

# Our Health: Canada-Wide 2SLGBTQIA+ Community Study

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COVID-19 COMMUNITY REPORT:

# Trans and Nonbinary People in Canada

2025

# Acknowledgements

We are grateful to the community advisors who informed research priorities and provided their feedback and valuable experiences on the development of this report. This work was done by, for, and with communities with lived and living experience. Thank you to the trans and nonbinary 2S/LGBTQQIA+ community members who participated in Our Health 2022, and for trusting us to do this work. We hope that this study provides useful information and insight for your communities. We also thank our entire [research team and research staff](#) – more information about them is available at the link!

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## Land Acknowledgement

Community-Based Research Centre (CBRC) acknowledges that as a national organization, our work spans across the unceded, ancestral, and traditional territories of Indigenous peoples on land that is currently occupied and known as Canada. This includes the unceded territories of the Musqueam, Squamish, and Tsleil-Waututh First Nations, currently known as Vancouver, where our head offices are located. We recognize and are grateful for living and working on all these lands that have been cared for by Indigenous peoples since time immemorial.

In 2016, CBRC endorsed the Truth and Reconciliation Commission of Canada: Calls to Action and the United Nations Declaration on the Rights of Indigenous Peoples. As an organization dedicated to the health and wellness of our communities, we recognize that true reconciliation requires more than an endorsement and have made a series of commitments in our work, including the full integration of Two-Spirit and Indigenous staff into the culture of the organization and delivery of our programs, and creating and centring an intentional space for Two-Spirit and Indigenous queer and trans people at CBRC's annual Summit conference.

As we continue on our path of Truth and Reconciliation, CBRC continues to learn from our Indigenous staff and partners, reflecting on the ways our actions and social policies impact the lives of Indigenous people, and actively participating in decolonization.

## Key Highlights

- Many trans and nonbinary participants experienced loneliness, anxiety, and depression symptoms during the COVID-19 pandemic.
- Access to health care, including primary care, was a challenge for many trans and nonbinary participants during the COVID-19 pandemic.
- Many trans and nonbinary participants reported feeling more connected to 2S/LGBTQQIA+ communities since the start of the COVID-19 pandemic.
- Housing challenges were common among trans and nonbinary participants, including difficulty finding a new place to live, feeling unsafe due to others' COVID-19 status or safety behaviours, and increasing costs of rent and expenses.





# Background

Trans and nonbinary people experienced numerous challenges during the COVID-19 pandemic in Canada. During provincially-mandated COVID-19 pandemic lockdowns, some trans and nonbinary individuals were forced to move in or isolate with those who were unsupportive or unaware of their trans or nonbinary identity.<sup>1</sup> This meant that trans and nonbinary individuals had to choose between outing themselves, which could possibly endanger them, or hiding their identity.<sup>1,2</sup> Additionally, many trans and nonbinary individuals reported increased experiences of disordered eating and alcohol use as a result of the COVID-19 pandemic.<sup>3,4</sup> While the federal government provided some financial relief during already financially precarious times, trans and nonbinary people continued to face unemployment and financial challenges, with one study reporting that 40% of trans and nonbinary individuals had been eating fewer meals due to their financial situation.<sup>5</sup>

Another significant impact of the COVID-19 pandemic was a reduction in the provision of gender-affirming care services, which some trans and nonbinary people needed and wanted to access during this time. The designation of gender-affirming surgeries as 'non-essential' meant that many surgeries were cancelled or delayed, and many trans and nonbinary people were unable to access hormone replacement therapy due to disruptions from the COVID-19 pandemic.<sup>5</sup> Prior research has found that an inability to access gender-affirming care is associated with psychological distress.<sup>5,6</sup> Aside from reducing access to gender-affirming medical care, the COVID-19 pandemic also prevented trans and nonbinary people from accessing support from 2S/LGBTQQIA+ peers and organizations, increasing feelings of isolation and loneliness.<sup>1,2</sup>

# Methods

## The Survey

Our Health 2022 was led by the Community-Based Research Centre to explore the current state of health among Two-Spirit, lesbian, gay, bisexual, trans, queer, questioning, intersex, and asexual (2S/LGBTQQIA+) people in Canada. The study consisted of a [community-based health survey](#) designed with community members and academic, public health, and community partners that included questions about sociodemographics, COVID-19, chronic health, health service access, mental health, discrimination, community connection, sexual health, reproductive health, caregiving, economic security, substance use, and housing. Participants received \$10 for completing the survey.

Study recruitment occurred between April and September 2022 through multiple recruitment methods, including promotion through CBRC and community partner organizations and advertisements in 2S/LGBTQQIA+ media, ethnoracial media, and on popular sex-seeking apps and websites. All recruitment methods directed participants to the online survey where they were given additional information about the study and could agree to participate. To be eligible, participants had to: be living in Canada; identify as 2S/LGBTQQIA+; be 15 years of age or older; be able to provide informed consent and complete a questionnaire in English, French, or Spanish; and not have already participated in the study.

Consultations with Indigenous scholars and community members were conducted to inform collection and analyses of Indigenous-specific data. You can [find out more about our study methods here](#).

## Making this Report

This report focuses on key COVID-19-related findings for trans and nonbinary communities. In this report, trans or nonbinary refers to any person who selected any of these response options on the following variables: 'Yes' to the question "Do you identify as trans?"; 'Nonbinary', 'Trans man', 'Trans woman', 'Agender', 'Genderfluid', or 'Genderqueer' selected; and/or wrote in 'Trans feminine' or 'Trans masculine' to the select-all-that-apply question "What is your gender identity?"

Some trans or nonbinary participants may have chosen not to answer the questions above and are not included in this report. In total, the responses of 1,597 trans and nonbinary people, or 40% of all participants in Our Health 2022, are described here.

To develop this report, we consulted with a group of community advisors made up of five people from trans and nonbinary communities. These consultations included group meetings, emails, and open invitations to edit drafts of the report. Community advisors were essential in choosing which findings to include in this report. Based on their feedback in addition to the lived and living experience of the research team, and given this report's focus on COVID-19, some topics covered in Our Health 2022 are not included in this report.

# How to Read this Report

This report describes the experiences of trans and nonbinary people who participated in the Our Health 2022 study. This may not be representative of all trans and nonbinary 2S/LGBTQQIA+ people in Canada. While the findings are still valuable, without reaching all trans and nonbinary 2S/LGBTQQIA+ people or a random sample of them, we cannot know how different the people who participated in the study are from those who did not.

In each table, the responses to a question are shown in several values:

- The “n” column: The number of people who selected that response option to describe their experience.
- The “(n=\_\_\_)” header: The overall number of people who responded to that question. At times, this may be replaced with a fraction in the “n” column if the number of people who responded to a question varies.
- The “%” column: The percentage of people who selected that response option, or the number of people who used that response option divided by the number of people who responded to that question x 100.



## Example Table

The “n” column: The number of people who chose that response option

The “%” column: The percentage of people who chose that response option

Variables	n	%
<b>Age (n = 371)</b>		
Under 18	87	23%
18-30	163	44%
31-40	64	17%
41+	57	15%
<b><sup>a</sup>Race/ethnicity (n = 368)</b>		
Indigenous	70	19%
Black	64	18%
East/Southeast Asian	91	25%
Latina, Latino, Latinx, Latine	78	22%
Middle Eastern	36	10%
South Asian	54	15%
White	200	56%
<b>Two-Spirit (n = 70)</b>	52	74%
<b><sup>a</sup>Able to access needed services during COVID-19 pandemic</b>		
<i>*Only participants who needed the respective service</i>		
Dental care	195/210	93%
Primary care	159/178	89%

The “(n=\_\_\_)” header: The overall number of people who responded to that question.

<sup>a</sup>Select all that apply question

Sometimes response options within a question were only shown to people based on their responses to a different question. A fraction in the “n” column is the “number of people who chose that response” / “number of people who saw that response option”

Looking at our example table, we can see that of the 178 participants who needed primary care, 89% (159 people) were able to access it. Sometimes, participants could use more than one option to respond to a question, shown using an “a” next to the question. This means that percentages for different response options will not always sum to equal 100%. Other times, questions were shown only to a subset of participants based on how they responded to another earlier question, shown using an asterisk (\*).

## Use of an intersectional lens

This report aims to use an intersectional lens to understand participants' experiences. Intersectionality is a theory, method, and lens, rooted in Black feminism and coined by Kimberlé Crenshaw, that describes how systems of oppression (e.g., homophobia, transphobia, colonialism, racism) 'intersect' to create experiences of social difference that have to be seen as a whole to be understood.<sup>7</sup> Based on conversations and the lived and living experiences of research and community members included in this work, we decided to further stratify this report by gender.

The gender stratification options that we chose for this report are: nonbinary and gender expansive *without trans experience* (including Two-Spirit and intersex individuals); *trans* nonbinary and gender expansive (including Two-Spirit and intersex individuals); *trans* men; and trans women. Although participants could report multiple genders, for the purposes of this report, participants were only placed into one of the four gender categories we created using the following approach:

1. **Trans woman:** This category includes participants who 1) reported their gender identity as trans woman or 2) reported their gender identity as a woman, responded 'yes' to the question asking whether they identified as trans, and did not report that they were assigned female at birth.
2. **Trans man:** This category includes participants who 1) reported their gender identity as 'trans man' or 2) reported their gender identity as 'man', responded 'yes' to the question asking whether they identified as trans, and did not report that they were assigned male at birth.
3. **Nonbinary and gender expansive without trans experience:** This category includes all participants who reported their gender identity as agender, genderfluid, genderqueer, nonbinary, or another expansive gender option and/or identified as Two-Spirit and/or identified as intersex, ***responded 'no' to the question asking whether they identified as trans***, and were not categorized as 'trans woman' or 'trans man' according to the above criteria.
4. **Trans nonbinary and gender expansive:** This category includes all participants who reported their gender identity as agender, genderfluid, genderqueer, nonbinary, or another expansive gender option and/or identified as Two-Spirit and/or identified as intersex, ***responded 'yes' to the question asking whether they identified as trans***, and were not categorized as 'trans woman' or 'trans man' according to the above criteria.



# Results

## Sociodemographics

In total, 1,597 participants in Our Health 2022 self-identified as trans and/or nonbinary. The vast majority of these participants identifying as trans or nonbinary were young, with half (51%) younger than 30 years old and 81% aged 40 or younger. Just over half of all trans and nonbinary participants lived in just two provinces, Ontario (36%) and British Columbia (20%). Many lived in very large (46%) or large (26%) urban population centres.

