

LGBTQ2+ Youth Priorities for Addressing Gender- Based Violence

Report of a Youth Engagement project led
by Wisdom2Action for the Public Health
Agency of Canada



Submitted by:

Wisdom2Action Consulting Ltd.
Lisa Lachance
2554 Oxford Street, Halifax, NS, B3L2T4
Phone: 902-266-5329
Email: lisa.lachance@dal.ca
www.wisdom2action.org

LAND ACKNOWLEDGEMENT

Wisdom2Action is based in K'ijipuk'tuk in Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq. We are all Treaty people and live in this territory under the Peace and Friendship Treaties of the mid-1700s.

The analysis, views, and opinions expressed are those of the authors and do not necessarily reflect the position or the policies of the Public Health Agency of Canada. Permission granted for non-commercial reproduction related to educational or service planning purposes, provided there is a clear acknowledgement of the source.

TABLE OF CONTENTS

| | |
|---|----|
| Executive Summary | 4 |
| Glossary of Terms | 6 |
| Project Background | 8 |
| Youth Engagement Process | 10 |
| Demographic Overview | 13 |
| Consultation Findings | 15 |
| Experience of LGBTQ2+ Youth and Gender-Based Violence | 15 |
| Impact of Gender-Based Violence on LGBTQ2+ Youth | 23 |
| Programs and Services Recommendations | 24 |
| Priority Areas for Action and Change | 28 |
| Project Reflection and Recommendations | 29 |
| Conclusion | 31 |

This project / report was made possible by the financial contributions of the Public Health Agency of Canada

© Her Majesty the Queen in Right of Canada, 2019

Financial contribution from



Public Health
Agency of Canada

Agence de la santé
publique du Canada

GBV

EXECUTIVE SUMMARY

500 YOUTH

On behalf of the Public Health Agency of Canada, Wisdom2Action engaged with approximately 500 youth, LGBTQ2+ youth in particular, across Canada to identify the particular ways LGBTQ2+ youth are impacted by Gender-Based Violence (GBV), from January to March 2019. The objectives of this engagement including allowing LGBTQ2+ youth to share the impact of GBV on their lives and identify their priorities related to addressing and preventing GBV.

It is clear that GBV remains an all too common experience for LGBTQ2+ youth. Youth emphasized the breadth and depth of the impact of GBV on their lives. In particular, participants emphasized the prevalence of:

LGBTQ2+ YOUTH

- Street harassment and a lack of public safety, particularly with regards to trans, gender non-conforming and racialized youth;
- Sexual violence, with an emphasis on sexual assault and intimate partner violence;
- Violence in schools, particularly bullying, verbal, physical and social violence, and lack of educator capacity to support LGBTQ2+ youth;
- Lack of safety in family contexts, particularly with regards to trans- and gender-diverse youth, and racialized young people;
- Public perceptions of LGBTQ2+ identities, with an emphasis on negative portrayals of LGBTQ2+ communities and the lack of positive LGBTQ2+ role models, and;
- Negative experiences with health and social services, in particular due to service providers unable to provide LGBTQ2+-inclusive care.

LGBTQ2+ youth emphasized the negative health, social and economic impacts of GBV, including increased prevalence of mental health problems, increased isolation, poverty and unemployment, homelessness and prevalence of suicidality among LGBTQ2+ youth. They also connected their experiences to larger systems of exclusion and oppression, such as racism -including environmental racism, as well as classism, and other issues.

SERVICE RECOMMENDATIONS

LGBTQ2+ youth articulated a diversity of program and service recommendations to address GBV and improve outcomes among LGBTQ2+ youth. Recommendations included:

- Education initiatives targeted at the general public, service providers and educators, and young people;
- Peer support services for LGBTQ2+ youth, including youth groups, community and social programming and intergenerational community programs;
- Family services and supports, in particular, counselling services, parent-focused education and parent-led peer support programs;
- Housing and homelessness services, including LGBTQ2+ youth shelters, LGBTQ2+ youth employment programs and more inclusive mainstream youth housing and homelessness services;
- Comprehensive sexuality education for LGBTQ2+ youth, with an emphasis on sexual health, consent, healthy relationships and communication, and;
- Community, Health and Social Services, particularly more inclusive mainstream health and social services, services targeted at LGBTQ2+ youth in particular, peer driven programming, and virtual support services.

PRIORITIES OF ACTION

The consultation sought to identify key priorities of action related to LGBTQ2+ youth and GBV. The following three issues were identified as the most important action areas:

- **Education:** Participants prioritized public education, youth and family education and service provider education as key areas of action to address GBV.
- **Housing and Homelessness:** Participants emphasized the need for action targeted at those LGBTQ2+ most vulnerable to GBV, particularly street-involved and homeless youth.
- **Health and Social Services:** Participants consistently identified difficulties accessing inclusive health and social services, the inability of service providers to deliver LGBTQ2+ inclusive services, and the need for LGBTQ2+ youth-specific services.

LGBTQ2+ youth are passionate and committed to addressing the issue of GBV because it has a pervasive effect on their lives, impacting their experiences of community, school, family and home, relationships, activism and health care. The powerful response to this engagement opportunity is testimony to their commitment and capacity to mobilize and lead change.

GLOSSARY OF TERMS

Ableism

Ableism is the systemic discrimination of disabled and neuro-diverse people, and the privileging of able bodied and neurotypical people.

Cis(gender)

Cisgender describes individuals whose gender identity matches the gender they were assigned at birth.

Classism

Classism is differential treatment based on social class or perceived social class. Classism is the systematic oppression of subordinated class groups to advantage and strengthen the dominant class groups. It's the systematic assignment of characteristics of worth and ability based on social class.

Gender-Based Violence

Gender-Based Violence (GBV) is the use and abuse of power and control over another person, and is perpetrated against someone based on their gender identity, gender expression or perceived gender. Violence against women and girls is one form of gender-based violence. It also has a disproportionate impact on LGBTQ2 (lesbian, gay, bisexual, transgender, queer, questioning, intersex and two-spirit) and gender non-conforming people.

