intersex, and Two Spirit (LGBTQI2S) communities within the Federal Sustainable Development Agenda.

Noticing this gap, Egale Canada Human Rights Trust (Egale) took on the task of assessing how LGBTQI2S communities fit into Canada's commitment to 'leaving no one behind'. To do so, we strategically chose to focus on the seven specific SDGs (1, 3, 5, 8, 10, 11, 16) that address the most pressing areas of concern for LGBTQI2S communities in Canada. It is important to note that the Federal Sustainable Agenda developed by the Canadian government solely focuses on goals 6, 7, 9, 11, 13, 14 and 15 which prioritise climate, resource management/development, and infrastructure sectors. While we recognize that environmental factors within sustainable development are key, solely focusing on these areas, as the Canadian government has done, results in a deficit by which pressing issues facing LGBTQI2S communities are erased.

We intend for this document to highlight this gap with the hope of encouraging the federal government to expand their development scope to create more comprehensive and, ultimately, more inclusive policies for LGBTQI2S communities. Accordingly, this report functions as an analysis of Canada's commitment to the implementation of the SDGs in a way that is inclusive of LGBTQI2S communities and their experiences. By queering the SDGs, Egale provides data and evidence that informs detailed recommendations on how to meaningfully and intentionally include LGBTQI2S communities in Canada's plans for sustainable development.

To do so, we recommend that all levels of government - municipal, provincial/territorial, and federal - adopt the following recommendations. Please note that this is not an exhaustive list, and more detailed recommendations can be found in specific subsections:

FOCUS

Focus on all SDGs in a comprehensive and interconnected way as they are innately linked and are achievable only when tackled as a unit (Ministerial Declaration, 2017). This should be done using an implementation plan that accounts for the intersections of inequity and discrimination that LGBTQI2S communities encounter, especially with regard to race, ability, and socioeconomic class;

EFFORT

Make a concerted effort when gathering economic, health, and violence data to reach LGBTQI2S communities, and especially those individuals who are marginalized in multiple ways. There is an overwhelming need for data collection that is inclusive of LGBTQI2S individuals and that is disaggregated to show trends of compounded marginalization when gender identity, attraction, race and ability intersect;

ENGAGE

Meaningfully engage with diverse LGBTQI2S populations across the country in the consultative process of developing the Canada Poverty Reduction Strategy, and to allocate targeted funding for policy and program development that is specific to LGBTQI2S communities, with an emphasis on LGBTQI2S communities of colour, Two Spirit and LGBTQI Indigenous communities and LGBTQI2S persons with disabilities;

SUPPORT

Provide support and funding to organizations looking to develop trans inclusive policy and programming in workplaces;

TRAIN

Provide training and ongoing professional development for healthcare practitioners surrounding LGBTQI2S health in general, and specifically issues related to HIV/AIDS, transition healthcare, and sexual and reproductive health from a holistic and patient-centred lens;

DEVELOP

Develop a National Gender Affirming Healthcare Strategy that models the work and approach of Trans Care BC to ensure comprehensive healthcare for trans and gender diverse communities that is physically and economically accessible and addresses their wide-ranging healthcare needs;

INCLUDE

Explicitly include Two Spirit and LGBTQI Indigenous people in the scope of the inquiry into Missing and Murdered Indigenous Women, as prioritized communities and participants integral to the process;

CONDUCT

Conduct large-scale consultations with intersex people living in Canada as an initial step towards reforming section 268(3) of Canada's Criminal Code, which continues to allow non-consensual surgery by medical practitioners to alter the bodies of infants and children whom they perceive to be ambiguous, a practice that disproportionately impacts intersex people.

ENSURE

Ensure that the newly released National Gender-based Violence Strategy, It's Time: Canada's Strategy to Prevent and Address Gender-Based Violence, includes meaningful engagement with LGBTQI2S communities, especially racialized trans women, Indigenous women, and gender diverse and Two Spirit people. Additionally, the strategy must provide specific funding allocations that directly addresses the violence faced by the aforementioned communities recognising the "urgency of addressing structural barriers to gender identity" (Ministerial Declaration, 2017);

DECRIMINALIZE

Decriminalize sex work and conduct full and open consultations with sex work advocates to determine the most effective occupational safety measures for transgender women, gender diverse, and Two Spirit persons who engage in sex work, in an effort to make all work safe, inclusive and sustainable;

REPLACE

Replace the current GBA+ lens with an Intersectional Feminist Analysis approach to more meaningfully acknowledge multiple identities that represent people's lived experience and to explicitly include and integrate queer people with multiple intersections of identities such as race, ethnicity, attraction, gender, class, and ability into its analysis;

OUTLINE

Explicitly outline what 'other' means for Canada's SDG framework, naming LGBTQI2S communities in a way that reflects human rights conventions within the country;

ASSESS

As part of the Federal Government's commitment to enhance services for asylum seekers/newcomer communities, develop and implement a large scale national needs assessment in order to identify the support needs of LGBTQI asylum seekers/newcomers. This initiative should be funded by the government but lead by LGBTQI asylum seeker/newcomer service agencies to ensure meaningful engagement and the results should be used to inform policy, programming, and services;

ENGAGE

Meaningfully engage with diverse LGBTQI2S populations across the country in the development of the National Housing Strategy and allocate targeted funding for policy, programming, and training development that is specific to LGBTQI2S communities, with an emphasis on LGBTQI2S youth and seniors, LGBTQI2S communities of colour, Two Spirit and LGBTQI Indigenous communities, LGBTQI2S persons with disabilities and LGBTQI newcomers and asylum seekers;

REVIEW

Review and revise the different Vital Statistics Acts and make them consistent in each province/territory to remove barriers preventing legal name and sex designation changes that affect trans and gender diverse people such as cost, physician approval and extensive wait times;

WORK

Work intentionally and meaningfully towards being a global benchmark for LGBTQI2S inclusion through the commitment to implementing the SDG's.



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1.0 Introduction

1.1 Context

The Sustainable Development Goals (SDGs) are a brainchild stemming from the United Nations Conference on Sustainable Development in Rio de Janeiro in 2012, replacing the Millennium Development Goals (MDGs) which were piloted in 2000. The MDGs began as a global effort to tackle the indignity of poverty by focusing on areas such as hunger and expanding primary education to all children among other development priorities. While an admirable effort, the MDGs had been heavily criticised for lacking measurability and tangible indicators that could be used and applied universally and saw little progress beyond increasing awareness and bringing attention to these pressing issues. The SDGs, building on the foundation laid by the MDGs, created a set of universal goals that meet the urgent environmental, socio-political and economic challenges facing our world. The goals all intersect and interconnect with one another, which means that success is entirely dependent on viewing development holistically and supporting the document's theme of "Leave No One Behind."

1.0 Introduction

1.2 Relationship between LGBTQI2S Community and SDGs

Since the inception of the MDGs in 2000 to the present, LGBTQI2S communities have found themselves excluded from this global collaboration to end inequalities – excluded by not being consulted, by not being explicitly acknowledged or named in either of the documents, and excluded by not incorporating the eliminating of LGBTQI2S discrimination in its multiple forms as integral to achieving these goals.

While we understand the precarious political position that the UN finds itself in having to balance and be aware of the different social realities of its member states, Canada does not have this excuse. The SDGs are meant to be a universally accepted plan that must then be tailored to fit the socio-political, economic, and environmental needs of the countries who sign on, as they are first accountable to their citizens and then the global community. Therefore, while LGBTQI2S communities were not explicitly acknowledged in the SDG document, Canada must include them in their measurement and indicators as under the Canadian Human Rights Act (1985), sex, sexual orientation, gender identity, and gender expression are listed as protected grounds. While individual provinces and territories are governed by their own specific human rights legislation, the federal government can still leverage political power and funding to ensure LGBTQI2S communities are acknowledged and are meaningfully included in areas such as healthcare, employment, and education. Ultimately, it is the responsibility of all levels of government - municipal, provincial, territorial, and federal - to individually and collaboratively implement measures and practices that aim to achieve the SDGs through methods that are inclusive of LGBTQI2S communities.

1.0 Introduction

1.3 Why should LGBTQI2S communities hold countries accountable to these goals?

LGBTQI2S communities have and continue to struggle with poverty, hate crime and violence, access to healthcare, gender inequality, access to sustainable and productive employment and economic opportunities, and homelessness. These are all main themes outlined in the SDGs. The SDGs include two elements that can help respond to these issues - both in Canada and internationally: accountability and visibility. The SDGs provide clear and measurable ways of holding countries accountable to eliminating issues that intersect with LGBTQI2S communities and heightening awareness of LGBTQI2S equity locally and globally. By showing how LGBTQI2S communities and the SDGs connect, we can begin to see why so many in LGBTQI2S communities have been 'left behind' and begin work towards meaningful inclusion.

1.4 What this report aims to do

Egale's "Queering the Sustainable Development Goals in Canada: Not Leaving LGBTQI2S Communities Behind" focuses on key SDGs (1,3,5,8,10,11,16) that are especially relevant to the lives and experiences of LGBTQI2S people in Canada. Through an in-depth analysis of these key SDGs, this report provides detailed quantitative and qualitative data about the experiences of LGBTQI2S communities and links to Canadian policy and legislation to inform our recommendations.

We intend for this document to encourage the federal government to expand their development scope in order to be more comprehensive and, ultimately, more inclusive when viewing and implementing development policies. Egale looks forward to collaborating with all levels of government in Canada to create sustainable development throughout the country.

1.0 Introduction

1.5 Conceptual Frameworks

In order to produce a comprehensive analysis of Canada's response to the UN's SDGs that considers the complex lived experiences of lesbian, gay, bisexual, trans, queer, intersex, and Two Spirit (LGBTQI2S*) individuals in Canada, Egale employed the following conceptual frameworks.

Indigeneity and Colonization:

Indigenous Peoples are the holders of languages, knowledge systems, and beliefs and possess invaluable knowledge of practices for the sustainable management of natural resources. They have a special relationship to and use of their traditional land. Their ancestral land has a fundamental importance for their collective physical and cultural survival as people.

Worldwide, many Indigenous groups have experienced disruption of their ways of being in many forms including cultural as well as hegemonial genocide due to processes of colonization through foreign settlement and state policies that forced the dispossession of their ancestral lands, territories and resources. Thus, the processes of colonization continue to influence and have everlasting impacts on our understanding and experiences of systems of power, oppressions, and domination between groups, nations, and peoples.

*The acronym 'LGBTQI2S' is used here to reference all people with diverse gender identities and experiences of attraction (sexual orientation), including those who identify as lesbian, gay, bisexual, trans, Two Spirit, intersex, queer or questioning. The terms LGBTQI2S, LGBTI, queer and sexual and gender minorities will be used interchangeably throughout this paper. However, the terms gay, lesbian, bisexual, transgender, intersex or Two Spirit people will be used to refer to specific identities and populations.

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1.5 Conceptual Frameworks

Gender and Sex Binary and Heteronormativity:

As a tool of colonization, a binary understanding of gender recognizes the existence of only two categories: men and women. Through this understanding, not only is gender narrowly conflated within falsely binary sex categories – male or female – but the binary also erases numerous groups of people, as intersex, trans, and gender diverse people are not recognized. This includes Indigenous concepts of gender identities beyond the man-woman binary, often referred to as Two Spirit. The erasure of these groups reinforces heteronormativity, which places heterosexuality as the “natural” and only valid way of being.