In terms of gender, 34% of trans and nonbinary participants identified themselves as nonbinary and gender expansive without trans experience; 48% as trans nonbinary and gender expansive; 10% as trans men; and 9% as trans women. Two-thirds (66%) of participants in this report explicitly identified as trans. The most common sexual identities reported were queer (58%), bisexual (26%), and pansexual (23%).

The vast majority of trans and nonbinary participants identified themselves as white (81%), while 10% identified as Indigenous and 6% identified as East or Southeast Asian. Less than one in five (16%) stated that they were treated as racialized or a person of colour by others. Finally, half (51%) of trans and nonbinary participants reported living with a disability. See Table 1 for a complete list of sociodemographic information.

**Table 1: SOCIODEMOGRAPHICS OF TRANS AND NONBINARY PARTICIPANTS**

Variables	n	%
<b>Age group, in years (n = 1597)</b>		
15–18	87	5%
19–30	735	46%
31–40	476	30%
41 and older	299	19%
<b>Gender identity (n = 1597)</b>		
Nonbinary and gender expansive without trans experience	537	34%
Trans nonbinary and gender expansive	762	48%
Trans man	162	10%
Trans woman	136	9%
<b>Trans identity (n = 1597)</b>		
Yes	1,059	66%
No	538	34%
<b>Intersex (n = 1597)</b>		
Yes	47	3%
No	1,334	84%
Unsure	200	13%
I prefer not to answer	16	1%
<b>*Sexual orientation (n = 1597)</b>		
Asexual	197	12%
Bisexual	410	26%
Gay	267	17%

Variables	n	%
Heteroflexible	27	2%
Homoflexible	41	3%
Lesbian	226	14%
Pansexual	367	23%
Queer	924	58%
Questioning	43	3%
Straight	30	2%
Other	17/1,587	1%
<b>*Race/Ethnicity (n = 1534)</b>		
Black	45	3%
East/Southeast Asian	95	6%
Latina, Latino, Latinx, Latine	50	3%
Middle Eastern	25	2%
South Asian	42	3%
White	1,237	81%
<b>Treated as a POC/racialized person (n = 1518)</b>		
Yes	241	16%
No	1,199	79%
Unsure	78	5%
<b>Identify as Indigenous (n = 1597)</b>		
Yes	161	10%
No	1,394	87%
I prefer not to answer this question	42	3%
<b>Two-Spirit identity (n = 161)</b>		
<i>*Indigenous participants only</i>		
I am Two-Spirit	101	63%
I am not Two-Spirit	46	29%
I prefer not to answer this question	14	9%
<b>Province (n = 1597)</b>		
Ontario	579	36%
British Columbia	319	20%
Quebec	214	13%
Alberta	154	10%
Nova Scotia	134	8%
Manitoba	64	4%
Newfoundland & Labrador	44	3%

Variables	n	%
Saskatchewan	39	2%
New Brunswick	32	2%
Prince Edward Island	8	1%
Yukon	8	1%
Northwest Territories	2	<1%
Nunavut	0	0%
<b>Size of location of residence (n = 1514)</b>		
Very large urban population centre (500,000+ people)	704	46%
Large urban population centre (100,000-499,999 people)	390	26%
Medium population centre (30,000-99,999 people)	210	14%
Small population centre (1,000-29,999 people)	143	9%
Rural area (<1,000 people)	67	4%
<b>Education (n = 1515)</b>		
No high school diploma or equivalent	75	5%
High school diploma or equivalent	313	21%
Trades certificate, diploma, vocational, or apprenticeship	72	5%
College, CEGEP, or other non-university diploma	188	12%
University degree below the bachelor's level	80	5%
Bachelor's degree	457	30%
University degree above bachelor's level	330	22%
<b><sup>a</sup>Immigration status (n = 514)</b>		
Canadian Citizen (Born in Canada)	1,303	86%
A Canadian Citizen (Not born in Canada)	128	8%
Landed immigrant/permanent resident	55	4%
Student (On study permit)	15	1%
On temporary work permit	11	<1%
A refugee/protected person (formally approved)	9	<1%
<b>Disability identity (n = 1526)</b>		
Yes	773	51%
No	593	39%
Unsure	160	10%

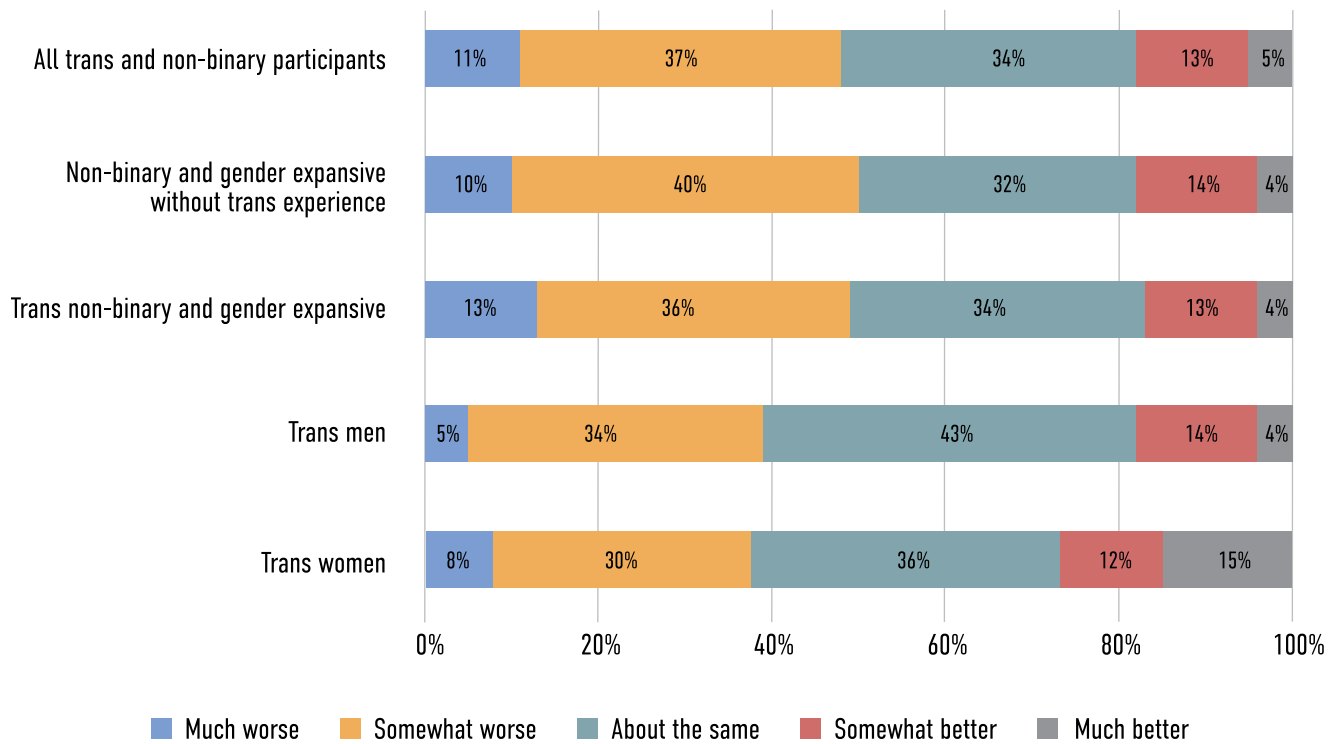
## COVID-19

Table 2 looks at COVID-19 variables from trans and nonbinary participants overall, and further stratified by gender. Nearly half of all trans and nonbinary participants (48%) reported feeling that their health was somewhat or much worse at the time of the survey than it was before the COVID-19 pandemic. When asked about the impacts of COVID-19 on their wellbeing, nearly three in five (59%) trans or nonbinary participants overall reported feeling ‘very’ or ‘extremely’ concerned about its impact on their own physical health. Similarly, nearly three-quarters (73%) of trans and nonbinary participants reported feeling ‘very’ or ‘extremely’ concerned about the impact of COVID-19 on their mental health. Among trans and nonbinary participants who reported ever having had COVID-19, one in five (21%) perceived themselves to have long COVID (which we defined in the survey as symptoms of COVID-19 persisting beyond the initial infection).

**Table 2: IMPACTS OF COVID-19 ON TRANS AND NONBINARY PARTICIPANTS’ HEALTH**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b>Concern about the impact of COVID-19 on physical health or wellness</b>	<b>(n = 1444)</b>	<b>(n = 478)</b>	<b>(n = 699)</b>	<b>(n = 143)</b>	<b>(n = 124)</b>
Not at all	6%	7%	5%	11%	9%
Somewhat	35%	35%	34%	35%	40%
Very	32%	31%	32%	33%	35%
Extremely	27%	28%	29%	21%	17%
<b>Concern about the impact of COVID-19 on mental health or wellness</b>	<b>(n = 1443)</b>	<b>(n = 478)</b>	<b>(n = 699)</b>	<b>(n = 143)</b>	<b>(n = 123)</b>
Not at all	5%	5%	4%	13%	7%
Somewhat	22%	25%	20%	24%	20%
Very	37%	36%	37%	29%	47%
Extremely	36%	34%	39%	34%	26%
<b>Concern about the impact of COVID-19 on spiritual or religious wellness</b>	<b>(n = 1432)</b>	<b>(n = 475)</b>	<b>(n = 691)</b>	<b>(n = 143)</b>	<b>(n = 124)</b>
Not at all	66%	65%	63%	77%	73%
Somewhat	22%	22%	25%	14%	18%
Very	7%	8%	7%	7%	7%
Extremely	5%	5%	5%	2%	2%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
<b>Considers themselves to have “long COVID”</b> <i>*Participants who have tested positive for or think they have had COVID-19 only</i>	<b>(n = 736)</b>	<b>(n = 276)</b>	<b>(n = 334)</b>	<b>(n = 75)</b>	<b>(n = 51)</b>
Yes	21%	21%	24%	13%	16%
No	51%	48%	49%	68%	61%
Unsure	28%	31%	27%	19%	24%
<b>Overall health compared with before the COVID-19 pandemic</b>	<b>(n = 1508)</b>	<b>(n = 503)</b>	<b>(n = 725)</b>	<b>(n = 152)</b>	<b>(n = 128)</b>
Much better now	5%	4%	4%	4%	15%
Somewhat better now	13%	14%	13%	14%	12%
About the same	34%	32%	34%	43%	36%
Somewhat worse now	37%	40%	36%	34%	30%
Much worse now	11%	10%	13%	5%	8%
<b>Hospitalized due to COVID-19</b> <i>*Participants who have tested positive for or think they have had COVID-19 only</i>	<b>(n = 732)</b>	<b>(n = 273)</b>	<b>(n = 333)</b>	<b>(n = 75)</b>	<b>(n = 51)</b>
Yes, I was hospitalized in the ICU for COVID-19	<1%	<1%	0%	0%	0%
Yes, I was hospitalized but NOT in the ICU for COVID-19	2%	2%	3%	3%	0%
No	98%	98%	97%	97%	100%



*Figure 1: Overall health compared with before the COVID-19 pandemic for all trans and nonbinary participants and broken down by gender*

## Health Services

Table 3 looks at health service variables from trans and nonbinary participants overall, and further stratified by gender. In terms of health care services needed during the COVID-19 pandemic, 70% of all trans and nonbinary participants reported needing care services from a primary care practitioner; three-quarters of trans nonbinary and gender expansive participants reported needing this kind of care. 68% of all trans and nonbinary participants reported needing dental care. Just over half (53%) of all trans and nonbinary participants also reported needing regular medical testing for issues unrelated to COVID-19, and just under three in five (58%) trans women participants reported needing this care. Just under half (45%) of trans and nonbinary participants reported needing physical therapies; trans men participants and trans women participants reported slightly lower levels (37% and 31%, respectively). Overall, 40% of all trans and nonbinary participants reported needing gender-affirming care; however, reporting this was higher among trans nonbinary and gender expansive participants (50%), trans men participants (69%), and trans women participants (80%).