Gender Binary

The gender binary is the classification of gender into two distinct, opposite, mutually exclusive and disconnected categories of male or female.

Gender non-conforming

Gender non-conforming describes individuals whose gender expression or physical appearance does not conform to prevailing conventions or social or cultural expectations of gendered appearance.

Heteronormative

Heteronormativity is the societal enforcement of heterosexuality as the default and norm. It involves the assumption that individuals are heterosexual until proven otherwise, and that heterosexuality is the normal and superior sexuality.

GLOSSARY OF TERMS

Heterosexism

Heterosexism is the systemic discrimination against LGBTQ2+ people based on the assumption that heterosexuality is the norm and ideal, and that all other identities or experiences are abnormal and inferior.

Homophobia

Homophobia describes the violence enacted against gay, lesbian, bi and otherwise non-heterosexual communities on a systemic, community and interpersonal level.

LGBTQ2+

LGBTQ2+ stands for Lesbian, Gay, Bisexual, Trans, Queer and Two-Spirit. The plus symbolizes the inclusion of all others who identify as other than heterosexual and cisgender.

Non-Binary

Non-binary is an umbrella term for those who do not identify wholly or exclusively as either binary gender, male or female.

Street harassment

Street harassment is a form of harassment, primarily sexual harassment that consists of unwanted comments, gestures, honking, catcalling, exposure, following, persistent sexual advances, and touching by strangers in public areas such as streets, shopping malls, and public transportation.

Street-involved

Street-involved is a term to describe those who are 'homeless', struggling with stable housing, or otherwise is exposed to and experiencing the physical, mental, emotional and social risks of street culture.

Trans(gender)

Transgender describes individuals whose gender identity does not wholly or completely match the gender they were assigned at birth.

Transphobia

Transphobia describes the violence enacted against trans and gender diverse communities on a systemic, community and interpersonal level.

PROJECT BACKGROUND

In December 2018, Wisdom2Action (W2A) was contracted by the Public Health Agency of Canada (PHAC) to lead a national youth engagement initiative to identify the priorities of youth, particularly LGBTQ2+ youth, on Gender-Based Violence (GBV). The goal of this project was to understand the experiences of GBV by LGBTQ2+ youth, increase understanding among youth across Canada on GBV, and identify recommendations on how the government can help support LGBTQ2+ young people impacted by GBV.

WHO IS WISDOM2ACTION?

Founded in 2011, Wisdom2Action is a national knowledge mobilization (KMb) initiative that supports researchers, community-based organizations, educators, policy makers, and others working to improve the mental health and well-being of children, youth, families and communities.

W2A was established with the goal of strengthening the connection between evidence and practice, and facilitating cross-sectoral and interdisciplinary knowledge sharing and collaboration between those working to improve the lives of vulnerable young people from across Canada.

Wisdom2Action Ltd. was incorporated in February 2018 as a social enterprise based at Dalhousie University, Halifax, Canada. Wisdom2Action Consulting Ltd. leads knowledge mobilization activities that value research evidence, practice evidence, and lived experience to truly understand what works in programs and services for young people.

- Knowledge mobilization, coaching and planning;
- Full-service evaluations for child and youth service providers and government agencies;
- Youth engagement strategy development, implementation, and training;
- Training and consultation on program design and implementation, and;
- Community engagement through events, facilitation, online platforms, and social media strategies.

PROJECT BACKGROUND



WHAT IS GENDER-BASED VIOLENCE?

The Government of Canada through the Department for Women & Gender Equality defines Gender-Based Violence (GBV) as “the use and abuse of power and control over another person, and is perpetrated against someone based on their gender identity, gender expression or perceived gender. Violence against women and girls is one form of gender-based violence. It also has a disproportionate impact on LGBTQ2 (lesbian, gay, bisexual, transgender, queer, questioning, intersex and two-spirit) and gender non-conforming people”

(<https://cfc-swc.gc.ca/commemoration/vaw-vff/index-en.html>).

WHO ARE LGBTQ2+ YOUTH?

For the purpose of this project, LGBTQ2+ youth was defined as any young person between the age of 12 and 29, who identifies as Lesbian, Gay, Bisexual, Trans, Queer or Two-Spirit (LGBTQ2+) or any identity other than heterosexual and cisgender.

YOUTH ENGAGEMENT PROCESS

In December 2018, Wisdom2Action (W2A) was contracted by the Public Health Agency of Canada (PHAC) to lead a national youth engagement initiative to identify the priorities of youth, particularly LGBTQ2+ youth, on Gender-Based Violence (GBV). The goal of this project was to understand the experiences of GBV by LGBTQ2+ youth, increase understanding among youth across Canada on GBV, and identify recommendations on how the government can help support LGBTQ2+ young people impacted by GBV.

PROJECT CREATION

Co-created proposal development: Wisdom2Action was approached by the Public Health Agency of Canada to submit a proposal for this initiative. The proposal was co-created by the Wisdom2Action President, the Wisdom2Action Youth Advisory Committee, and LGBTQ2+ youth affiliated with Wisdom2Action.

Youth Project Coordinator: Upon confirmation of contract, Wisdom2Action retained an LGBTQ2+ identified youth project coordinator to lead the project, under the supervision of the Wisdom2Action President.

PROJECT IMPLEMENTATION - ENGAGEMENT

IN-PERSON CONSULTATIONS

Wisdom2Action organized 4 youth consultations across Canada, in Calgary, Alberta, Halifax, Nova Scotia, Ottawa, Ontario and Toronto, Ontario. Each consultation was facilitated by an LGBTQ2+ youth facilitator and supported by the W2A Project Coordinator. The consultations represented an opportunity for young people to engage in deeper discussions related to LGBTQ2+ youth and GBV, through the creative facilitation approach employed by W2A youth facilitators. The consultations facilitated a more in-depth analysis of key themes, issues and recommendations.