Intersectionality:

When considering the social location of individuals, and communities, and their experiences, it is critical to meaningfully acknowledge that multiple elements of identity represent people’s lived experience such as sex, race, ethnicity, attraction, gender identity, class, and ability. Within international human rights discourse, these categories of identity are often considered in isolation, or as applied to a universal subject. Intersectionality is a legal and social analysis that recognizes that the implementation of universality in international human rights law fails to acknowledge the manner in which the application of law impacts or fails to impact those with multiple marginalized identities. International human rights law frequently falls short of being just and restorative in its application and implementation for these marginalized communities as it is often constructed from the perspective of privileged social positions and identities.

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1.5 Conceptual Frameworks

Sex, Gender, and Sexuality Spectrum:

Adopting intersectionality as a lens for analysis widens our ability to address the ways in which the binary conceptions of sex (male and female), gender (masculine and feminine), and sexuality (heterosexual and homosexual) positions queer and trans people as “the other”, which frequently renders these populations as invisible or made hypervisible through pathologization.

This particular stigma associated with queer and trans identities and experiences causes further harm.. A growing body of research (Huang et al., 2011; Macleod et al., 2015; Mantell et al., 2016; Sharman, 2016) demonstrates that the stigma of being bisexual/pansexual encountered from heterosexual, gay, and lesbian communities reflects the ways in which biphobia influences individuals’ engagement in their sexual practices, knowledge about their sexual health, and acceptance of queer forms of attraction. Bisexual and pansexual individuals often lack social acceptance from the general population in societies that have observed significant advancements in LGBTI human rights.

Alternatively, many Indigenous societies that have resisted colonization in the Global South as well as Indigenous Peoples who seek to decolonize within the Global North have illustrated in a variety of ways that sex, gender, and sexuality operate on a spectrum as opposed to the aforementioned binary. Thus, positioning sex, gender, and sexuality as continuous and along a spectrum meaningfully facilitates the positive application to the Yogyakarta Principles in international human rights law with relation to sexual attraction and gender identity.

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1.5 Conceptual Frameworks

Minority Stress Model:

LGBTQI2S people who are racialized and/or disabled hold multiple marginalized identities. Due to experiences of stigma such as discrimination in legislation as well as state and private institutions, hate crimes, homophobic slurs and language, and other forms of social oppression including racism, sexism, ableism, homophobia, biphobia, and transphobia, many racialized and disabled LGBTQI2S individuals experience additional stress that negatively impact health and well-being. This added stress, often referred to as minority stress, can lower mental health status (Everett, 2015; Lehavot & Simoni, 2011; MacKenzie, Huntington, & Gilmour, 2009), including heightened risk of developing mental health concerns such as depression, anxiety, substance use and abuse, and suicidality.

Social Determinants of Health:

Using a population health approach, the concept of social determinants of health recognizes that people's health goes beyond personal lifestyle choices and seeking medical treatment within our healthcare system, and emphasizes people's living conditions as the key factors of one's health (Mikkonen and Raphael, 2010). There are several social factors that impact population health, as an individual's health is embodied by their income and wealth distribution, employment status and work conditions, their connections to social networks and community, the state of the environment in their neighbourhood, as well as access to economic and social resources.

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1.5 Conceptual Frameworks

Reproductive Justice:

The concept of self-determination is integral to the value of human rights. Historically, women of colour and Indigenous women's reproduction has been constructed as inferior, defective, immoral, irresponsible, infantile, and savage (Roberts, 1997; Smith, 2010), in juxtaposition to the construction of white women's reproduction. Reproduction is not just a matter of individual choice. Reproductive health policy affects the status of entire groups. It reflects which people are valued in our society and who is deemed worthy to bear children and capable of making reproductive decisions for themselves. Reproductive decisions are made within a social context, including inequalities of wealth and power (Roberts, 2013). As an alternative to the reproductive rights movement, reproductive justice is an intersectional theoretical framework which provides a context for marginalized women's and queer people's reproductive experiences:

"The right to have children, not have children, and to parent the children we have in safe and healthy environments -- is based on the human right to make personal decisions about one's life, and the obligation of government and society to ensure that the conditions are suitable for implementing one's decisions is important for women of color (sic) [and queer people]" ("What is RJ", 2006).

Harm Reduction:

As defined by Marlatt (1998), harm reductionism is "an umbrella term for interventions aiming to reduce the problematic effects of behaviours" (p.201). Rather than encourage the absence of all harmful behaviours, a harm reduction approach attempts to "meet individuals where they are at" (Marlatt & Witkiewitz, 2010, p. 591), aiming to lessen potentially harmful behaviours without blaming or judging any behaviours that may continue throughout this process. As a result, a harm reduction analytic lens focuses on the health and socioeconomic outcomes of individuals rather than rate of engagement in harmful activities ("Harm Reduction", 2008).

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1.5 Conceptual Frameworks

Trauma-and Violence-informed:

Individuals who have experienced trauma may be triggered by a number of situational occurrences including language, sounds, behaviours, activities, and locations. A trauma and violence informed lens ensure that all work is aimed to limit further harm to survivors while also working towards healing and justice (Ponic, Varcoe & Smutylo, 2016). Additionally, this lens ensures a focus on the broader social conditions, oppressive systems and institutions that lead to violence and further exacerbate historical trauma (“Trauma- and Violence-Informed Care”, 2016).

Right to Development:

This conceptual framework frames development as multidisciplinary and shows the link to existing global human rights discourse emphasising that all humans are entitled to participate in, contribute to, and enjoy economic, social, cultural and political development, in which all human rights and fundamental freedoms can be fully realised (United Nations, 1986). This concept informs the analyses and recommendations found in this document as it implies the full realisation of the right of peoples to self-determination and requires and mandates active, free, and meaningful participation so as to “Not Leave Anyone Behind”. This lens embodies principles of equality, non-discrimination, participatory processes, and accountability in the development of economic, social and political policies that meaningfully include the most vulnerable and marginalized members within LGBTQI2S communities.

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1.5 Conceptual Frameworks

Global North and Global South:

As the Orlando Pulse Nightclub massacre in June 2016, and the ongoing systemic marginalization of diverse gender identities and sexual attractions within the Global North show, there is still much work to do domestically. Within Global North states, LGBTQI2S communities face uncertain legal recognition and experience stigma, marginalization as well as precarious living conditions for their way of being. As a result, it must be acknowledged that homophobia, biphobia, transphobia, and discrimination on the grounds of gender identity, gender expression, and attraction is not exceptional to the Global South.

The diffusion model, where knowledge production and norms are framed by the centre and then diffused to the periphery, is inherently problematic within international relations and international development. This model projects the Global North as more “progressive” due to assumptions that there is more “acceptance” of gay and lesbian identities. Holding to these assumptions continues to impose an asymmetrical “West is Best” approach instead of working in solidarity with nation states in the Global South (Browne & Nash, 2014). From this perspective, the Global North falsely revisions itself as having overcome the social disparities that continue to exist for LGBTQI2S populations in the West.

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1.5 Conceptual Frameworks

Global North and Global South cont'd:

This “one size fits all” approach – whereby strategies to achieve justice for LGBTQI2S communities in the Global North are merely transplanted to the Global South – does not acknowledge the specific cultural histories of other nation states or the plurality of queer identities. It is not only critical to acknowledge the legacy of colonization through the imposition of anti-sodomy laws that criminalized homosexuality around the world (Baisley, 2016; Bosia, 2015), but it is also necessary to meaningfully engage in alternative methods of shifting the deeply embedded discrimination of queer people. Furthermore, these alternatives must be explicitly distinct from once again imposing Western narratives of modernization and embracing Western understandings and recognition of Gay and Lesbian rights in the Global South. Thus, a Global South approach within international development practices not only recognizes but also prioritizes the expertise of regional work and practices that is specific to those geographies and within those local civil societies. In doing so, the Global North’s role is to act as facilitators in engaging in the needs and agenda development by the Global South to address the challenges specific to their regional and cultural context.

1.0 Introduction

1.6 Key Terms

While a full list of definitions pertaining to sex, attraction, and gender identity are provided in Appendix 1, the following key terms are defined within this introductory section to provide important context for the remainder of the document.

Homelessness:

As defined by the Canadian Observatory on Homelessness (2012), homelessness “describes the situation of an individual or family without stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. It is the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual/household’s financial, mental, cognitive, behavioural or physical challenges, and/or racism and discrimination. Homeless describes a range of housing and shelter circumstances, with people being without any shelter at one end, and being insecurely housed at the other. That is, homelessness encompasses a range of physical living situations, organized here in a typology that includes 1) unsheltered, or absolutely homeless and living on the streets or in places not intended for human habitation; 2) Emergency Sheltered, including those staying in overnight shelters for people who are homeless, as well as shelters for those impacted by family violence; 3) Provisionally Accommodated, referring to those whose accommodation is temporary or lacks security of tenure, and finally, 3) At Risk of Homelessness, referring to people who are not homeless, but whose current economic and/or housing situation is precarious or does not meet public health and safety standards. This should be noted that for many homelessness is not a static state but rather a fluid experience, where one’s shelter circumstances and options may shift and change quite dramatically and with frequency”.

1.0 Introduction

1.6 Key Terms

Poverty:

The measure for eradicating extreme poverty within the SDG framework is based on the UN Human Poverty Index (HPI) which is often used in the context of developing countries and is currently measured by the proportion of the population which lives on less than \$1.25 per day (Collin, 2008). To more accurately measure the poverty in more developed countries, the UN developed the more comprehensive Multidimensional Poverty Index (MPI) which ranks Canada 10th among other developed nations (UN, 2017).

While there is a lack of consensus in Canada around a standardized measure of poverty, the two most commonly used measures are the Low-Income Cut-offs (LICO) and the Market Basket Measure (MBM). LICO is adjusted annually and represents an income cut-off at which a household is more likely to spend a significant portion of their total income on basic necessities. MBM is also adjusted annually, but additionally considers the cost of necessary specific goods and services in a given region like housing, food and clothing (Giles, 2004). While the calculation of these measures differs greatly, they both propose a poverty line with a significantly higher household income than the UN's HPI. This is necessary in a Canadian context as the poverty line should represent a household income that is sufficient to meet the minimum standards of living including food, shelter and clothing (Giles, 2004).

Women and Girls:

Corresponds to all who self-identify as women or girls including, but not limited to, cisgender and transgender women and girls, intersex women and girls, Two Spirit women and girls, and gender diverse and non-binary people who self-identify as women and girls.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

In this section, we analyse and provide detailed recommendations on the seven SDGs (1,3,5,8,10,11,16) that are most relevant to LGBTQI2S communities in Canada. Although many of the SDGs apply to LGBTQI2S communities in Canada and warrant their explicit inclusion, we have chosen to focus on these seven as they represent areas of social and civil life that are especially relevant for LGBTQI2S communities within the Canadian context.