In relation to community and support services needed by trans and nonbinary participants during the COVID-19 pandemic, around a quarter reported needing access to crisis centres or crisis lines (24%), community centres (23%), and recreational services (23%), while 17% reported needing food banks or soup kitchens.

**Table 3: SERVICES NEEDED BY TRANS AND NONBINARY PARTICIPANTS DURING THE COVID-19 PANDEMIC**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b><sup>a</sup>Health care services needed during COVID-19 pandemic</b>	<b>(n = 1367)</b>	<b>(n = 449)</b>	<b>(n = 663)</b>	<b>(n = 140)</b>	<b>(n = 115)</b>
Primary care (e.g., doctor or nurse practitioner)	70%	67%	75%	64%	63%
Dental care	68%	67%	70%	64%	63%
Regular medical testing for issues unrelated to COVID-19 (e.g., blood work, X-ray, CT scan, MRI, colonoscopy, biopsy)	53%	49%	56%	53%	58%
Physical therapies (e.g., physiotherapy, massage, chiropractic treatments, occupational therapy, rehabilitative care)	45%	48%	48%	37%	31%
Gender-affirming care	40%	7%	50%	69%	80%
Emergency Room	33%	31%	35%	31%	28%
Gender-affirming surgery	20%	2%	25%	37%	37%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
Alternative therapies (e.g., acupuncture, osteopathy, naturopath, Traditional Chinese Medicine)	19%	23%	21%	11%	3%
Surgery (excluding gender-affirming surgery)	9%	8%	10%	12%	10%
Foot care	9%	9%	9%	9%	6%
Personal support workers at your home	4%	2%	6%	2%	3%
Fertility services	4%	5%	3%	2%	7%
<b><sup>a</sup>Community and support services needed during COVID-19 pandemic</b>	<b>(n = 1294)</b>	<b>(n = 422)</b>	<b>(n = 635)</b>	<b>(n = 127)</b>	<b>(n = 110)</b>
Crisis centres or crisis lines	24%	20%	27%	23%	17%
Community centres	23%	18%	30%	13%	17%
Recreation services	23%	22%	25%	19%	19%
Support group services, drop-in centre, telephone information or support lines	22%	17%	27%	18%	23%
Food banks, soup kitchens	17%	14%	21%	13%	18%
Legal aid or community legal clinics	12%	11%	13%	9%	6%
Cultural centres	10%	9%	13%	6%	5%
Religious, spiritual, ceremonial, or other faith-based services	10%	10%	12%	5%	4%
Free clothing services	9%	6%	11%	6%	7%
Individualized support services (e.g., meals on wheels, friendly visitors)	7%	5%	10%	2%	5%
Friendship centres	7%	6%	8%	6%	4%
Sexual assault centres	6%	6%	8%	4%	2%
Victim support groups or centres	5%	5%	6%	1%	6%
Victim services or witness assistance programs	4%	5%	5%	2%	5%



## Mental Health

Table 4 looks at mental health variables from trans and nonbinary participants overall, and further stratified by gender. Participants responded to questions related to mental health, including questions from three screening measures for depression symptoms (PHQ-2)<sup>8</sup>, anxiety symptoms (GAD-2)<sup>9</sup>, and loneliness (UCLA-3)<sup>10</sup>. Responses to these questions were used to calculate scores indicating whether participants were ‘likely’ or ‘not likely’ to have depression symptoms, anxiety symptoms, or be lonely.

About two-fifths (41%) of all trans and nonbinary participants and nearly half (48%) of trans women had depression symptoms. Just under half (46%) of all trans and nonbinary participants self-reported currently experiencing depression, with higher reportings among participants identifying as nonbinary and gender expansive without trans experience (53%), and lower reportings among trans men (39%) and trans women (36%). Two-thirds (68%) of trans and nonbinary participants reported wanting help for depression, and of these, 56% (n=500/892) reported seeking and accessing help for depression.

More than half (54%) of all trans and nonbinary participants had anxiety symptoms. Just under half (49%) of all trans and nonbinary participants, including 57% of trans nonbinary and gender expansive participants, self-reported currently experiencing anxiety. Three-quarters (76%) of all trans and nonbinary participants reported wanting help for anxiety, and of these, 59% (n=586/989) reported seeking and accessing help for anxiety.

**Table 4: MENTAL HEALTH OF TRANS AND NONBINARY PARTICIPANTS**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b>Mental health at time of survey</b>	<b>(n = 1339)</b>	<b>(n = 439)</b>	<b>(n = 651)</b>	<b>(n = 134)</b>	<b>(n = 115)</b>
Excellent	1%	1%	1%	4%	3%
Very good	10%	11%	8%	13%	10%
Good	27%	27%	26%	29%	32%
Fair	37%	43%	36%	34%	25%
Poor	25%	18%	29%	20%	29%
<b>Self-reported depression</b>	<b>(n = 1595)</b>	<b>(n = 536)</b>	<b>(n = 762)</b>	<b>(n = 162)</b>	<b>(n = 135)</b>
Yes	46%	42%	53%	39%	36%
No	54%	58%	47%	61%	64%
<b>Self-reported help wanted for depression</b>	<b>(n = 1334)</b>	<b>(n = 438)</b>	<b>(n = 648)</b>	<b>(n = 134)</b>	<b>(n = 114)</b>
Yes	68%	69%	70%	60%	63%
No	32%	31%	30%	40%	37%
<b>Patient Health Questionnaire-2 (PHQ-2) score<sup>8</sup> - (Depression)</b>	<b>(n = 1321)</b>	<b>(n = 433)</b>	<b>(n = 643)</b>	<b>(n = 131)</b>	<b>(n = 114)</b>
3-6 (likely)	41%	37%	43%	36%	48%
0-2 (not likely)	59%	63%	57%	64%	52%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
<b>Self-reported anxiety</b>	<b>(n = 1595)</b>	<b>(n = 536)</b>	<b>(n = 762)</b>	<b>(n = 162)</b>	<b>(n = 135)</b>
Yes	49%	44%	57%	41%	37%
No	51%	56%	43%	59%	63%
<b>Self-reported help wanted for anxiety</b>	<b>(n = 1334)</b>	<b>(n = 438)</b>	<b>(n = 648)</b>	<b>(n = 134)</b>	<b>(n = 114)</b>
Yes	76%	76%	79%	65%	68%
No	24%	24%	21%	35%	32%
<b>Generalized Anxiety Disorder 2-item (GAD-2) score<sup>9</sup> - (Anxiety)</b>	<b>(n = 1321)</b>	<b>(n = 433)</b>	<b>(n = 643)</b>	<b>(n = 131)</b>	<b>(n = 114)</b>
3-6 (likely)	54%	50%	58%	47%	49%
0-2 (not likely)	46%	50%	42%	53%	51%
<b>Loneliness score<sup>10</sup></b>	<b>(n = 1328)</b>	<b>(n = 438)</b>	<b>(n = 642)</b>	<b>(n = 132)</b>	<b>(n = 115)</b>
6-9 (lonely)	70%	69%	71%	68%	70%
3-5 (not lonely)	30%	31%	29%	32%	30%
Fertility services	4%	5%	3%	2%	7%
	%	%	%	%	%
<b>*Able to get help for since the start of the COVID-19 pandemic</b>					
<i>*Those who needed help for the respective issue only</i>					
Anxiety	59%	60%	60%	61%	51%
Depression	56%	57%	57%	53%	53%
Trauma	45%	46%	45%	47%	33%
Gender dysphoria	42%	18%	39%	71%	64%
Relationship problems	44%	47%	44%	46%	27%
Burnout	27%	24%	28%	34%	34%
Suicidal thoughts	41%	45%	41%	40%	31%
Grief/Loss	38%	43%	37%	33%	32%
Body image	22%	19%	24%	18%	25%
Navigating sexual orientation and identity	30%	24%	31%	44%	27%
Self-harm	31%	34%	31%	36%	18%
Eating disorder(s)	23%	17%	23%	40%	38%
Substance use	23%	21%	24%	32%	21%
Psychosis, hallucinations, delusions, or paranoia	26%	30%	22%	38%	33%
Other	23%	39%	8%	0%	60%

## Discrimination and Community

Table 5 looks at responses to discrimination-related questions from trans and nonbinary participants overall, and further stratified by gender. Questions on discrimination and violence were only shown to participants who were aged 18 or older. Additionally, at the beginning of the section asking about discrimination and violence, participants were asked if they preferred to skip this set of questions and be taken to the next part of the survey.

One-quarter (25%) of all trans and nonbinary participants reported that they had been manipulated or that their emotions had been used against them since the start of the COVID-19 pandemic by a caregiver, dependent, friend, or someone close to them. Two of five (38%) trans and nonbinary participants reported discrimination online and on social media. Two of five (37%) trans and nonbinary participants reported experiencing discrimination in health care settings, with 45% of trans nonbinary and gender expansive participants reporting discrimination in health care settings.