YOUTH ENGAGEMENT PROCESS

NATIONAL ONLINE SURVEY

The circulation of a national online survey for LGBTQ2+ youth was a key mechanism to ensure LGBTQ2+ youth from across Canada had the opportunity to provide their perspectives and inform this project. The survey was intentionally structured to center youth perspectives through a qualitative approach.

Wisdom2Action worked with new and past partner organizations and individuals across Canada to get the word out about this project and create interest in completing the survey. W2A wanted to ensure that the survey reflected as much as possible a wide range of youth experience from diverse locations in Canada and through diverse identities. Both the W2A President and Project Coordinator promoted the project through a range of national forums such as the Rainbow Youth Health Forum (November 2018, Ottawa), Child Rights Academic Network (February 2019, Ottawa) and the Fierté Canada Pride conference (February 2019, Ottawa). A wide variety of organizations, associations and LGBTQ2+ community leaders promoted the project as well, including the Canadian Federation of Students, the Mental Health Commission of Canada, the Canadian Professional Association for Transgender Health and many others.

TWITTER CHAT

Wisdom2Action led a virtual “Twitter Chat” to enable more in-depth engagement through virtual means for LGBTQ2+ youth across Canada. The Twitter Chat served as an opportunity to move beyond pre-established survey questions and engage in a more detailed discussion about the realities, needs and priorities of LGBTQ2+ youth on GBV.

YOUTH ENGAGEMENT PROCESS

PROJECT CONCLUSION – ANALYSIS & PRIORITIZATION

THEMATIC ANALYSIS

The initial thematic analysis was undertaken by a Research Assistant from the Resilience Research Centre (Dalhousie University) who reviewed 100 surveys overall, and then also reviewed three batches of 50 surveys each from survey respondents who identified as Black, Indigenous or a Person of Colour; from rural areas; or as trans or gender diverse.

YOUTH-LED ANALYSIS

As the project entered the analysis phase, Wisdom2Action engaged 11 survey and consultation participants in a series of youth analysis meetings, where young people were presented with the key themes and recommendations identified through an analysis of the survey, in-person consultations and Twitter Chat data. The analysis notes derived from the Youth Analysis Meetings were central to the development of the recommendations and priorities identified in this report. All youth who had completed the online survey or participated in in-person discussion were invited to join these sessions. This inclusive process resulted in the engagement of LGBTQ2+ youth from diverse lived experiences, including a strong representation of rural, trans and racialized young people from across Canada. Participants in this part of the process received a \$25 honorarium.

FINAL REPORT ADVISORY GROUP

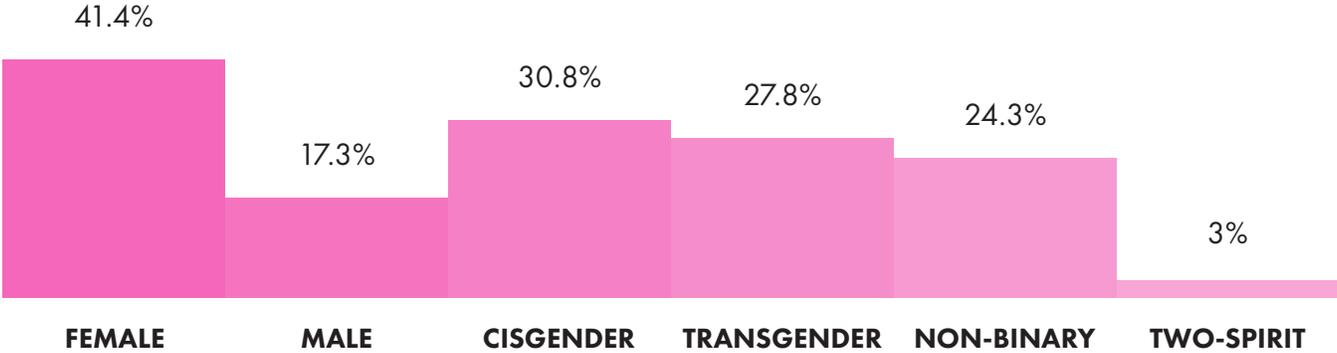
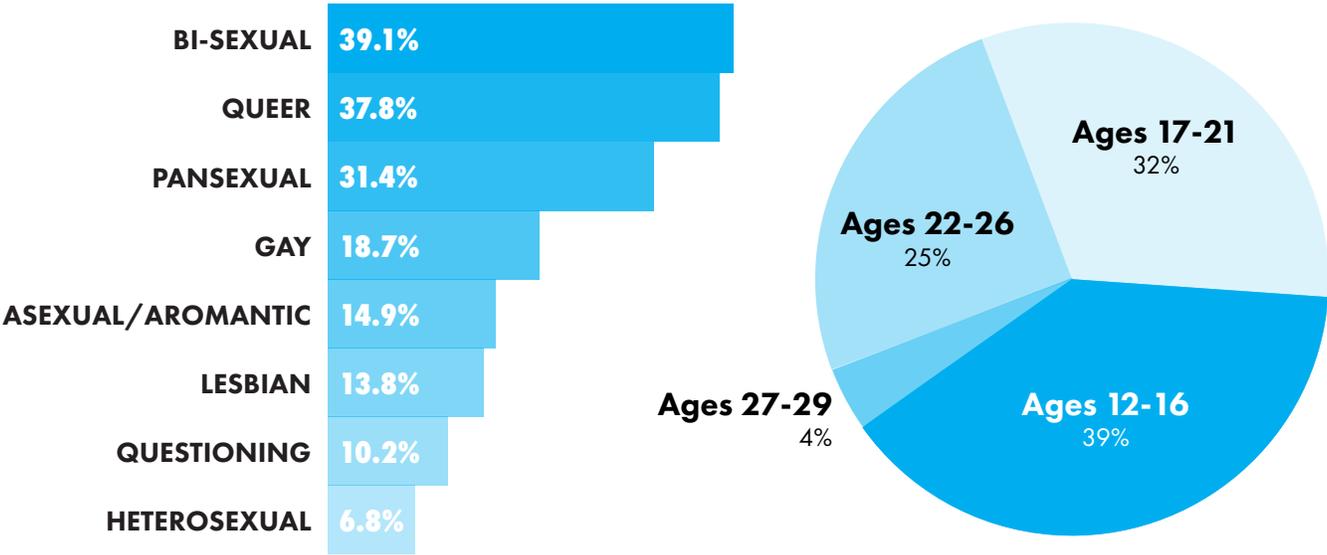
Following the Youth Analysis Meetings, as the project moved into the final phase, Wisdom2Action engaged a team of four LGBTQ2+ youth who had been engaged in various roles throughout the project - as survey respondents, consultation participants and/or youth facilitators - to guide the development of this report and associated deliverables. These team members received an honorarium of \$400.