For each SDG, we have highlighted the subsections and corresponding indicators which relate directly to LGBTQI2S experiences and the inclusion of these communities in the goals. Following these subsections, we provide an analysis, including statistical data, of LGBTQI2S communities and their experiences in Canada as they relate to the specific SDG being discussed. Finally, we provide a list of detailed recommendations for all levels of government concerning how LGBTQI2S communities can be meaningfully included in the implementation of the SDG. These recommendations are by no means an exhaustive list of how levels of the Canadian government can recognize LGBTQI2S communities in their implementation of the SDGs; however, they provide a basis for consideration of these communities that is intentional and necessary.

It is important to note the use of United States (US) based research findings within this document. Although US analyses cannot be directly transposed into a Canadian context, LGBTQI2S people in both the US and Canada experience similar negative social climates and barriers to inclusion. For this reason, and due to the lack of Canadian research of these intersecting communities, we must assume that LGBTQI2S communities in Canada experience comparable rates of discrimination and inequality.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.1 Goal 1: End poverty in all its forms everywhere

2.11 Relevant Subsections and Corresponding Indicators under Goal 1:

- 1.1 By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day
 - 1.1.1 Proportion of population below the international poverty line, by sex, age, employment status and geographical location (urban/rural)
- 1.4 By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance
 - 1.4.1 Proportion of population living in households with access to basic services
 - 1.4.2 Proportion of total adult population with secure tenure rights to land, with legally recognized documentation and who perceive their rights to land as secure, by sex and by type of tenure.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.1 Goal 1: End poverty in all its forms everywhere

2.12 How are LGBTQI2S communities in Canada doing in relation to goal 1.

This SDG relates directly to socioeconomics. LGBTQI2S communities, due to discrimination in the workforce and educational institutions as well as increased risks of homelessness are more vulnerable and more likely to live in poverty. This likelihood increases when a member of the community is racialized, trans, gender diverse, indigenous and/or a person with disabilities.

Because the current economic climate creates a hierarchical system, it promotes inequality as it provides advantages to those who are privileged in society. Marginalized populations which experience social and economic exclusion are often most negatively impacted by this hierarchy, particularly as there is a significant lack of government assistance to mitigate this inequality. Currently, “those in receipt of social assistance continue to subsist on benefits that place them well below any poverty measure used in Canada,” (Dignity for All, 2015). This is evident when examining poverty measures in Canada which have been disaggregated to represent singular dimensions of identity such as gender identity, race, age and ability.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.1 Goal 1: End poverty in all its forms everywhere

2.12 How are LGBTQI2S communities in Canada doing in relation to goal 1 cont'd.

While ranked tenth globally for MPI, one in seven (14.3%) Canadians currently live below the LICO, and this rate is significantly higher among marginalized populations including LGBTQI2S communities, Indigenous peoples and persons with disabilities (Dignity for All, 2015).

- Ontario-based research found that, on average 34% of trans Ontarians live below the LICO, more than twice the rate of Canadians generally (Bauer et al., 2012). The average annual income of trans people in Ontario is \$15,000 (Bauer & Scheim, 2015).
- Attraction additionally impacts the likelihood of living below the poverty line, as on average 25.7% of bisexual adults in Canada live below the LICO (Ross et al., 2016).
- With similar rates to trans communities, 37% of First Nations females and 40% of Indigenous children in Canada live below the LICO (O'Donnell & Wallace, 2011; Macdonald & Wilson, 2013).
- Persons with disabilities are twice as likely as persons without disabilities to live in poverty (Crawford, 2013).
- This discrimination is further compounded when these categories intersect, as 47% of Indigenous gender diverse Ontarians live below the poverty line (Scheim et al., 2013).
- While there is a lack of Canadian data which quantifies rates of poverty among trans people of colour, a US-based study found that 34% of African American trans communities and 28% of trans Latino communities live in poverty (Center for American Progress & Movement Advancement Project, 2015).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.1 Goal 1: End poverty in all its forms everywhere

2.13 Recommendations: Achieving Goal 1 within LGBTQI2S Communities

In order to achieve Goal 1 within LGBTQI2S communities, federal, provincial, territorial, and/or municipal governments in Canada should:

- (a) Make a concerted effort when gathering economic data to include LGBTQI2S communities, and especially those individuals who are marginalized in multiple ways. There is an overwhelming need for data collection of household income that is inclusive of LGBTQI2S individuals and that is disaggregated to show trends of compounded marginalization when gender identity, attraction, race and ability intersect.
- (b) Meaningfully engage diverse LGBTQI2S populations across the country as part of the consultative process behind the development of the Canada Poverty Reduction Strategy, and allocate targeted funding for policy and programming development that is specific to LGBTQI2S communities, with an emphasis on LGBTQI2S communities of colour, Two Spirit and LGBTQI Indigenous communities and LGBTQI2S persons with disabilities.
- (c) Provide increased funding for government social assistance programs to ensure a basic standard of living through a sufficient living wage that is available for all Canadians.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.21 Relevant Subsections and Corresponding Indicators under Goal 3:

- 3.3 By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases
 - 3.3.1 Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations
 - 3.3.2 Tuberculosis incidence per 100,000 population
 - 3.3.3 Malaria incidence per 1,000 population
 - 3.3.4 Hepatitis B incidence per 100,000 population
 - 3.3.5 Number of people requiring interventions against neglected tropical diseases
- 3.5 Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol
 - 3.5.1 Coverage of treatment interventions (pharmacological, psychosocial and rehabilitation and aftercare services) for substance use disorders
 - 3.5.2 Harmful use of alcohol, defined according to the national context as alcohol per capita consumption (aged 15 years and older) within a calendar year in litres of pure alcohol

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.21 Relevant Subsections and Corresponding Indicators under Goal 3 cont'd.

- 3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
 - 3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods
- 3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all
 - 3.8.1 Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population)
 - 3.8.2 Proportion of population with large household expenditures on health as a share of total household expenditure or income

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3

This SDG relates directly to healthcare and the promotion of holistic well-being. LGBTQI2S communities in Canada face direct and indirect barriers to healthcare access and support, especially as it relates to mental, physical, sexual and reproductive healthcare. Although Canadian public health insurance programs and services are publicly funded, there are still many healthcare services crucial for LGBTQI2S communities that are not covered, such as access to gender affirming hormone therapy.

HIV/AIDS

Rates of individuals living with HIV/AIDS are disproportionality higher within LGBTQI2S communities

- Men who have sex with men are 131 times more likely to be living with HIV/AIDS than heterosexual men (Catie, 2017). These rates are particularly high within bisexual men (Public Health Agency of Canada, 2014).
- Risk of HIV/AIDS is significantly increased within marginalized LGBTQI2S communities, specifically trans and gender diverse communities, queer and trans communities of colour, and Indigenous LGBTQI (Marcellin, Bauer & Scheim, 2013) and Two Spirit communities (Public Health Agency of Canada, 2014).
- Rates of HIV/AIDS continue to rise within incarcerated populations even while rates of testing, diagnosis, and medical support remain low (Centres for Disease Control, 2017)

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

HIV/AIDS

The criminalization of HIV/AIDS acts as a significant barrier to diagnosis and support

- Stemming from a 2012 Supreme Court of Canada ruling, individuals living with HIV/AIDS are required to disclose their status prior to engaging in sexual activity (Patterson et al, 2015). Those found guilty of non-disclosure are often charged with aggravated sexual assault and may be required to register as a sex offender (Hastings, Kazatchkine & Mykhalovskiy, 2017).
- Rates of prosecution among men of colour and gay men are disproportionately high and continue to increase, suggesting the law targets marginalized communities (Hastings, Kazatchkine & Mykhalovskiy, 2017).
- Fearful of prosecution and potential disclosure of status to others, criminalization acts as a significant deterrent to seeking healthcare support (Patterson et al, 2015).
- As women living with HIV/AIDS are also more likely to experience intimate partner violence (Centres for Disease Control and Prevention, 2014), fear of prosecution acts as a barrier to ending abusive relationships and seeking trauma-informed support.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Mental Health

Mental health disparities, including mental illness, substance use/abuse, and suicidality are significantly overrepresented within LGBTQI2S communities:

- Lesbian, gay, bisexual, and trans communities experience higher rates of mental health issues including mood disorders, anxiety, and depression than their cisgender heterosexual counterparts (Law et al., 2015; McNamara and Ng, 2016; Bauer et al., 2015). These rates are even higher among Indigenous, racialized, and newcomer LGBTQI2S populations (Logie et al., 2016).
- Lesbian, gay, bisexual, and trans communities are more likely to experience suicidal ideation and attempts. For example, according to the TransPULSE survey, almost 75% of trans adults have considered suicide and 43% have attempted suicide at some point in their lives (Bauer et al., 2015).
- While lack of data exists regarding the risk of mental health distress in intersex communities, there is some research to suggest that intersex adults struggle with mental health concerns/mental illness more than non-intersex, cisgender individuals (Rosenstreich, 2013). One analysis by Schützmann, Brinkmann, Schacht, and Richter-Appelt (2009) found the rate of mental health distress in intersex communities is comparable to non-intersex, cisgender women who have experienced significant physical and/or sexual violence.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Mental Health

- Mental health distress and risk of suicide remains exceptionally high within trans youth populations due to intense, persistent and consistent negative experiences.
 - Trans youth are more likely to engage in self-injury (Walls, Laser, Nickels, & Wisneski, 2010) and higher body dissatisfaction and disordered eating tendencies (Witcomb et al., 2015).
 - Lesbian, gay, bisexual, and trans youth are twice as likely to have suicidal ideation than their cisgender and heterosexual counterpart and are three to four times more likely to have attempted suicide that requires medical attention (Sharman, 2016; Bauer et al., 2015).
 - There is a heightened risk of suicidality among LGB youth in rural settings in comparison to their urban peers (Poon & Saewyc, 2009).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Mental Health

- Dual and intersectional oppression (e.g. attraction/gender identity AND ethnic/racialized discrimination) increases the likelihood of developing a mental health concern over and above individuals presenting with one form of marginalization (Bostwick, Boyd, Hughes, West, & McCabe, 2014).
 - For many Indigenous youth, the prevalence of suicidality is indicative of the health disparities that exist in their social and physical environment. According to a study conducted by National Aboriginal Health Organization (NAHO) 8% of trans and Two Spirit people in Ontario had attempted suicide due the treatment they received as a gender minority (First Nations Centre, 2012). Additional key indicators linked to Indigenous and Two Spirit youth suicidality include: substance use/abuse, lateral violence, generational trauma and gender-based violence, breakdown and/or loss of cultural values and belief systems, rapid cultural change (colonization, erosion of traditional practices, dislocation from land, and barriers to accessing support (Health Canada, 2013).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Substance Use and Abuse

- Stemming from minority stress and societal discrimination, LGBTQI2S communities are more at risk of developing a substance abuse problem, often concurrently with serious mental health concerns or mental illness
 - Lesbian, gay, bisexual, and trans populations, including youth, have 2-4 times higher rates of tobacco, alcohol, and drug use than the general cisgender and heterosexual population, stemming from social stressors including lack of safe non-partying social spaces, lack of cultural acceptance as well as coping stigma and trauma (Robinson, 2014; Law et al. 2015; Bolderston and Ralph, 2016).
 - Lesbian and bisexual women have higher rates of smoking tobacco than their heterosexual counterpart (AAMC, 2014; McNamara and Ng, 2016).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Sexual and Reproductive Health