Trust in various institutions was also assessed in Our Health 2022. The vast majority (83%) of all trans and nonbinary participants reported having little to no trust in the police (Figure 1). Nearly two-thirds (61%) reported having little to no trust in the federal government. Three of four (78%) trans and nonbinary participants reported little trust in their provincial or territorial government. In contrast, 75% of trans and nonbinary participants reported high trust in 2S/LGBTQQIA+ organizations.

**Table 5: DISCRIMINATION & VIOLENCE EXPERIENCED BY TRANS AND NONBINARY PARTICIPANTS**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b><sup>a</sup>Violence done by a caregiver, dependent, friend, or someone close to you since the start of the COVID-19 pandemic</b> <i>*Does not include participants who are under 18, or who skipped discrimination questions</i>	<b>(n = 1109)</b>	<b>(n = 360)</b>	<b>(n = 540)</b>	<b>(n = 113)</b>	<b>(n = 96)</b>
Manipulated me or used my emotions against me	25%	23%	28%	21%	22%
Insulted or verbally abused me	17%	13%	20%	13%	16%
Controlled or restricted my movements outside of the house	7%	6%	7%	8%	6%
Controlled or restricted my access to money	5%	4%	6%	3%	4%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
Hit, kicked, slapped, or physically abused me	2%	3%	1%	0%	3%
Forced unwanted sex or sexually abused me	1%	1%	1%	1%	3%
Not applicable	9%	12%	7%	9%	14%
<b>*Situation(s) where discrimination was experienced since the start of the COVID-19 pandemic</b> <i>*Does not include participants who are under 18, or who skipped discrimination questions</i>	(n = 1147)	(n = 374)	(n = 559)	(n = 114)	(n = 100)
On the Internet, including social media platforms	38%	28%	45%	32%	40%
In health care settings	37%	29%	45%	32%	32%
At work	30%	28%	34%	22%	24%
While using public areas, such as parks and sidewalks	28%	23%	31%	21%	38%
In a store, bank, or restaurant	23%	19%	28%	15%	27%
While attending social gatherings (online or in-person)	20%	15%	24%	15%	22%
While using public transit, such as buses, trains, or taxis	19%	17%	21%	13%	19%
When applying for a job or promotion	15%	12%	18%	11%	13%
When attending school or classes (online or in-person)	14%	9%	19%	11%	9%
When accessing services through a government agency	13%	9%	16%	6%	15%
When seeking or applying for housing (e.g., buying or renting)	12%	10%	16%	7%	8%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
When interacting with the police	12%	10%	15%	10%	10%
When accessing services through a community organization or agency	7%	4%	10%	4%	4%
When interacting with the courts	3%	3%	3%	3%	2%
When interacting with Canadian Border Services Agency officers	2%	3%	2%	1%	4%
Any other situation	11%	7%	13%	12%	8%

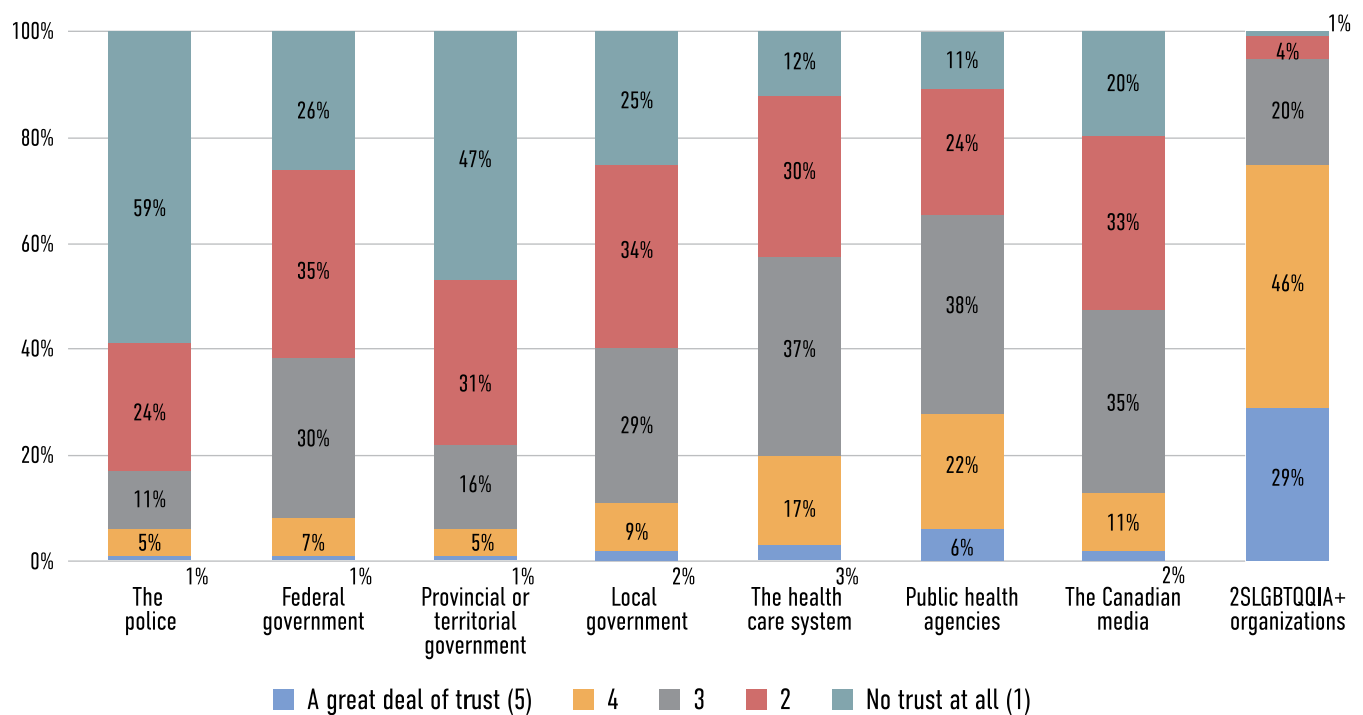
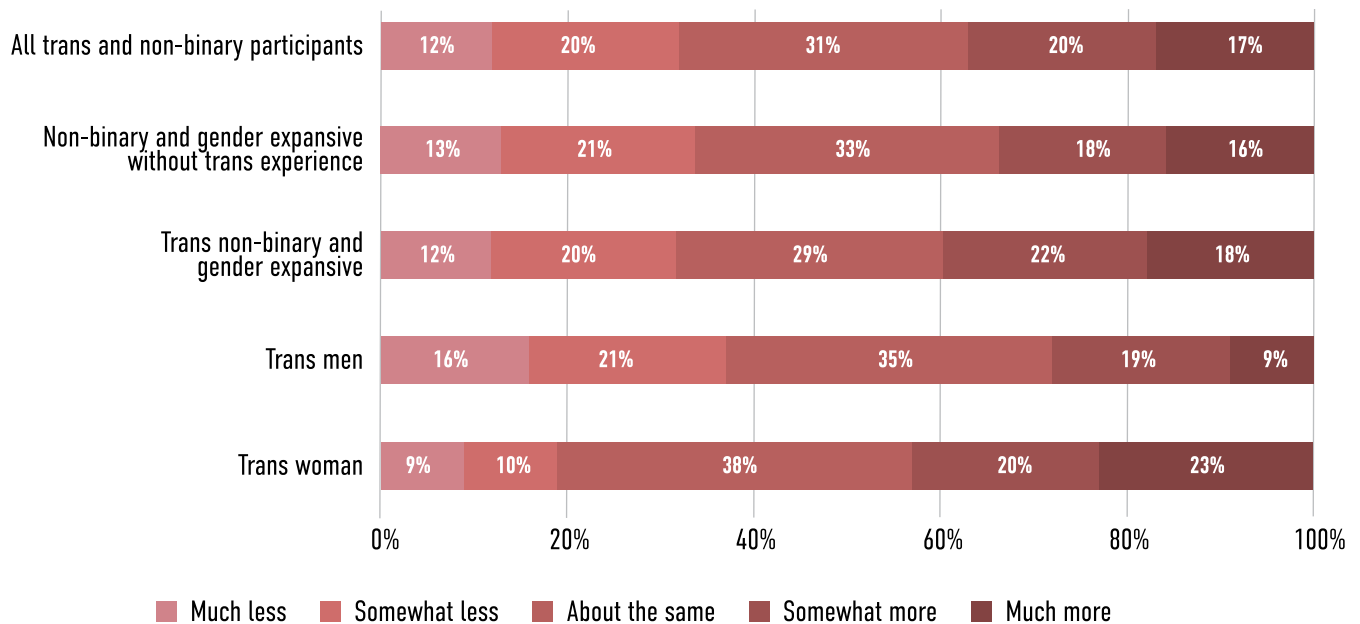


Figure 2: Level of trust in various institutions among trans and nonbinary participants

## Community

Figure 3 shows to what degree trans and nonbinary participants stayed connected to their communities during the COVID-19 pandemic. Just over a third (37%) of all trans and nonbinary participants reported feeling either 'somewhat' or 'much more' connected to the 2S/LGBTQQIA+ community at the time of the survey compared with before the COVID-19 pandemic; when stratified by gender, we found greater levels of community connectedness for trans nonbinary and gender expansive participants (40%), and trans women (43%).



*Figure 3: Community connection among trans and nonbinary participants, overall and by gender*

Four of five (80%) trans and nonbinary participants reported spending at least half of their social time around other 2S/LGBTQQIA+ people. These findings are shown in Figure 4, stratified by gender.