DEMOGRAPHIC OVERVIEW

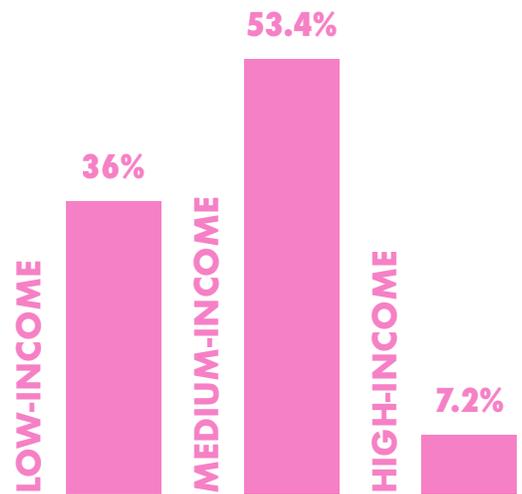
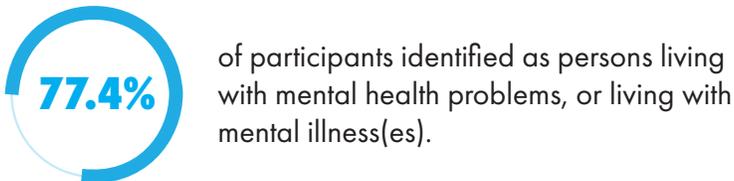
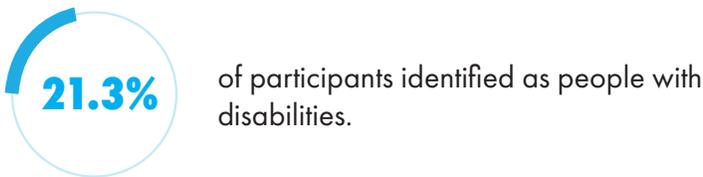
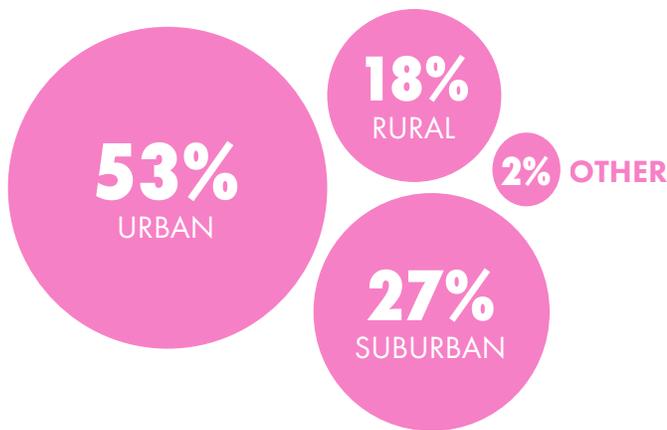
500
PARTICIPANTS

Wisdom2Action engaged approximately 500 young people across Canada in the consultative process for this project, through the national online survey, in-person consultations and Twitter chat.

The national survey served as the primary mechanism for engagement, and was completed by a total of 455 participants from across Canada. To ensure the perspectives of underrepresented groups were included in this consultation, Wisdom2Action included demographic questions within the survey, focused on gender, age, sexuality, race, community type, income, (dis)ability, level of education and geographic location. In many cases, percentages do not add up to 100% as participants were able to select multiple options to best describe themselves.



DEMOGRAPHIC OVERVIEW



The consultation process had strong representation of trans- and gender-diverse youth, racialized youth, and rural youth. However, there were limited responses from the Yukon, Northwest Territories and Nunavut.

CONSULTATION FINDINGS

EXPERIENCES OF LGBTQ2+ YOUTH AND GENDER-BASED VIOLENCE

A key question in our consultation involved the particular experiences of LGBTQ2+ youth connected to GBV. While it is understood that LGBTQ2+ youth are disproportionately impacted by GBV, the particularities of how LGBTQ2+ youth experience that impact has not always been well understood. As such, our consultation sought to provide depth and detail to those experiences, to improve awareness of - and ability to address - that impact.

Our consultation identified an immense diversity of impacts, with many participants emphasizing that GBV is intimately connected to social systems deeply embedded in Canadian society, and therefore, the impact of GBV exists on both a societal and individual level. The following categories represent broad themes that captured the diversity of experiences emphasized by participants. Due to the complex nature of GBV, there is significant similarity and correlation across categories. These categories therefore exist less to create boxes between issues, and more to enable greater clarity of particular experiences.

Lack of Public Safety and Prevalence of Street Harassment

One of the most common experiences highlighted by participants was the lack, or perceived lack, of safety in public spaces, and the prevalence of street harassment. Of particular note, participants emphasized the heightened risk of street harassment directed at gender non-conforming LGBTQ2+ youth and youth who identified as both LGBTQ2+ and racialized.

Participants consistently highlighted the fear they experienced existing as LGBTQ2+ young people in public, and how the threat of violence impacted their sense of safety. Due to the threat of violence, many LGBTQ2+ youth expressed their hesitation to go out in public, and the increased isolation caused by avoiding public spaces.