- Parental rights and recognition are provincially regulated and thus wide ranging and legislatively uneven in terms of acknowledging LGBTQI2S families. Although most provinces have granted same-sex adoption, gay and lesbian couples continue to experience discrimination as well as additional barriers within the adoption system. For example, in Quebec only two parents can be acknowledged as parents regardless of gender or sex, which can be a barrier for legal recognition to a non-biological parent.
 - There has been some progress in British Columbia, Ontario, and Alberta. For instance: In 2013, British Columbia sought reforms to the Family Law Act in 2013. Under section 30 of the Family Law Act, a multiple parent family is limitedly recognized.
- In many provinces, LGBTQI2S communities continue to face legal uncertainty in being recognized as parents and experience stigma and marginalization for their family planning choices.
 - In a positive move, Ontario passed the All Families are Equal Act in November 2016 that implements reforms and increases parental rights and recognition to acknowledge family diversity within LGBTQI2S communities.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd. Sexual and Reproductive Health

- Under the archaic state of the Assisted Human Reproduction Act (AHRA), it is still illegal for many queer people who are using known sperm donors from cisgender gay or bisexual men, or for men who have sex with men (MSM) to donate sperm. MSM sperm must be tested and alongside a submitted application to the Minister of Health for approval. Additionally, for many queer families, there still remains systematic and legal barriers to meaningfully and legally accessing the fertility tax credit.
- The Public Health Agency of Canada's (2008) Canadian Guidelines for Sexual Health Education encourages education systems to include information about attraction and gender identity within sexual education curriculum. Additionally, the guidelines further address the importance of ensuring all sexual health information is inclusive of LGBTQI2S identities. Despite this need, many students across Canada are still not receiving adequate information about LGBTQI2S identities, and queer and trans students are lacking sexual health education inclusive of their unique experiences and needs (Sex Information and Education Council of Canada, 2010).
- Section 268(3) of Canada's Criminal Code continues to allow non-consensual surgery by medical practitioners to alter the bodies of infants and children whom they perceive to be ambiguous (i.e. intersex or, in current medical discourse, to have a "disorder of sex development"). This practice actively harms children based on a cisnormative assumptions on what bodies are medically "correct" and violates the right to bodily autonomy.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Universal Healthcare Access and Support

- It is commonplace for LGBTQI2S communities to receive care that is not inclusive of their identities
 - Due to the lack of education, training, and cultural awareness of LGBTQI2S communities that health care professionals receive (Obedin-Maliver et al., 2011), LGBTQI2S patients often experience improper care.
 - As a result, many practitioners attempting to provide sensitive care to these communities often experience fear, anxiety and hesitance (Rachlin & Lev, 2011). This is particularly problematic within intersex communities (Leidolf, Curran, Scout & Bradford, 2008).
 - In a Toronto Based Study of LGBTQ older adults (Daley & MacDonnell, 2016):
 - 40% of LGBTQ service users had never heard of community care access centres
 - Almost 50% of service users feared that they would lose the respect of their service providers should they come out.
 - Healthcare practitioners often have limited knowledge of pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP), two medical interventions crucial to help prevent HIV/AIDS transmission
 - Newcomers who access healthcare through the Interim Federal Health Program (IFHP) face additional barriers to accessing PEP and PrEP, as these medications require 'prior approval' or preauthorization from the IFHP before the patient is able to receive coverage (Medavie Blue Cross, 2016).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Universal Healthcare Access and Support

- As a result of these previous negative experiences, as well as the trauma resulting from the history of pathologization and institutionalization within the medical community, there is significant mistrust of healthcare practitioners within LGBTQI2S communities (Meyer, 2003; Bolderston and Ralph, 2016; Quinn et al., 2015).
- Access to publicly funded comprehensive gender affirming healthcare remains a significant barrier for trans and gender diverse communities
 - Providing appropriate gender affirming healthcare requires access to comprehensive support services. This may include surgical intervention, access to hormones, voice support, electrolysis, and ongoing mental health support.
 - Within the medical and health care system, trans individuals are pathologized, as their gender identity and expression are still designated and listed as gender dysphoria in the current edition, Diagnostic and Statistical Manual of Mental Disorders V (Toscano & Maynard, 2014). As such, trans people need to be given various medical and psychological evaluations in order to move forward with transitioning.
 - Trans people who wish to medically transition, but have not yet begun, are 27 times more likely to attempt suicide or self-harm than those who have completed medical transition (Bauer, Pyne, Francino & Hammond, 2013)

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.22 How are LGBTQI2S communities in Canada doing in relation to goal 3 cont'd.

Universal Healthcare Access and Support

- Despite these comprehensive support needs, trans and gender diverse communities experienced stigma and trauma in the medical system and encounter various barriers including economical, social, and geographical ones while seeking medical transition services. Recently British Columbia, Ontario, and New Brunswick announced that gender transition services would be covered under their respective provincial health care insurance.
 - In Fall 2015, British Columbia's Provincial Health Services Authority (PHSA) launched Trans Care BC, which is Canada's first program to support transgender health. The program aims to support the delivery of equitable and accessible care, surgical planning, and peer and community support for transgender and gender diverse people across the province.
 - In March 2016, Ontario announced that gender-confirming surgeries will be covered under Ontario Health Insurance Plan.
 - In June 2016, New Brunswick announced that gender-confirming surgeries will be covered under Medicare for transgender peoples in New Brunswick.
 - Despite the recently progressive shifts in the aforementioned provinces, in many provinces and territories across Canada gender affirming healthcare is still not covered as well as there are still many restrictions and out of pocket costs associated with surgical procedures and treatments. For individuals who are not insured, gender affirming procedures range from \$7,000- \$50,000.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.23 Recommendations: Achieving Goal 3 within LGBTQI2S Communities

In order to achieve Goal 3 within LGBTQI2S communities, federal, provincial, territorial, and/or municipal governments in Canada should:

(a) Provide training and ongoing professional development for healthcare practitioners surrounding LGBTQI2S health in general, and specifically issues related to HIV/AIDS, transition healthcare, and sexual and reproductive health from a holistic and patient-centred lens.

(b) Implement consistent sexual and reproductive health education across all provinces and territories in line with the Canadian Guidelines for Sexual Health Education (PHAC, 2008) and modeled on Ontario's health and physical education curriculum that is comprehensive and inclusive of LGBTQI2S health issues and experiences and geared for youth and adolescent development.

(c) Develop a National Gender Affirming Healthcare Strategy that models the work and approach of Trans Care BC to ensure comprehensive healthcare for trans and gender diverse communities that is physically and economically accessible and addresses their wide-ranging healthcare needs;

(d) Encourage judicial systems to limit prosecution of HIV non-disclosure, particularly as it relates to sexual assault law;

(e) Provide accessible and affordable contraceptives, immunization plans, and preventative sexual healthcare, including Prep/PEP, within sexual health coverage across Canada, with a particular focus on rural regions.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.2 Goal 3: Ensure healthy lives and promote well-being for all at all ages.

2.23 Recommendations: Achieving Goal 3 within LGBTQI2S Communities cont'd:

(f) Develop a National Harm Reduction Strategy with specific allocated funding that addresses the mental health and addiction needs of LGBTQI2S individuals, with particular focus on gender affirming care and holistic approaches that respect and acknowledge Indigenous ways of healing.

(g) Adhering to Yogyakarta Principles 24 and 25 - Rights to Participate in Cultural and Family Life with its application to LGBTQI2S communities. Recognizing LGBTQI2S persons have parental rights and recognition by acknowledging that biological and cultural forms of kinship are both key factors in determining parental rights and moving away from the biological links as presumptive parentage.

(h) Although some provinces have passed legislation in recognition of diverse families and family methods, there still remains an uneven legislative landscape across Canada in regards to LGBTQI2S family structures and forms of kinship. Currently, Ontario's new legislation, All Families Are Equal Act (2016), that recognizes intention family planning and families with four parents. This legislation needs to be a model for other provinces and territories to follow.

(i) Conduct large-scale consultations with intersex people living in Canada as an initial step towards reforming section 268(3) of Canada's Criminal Code, which continues to allow non-consensual surgery by medical practitioners to alter the bodies of infants and children whom they perceive to be ambiguous, a practice that disproportionately impacts intersex people.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.31 Relevant Subsections and Corresponding Indicators under Goal 5:

- 5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels
 - 5.c.1 Proportion of countries with systems to track and make public allocations for gender equality and women's empowerment
- 5.1 End all forms of discrimination against all women and girls everywhere
 - 5.1.1 Whether or not legal frameworks are in place to promote, enforce and monitor equality and non-discrimination on the basis of sex
- 5.5 Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life
 - 5.5.1 Proportion of seats held by women in (a) national parliaments and (b) local governments
 - 5.5.2 Proportion of women in managerial positions
- 5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences
 - 5.6.1 Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care
 - 5.6.2 Number of countries with laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.32 How are LGBTQI2S communities in Canada doing in relation to goal 5

This SDG relates directly to a lack of overall inclusion and the gender-based violence queer, trans, gender diverse, intersex, and Two Spirit girls and women encounter at disproportionately higher rates than their heterosexual and cisgender counterparts. These experiences are motivated by intolerance, fear or hatred of the person's diversity in attraction and/or gender identity in every social context, including homes, schools, communities, religious and spiritual centres, public spaces, and health institutions. Experiences of violence are exacerbated when individuals are further marginalized, especially as a result of their race, age, ability, religion and socioeconomic, immigration and citizenship status.

Gender-based Violence

- Evidence from the large-scale Association of American Universities' Campus Climate Survey on Sexual Assault and Sexual Misconduct (2015) suggests that LGBTQ students experience the most violent forms of campus-based sexual violence
- Trans and gender diverse communities are at increased risk of experiencing all forms of violence and harassment on campus (METRAC, 2014).
- While prevalence differs widely within the literature, several investigations estimate that nearly 50% of all same-sex relationships involve some degree of domestic and intimate partner violence (D/IPV; Parry & O'Neal, 2015).
- Lifetime prevalence of domestic/intimate partner violence (D/IPV) is significantly higher among bisexual women (61%) when compared to lesbian (43.8%) and heterosexual women (35%; Walters, Chen, & Breiding, 2013).
- A 2011 joint analysis conducted by the National Center for Transgender Equality and the National Gay and Lesbian Task Force in the U.S indicated that approximately 19% of trans and gender diverse respondents had experienced D/IPV (Grant, Mottet, & Tanis, 2011).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.32 How are LGBTQI2S communities in Canada doing in relation to goal 5 cont'd:

Gender-based Violence

Risk of experiencing gender-based violence is disproportionately higher among marginalized LGBTQI2S communities

- trans people of colour, young LGBTQ2S survivors, and Indigenous women are approximately 2.6 times more likely to experience a form of violence and discrimination within an intimate relationship (National Coalition of Anti-Violence Programs, 2014).
- Men who are HIV positive are at least 50% more likely to experience same-sex D/IPV (Jackson Heintz & Melendez, 2006).
- Due to the processes of colonization within Canada, Indigenous women and Two Spirit people encounter discrimination, stigmatization, and traumatic experiences of violence at disproportionately higher rates (Hunt, 2016).
- In 2015, the Truth and Reconciliation Commission* called to Action #41, which calls for the federal government to launch an inquiry into missing and murdered Indigenous women. Consequently, in that same year, the Federal Government launched an independent national inquiry into missing and murdered Indigenous women and girls.
 - Despite these efforts, Two Spirit people were not meaningfully included within the inquiry.