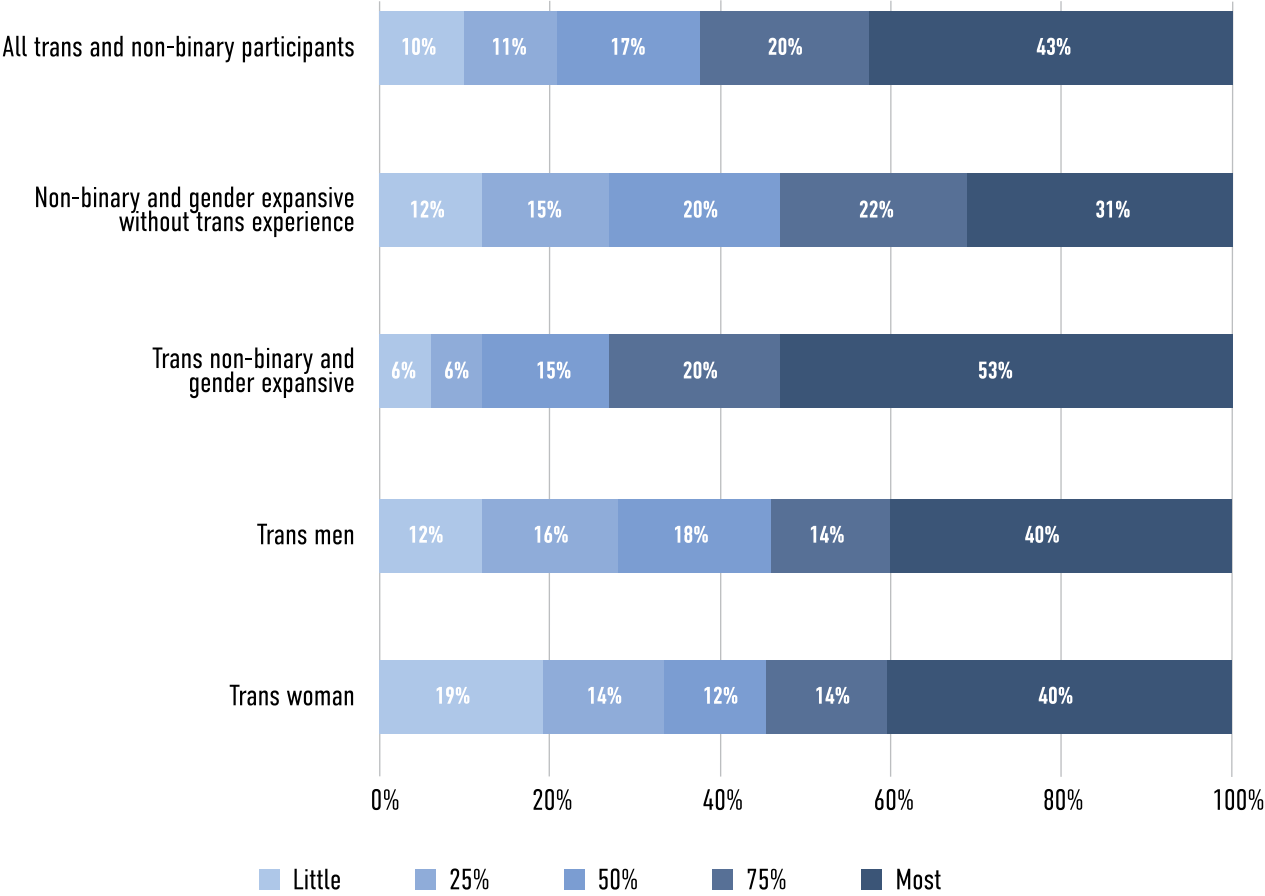
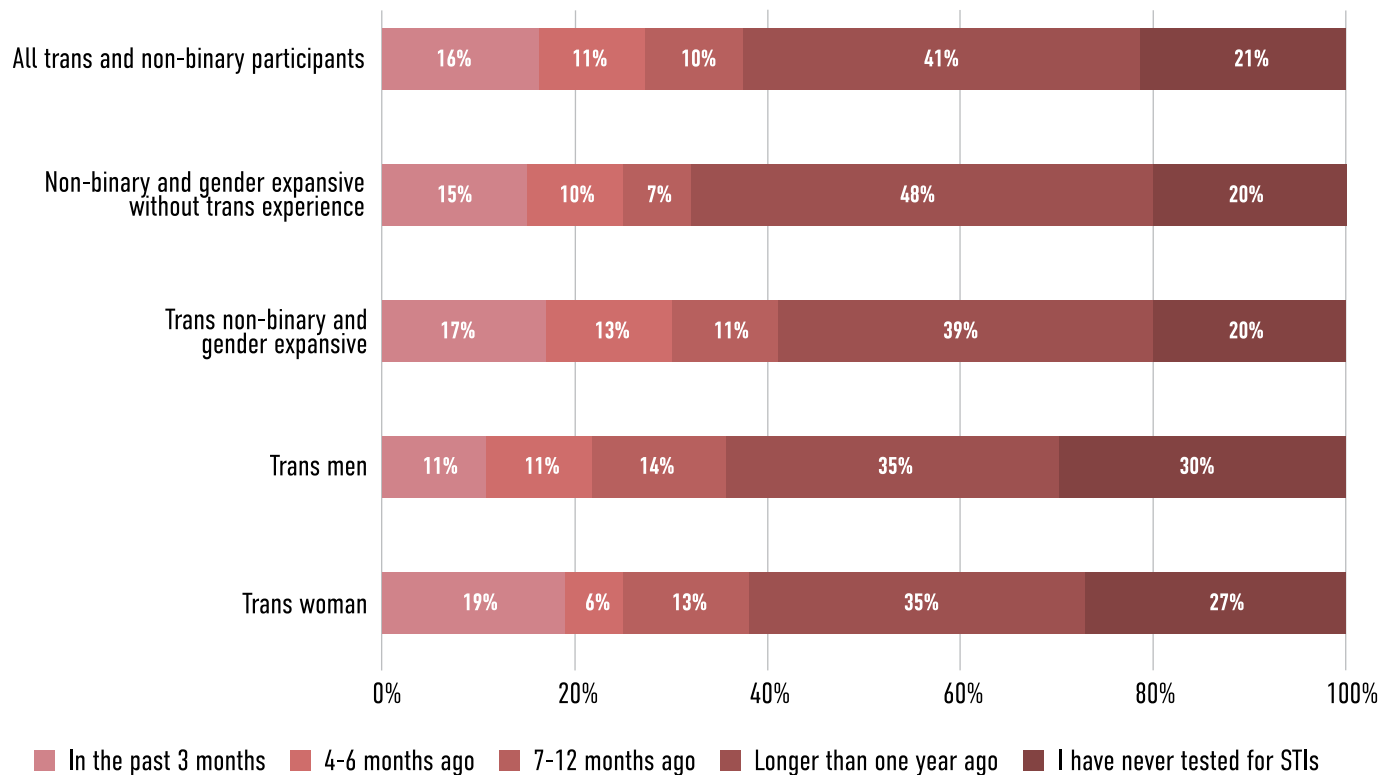


Figure 4: Amount of time trans and nonbinary participants spent with 2S/LGBTQQIA+ people, overall and by gender

## Sexual Health

Figure 5 depicts the sexual health of all trans and nonbinary participants during the COVID-19 pandemic, and how this differed by gender. Just over one-third (37%) of trans and nonbinary participants reported having last been tested for sexually transmitted infections (STIs) within the previous 12 months, while one in five (21%) reported having never been tested for STIs.



*Figure 5: Time since last STI test among trans and nonbinary participants, overall and by gender*



One in three (35%) trans and nonbinary participants reported their sex life was either ‘somewhat worse’ or ‘much worse’ at the time of the survey than before the COVID-19 pandemic began (Figure 6). Just under a third (29%) reported that it was about the same.

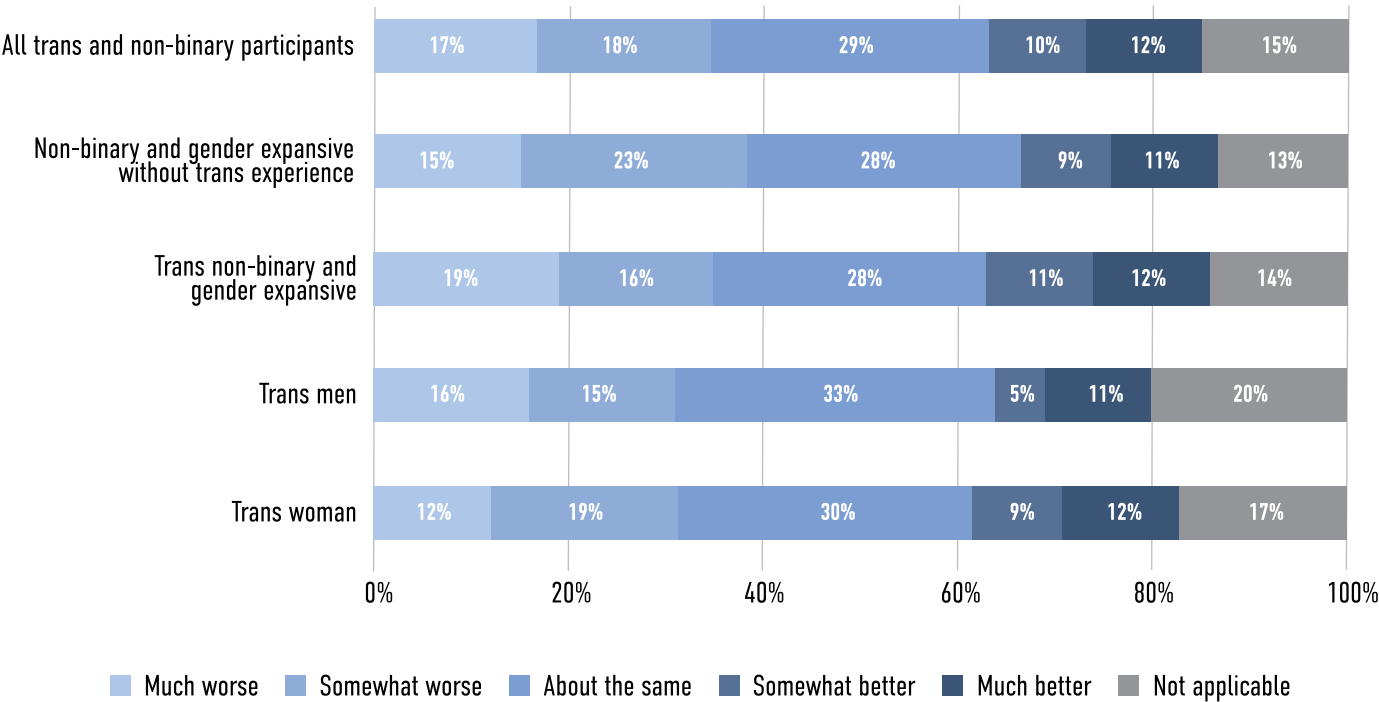


Figure 6: Sex life of trans and nonbinary participants compared with before the COVID-19 pandemic, overall and by gender