“

I used to have unfettered access to public spaces, something most people would take for granted, but when I began visibly violating gender norms, I became subject to verbal and physical abuse while in public on a fairly regular basis and have little recourse except to avoid public spaces.

CONSULTATION FINDINGS

Participants emphasized the toll public violence takes on the health and well-being of LGBTQ2+ youth, through the burden of hypervigilance, lack of public safety, experiences of public violence and fear. Due to the prevalence of street harassment, including physical and verbal harassment, staring, glaring and other experiences that contributed to an overall decreased sense of safety in public, many LGBTQ2+ youth identified increased isolation and an increased fear of public spaces, and a direct, corresponding impact on their mental health.

“

I think our mental health is largely impacted. Some may never physically be attacked but the threat is constant and exhausting. Constantly being on edge in public spaces or in gatherings takes a toll on one's mind to the point where going out is a burden.

Sexual Violence

Sexual violence, particularly sexual assault and Intimate Partner Violence (IPV) were amongst the most commonly identified issues articulated by participants. Participants emphasized the greater prevalence of sexual assault targeted at LGBTQ2+ communities, and LGBTQ2+ women and trans people in particular.

Of particular note, numerous participants described the impact of 'corrective rape' or sexual assault intended to 'cure' an individual of their gender or sexual diversity, with a particular emphasis on efforts to 'cure' young women, asexual youth, and gender diverse youth.

“

I think my identity as a lesbian puts me at a greater risk for violence from men. Lesbian relationships are fetishized by men and seen as not real/for attention which can lead to sexual harassment. As well, men are offended at the idea that a woman is exclusively attracted to other women and there is no room for men in the equation. This again leads to sexual abuse in the form of things like corrective rape, frequent advances, etc.

CONSULTATION FINDINGS

“

I would say we are impacted more than cisgender, heterosexual, heteroromantic youth when it comes to gender-based violence. Some are attacked, simply because of their gender, or sexuality. For example, Asexual and Aromantic youth in Canada are attacked because people think that by utilizing sexual assaults, they can correct us.

Participants articulated a diversity of barriers preventing LGBTQ2+ youth from accessing sexual assault services, including the lack of sensitivity from service providers of LGBTQ2+ identities and the gendered and heteronormative approach embedded in many service-providing agencies. Examples of gendered and heteronormative approaches include the lack of gender-neutral washrooms, the presence of gender segregated programming, presumption of opposite-gendered sexual and romantic partners, presumption of gender identity based on appearance through the use of incorrect pronouns and incorrectly gendered terms, and more.

Intimate partner violence (IPV) was underscored by many participants as an issue receiving insufficient attention. Participants emphasized that LGBTQ2+ communities are often left out of mainstream discussions of intimate partner violence, and therefore the realities of LGBTQ2+ youth experiencing IPV are not acknowledged, and the particular needs of LGBTQ2+ youth impacted by IPV are not addressed.

“

LGBTQ2+ people experience intimate partner violence and when they do are less likely to report it since police and other authorities will not take it seriously or regard it as 'real' since it is not a man or a woman or they do not recognize the relationship or sexual activities as real sex e.g. a female identified partner abusing another female identified partner violently or sexually.

CONSULTATION FINDINGS

Violence in Schools

Younger participants, in particular, emphasized the violence prevalent in educational contexts. Participants highlighted the prevalence of peer-based violence and abuse, in the form of teasing, bullying, the use of slurs and micro-aggressions such as refusing to use proper names and pronouns in reference to trans and gender diverse students.

“

The biggest issue I'm seeing right now is with Trans and Genderqueer people in schools. A friend of mine was beat up after school for identifying as a trans female. I've heard from multiple non-binary / genderqueer people that they've been relentlessly bullied, an overwhelming majority physically, for being themselves and not conforming to gender norms.

Participants also emphasized the role of teachers and administrators in failing to create inclusive environments, through a lack of education themselves, ambivalence towards the needs and experiences of LGBTQ2+ youth, or outright hostility.

“

Teachers I've had will say something wrong, not with the intentions of being harmful mind you, but they then spread the misinformation.

Teachers and authority figures (adults) often use microaggressions or use incorrect pronouns, names, etc. regularly and may use laws or policies to justify it.

”

CONSULTATION FINDINGS

A significant number of participants described education environments that failed to create safe and inclusive environments for LGBTQ2+ youth, through a lack of explicit policies protecting LGBTQ2+ youth, reinforcing a gender binary through gender-segregated spaces like bathrooms and gym classes, failing to support LGBTQ2+ student initiatives, and a lack of LGBTQ2+ education.

“

Schools and public spaces can be extremely difficult and make people feel unsafe because of gender policing and institutionalize measures (such as public bathrooms) to ensure that everyone fits into certain gendered expressions. Schools often won't allow students to identify outside of the binary in a comfortable way and this lack of support can create an opportunity for peer violence.

Lack of Safety in Family Contexts

Many participants highlighted problems in familial contexts, particularly with regards to unaccepting or unsafe homes, and the impact of family violence. Participants emphasized the scope and depth of family violence, including physical abuse, isolation, and neglect. Participants emphasized the negative impact of living in homes where LGBTQ2+ identities are implicitly or explicitly unwelcomed, where families are able to act as gatekeepers preventing access to health and social services, and the homelessness too often resulting from familial rejection.

Participants particularly emphasized the difficulty of existing in unaccepting homes, having to hide their LGBTQ2+ identities and remain in the closet in order to maintain familial relationships, or due to their dependency on parental resources.

“

It's hard for me to say as I've never been "out" in my suburban community growing up, largely due to many unspoken rules that it is not okay to be queer, and having parents coming from a culture that are unlikely to meet my coming out with acceptance (but rather alienation). It felt safer to pretend to be straight, although I have no doubt that if I was more openly out, I would've faced more harassment and bullying.