*The Truth and Reconciliation Commission is mandated to learn the truth about the impacts on Indigenous peoples in residential schools and to inform all Canadians about what happened in the schools.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.32 How are LGBTQI2S communities in Canada doing in relation to goal 5 cont'd:

Gender Diversity in Public Life

- While the Trudeau government is said to have achieved 'gender parity' at the federal level, this movement was based on a binary understanding of women, making invisible women who fall outside of the binary. As a result, there continues to be a lack of inclusion of trans, gender diverse, intersex, and Two Spirit identified women within all levels of government and, in particular, women with intersecting identities.
- Currently, trans, gender diverse, and Two-Spirit women's representations in public life are problematic, as public representations of non-cisgender women are negative, stigmatizing, and invalidating of their lived experience of their gender. Although, Bill C-16, which recognizes gender identity and expression as protected grounds, passed in 2017, several renditions of the bill have previously failed to pass in Senate.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.32 How are LGBTQI2S communities in Canada doing in relation to goal 5 cont'd:

Sexual and Reproductive Healthcare Rights

- Framing sexual and reproductive healthcare rights as explicitly for heterosexual and cisgender women renders lesbian, bisexual, trans, gender diverse, intersex and Two Spirit women as invisible and vulnerable populations.
 - Trans patients are often reluctant to seek reproductive health support due to fear of discrimination from healthcare practitioners, discomfort during examinations due to their gender identity or expression, and misinformation about the need for reproductive health support in relation to their gender identity (National Center for Transgender Equality, 2012).
 - An Ontario study of trans people found that that there are health disparities between cisgender and trans people with 42.3% of trans men and 36.4% of trans women reported that their health care needs were unmet in the past year (Gibson and Bauer, 2017).
 - While there are currently no available quantitative or qualitative comprehensive population studies on these communities with respect to sexual and reproductive healthcare rights, Ontario-based research speaks to the high levels of unmet healthcare needs in trans men and women (Gibson and Bauer, 2017).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.32 How are LGBTQI2S communities in Canada doing in relation to goal 5 cont'd:

Legislative Inequality

- The Canadian government continues to systematically exclude and purposefully deny Indigenous women their cultural and treaty rights outlined in the Indian Act. Although there have been amendments with Bill C-31 and Bill C-3, which enables a process of reinstating the loss of Indigenous women's Indian status, the implementation of these amendments is burdensome, costly, and designates Indigenous women with an inferior status when compared to their male counterparts. Accordingly, the relationship between the Indian Act and Indigenous women effectively remains unchanged, while simultaneously and systematically eliminating Indigenous women by denying them their Indian status for generations (Palmater, 2011).
 - The impacts of colonization, the reservation system, residential school, systemic child apprehension, high rates of incarceration as well as the trends of forced migration to urban centres continues to be key factors and determinants of health for Indigenous people.
 - Due to these systemic forms of oppression experienced by Indigenous people - Indigenous youth, especially Two Spirit youth are vulnerable subpopulation. Research indicates that numerous barriers currently exist for Two Spirit clients within Indigenous health and social services, for instance, TARP study indicated that 80 percent of participants reported the severe lack of safe events or spaces where Two Spirit people can practice their Indigenous culture in Toronto (McCaskill, FitzMaurice & Cidro, 2011). Data speaking to experiences of Two Spirit youth outside of the urban centre are lacking.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.3.3 Recommendations: Achieving Goal 5 within LGBTQI2S Communities

In order to achieve Goal 5 within LGBTQI2S communities, federal, provincial, territorial, and/or municipal governments in Canada should:

- (a) Explicitly include Two Spirit and LGBTQI Indigenous people in the scope of the inquiry into Missing and Murdered Indigenous Women, as prioritized communities and participants integral to the process.
- (b) Recognize and address that the Indian Act is highly discriminatory and continues to reproduce negative outcomes for Indigenous people, especially Indigenous women, for their human development and disconnects their relation to their ancestral land.
- (c) Ensure that the newly released National Gender-based Violence Strategy (2017), *It's Time: Canada's Strategy to Prevent and Address Gender-Based Violence*, includes meaningful engagement with LGBTQI2S communities, especially racialized trans women, Indigenous women, and gender diverse and Two Spirit women. Additionally, the strategy must provide specific funding allocations that directly addresses the violence faced by the aforementioned communities.
- (d) Make a concerted effort when gathering data on sexual and gender-based violence to include disaggregated data on LBTI women, gender diverse and Two Spirit people, as well as intersections relating to race, ability, and socioeconomic status.
- (e) Develop federal, provincial and territorial strategies that work towards the achievement of gender equity in all levels of government.
- (f) Establish legislation related to Sexual Violence and Harassment Action Plans in every province and territory, following the model of Ontario's Bill 132.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.3 Goal: 5. Achieve gender equality and empower all women and girls

2.3.3 Recommendations: Achieving Goal 5 within LGBTQI2S Communities

(g) Introduce mechanisms aimed at responding to survivors of sexual violence from the above mentioned communities in ways that decenter heteronormative and cisnormative assumptions.

(h) Facilitate trauma- and violence-informed reporting procedures for LGBTI women and gender diverse and Two Spirit persons that prioritize the safety and security of survivors.

(i) Ensure training of sexual health providers on the unique reproductive healthcare needs of trans, gender diverse, intersex, and Two Spirit women and girls.

(j) Train first responders, healthcare professionals, shelter and support service workers, child welfare workers, and victim services on effective response methods and mechanisms that eschew heteronormative and cisnormative assumptions regarding gender-based violence

(k) Facilitate trauma informed reporting procedures for acts of sexual violence, especially on campuses, and implement more effective prosecutorial measures in cases of sexual violence, punishing perpetrators with appropriate penalties including hate crimes when applicable.

(l) Explicitly address trans and gender diverse individuals within any federal gender-based violence strategies, policies, or procedures, as with the recent passing of Bill C-16 gender identity and gender expression now constitute grounds that mark an identifiable group in the Criminal Code.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.4 Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

2.41 Relevant Subsections and Corresponding Indicators under Goal 8:

- 8.2 Achieve higher levels of economic productivity through diversification, technological upgrading and innovation, including through a focus on high-value added and labour-intensive sectors
 - 8.2.1 Annual growth rate of real GDP per employed person
- 8.3 Promote development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and innovation, and encourage the formalization and growth of micro-, small- and medium-sized enterprises, including through access to financial services
 - 8.3.1 Proportion of informal employment in non-agriculture employment, by sex
- 8.6 By 2020, substantially reduce the proportion of youth not in employment, education or training
 - 8.6.1 Proportion of youth (aged 15-24 years) not in education, employment or training

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.4 Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

2.42 How are LGBTQI2S communities in Canada doing in relation to goal 8

This SDG relates directly to the importance of creating a diverse yet sustainable economy which supports the development of strategies and practices that work towards inclusive, safe, and productive employment for all. LGBTQI2S communities are systematically excluded from learning, educational, career and employment opportunities due to institutional barriers and discrimination. The effects of discrimination and institutional barriers are further compounded when these marginalised identities intersect with age, race, ability, socioeconomics, religion, gender identity and expression, attraction, citizenship and immigration status.

Social Barriers to Education

- LGBTQ students face significant harassment and discrimination within their school environments. An Egale analysis revealed that 64% of LGB students (in comparison to 15% non-LGB students) feel unsafe in school. This number increases to 78% for trans students. When asked about their educational experience, 30% of trans and 20% of LGB students admitted they felt 'very depressed' (see Taylor and Peter, 2011).
- In addition to direct discriminatory experiences, trans people experience structural barriers to employment as systems are not designed for the possibility of trans experience. For example, nearly half of trans Ontarians are unable to obtain employment references or academic transcripts with their correct name, pronoun, and/or sex designation (Bauer & Scheim, 2015).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.4 Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

2.42 How are LGBTQI2S communities in Canada doing in relation to goal 8 cont'd:

Workplace Violence

Based on a US market based research study (Catalyst, 2015):

- Approximately 47% of LGB workers have experienced workplace harassment and/or violence based on their attraction (orientation)
- Approximately 90% of transgender and gender diverse employees report experiencing workplace harassment and/or violence stemming from their gender identity and expression.
- Queer and trans individuals who are able to obtain employment experience heightened rates of violence and harassment in the workplace. Approximately 90% of transgender and gender diverse employees in the US report experiencing workplace harassment and/or violence stemming from their gender identity and expression, and approximately 47% of LGB workers have experienced workplace harassment and/or violence based on their sexual attraction.
- Once they have obtained employment, queer and trans employees are less likely to report incidents of workplace harassment and/or violence due to lack of appropriate policies and procedures.

Unemployment/Underemployment

- Unemployment is a serious concern among trans and gender diverse communities. According to Trans Pulse, a large scale Ontario based analysis (Bauer & Scheim, 2015):
 - 18% were turned down for employment because they are transgender
 - 13% were fired for being transgender
 - 15% were unsure if fired because of being transgender
 - 15% said co-workers never accepted their identity

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.4 Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

2.42 How are LGBTQI2S communities in Canada doing in relation to goal 8 cont'd:

Unemployment/Underemployment

- As a result of this unemployment and underemployment, poverty remains a major concern among trans and gender diverse communities:
 - 50% of trans people in Ontario earn less than \$15,000/year despite the fact that over 70% have completed at least some college or university education
 - Only 37% of trans people in Ontario have succeeded in obtaining full-time employment (Bauer et al., 2011).
- Trans and gender diverse people experience a high prevalence of employment disruption due to transphobia as well as accessing and recovering from gender affirming healthcare treatment and procedures such as hormonal therapy and gender affirming surgeries.
- There is a lack of federal legislative support to mitigate these impacts as LGBTQI2S communities are excluded from the protections extended in the federal Employment Equity Act which aims “to achieve equality in the workplace so that no person shall be denied employment opportunities or benefits for reasons unrelated to ability,” (Minister of Justice, 2014).
- US statistics from the Center for American Progress indicate racialized LGBT communities (Center for American Progress, 2015):
 - Asian/Pacific Islander, Latino, and African American communities experience increased rates of employment in comparison to the general population.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.4 Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

2.42 How are LGBTQI2S communities in Canada doing in relation to goal 8 cont'd:

Informal Economies

- Racialized homeless LGBTQ youth face structural barriers to securing formal and stable employment. As a result of these barriers, homeless youth are more likely to participate in informal economic activities in order to earn a tangible income to meet their immediate survival needs, and includes quasi-legal and illegal activities. This participation in informal economies, combined with the societal discrimination of being a racialized LGBTQ homeless youth increases both police surveillance and police violence (Daniel & Cukier, 2015)
- While there is limited Canadian-based research on the number of self-identified lesbian, bisexual, and trans women sex workers as well as gender diverse and Two Spirit sex workers, demographic data from the 2014 International Symposium on the Sex Industry in Canada found 77% of sex workers identify as women, and 6% as genders other than men or women, including those who see themselves as trans or as gender-fluid. Moreover, 38% identified as bisexual or bi-curious, 6% as gay or lesbian, and 11% reported other sexual orientations (Benoit et al., 2014).
- Current legislation regarding sex work in Canada, specifically Bill C-36 the Protection of Communities and Exploited Persons Act, places LBT women, and gender diverse and Two Spirit people who engage in sex work in harmful and unsafe circumstances.
- Specifically, sex workers from these communities are unable to benefit from health and safety regulations, labour laws, and human rights protections. As individuals already marginalized in the area of employment, LBT women and gender diverse and Two Spirit people are harshly affected by legislation criminalizing sex work.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.4 Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

2.42 How are LGBTQI2S communities in Canada doing in relation to goal 8 cont'd:

Informal Economies

- Moreover, the Canadian Public Health Association has noted that “Indigenous women are among the most marginalized populations in Canada and are overrepresented as sex workers. . . . Broadly speaking, First Nations, Inuit and Métis women in Canada experience rates of violence 3.5 times higher than non-First Nations, Inuit and Métis women – a risk further heightened for First Nations, Inuit and Métis sex workers” (Halseth, 2013, p.11).