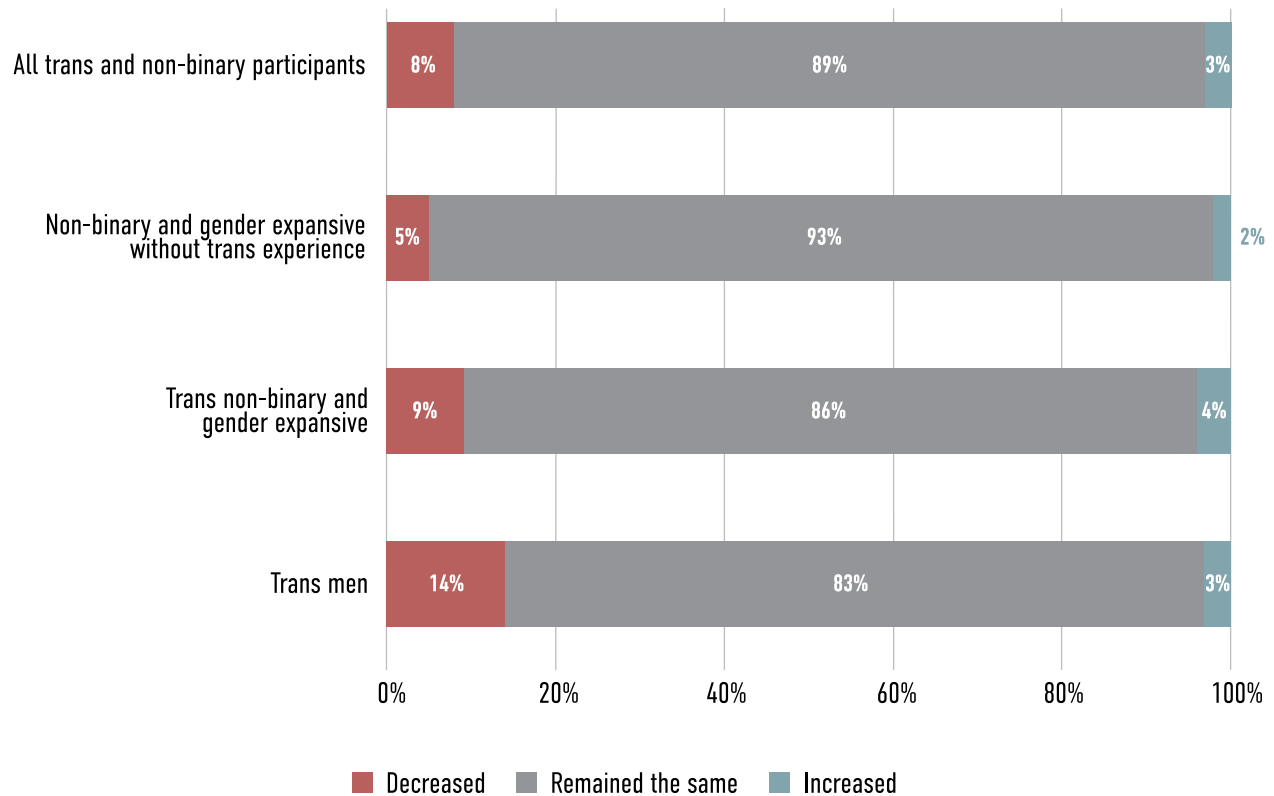
## Reproductive Health

Fewer than one in five (17%) trans and nonbinary participants reported wanting to have children in the future, with a further 27% unsure. Among those participants intending to or unsure about having children in the future, the most commonly reported barriers to having children were cost (reported by 63% of these participants). Social, political, or environmental concerns were reported by half (50%) of trans and nonbinary participants, though these concerns were less common among trans men and trans women. See Table 6 for a description of reproductive variables reported by trans and nonbinary participants.

**Table 6: REPRODUCTIVE INTENTIONS AND BARRIERS AMONG TRANS AND NONBINARY PARTICIPANTS**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b>Intend to have children in the future</b>	<b>(n = 1216)</b>	<b>(n = 394)</b>	<b>(n = 587)</b>	<b>(n = 128)</b>	<b>(n = 107)</b>
Yes	17%	18%	17%	18%	13%
No	56%	54%	56%	59%	64%
I don't know	27%	29%	27%	23%	23%
<b>*Barriers to having children</b> <i>*Among those who intend to have children or don't know</i>	<b>(n = 552)</b>	<b>(n = 178)</b>	<b>(n = 254)</b>	<b>(n = 51)</b>	<b>(n = 39)</b>
Cost	63%	64%	67%	51%	54%
Social, political, or environmental concerns	50%	52%	52%	37%	36%
Gender dysphoria	31%	13%	39%	41%	44%
Getting approval for adoption	24%	17%	27%	33%	18%
Finding a sperm donor	20%	21%	22%	20%	5%
Matching with a child for adoption	17%	14%	20%	14%	15%
Finding a co-parent(s)	15%	11%	20%	10%	5%
Disagreements with partner(s) concerning family planning	12%	19%	10%	4%	10%
Infertility	12%	12%	11%	8%	33%
Finding a gestational surrogate	6%	4%	6%	10%	3%
Finding a traditional surrogate	5%	5%	5%	8%	5%
Finding an egg donor	4%	4%	4%	2%	5%
Other	12%	7%	17%	8%	8%

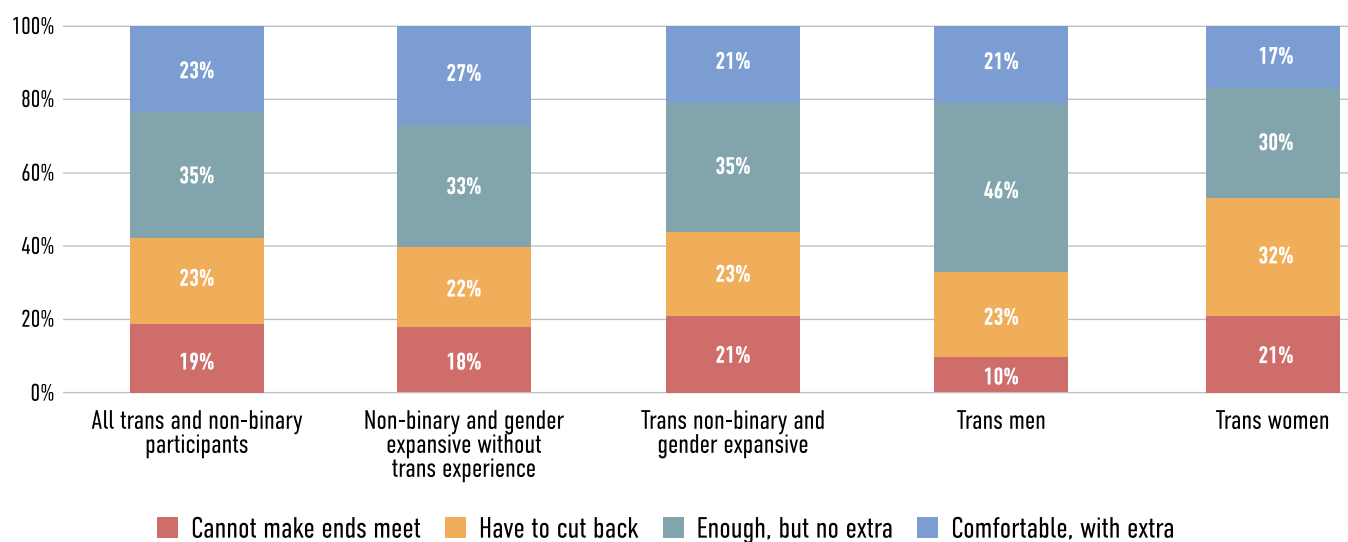
Most (89%) trans and nonbinary participants reported having unchanged access to menstrual products within the six months prior to the survey. Differences are reported in Figure 7, with data for trans women not shown due to the low response rate among trans women participants (n=2) for this question.



*Figure 7: Access to menstrual products in the six months prior to data collection among trans and nonbinary participants, overall and by gender.*

## Economic Security

This section looks at the economic security of trans and nonbinary participants during the COVID-19 pandemic. Two of five (42%) trans and nonbinary participants reported experiencing financial challenges (“having to cut back” or “could not make ends meet”) during the COVID-19 pandemic (Figure 8). However, half of trans women (53%) reported experiencing financial challenges. A quarter (27%) of all trans and nonbinary participants reported that the COVID-19 pandemic had a major impact on the ability to pay off debt; when stratified by gender, trans men participants reported this less (14%) (Table 7). Half (49%) of all trans and nonbinary participants reported that the COVID-19 pandemic had a moderate or major impact on their ability to pay for food and groceries. See Figure 9 for more details. Over a third (36%) of all trans and nonbinary participants reported having applied for government COVID-19 benefits, such as the Canada Emergency Response Benefit (CERB) or Canada Emergency Student Benefit (CESB).

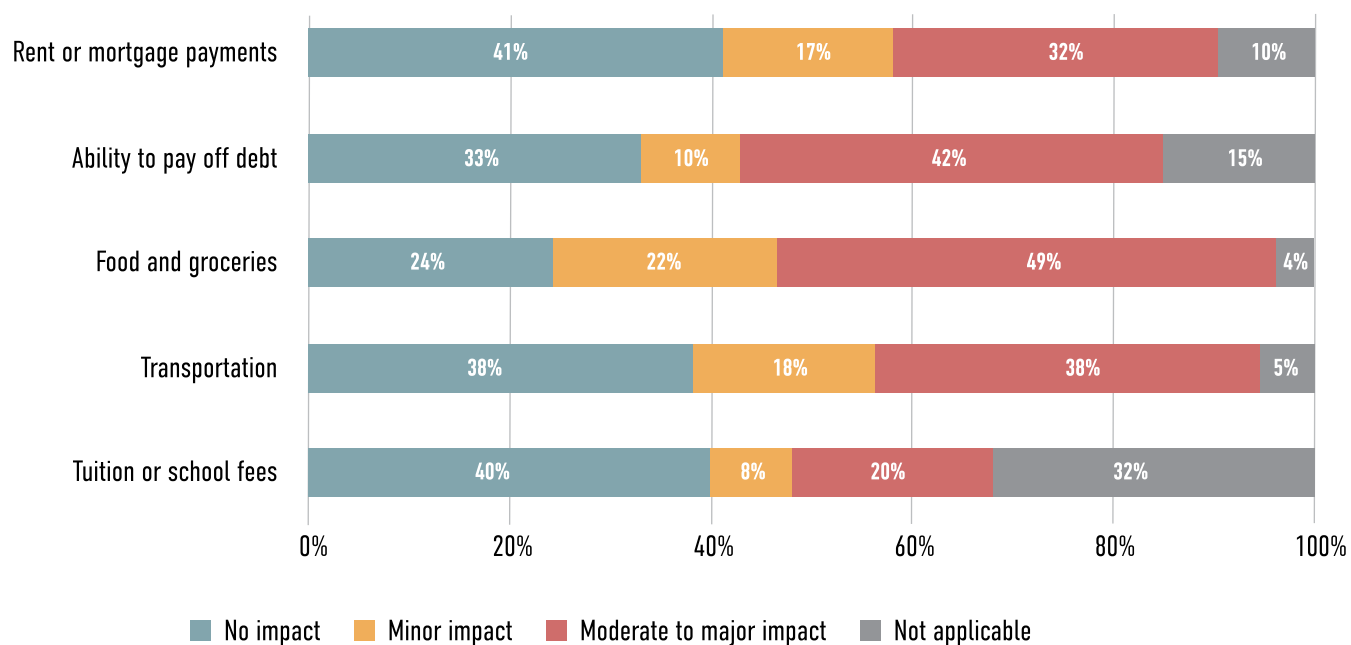


*Figure 8: Money situation among trans and nonbinary participants, overall and by gender*