CONSULTATION FINDINGS

Lack of Safety in Family Contexts

Many participants highlighted the dependent relationship between many LGBTQ2+ youth and their parents, and the capacity of unaccepting parents to prevent access to medical, health and social services, particularly in the case of trans young people seeking access to transition-related healthcare.

“

Young adults, because they are often still dependent on their families for food, shelter, finance, and access to healthcare, can find themselves in a position where their family will actively stand in the way of the young adult's ability to transition, and/or threaten to kick the youth out should they pursue transition.

”

There is not enough resources for youth to go and get help, especially in rural communities. Often times youth are unable to access those resources, even if they are provided, due to it being unsafe or being afraid to. Often times parental consent is needed to access these resources, which can be risky if the parents are the assailants.

Participants emphasized the violence of family rejection and expulsion from parental homes. Of particular note, participants highlighted the impact to the health and wellbeing, self-esteem, and community resulting from unstable housing.

CONSULTATION FINDINGS

“

When parents reject their kids and force them into the streets at a young age those kids have very few options available to them. Disconnected from any sort of wider community, and without any adult advocates, sex work and drugs are some of the only avenues open to homeless queer/trans youth.

Public Perception of LGBTQ2+ Identities

Participants consistently identified the broader public perception of LGBTQ2+ identities, and LGBTQ2+ youth in particular, as a negative component of GBV. Participants identified negative media portrayal as a key issue, particularly the prevalence of news coverage focused on violence directed at LGBTQ2+ communities, and coverage debating the validity of LGBTQ2+ identities.

Not only are the youth directly affected by the violence through bullying or harassment because of being LGBTQ2+, they also constantly exposed to it, through the news and social media they are constantly seeing that the way they identify or other people identify as wrong, and punishable by violence by just expressing themselves and being who they are.

“

“The youth are impacted first hand through the abuse that LGBTQ2+ people often face as you hear about it all the time of youth being harassed etc. Youth are also affected through witnessing the abuse done upon others through social media, news articles, stories etc. It’s a prevalent thing”

CONSULTATION FINDINGS

Negative Experience with Health and Social Services

Participants articulated significant difficulties related to health and social services. Many highlighted the inaccessibility or unwelcoming nature of mainstream health and social services, the lack of LGBTQ2+-competency among service providers, and experiences of 'gatekeeping' or denial of services to gender diverse clients. Many participants emphasized that they were forced to act as educators and advocates while accessing health and social services.

Numerous participants articulated negative experiences working with health and social service providers who were not adequately trained to be fully inclusive of LGBTQ2+ communities, and trans youth in particular.

“

Many physicians are unsure of how to treat trans people, or do not want to, and when confronted with gender non-conformity as a medical issue, can often meet clients, especially young ones with resistance on the basis of being “too young” to make such a big “choice” not fully understanding that transition is essential for the safety and well-being of many trans people.

Due to the lack of education and LGBTQ2+ competency, many young people were required to educate providers, and self-advocate for the kinds of care and services they needed. Due to the power imbalances, and the stigma related to LGBTQ2+ identities, many youth emphasized the uncomfortable and unsafe position the requirement for self-advocacy placed upon them.

“

In general, it is harder for young people who are still learning how to self-advocate and navigate the health system, to find care providers of any kind who are willing and able to treat trans people appropriately in a healthcare setting.

CONSULTATION FINDINGS

“

We have to advocate for ourselves but a lot of us don't know how to do that because of how our experiences as minorities have deeply harmed and stifled us.

IMPACT OF GENDER-BASED VIOLENCE ON LGBTQ2+ YOUTH

Throughout the consultation process, LGBTQ2+ youth consistently highlighted the devastating impact GBV had on their lives. In particular, participants emphasized a causal relationship between GBV and the prevalence of negative health, social and economic outcomes in LGBTQ2+ youth and broader LGBTQ2+ communities.

PARTICIPANTS EMPHASIZED THE FOLLOWING AS ISSUES SIGNIFICANTLY IMPACTED BY GBV:

- Mental health problems;
- Substance use problems;
- Isolation, fear and shame;
- Homelessness and street involvement;
- Poverty and underemployment;
- Inability to access needed mental and physical health services;
- Inability to access needed social services;
- Hiding aspects of their identities, staying “in the closet”, and;
- Increased prevalence of suicidal ideation, suicide attempts and completed suicides.

CONSULTATION FINDINGS

PROGRAMS AND SERVICES RECOMMENDATIONS

A key component of the consultative process was the identification of programs, services and initiatives that LGBTQ2+ youth would like to see to better support LGBTQ2+ youth impacted by GBV, and to reduce the prevalence of GBV directed at LGBTQ2+ youth.

Education Initiatives

Education initiatives were the most common recommendations from consultation participants.

PARTICIPANTS HIGHLIGHTED A NEED FOR:

- Education for service providers and educators: Due to the difficulties accessing inclusive and affirming health and social services, as well as the negative experiences interacting with school educations, participants emphasized the need for greater training and capacity building targeted at professionals working with youth.
- Education targeted at youth: Younger participants in particular emphasized the importance of education initiatives in the primary and secondary school systems.
- Public Education: With a particular emphasis on addressing the prevalence of street harassment and reducing the occurrence of micro-aggressions such as mis-gendering, participants emphasized the need for a significant increase and focus on education targeted at the general public, particularly in rural communities.
- LGBTQ2+-Driven Education: Participants consistently emphasized the importance of education by and for LGBTQ2+ communities - as a mechanism to ensure youth had access to positive role models in schools.

CONSULTATION FINDINGS

Peer Support for LGBTQ2+ Youth

Many participants emphasized the positive impacts of peer support services, including youth groups, community programming, and opportunities for intergenerational relationships.