2.43 Recommendations: Achieving Goal 8 within LGBTQI2S Communities

(a) The federal government must develop a comprehensive national implementation strategy for Bill C-16 that targets funding for the development of comprehensive and inclusive policies, programs and training around gender identity and expression. This must provide support and funding to organizations looking to develop trans inclusive policies and programming in workplaces.

(b) The federal government, in an effort to make all work safe, inclusive and sustainable, should decriminalize sex work, and conduct full and open consultations with sex work advocates to determine the most effective occupational safety measures for transgender women, and gender diverse and Two Spirit persons who engage in sex work. This would entail explicitly differentiating sex work from trafficking and exploitative prostitution as well as introducing appropriate mechanisms for reporting sexual violence that respect sex work as an occupation and eschew heteronormative and cisnormative assumptions surrounding sex work as an industry.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.4 Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

2.43 Recommendations: Achieving Goal 8 within LGBTQI2S Communities cont'd:

(c) Include sexual orientation, gender identity and gender expression as protected grounds in the federal Employment Equity Act, and collect data that is inclusive of LGBTQI2S communities that accurately reflects the lived employment realities of LGBTQI2S people across the country.

(d) Earmark targeted social assistance funding to sustain the income of trans and gender diverse employees who experience employment disruption while they are recovering from gender affirming procedures.

2.5 Goal 10: Reduce inequality within and among countries

2.51 Relevant Subsections and Corresponding Indicators under Goal 10:

- 10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status
 - 10.2.1 Proportion of people living below 50 per cent of median income, by sex, age and persons with disabilities.
- 10.3 Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard
 - 10.3.1 Proportion of population reporting having personally felt discriminated against or harassed in the previous 12 months on the basis of a ground of discrimination prohibited under international human rights law.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.5 Goal 10: Reduce inequality within and among countries

2.51 Relevant Subsections and Corresponding Indicators under Goal 10 cont'd:

- 10.7 Facilitate orderly, safe, regular and responsible migration and mobility of people, including through the implementation of planned and well-managed migration policies
 - 10.7.1 Recruitment cost borne by employee as a proportion of yearly income earned in country of destination
 - 10.7.2 Number of countries that have implemented well-managed migration policies

2.52 How are LGBTQI2S communities in Canada doing in relation to goal 10

This SDG relates directly to the meaningful social, economic, and political inclusion of LGBTQI2S people in Canada, including their representation in legislation, policies, and practices that address discrimination against these communities. LGBTQI2S communities in Canada continue to be overrepresented in public life by cisgender, able-bodied, white lesbian and gay populations, while racialized and disabled trans, gender diverse, bisexual, intersex, and Two Spirit people lack explicit acknowledgement and meaningful inclusion. This deficit in representation negatively impacts these latter communities socially, economically and politically, especially in relation to migration and mobility.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.5 Goal 10: Reduce inequality within and among countries

2.52 How are LGBTQI2S communities in Canada doing in relation to goal 10 cont'd:

Social, Economic, and Political Inclusion

For the first time in a Canadian federal budget, Building a Strong Middle Class: Budget 2017 (Budget 2017), the issue of gender was addressed through the introduction of a Gender Based Analysis (GBA+) lens. While this is an important first step, a GBA+ framework falls short in providing a comprehensive intersectional analysis. As a result, gender remains conceptually rigid and presented as a binary, removing intersecting identities from the analysis and effectively erasing marginalized groups within LGBTQI2S communities from Budget 2017. As a major policy framework that influences federal legislation and programming, the GBA+ lens has the potential to negatively impact LGBTQI2S communities.

LGBTQI2S communities are made invisible by a lack of meaningful inclusion in national level data collection which is integral for informing evidence-based policy. Currently, the three large scale Canadian data sets- the census, the Canadian community health survey (CCHS), and the general social survey (GSS) - do not consistently measure gender identity and attraction or provide disaggregated data relating to multiple intersections of identity such as disability, race/ethnicity, age, socioeconomics, citizenship and immigration.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.5 Goal 10: Reduce inequality within and among countries

2.52 How are LGBTQI2S communities in Canada doing in relation to goal 10 cont'd:

Discriminatory Laws, Policies, and Practices

Communities of colour in Canada face high levels of racial discrimination:

- 88% of Two Spirit people in a Toronto based study agree that discrimination against Two Spirit people is a serious problem (McCaskill, FitzMaurice & Cidro, 2011).
 - The Urban Aboriginal Task Force (UATF) found that 78% of Indigenous participants identified racism as a problem for urban Indigenous peoples (McCaskill & FlitzMaurice, 2007).
 - Additionally, the UATF found that the racism experienced by Indigenous people in urban areas as widespread and systematic, impacting access to housing and employment, interactions with police and school systems, and treatment in public spaces (McCaskill & FlitzMaurice, 2007).
 - The Toronto Aboriginal Research Project (TARP) indicated that 48% of participants reported experiences of racism. Indigenous youth were more likely to report internalized racism (McCaskill, FitzMaurice & Cidro, 2011)
- Research has also indicated that racism in dating and intimate relationships may be particularly problematic for gay and bisexual men; for instance, Phua and Kaufman (2003) reported a greater likelihood of race being mentioned in Internet ads for men who have sex with men (MSM). Beliefs concerning racial/ethnic differences in sexual behaviour can lead to both rejection and sexual objectification of LGBT people of colour by other LGBT people (Balsam, Molina, Beadnell, Simoni, & Walters, 2011).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.5 Goal 10: Reduce inequality within and among countries

2.52 How are LGBTQI2S communities in Canada doing in relation to goal 10 cont'd:

Discriminatory Laws, Policies, and Practices

Trans and gender diverse people face higher levels of discrimination based on gender identity and/or gender expression:

- The Trans PULSE study revealing that 20% of all trans Ontarians “had been physically or sexually assaulted for being trans, and another 34% had been verbally threatened or harassed but not assaulted” (Bauer & Scheim, 2015).
- A number of needs assessments and surveys conducted with trans populations have consistently demonstrated that members of this community experience high levels of both physical and sexual violence, with reported rates of physical violence ranging from 43% to 60% and reported rates of sexual violence ranging from 43% to 46% (Testa, 2012).
- Trans women are more likely to experience physical violence and discrimination within an intimate relationship, and more likely to experience police violence when interacting with the authorities following an incident (National Coalition of Anti-Violence Programs, 2014).
- Approximately 20% of police-reported hate crimes in 2013 were motivated by hatred of sexual orientation and were more likely to be violent (66%) than those motivated hatred of race/ethnicity (44%) or religion (18%; Allen, 2015).
- Intersex communities have been erased from the title, mandate, and policy and program development of the LGBTQ2 Secretariat within the Privy Council Office. This, combined with historical erasure, has resulted in serious disparities within Intersex communities:
 - 30-80% of intersex children undergo more than one surgery and some have as many as five surgeries (Holmes & Hunt, 2011)

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.5 Goal 10: Reduce inequality within and among countries

2.52 How are LGBTQI2S communities in Canada doing in relation to goal 10 cont'd:

Discriminatory Laws, Policies, and Practices cont'd:

- Rate of food insecurity is disproportionately high among LGBT people of colour, with the highest prevalence within Indigenous, Black, and Latinx communities (Center for American Progress & Movement Advancement Project, 2011).
- Racial/ethnic minority individuals have reported exclusion from LGBT community events and spaces (Baslam et. al., 2011); for example, gay bars have historically, and some may continue, to refuse entry to African Americans and provide poor service to Black patrons.
- Racial/ethnic minority communities continue to experience discriminatory interactions with police in cities across Canada, particularly in the form of heightened surveillance practices and carding.
 - Recent figures received through a freedom of information request indicate that people of colour are disproportionately targeted by police carding practices within the Edmonton Police Department. These figures show that Black people and Indigenous women were stopped 4.7 and 9.7 times more frequently than their white counterparts, respectively (Huncar, 2017).
 - The Ottawa Police Service's Traffic Stop Race Data Collection Project (TSRDCP) concluded that racial minorities experienced traffic stops at disproportionately higher rates than their white counterparts (Foster, Jacobs & Siu, 2016).
 - The Black Experience Project (2017), a large-scale research analysis of individuals throughout the Greater Toronto Area who self-identify as black and/or of African heritage found that 79% of men aged 25-44 had been stopped by police with approximately 24% reporting use of force.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.5 Goal 10: Reduce inequality within and among countries

2.52 How are LGBTQI2S communities in Canada doing in relation to goal 10 cont'd:

International Migration and Mobility

- LGBTQI asylum seekers have often faced trauma and/or persecution in their country of origin, which may include isolated or repeated physical, mental, emotional and/or sexual violence and is often the reason they seek international protection (Hall & Sajnani, 2015).
- The settlement and asylum seeking process for LGBTQI communities is burdensome and places undue hardship on claimants, often requiring intimate details about their relationships and recalling past traumatic experiences as 'evidence' of their sexuality and/or gender identity that fulfills a Western understanding of LGBTQI experiences.
- As a result of these previous experiences, LGBTQI newcomers and asylum seekers require comprehensive healthcare and support services.
- The Interim Federal Health Program (IFHP; 2016) provides temporary health coverage for individuals not covered by provincial and federal health programs, which includes refugee claimants, refugees, and other protected persons. However, the IFHP insurance explicitly excludes any coverage of transition-related health care including access to specialist healthcare providers, hormone prescriptions, and surgery.