**Table 7: ECONOMIC SECURITY OF TRANS AND NONBINARY PARTICIPANTS**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b>Negative impact from COVID-19 pandemic on ability to meet the following</b>					
<b>Rent or mortgage payments</b>	<b>(n = 1159)</b>	<b>(n = 374)</b>	<b>(n = 564)</b>	<b>(n = 121)</b>	<b>(n = 100)</b>
No impact	41%	46%	37%	49%	36%
Minor impact	17%	20%	16%	16%	17%
Moderate to major impact	32%	29%	36%	21%	32%
Not applicable	10%	5%	11%	14%	15%
<b>Ability to pay off debt</b>	<b>(n = 1155)</b>	<b>(n = 373)</b>	<b>(n = 562)</b>	<b>(n = 120)</b>	<b>(n = 100)</b>
No impact	33%	34%	32%	37%	26%
Minor impact	10%	12%	8%	9%	10%
Moderate to major impact	42%	42%	44%	32%	43%
Not applicable	15%	11%	16%	22%	21%
<b>Food and groceries</b>	<b>(n = 1164)</b>	<b>(n = 376)</b>	<b>(n = 567)</b>	<b>(n = 121)</b>	<b>(n = 100)</b>
No impact	24%	29%	21%	28%	23%
Minor impact	22%	22%	23%	25%	21%
Moderate to major impact	49%	48%	53%	41%	47%
Not applicable	4%	1%	4%	6%	9%
<b>Transportation</b>	<b>(n = 1158)</b>	<b>(n = 375)</b>	<b>(n = 563)</b>	<b>(n = 120)</b>	<b>(n = 100)</b>
No impact	38%	41%	36%	43%	38%
Minor impact	18%	18%	17%	21%	20%
Moderate to major impact	38%	38%	42%	29%	30%
Not applicable	5%	4%	5%	7%	12%
<b>Tuition or school fees</b>	<b>(n = 1152)</b>	<b>(n = 373)</b>	<b>(n = 558)</b>	<b>(n = 121)</b>	<b>(n = 100)</b>
No impact	40%	40%	39%	47%	40%
Minor impact	8%	8%	9%	5%	6%
Moderate to major impact	20%	22%	20%	12%	20%
Not applicable	32%	30%	32%	36%	34%
<b><sup>a</sup>Work experience since the start of the COVID-19 pandemic</b>	<b>(n = 1193)</b>	<b>(n = 389)</b>	<b>(n = 578)</b>	<b>(n = 124)</b>	<b>(n = 102)</b>
A decrease in work hours	27%	29%	29%	19%	24%
An increase in work hours	25%	26%	27%	21%	17%
Difficult finding work	24%	22%	27%	20%	25%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
A new job or opening of your new business	24%	24%	27%	23%	12%
A work absence for voluntary or personal reasons related to COVID-19	21%	23%	21%	19%	12%
An increase in pay or self-employment earnings (include overtime pay)	17%	16%	20%	12%	15%
A decrease in pay or self-employment earnings	17%	21%	14%	16%	15%
A temporary layoff or business closure (e.g., due to business conditions or COVID-19- related public health restrictions)	17%	18%	16%	13%	20%
A job loss or permanent closure of your business	16%	15%	17%	13%	18%
Other changes in work status	21%	20%	25%	11%	14%
<b>Experience with a government COVID-19 benefit (e.g., CERB, CESB)</b>	<b>(n = 1195)</b>	<b>(n = 389)</b>	<b>(n = 578)</b>	<b>(n = 125)</b>	<b>(n = 103)</b>
I applied to receive a benefit and I received the benefit	36%	37%	39%	24%	37%
I applied to receive a benefit, received it but had to pay it back	5%	5%	4%	2%	7%
I applied to receive a benefit but did not receive it	1%	1%	1%	0%	3%
I did not apply because I did not need it	23%	27%	19%	31%	21%
I did not apply because I was not eligible	25%	21%	29%	27%	21%
Not applicable	10%	10%	9%	15%	11%



*Figure 9: Financial impacts of the COVID-19 pandemic on all trans and nonbinary participants*

## Caregiving

This section looks at the caregiving responsibilities reported by all trans and nonbinary participants during the COVID-19 pandemic, and how these differed by gender. Compared with before the COVID-19 pandemic, a quarter (24%) of all trans and nonbinary participants reported 'somewhat more' or 'much more' caregiving responsibilities (Table 8). Nearly one in three (29%) of all trans and nonbinary participants reported 'about the same' caregiving responsibilities.

**Table 8: CAREGIVING RESPONSIBILITIES OF TRANS AND NONBINARY PARTICIPANTS**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b>Caregiving responsibilities compared with before COVID-19 pandemic</b>	<b>(n = 1210)</b>	<b>(n = 393)</b>	<b>(n = 585)</b>	<b>(n = 127)</b>	<b>(n = 105)</b>
Much more	10%	10%	11%	9%	6%
Somewhat more	14%	16%	12%	15%	11%
About the same	29%	27%	29%	30%	31%
Somewhat less	3%	4%	3%	3%	1%
Much less	3%	3%	4%	1%	3%
No caregiving responsibilities	41%	40%	41%	42%	48%



## Substance Use

This section looks at substance use among all trans and nonbinary participants during the COVID-19 pandemic, and how these differed by gender. More than one in ten (12%) trans and nonbinary participants reported losing someone close to them due to the toxic drug supply, while one in three (36%) reported losing someone from their community (Table 9). This was highest among trans nonbinary and gender expansive participants (42%).

Questions were also asked related to the frequency of consumption of various substances in the six months prior to the survey. 70% of all trans and nonbinary participants reported ‘once in a while or regularly’ drinking less than five alcoholic drinks in one occasion. This was highest among nonbinary and gender expansive participants without trans experience (74%). One in five (20%) trans and nonbinary participants reported daily use of cannabis, with an additional 42% reporting ‘once in a while or regularly’ using cannabis. About one in five (22%) trans and nonbinary participants reported recently using psychedelics (e.g., LSD, mescaline, acid, mushrooms).

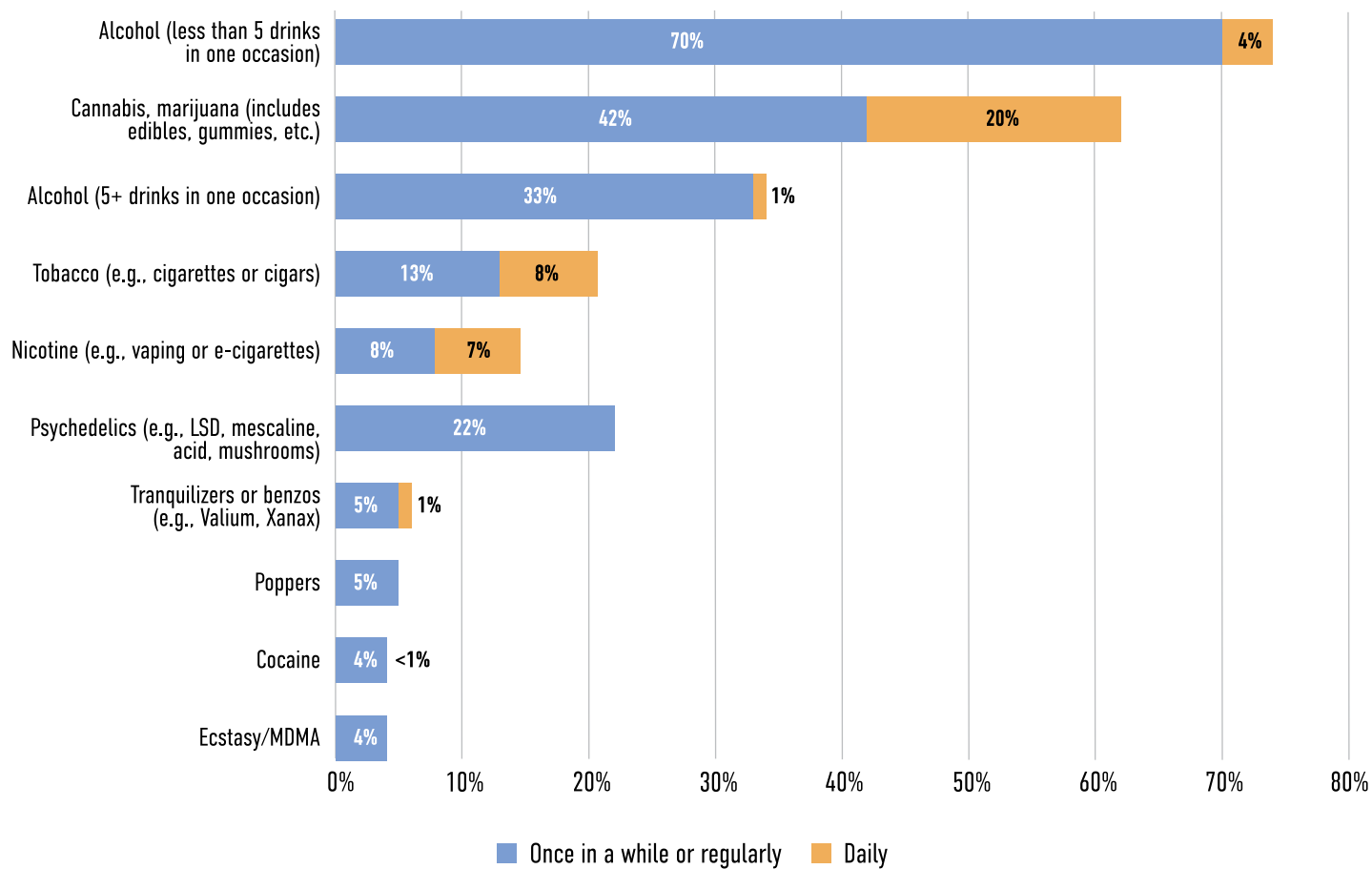
Figure 10 shows the reported increases in substance use behaviours and concerns since the onset of the COVID-19 pandemic. Over a third (35%) of all trans and nonbinary participants reported increasingly using substances alone. One in five (20%) trans and nonbinary participants also reported increased triggers for using substances, with fewer trans men (15%) and trans women (15%) reporting this. A total of 115 trans and nonbinary participants (7%) reported seeking out naloxone/ NARCAN kits, with 74% of these able to access this resource (Table 10).