THE FOLLOWING PEER SUPPORT SERVICES WERE EMPHASIZED BY PARTICIPANTS:

- Youth Groups: Spaces by and for LGBTQ2+ youth, such as Gender and Sexuality Alliances (GSAs), campus LGBTQ2+ student centres, and drop-in LGBTQ2+ youth programs.
- Community and Social Programming: Outside of formalized peer support services, participants articulated a desire to see more community-based and social programs, to provide opportunities to socialize with other LGBTQ2+ youth with common lived experiences, build peer relationships and access safer spaces.
- Intergenerational Community Building and Mentorship: Due to the lack of opportunities for intergenerational sharing within LGBTQ2+ communities in particular, and the lack of adult role models for many LGBTQ2+ youth, participants consistently emphasized their desire for more community-based opportunity to connect, build relationships with and learn from older LGBTQ2+ individuals.

Family Services & Supports

Given the identified impacts of unwelcoming families and home environments, many participants emphasized the need for greater supports targeted at families, with a particular focus on culturally-appropriate services. The need for supports targeted at parents with recently-out LGBTQ2+ youth was prioritized by many participants.

CONSULTATION FINDINGS

RECOMMENDED INITIATIVES INCLUDED:

- **Counselling Services:** Counselling services intended to support parents with LGBTQ2+ children, particularly those experiencing difficulty supporting their children, were consistently identified by participants.
- **Parent-Focused Education:** Ignorance and misunderstandings related to LGBTQ2+ identities, particularly with regard to medical transition for trans and gender diverse youth, and how to practically support LGBTQ2+ youth, were key issues identified by participants.
- **Peer Support Programs:** Many participants identified the importance of peer support programs, including virtual and in-person supports, to enable parents to share any difficulties they might experience, access support, and learn from other parents how to best support their children.

Housing and Homelessness Services

Participants consistently identified the need for holistic services targeted at reducing, preventing and ending LGBTQ2+ youth homelessness. Participants emphasized the increased vulnerability to all forms of violence, including gender-based violence, of street-involved or homeless LGBTQ2+ youth.

RECOMMENDED INITIATIVES INCLUDED:

- **LGBTQ2+ Youth Shelters:** Many participants expressed the desire for shelters specific to LGBTQ2+ youth, given the barriers preventing access to mainstream youth homelessness services.
- **Youth Employment Programs:** Given the higher risk of homelessness among LGBTQ2+ youth, and barriers to accessing employment opportunities, participants emphasized the importance of targeted interventions to ensure employment opportunities for LGBTQ2+ youth, and homeless or unstably housed LGBTQ2+ youth in particular.
- **Inclusive Youth Housing and Homelessness Services:** Participants consistently identified barriers accessing mainstream homelessness and housing services, including unsupportive service providers and peers. As such, participants particularly emphasized a desire to see more inclusive youth housing services, including more inclusive youth shelters and more inclusive affordable housing options.

CONSULTATION FINDINGS

Community, Health and Social Services

Participants regularly highlighted the need for a greater emphasis on community, health and social services.

RECOMMENDED INITIATIVES INCLUDED:

- **Inclusive Health and Social Services:** Participants articulated the need for more inclusive and affirming health and social services. Participants consistently identified the lack of capacity of service providers to provide affirming care, and the inability of agencies as a whole to operate from LGBTQ2+-inclusive approaches. Participants emphasized on-going and in-depth training for service providers, particularly focused at trans and gender diverse inclusion, as well as cultural competency and intersectionality.
- **Services targeted at LGBTQ2+ youth:** Participants consistently articulated a desire for more services targeted specifically at LGBTQ2+ young people. Services recommended included community gatherings, peer support programs, counselling services and sexual violence support services. In particular, LGBTQ2+ youth in rural communities emphasized the need for and importance of peer-driven programming.
- **Accessible Virtual Services:** Participants consistently identified the need for virtual support services, with a particular emphasis on crisis lines and online peer support services. Youth in rural communities most consistently identified the need for online support services.

PRIORITY AREAS FOR ACTION AND CHANGE

While participants articulated an incredible diversity of needs, priorities and recommendations to support LGBTQ2+ youth impacted by Gender-Based Violence, a key aspect of the consultation process involved identifying a series of top priorities for action. The three key priorities identified included: Education, Housing and Homelessness and Health and Social Services.

EDUCATION

Participants consistently identified the need for greater education on LGBTQ2+ issues, with an emphasis on public education, family-focused education, and youth-focused education. Participants consistently identified the negative impact of ignorance related to LGBTQ2+ identities, particularly with regard to street harassment, violence in schools and family violence.

HOUSING AND HOMELESSNESS

Participants prioritized the need for action to support the most vulnerable within LGBTQ2+ youth communities, particularly homeless and unstably housed LGBTQ2+ youth. Participants emphasized the increased vulnerability to GBV experienced by homeless LGBTQ2+ youth, and the need for targeted interventions to prevent, reduce and end LGBTQ2+ youth homelessness specifically.

HOUSING AND HOMELESSNESS

LGBTQ2+ youth consistently identified difficulties accessing mainstream health and social services, with a particular emphasis on the inability of service providers to provide LGBTQ2+-inclusive services. Participants emphasized the need for more inclusive health and social services, services targeted at LGBTQ2+ youth, and services lead by and for LGBTQ2+ communities.

PROJECT REFLECTION

Meaningful Youth Engagement

Wisdom2Action is committed to meaningful youth engagement. Meaningful engagement can happen in diverse structures and timelines, and was prioritized throughout this project to ensure the identified needs and priorities reflected the experiences and perspectives of LGBTQ2+ youth.

However, in future, Wisdom2Action would recommend youth engagement projects are enacted over longer time-frames to ensure meaningful engagement with as many young people in as many regions of Canada as possible. Youth engagement projects should be adequately funded in order to provide adequate compensation for youth facilitators and to be able to support youth to have safe and healthy gatherings, including providing mental health support. It is also important to be as transparent and accountable as possible when engaging youth, and this includes being able to give youth the rationale for their engagement, what the information gathered will be used for, and ideally, planned next steps in policy or programs.