2.53 Recommendations: Achieving Goal 10 within LGBTQI2S Communities

- Replace the current GBA+ lens with an Intersectional Feminist Analysis approach to more meaningfully acknowledge multiple identities that represent people's lived experience and explicitly includes and integrates queer people with multiple intersections of identities such as race, ethnicity, attraction, gender, class, and ability into its analysis. Using an Intersectional Feminist Analysis would not only be more inclusive but more importantly decentres white, able-bodied cisgender communities when discussing the issues of marginalization, barriers, and challenges experienced by the vulnerable and invisible populations in Canadian society.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.5 Goal 10: Reduce inequality within and among countries

2.53 Recommendations: Achieving Goal 10 within LGBTQI2S Communities cont'd:

- Update all three federal demographic surveys to include data gathering on sex and gender identity and ensure that disaggregated data on the intersections of identity are disseminated
- Meaningfully include and engage intersex communities in a national consultation to develop standards of care that value bodily autonomy.
- Ensure gender expression is included in all provincial/territorial human rights codes
- End the practice of carding among all federal and provincial/municipal law enforcement agencies. Additionally, remove law enforcement access to the carding data base while permitting access to researchers and community-based organizations for statistical purposes.
- As part of the Federal Government's commitment to enhance services for asylum seekers/newcomer communities, a large scale national needs assessment should be developed and implemented in order to identify the support needs of LGBTQI2S asylum seekers/newcomers. This initiative should be funded by the government but lead by LGBTQI2S asylum seeker/newcomer service agencies to ensure meaningful engagement and the results should be utilized to inform policy, programming, and services.
- Expand the Interim Federal Health Program to ensure coverage of comprehensive gender-affirming healthcare for LGBTQI2S newcomers and asylum seekers

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.6 Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

2.61 Relevant Subsections and Corresponding Indicators under Goal 11:

- 11.1 By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums
 - 11.1.1 Proportion of urban population living in slums, informal settlements or inadequate housing
- 11.7 By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities
- 11.4 Strengthen efforts to protect and safeguard the world's cultural and natural heritage
 - 11.4.1 Total expenditure (public and private) per capita spent on the preservation, protection and conservation of all cultural and natural heritage, by type of heritage (cultural, natural, mixed and World Heritage Centre designation), level of government (national, regional and local/municipal), type of expenditure (operating expenditure/investment) and type of private funding (donations in kind, private non-profit sector and sponsorship)

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.6 Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

2.62 How are LGBTQI2S communities in Canada doing in relation to goal 11

This SDG relates directly to the rights of all people in Canada to access safe, inclusive, and affordable housing as well as have access to inclusive and accessible public spaces. Housing and homelessness remains a primary concern for LGBTQI2S communities, in particular LGBTQI2S youth and seniors, Two Spirit and LGBTQI indigenous communities, LGBTQI2S persons with disabilities, and LGBTQI2S communities of colour. Additionally, public spaces, including shelter systems and service agencies lack awareness and knowledge of, as well as policy and programming that speaks to, the unique experiences and needs of LGBTQI2S communities and, more specifically, trans and gender diverse communities.

- LGBTQI2S youth experience homelessness at disproportionately higher rates than non-LGBTQI2S youth.
 - Within the City of Toronto shelter system, LGBTQI2S have twice the occupancy rate as all other youth combined (City of Toronto, 2013).
 - The majority of youth who experience homelessness have been forced to leave their familial home due to conflict (Public Health Agency of Canada, 2006) including lack of acceptance of gender identity and attraction, homophobia, transphobia and, mostly commonly, abuse and violence (Abramovich, 2013).
 - LGBTQI2S youth who look for support are often faced with discriminatory attitudes and inappropriate services (Ard & Makadon, 2011).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.6 Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

2.62 How are LGBTQI2S communities in Canada doing in relation to goal 11 cont'd:

- LGBTQI2S older adults experience unique challenges to accessing housing as they age, as they face physical, economic and social barriers to inclusion in long-term care settings (Espinoza, 2014).
 - These barriers are further compounded when LGBTQI2S older adults are living with a disability. Disability is overrepresented among LGBT older persons, with nearly half of a large US sample of LGBT older adults reporting a disability (Fredriksen-Goldsen et al., 2011).
 - In a US-based study, 78% of LGBT older adults experience interested in living in LGBT-friendly affordable housing (Espinoza, 2014).
- Homeless, marginalized LGBTQI2S people experience increased vulnerability to violence, exploitation and criminalization.
 - In a study examining the lived realities of homeless racialized LGBTQ youth in Toronto, researchers found that participants were at heightened risk of experiencing police violence and targeted police intervention (Daniel & Cukier, 2015).
 - Canadian research exploring the experiences of LGBTQI asylum seekers highlights a lack of safe, affirming, and affordable housing. As a result, LGBTQI asylum seekers have reduced options for accessing housing and often must live in situations where they experience stigma and violence (Mulé & Gates-Gasse, 2012).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.6 Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

2.62 How are LGBTQI2S communities in Canada doing in relation to goal 11 cont'd:

- On reserves, Indigenous peoples experience substantial housing instability.
 - 28% of on-reserve First Nations people and 30% of Inuit in Canada lived in crowded homes, defined as living with more than one person per room. In addition, 43% of First Nations people living on-reserve lived in homes in need of major repairs (Kelly-Scott & Smith, 2015).
 - For Indigenous LGBTQI and Two Spirit people, this issue is further compounded as a lack of acceptance around their attraction or gender identity leaves them vulnerable to discrimination. In a Winnipeg study of Two Spirit migration, mobility and health, “one third of participants indicated that they have been forced out of their community because of their sexual or gender identity,” (Ristock, Zoccole & Passante, 2010, p. 20).
- Although required by provincial/territorial human rights legislation, shelter systems and service agencies are often not inclusive to the experiences of queer, trans, gender diverse, intersex, and Two Spirit services users:
 - Homophobia, biphobia, and transphobia within the shelter system and service agencies may result in the denial of access to services, victim blaming, and the devaluing of legitimate violence (Calton, Bennett Cattaneo, & Gebhard, 2015).
 - While there is no available Canadian data, research from the US-based Williams Institute in the United States highlights that, while in care, 12.9% of LGBTQ youth report being treated poorly by the foster care system compared to 5.8% of non-LGBTQ youth (Wilson, Cooper, Kastanis & Nezhad, 2014).

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.6 Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

2.63 Recommendations: Achieving Goal 11 within LGBTQI2S Communities

(a) Make a concerted effort when gathering data around housing to reach LGBTQI2S communities, and especially those individuals who are marginalized in multiple ways. There is an overwhelming need for data collection around housing and homelessness that is inclusive of LGBTQI2S individuals and that is disaggregated to show trends of compounded marginalization when gender identity, attraction, race and ability intersect.

(b) Meaningfully engage with diverse LGBTQI2S populations across the country in the development of the National Housing Strategy and to allocate targeted funding for policy, programming, and training development that is specific to LGBTQI2S communities, with an emphasis on LGBTQI2S youth and seniors, LGBTQI2S communities of colour, Two Spirit and LGBTQI Indigenous communities, LGBTQI2S persons with disabilities and LGBTQI newcomers and asylum seekers.

(c) Amend child welfare regulations across all provinces and territories to allow children in foster care to remain in care until at least 24 years old or upon graduation from their first postsecondary institution. In addition, funding should be allocated to children aging out of care to provide for a subsidy in order to assist with securing housing during this transitional period (Gaetz, 2014).

(d) Meaningfully engage diverse communities in the development and implementation of national accessibility policy and programming that is monitored and evaluated by an independent review body such as the Canadian Human Rights Commission. This work must ensure accessible federal spaces, access to voting and democracy, accessible emergency planning, and accessible information through ASL/FSQ and braille.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.6 Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

2.63 Recommendations: Achieving Goal 11 within LGBTQI2S Communities cont'd:

(e) Sanctuary cities are municipalities that have committed to providing municipal services to undocumented immigrants without reporting their lack of legal status to Canadian immigration. Many cities who have passed sanctuary motions, in order to explicitly allow migrants to obtain such municipal services as housing, libraries and food banks without being questioned about their immigration status. Since the Trump election, there has been a movement of cities in North America to declare themselves as a Sanctuary City to protect undocumented persons as well as asylum seekers. In Canada, Toronto, Hamilton, London, and Montreal are currently sanctuary cities with Calgary, Ottawa, Regina, Saskatoon, and Winnipeg still in consideration. This designation ensures that LGBTQI2S undocumented persons and asylum seekers can access municipal services like shelters, housing, health care without fear of being reported or being deported by Canadian Immigration authorities. As such, all Canadian urban centres should work towards developing and implementing similar protections.

(f) Ensure LGBTQI asylum seekers and newcomers are provided accessible information (i.e. in multiple languages and formats) that outlines their rights, available services, and address common settlement questions and concerns.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.7 Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

2.71 Relevant Subsections and Corresponding Indicators under Goal 11:

- 16.1 Significantly reduce all forms of violence and related death rates everywhere
 - 16.1.1 Number of victims of intentional homicide per 100,000 population, by sex and age
 - 16.1.2 Conflict-related deaths per 100,000 population, by sex, age and cause
 - 16.1.3 Proportion of population subjected to physical, psychological or sexual violence in the previous 12 months
 - 16.1.4 Proportion of population that feel safe walking alone around the area they live
- 16.7 Ensure responsive, inclusive, participatory and representative decisionmaking at all levels
 - 16.7.1 Proportions of positions (by sex, age, persons with disabilities and population groups) in public institutions (national and local legislatures, public service, and judiciary) compared to national distributions
 - 16.7.2 Proportion of population who believe decisionmaking is inclusive and responsive, by sex, age, disability and population group
- 16.a Strengthen relevant national institutions, including through international cooperation, for building capacity at all levels, in particular in developing countries, to prevent violence and combat terrorism and crime
 - 16.a.1 Existence of independent national human rights institutions in compliance with the Paris Principles

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.7 Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

2.72 How are LGBTQI2S communities in Canada doing in relation to goal 16

The SDGs pertain to ensuring inclusive and just institutions that incorporate the historical and contemporary realities of marginalized groups. LGBTQI2S communities have historically been excluded from municipal, provincial, and federal legislation, policy, and programming which has resulted in a lack of diverse political representation, meaningful engagement with all communities, and allocated funding within strategic initiatives.