**Table 9: SUBSTANCE USE AMONG TRANS AND NONBINARY PARTICIPANTS**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b><sup>a</sup>Lost someone due to unsafe drug supply or overdose since the start of the COVID-19 pandemic</b>	<b>(n = 1172)</b>	<b>(n = 375)</b>	<b>(n = 574)</b>	<b>(n = 124)</b>	<b>(n = 99)</b>
Yes, I have lost someone close to me	12%	12%	12%	15%	10%
Yes, my community has lost someone	36%	34%	42%	29%	19%
No	57%	60%	52%	62%	73%
<b><sup>a</sup>Increase since start of COVID-19 pandemic</b>	<b>(n = 1169)</b>	<b>(n = 371)</b>	<b>(n = 574)</b>	<b>(n = 124)</b>	<b>(n = 100)</b>
Using alone	35%	34%	36%	28%	37%
Triggers for using	20%	22%	20%	15%	15%
Using with others	14%	15%	15%	10%	12%
Withdrawal symptoms	6%	6%	6%	6%	5%
Worry about toxic supply / overdose	5%	5%	6%	3%	3%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	Frequency of consumption in past 6 months				
<b>Alcohol (less than 5 drinks in one occasion)</b>	<b>(n = 1166)</b>	<b>(n = 375)</b>	<b>(n = 573)</b>	<b>(n = 121)</b>	<b>(n = 97)</b>
Never	26%	21%	26%	31%	37%
Once in a while or regularly	70%	74%	71%	66%	60%
Daily	4%	5%	3%	2%	3%
<b>Alcohol (less than 5 drinks in one occasion)</b>	<b>(n = 1143)</b>	<b>(n = 367)</b>	<b>(n = 562)</b>	<b>(n = 117)</b>	<b>(n = 97)</b>
Never	66%	58%	69%	74%	70%
Once in a while or regularly	33%	41%	30%	25%	29%
Daily	1%	1%	1%	1%	1%
<b>Nicotine (e.g., vaping or e-cigarettes)</b>	<b>(n = 1132)</b>	<b>(n = 364)</b>	<b>(n = 557)</b>	<b>(n = 116)</b>	<b>(n = 95)</b>
Never	85%	85%	87%	82%	84%
Once in a while or regularly	7.8%	8.0%	7.4%	10%	6.3%
Daily	6.8%	7.4%	5.7%	7.8%	9.5%
<b>Tobacco (e.g., cigarettes or cigars)</b>	<b>(n = 1145)</b>	<b>(n = 367)</b>	<b>(n = 563)</b>	<b>(n = 118)</b>	<b>(n = 97)</b>
Never	79%	78%	80%	84%	75%
Once in a while or regularly	13%	13%	13%	10%	19%
Daily	7.7%	9.0%	7.5%	5.9%	6.2%
<b>Cannabis, marijuana (includes edibles, gummies, etc.)</b>	<b>(n = 1163)</b>	<b>(n = 374)</b>	<b>(n = 571)</b>	<b>(n = 119)</b>	<b>(n = 99)</b>
Never	38%	34%	35%	48%	55%
Once in a while or regularly	42%	47%	42%	37%	28%
Daily	20%	19%	23%	15%	17%
<b>Cocaine</b>	<b>(n = 1133)</b>	<b>(n = 363)</b>	<b>(n = 561)</b>	<b>(n = 116)</b>	<b>(n = 93)</b>
Never	96%	95%	96%	96%	97%
Once in a while or regularly	4%	4%	4%	4%	2%
Daily	<1%	<1%	0%	0%	1%
<b>Ecstasy/MDMA</b>	<b>(n = 1130)</b>	<b>(n = 364)</b>	<b>(n = 556)</b>	<b>(n = 116)</b>	<b>(n = 94)</b>
Never	96%	94%	96%	98%	99%
Once in a while or regularly	4%	6%	4%	2%	1%
Daily	0%	0%	0%	0%	0%

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
<b>Tranquilizers or benzos (e.g., Valium, Xanax)</b>	<b>(n = 1130)</b>	<b>(n = 362)</b>	<b>(n = 558)</b>	<b>(n = 116)</b>	<b>(n = 94)</b>
Never	94%	95%	94%	94%	94%
Once in a while or regularly	5%	4%	6%	5%	3%
Daily	1%	<1%	<1%	1%	3%
<b>Poppers</b>	<b>(n = 1128)</b>	<b>(n = 363)</b>	<b>(n = 556)</b>	<b>(n = 114)</b>	<b>(n = 95)</b>
Never	94%	93%	95%	91%	95%
Once in a while or regularly	5%	6%	4%	8%	5%
Daily	<1%	1%	<1%	1%	0%
<b>Psychedelics (e.g., LSD, mescaline, acid, mushrooms)</b>	<b>(n = 1135)</b>	<b>(n = 364)</b>	<b>(n = 562)</b>	<b>(n = 116)</b>	<b>(n = 93)</b>
Never	94%	93%	95%	91%	95%
Once in a while or regularly	5%	6%	4%	8%	5%
Daily	<1%	1%	<1%	1%	0%



*Figure 10: Reported recent use of substances among trans and nonbinary participants*

**Table 10: ACCESS TO SUBSTANCE USE RESOURCES AMONG TRANS AND NONBINARY PARTICIPANTS**

Variables	Overall		Nonbinary and gender expansive without trans experience		Trans nonbinary and gender expansive		Trans men		Trans women	
	n	%	n	%	n	%	n	%	n	%
<b>Ability to get following substance use resources in the last 6 months</b>										
<i>*Those who needed the resource only</i>										
Naloxone/NARCAN kit	85/115	74%	22/27	81%	52/70	74%	7/10	70%	4/8	50%
Counselling for alcohol or substance use	42/106	40%	10/38	26%	29/56	52%	1/4	25%	2/8	25%
Needle/syringe exchange	41/57	72%	2/2	100%	29/39	74%	8/12	67%	2/4	50%
Referrals for social supports (e.g., housing, income, food)	40/112	36%	6/26	23%	22/66	33%	8/10	80%	4/10	40%
Harm reduction supplies (e.g., free pipes, straws)	35/45	78%	7/10	70%	23/30	77%	4/4	100%	1/1	100%
Safe supply of substances	34/88	39%	5/21	24%	22/55	40%	3/5	60%	4/7	57%
Drug checking services	16/45	36%	6/14	43%	9/27	33%	1/1	100%	0/3	0%
Supervised injection/ consumption sites	7/11	64%	1/2	50%	5/7	71%	1/2	50%	0/0	NA%

## Housing

This section looks at housing challenges during the COVID-19 pandemic among all trans and nonbinary participants, and how this differed by gender. Among all trans and nonbinary participants, 40% reported feeling unsafe due to the COVID-19 status or the COVID-19 safety practices of the people they lived with (Table 11). One in three (33%) trans and nonbinary participants also reported difficulty in finding a new place to live. Just over a quarter (29%) of trans and nonbinary participants reported increases in rent or property tax.

**Table 11: HOUSING CHALLENGES EXPERIENCED BY TRANS AND NONBINARY PARTICIPANTS DURING THE COVID-19 PANDEMIC**

Variables	Overall	Nonbinary and gender expansive without trans experience	Trans nonbinary and gender expansive	Trans men	Trans women
	%	%	%	%	%
<b>*Housing challenges since the start of the COVID-19 pandemic</b>	<b>(n = 1161)</b>	<b>(n = 370)</b>	<b>(n = 569)</b>	<b>(n = 122)</b>	<b>(n = 100)</b>
Felt unsafe because of others' COVID-19 status or safety practices	40%	40%	45%	30%	28%
Had difficulty finding a new place to live	33%	33%	37%	24%	23%
Increased rent or property tax	29%	29%	31%	23%	24%
Felt unsafe due to domestic violence, maltreatment, harassment, etc.	18%	16%	20%	12%	15%
Borrowed money to pay rent or mortgage	17%	16%	19%	9%	17%
Had to move because of housing costs	16%	17%	18%	12%	9%
Tensions with my current landlord	16%	19%	18%	5%	11%
Needed to move in with family or friends	16%	18%	17%	7%	10%
A major home or facility repair was delayed or cancelled	12%	11%	13%	9%	6%
Skipped or delayed a rent or mortgage payment	9%	8%	11%	5%	8%
A potential landlord declined to rent to me	9%	6%	11%	6%	8%
Unable to find housing due to stigma or discrimination	6%	4%	8%	4%	10%
Received an eviction notice, notice to pay, or similar	6%	4%	8%	4%	7%
Experienced eviction or foreclosure	5%	3%	6%	5%	4%
Other	3%	1%	4%	2%	3%



# Conclusion

This report highlights some of the impacts of the COVID-19 pandemic on trans and nonbinary communities in Canada. Participants reported increased mental health concerns such as symptoms of loneliness, anxiety, and depression; discrimination online, in health care settings, and at work; challenges with the ability to meet various needs such as food; and issues with housing related to feeling unsafe and cost. These findings are similar to previous research that showed mental health and housing concerns as major impacts of the COVID-19 pandemic on trans and nonbinary communities in Canada.<sup>1,2,11</sup>

Despite challenges, trans and nonbinary participants found ways to connect with each other and other 2S/LGBTQQIA+ people. Social connection can be a protective factor for mental health and wellbeing for 2S/LGBTQQIA+ communities, especially when taking an intersectional lens that accounts for various social positions and experiences.<sup>12,13</sup> Many participants increased their connection with 2S/LGBTQQIA+ communities when compared with before the COVID-19 pandemic.

Many participants experienced discrimination in health care settings, which may contribute to why over 60% of trans and nonbinary participants had their last STI test more than one year ago or had never sought testing. Furthermore, supports are needed to meet the health needs of trans and nonbinary people by reducing discrimination, providing accessible and gender-affirming care, and reducing existing housing inequities in Canada.

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