Access to Justice

- LGBTQI2S survivors of sexual violence and D/IPV are less likely to report incidents to the authorities or access D/IPV shelters and support services than cisgender and heterosexual survivors. Barriers to help-seeking include an extreme lack of appropriate helping agencies and services (Ard & Makadon, 2011), prevailing stigmatization, and limited understanding of D/IPV within LGBTQI2S communities (Calton, Bennett Cattaneo, & Gebhard, 2015).
- Within incidents involving D/IPV reporting, misarrests, defined as the mistaken arrest of the survivor and not the abusive partner, is a common reality within LGBTQI2S communities.
- While there is no available Canadian data, US research suggests that there is an increased prevalence of sexual minorities in the prison system. According to a Williams Institute analysis of the National Inmate Survey in the US, 9.3% of men in prison and 42.1% of women in prison identify as sexual minorities (Meyer et al., 2017).
- When preparing for end-of-life legal matters, LGBT older adults overwhelmingly fear that their wishes will not be carried out because of discrimination within the medico-legal context (Stinchcombe, Kortess-Miller & Wilson, 2016)

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.7 Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

2.72 How are LGBTQI2S communities in Canada doing in relation to goal 16 cont'd:

Federal Mandate

- In 2016, the federal government announced the appointment of an LGBTQ2 Secretariat within the Privy Council Office. While this is seen as a progressive step towards LGBTQI2S inclusion, the mandate is broad and unspecific, failing to address the precise and pressing concerns for LGBTQI2S communities (as is discussed throughout this document). Moreover, without offering a detailed plan to combat historical and current discrimination against LGBTQI2S people in Canada, there is currently no strategy for how Budget 2017 allotted amount of \$3.6 million over three years will be effectively used. (Government of Canada, 2017).
- In June 2016, Egale's Just Society Committee published the report *Grossly Indecent: Confronting the Legacy of State Sponsored Discrimination against Canada's LGBTQI2S Communities*, a document that called on the federal government for an open and inclusive dialogue and apology for Canada's history of oppression and abuse against LGBTQI2S people. The Report also called for a year-long mediated negotiation with LGBTQI2S community representatives to discuss the recommendations included therein. These recommendations consist of a detailed model for the government's apology and community consultations, including timelines, compensations, and necessary pardons related to section 159 of the Criminal Code, colloquially known as the sodomy law. As of June 2017, the government has ignored the Just Society Committee's attempts at dialogue, providing few opportunities for the Committee to engage with the LGBTQ2 Secretariat

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.7 Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

2.72 How are LGBTQI2S communities in Canada doing in relation to goal 16 cont'd:

Vital Statistics

- A 2011 study from Stanford University reported that Canadian medical schools offer a median of 4 hours of combined pre-clinical and clinical instruction on LGBT-related topics, with gender affirming surgery and other medical aspects of transitioning receiving the least amount of instruction (Obedin-Maliver, 2011)
- In Ontario, where the first and only available data in Canada have emerged following a study initiated in 2004, 50% of trans people reported personal annual earnings of \$15,000 or less (Bauer et al., 2011). The cost to legally change your name and sex designation is high and the process is intensive which creates a socioeconomic barrier to access.

Sports and Recreation

- While there is a lack of North American data around LGBTQI2S inclusion in sports, a large scale Scottish study of LGBT athletes and coaches found that (Smith, Cuthbertson & Gale, 2012):
 - 79% of respondents believe that homophobia in sports is a problem
 - 66% believe that transphobia in sports is a problem
 - 62% have witnessed homophobia or transphobia in sport
 - 73% think that homophobia and transphobia are barriers to people taking part in sport
 - 94% think sport would be better off without homophobia and transphobia
- In response, the Canadian Centre for Ethics in Sport published Creating Inclusive Environments for Trans Participants in Canadian Sport: Guidance for Sport Organizations (2016) to support sports organizations work towards trans inclusion

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.7 Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

2.73 Recommendations: Achieving Goal 16 within LGBTQI2S Communities

In order to achieve Goal 16 within LGBTQI2S communities, the federal, provincial, territorial, and/or municipal governments in Canada should:

- Ensure the LGBTQI2S Secretariat within the Privy Council Office:
 - Meaningfully engages and consults with LGBTQI2S populations and organisations across the country with a particular focus on members of the community marginalised by race, ability, age, gender identity and expression, socioeconomic status, citizenship and immigration status.
 - Develop and implement a transparent and publicly available mandate using an ARAO and Intersectional Feminist framework based on the results from the community consultation with specific timelines.
 - Develop a Federal implementation strategy for Bill C-16 that targets funding for the development of comprehensive and inclusive policies, programs and training around gender identity and expression.
- Respond immediately to the Just Society Committee's report and recommendations, including the following actions on the part of the federal government:
 - Deliver an open and inclusive apology for Canada's history of oppression of LGBTQI2S people
 - Enter a year-long mediated negotiation with LGBTQI2S community representatives to discuss criminal law reform (specifically s. 159 of the Criminal Code), pardons for criminal convictions under s. 159 and military discharges, financial compensation for past government actions, and memorialization of LGBTQI2S injustices.

2.0 Analysis and Recommendations of Relevant SDGs to LGBTQI2S Communities in Canada

2.7 Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

2.73 Recommendations: Achieving Goal 16 within LGBTQI2S Communities cont'd:

- Develop and implement comprehensive training of all levels of the justice system including RCMP, provincial/municipal police, judiciary and corrections workers using an ARAO and Intersectional Feminist framework
- At provincial/territorial levels, allocate funding to LGBTQI2S-specific legal clinics that provides free access to lawyers, advice and information regarding issues such as but not limited to child welfare services, end of life planning, vital statistics, immigration and human rights. Additionally, target funding for the development and dissemination of legal resource to support and guide LGBTQI2S communities navigating the legal system.
- Encourage sports organizations at all levels to adopt the Canadian Centre for Ethics in Sports' guidelines for creating inclusive environments for transgender participants
- Review and revise Vital Statistics Acts in all provinces and territories for consistency across all jurisdictions. Additionally, remove barriers preventing legal name and sex designation changes that affect trans and gender diverse people such as cost, physician approval and extensive wait times.

3.0 Conclusion

Canada purports itself as being a global leader in the field of human rights and this document allows for some critical reflection on that claim and offers achievable goals and recommendations that will genuinely support LGBTQI2S communities in Canada and, even more importantly, communities of colour, Indigenous LGBTQI2S and Two Spirit communities, and LGBTQI2S communities with disabilities. These recommendations present an opportunity for the country to improve on areas such as data collection, healthcare, racism, Indigenous relations, accessibility, homelessness, justice reform, discrimination (federal, institutional and social), gender equity and poverty reduction. Canada holds a responsibility to its LGBTQI2S communities to not simply appoint an LGBTQ2 secretariat but to enforce the creation and implementation of that office's mandate which should address the aforementioned areas.

The state must commit to not leaving the community behind by implementing policies and practices that take an intersectional feminist approach, thereby decentering hetero- and cis-normative perspectives. Only by committing to accessible healthcare for trans and gender diverse people while also funding the development of healthcare resources specific to the community can we ensure that LGBTQI2S people live healthy lives. By focusing on removing inequality institutionally, increasing accessibility to all and integrating vulnerable members into the economic framework of society, Canada will finally "Leave No One Behind".

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Appendix 1: Glossary of Terms

The following terms recognize that gender is a self-identification that does not necessarily correspond to sex assigned at birth; physical appearance and genitalia are not the only determinants of gender. It also recognizes that there are many ways to experience and express gender and is intended to include the diverse range of gender identities.

Sex Definitions

Intersex (adj): Refers to a person whose chromosomal, hormonal or anatomical sex characteristics fall outside the conventional classifications of male or female. The designation of “intersex” can be experienced as stigmatizing given the history of medical practitioners imposing it as a diagnosis requiring correction, often through non-consensual surgical or pharmaceutical intervention on infants, children and young adults (some people may not be identified as “intersex” until puberty or even later in life).

Attraction Definitions

Bisexual (adj): A person who experiences attraction to both men and women. Some bisexual people use this term to express attraction to both their own sex and/or gender, as well as to people of a different sex and/or gender.

Gay (adj): A person who experiences attraction to people of the same sex and/or gender—gay can include both male-identified individuals and female-identified individuals, or refer to male-identified individuals only.

Heterosexual: A person who experiences attraction to people of a different sex and/or gender. Also referred to as “straight”.

Lesbian (adj or n): A female-identified person who experiences attraction to people of the same sex and/or gender.

Pansexual (adj): A person who experiences attraction to people of diverse sexes and/or genders. The term pansexual reflects a desire to recognize the potential for attraction to sexes and/or genders that exist across a spectrum and to challenge the sex/gender binary.

Appendix 1: Glossary of Terms

Gender Identity Definitions

Cisgender (adj): A person whose gender identity corresponds with the sex assigned to them at birth (e.g., a cisgender man is someone who identifies as a man and who was assigned male sex at birth).

Gender Diverse (adj): An umbrella term for gender identities and/or gender expressions that differ from cultural or societal expectations based on assigned sex.

Transgender (adj): A person who does not identify either fully or in part with the gender associated with the sex assigned to them at birth—often used as an umbrella term to represent a wide range of gender identities and expressions.

Trans (adj): Often used as an umbrella term to encompass a variety of gender-diverse identities, including transgender, transsexual and genderqueer. Some people may identify with these or other specific terms, but not with the term trans. Similarly, some people may identify as trans, but not with other terms under the trans umbrella.

Definitions related to both gender identity and attraction

Queer (adj): A term used by some in LGBTQ communities, particularly youth, as a symbol of pride and affirmation of diversity. This term makes space for the expression of a variety of identities outside of rigid categories associated with sex, gender or attraction. It can be used by a community to encompass a broad spectrum of identities related to sex, gender or attraction (as with the acronym LGBTQ), or by an individual to reflect the interrelatedness of these aspects of their identity. Queer was historically a derogatory term for difference, used in particular to insult homosexuality and LGBTQ people. Although sometimes still used as a slur, the term has been reclaimed by some members of LGBTQ communities.

Two Spirit (or 2-spirit) (adj): An English umbrella term that reflects the many words used in different Indigenous languages to affirm the interrelatedness of multiple aspects of identity—including gender, sexuality, community, culture and spirituality. Prior to the imposition of the sex/gender binary by European colonizers, some Indigenous cultures recognized Two Spirit people as respected members of their communities. Two Spirit people were often accorded special status based upon their unique abilities to understand and move between masculine and feminine perspectives, acting as visionaries, healers and medicine people. Some Indigenous people identify as Two Spirit rather than, or in addition to, identifying as lesbian, gay, bisexual, trans or queer.

Appendix 2: About Egale Canada Human Rights Trust

Founded in 1995, Egale Canada Human Rights Trust (Egale) works to improve the lives of lesbian, gay, bisexual, trans, queer, intersex, and Two Spirit (LGBTQI2S) people in Canada and to enhance the global response to LGBTQI2S issues by informing public policy, inspiring cultural change, and promoting human rights and inclusion through research, education and community engagement. Egale’s vision is a Canada, and ultimately a world, without homophobia, biphobia, transphobia, and all other forms of oppression so that every person can achieve their full potential, free from hatred and bias.

Egale’s work is grounded in ARAO practice. While striving to compile, produce and communicate the best-available evidence to guide our work, we recognize that the production of knowledge is always intimately connected to power, privilege and oppression. Those with the least power and privilege are often not included in the production of knowledge, and as a result, fail to be represented in the knowledge that influences their lives. Often, it is those with the least power to produce and shape knowledge who are most in need of services, leaving them un/mis-represented, under-served, ill-served, or not served at all. To honour and address the experiences of the most marginal folks in our communities, Egale undertakes to balance both academic and experiential knowledge, privileging community-based participatory practices in conducting research; developing and reviewing policy, resources and curricula; and providing services to clients, community organizations and individuals. Furthermore, Egale recognizes the necessity of targeting intersectional oppression, while simultaneously examining the broader social contexts that sustain and legitimize various oppressions, in order to appropriately respond to the needs and experiences of the full diversity of LGBTQ communities.