Managing Oppression and Creating Safety

Since 2011, W2A has led projects on a wide range of issues. Although not empirically measured, this project has generated a great deal of interest from coast to coast to coast at an unprecedented level. When we first discussed this project with our Youth Advisory Committee, they felt that this would be a priority issues for youth and that the project had merit.

At the same time, we have never as an organization received or witnessed some much negative and hateful feedback online as with this project. The fact that simply raising the issue of how to create more safety for LGBTQ2S+ young people resulted in violent and threatening messages and comments speaks to and reinforces the need for this project and more importantly, action to address GBV.

In future, we recommend the Public Health Agency of Canada include a safety plan to prepare for these sorts of incidents, to ensure partners and PHAC have measures in place to address issues, mitigate risks and maximize safety. We also recommend the allocation of safety-focused funding to ensure professional mental health support alongside a resource list of supports available to partner agencies, developed and provided by PHAC.

PROJECT REFLECTION

Research Ethics

In the future, consideration should be given to planning youth engagement processes that allow adequate time for an ethics submission to the internal PHAC committee or to a university-based committee, if applicable. Preparing a research ethics submission is a valuable process in identifying the specific aspects of consent, privacy, and confidentiality. Furthermore, having research ethics would allow ongoing analysis and potential academic publishing of the engagement process and results, thereby further validating the efforts of youth who contribute their time and expertise.

CONCLUSION

It is clear that, as a country, we need to be doing much more to support LGBTQ2+ youth in Canada. At home, at school, in communities, and when seeking services, LGBTQ2+ youth are constantly forced to consider measures and actions that keep themselves and their peers safe. This constant vigilance comes at a cost, as identified by the youth in this process. LGBTQ2+ youth also know the pathways to wellness for themselves and their communities. It has been a privilege to provide opportunities for LGBTQ2+ youth to share their experiences and identify actions for a better future.

ANNEX A - QUESTIONNAIRE

LGBTQ2+ Youth in Canada & Gender-Based Violence

Wisdom2Action (<http://www.wisdom2action.org/>) is working on behalf of the Public Health Agency of Canada to identify the priorities of young people, LGBTQ2+ youth in particular, aged 12-25, on the subject of gender-based violence.

Alongside this survey, we will be conducting in-person consultations in a number of regions across Canada to provide opportunities for more in-depth conversations and data-collection. If you or an organization in your community are interested in hosting a consultation in your region, please contact our project coordinator, Fae Johnstone, at faejohnstone@gmail.com.

A group of LGBTQ2+ youth will be working with us to review results from the survey, in-person consultations and other data collection initiatives.

Results from the survey, in-person consultations and other data collection initiatives will be rolled into a report that will be delivered to the Public Health Agency of Canada to help inform their work moving forward on Gender-Based Violence and help create a for youth by youth product.

Your responses are voluntary and will be confidential. Responses will not be identified by individual. All responses will be compiled together and analyzed as a group.

All respondents will be entered into a draw to win one of six \$25 Amazon gift cards. To be entered into the draw, please provide your email address at the end of the survey.

The Department for Women & Gender Equality defines Gender-Based Violence (GBV) as "the use and abuse of power and control over another person, and is perpetrated against someone based on their gender identity, gender expression or perceived gender. Violence against women and girls is one form of gender-based violence. It also has a disproportionate impact on LGBTQ2 (lesbian, gay, bisexual, transgender, queer, questioning, intersex and two-spirit) and gender non-conforming people".

More information on GBV can be accessed here: <https://cfc-swc.gc.ca/violence/knowledge-connaissance/about-a-propos-en.html>

ANNEX A - QUESTIONNAIRE

Demographic Questions

To help ensure we are capturing the experiences of diverse young people of different genders, sexualities, ethnicities, races, abilities, geographic locations and incomes, please fill out the following demographic questions. These questions will enable us to identify limitations of our data, engage in targeted outreach to under-represented communities, and ensure that our analysis and final report to the Public Health Agency of Canada, highlight the particular needs, priorities and recommendations of diverse young people.

How old are you?

Short-answer text

What province or territory do you live in?

- New Brunswick
- Manitoba
- Alberta
- Ontario
- Quebec
- Saskatchewan
- Newfoundland & Labrador
- Prince Edward Island
- British Columbia
- Nova Scotia
- North West Territories
- Yukon

ANNEX A - QUESTIONNAIRE

Do you identify as (please check all that apply)?

- White
- South Asian
- Central Asian
- Chinese
- Black
- Filipino
- Latin American
- Middle Eastern
- Southeast Asian
- West Asian
- Korean
- Japanese
- Inuit
- Métis
- First Nations
- Other...

ANNEX A - QUESTIONNAIRE

Do you identify as (please check all that apply):

- Cisgender
- Transgender
- Non-binary
- Two-Spirit
- Genderqueer
- Intersex
- Male
- Female
- Transmasculine
- Transfeminine
- Questioning
- Prefer not to disclose
- Other...

ANNEX A - QUESTIONNAIRE

Do you identify as (please check all that apply):

- Gay / Homosexual
- Straight / Heterosexual
- Bisexual
- Lesbian

- Asexual or Aromantic
- Queer
- Questioning
- Prefer not to disclose
- Other...

Are you located in a:

- Rural community
- Urban community
- Suburban community
- Other...

Do you identify as a person with a disability or disabled person?

- Yes
- No

ANNEX A - QUESTIONNAIRE

Do you identify as a person with mental health issue(s) or living with mental illness(es)?

Yes

No

Some high school education

High School Diploma

Some college education

College Diploma

Some undergraduate education

Undergraduate Degree

Masters Degree

PhD

Other...

How would you describe your household income?

Low income

Medium income

High income

Other...

ANNEX A - QUESTIONNAIRE

How would you say LGBTQ2+ youth in particular are impacted by Gender-Based Violence?

Long-answer text

What issues are most important to you when it comes to gender-based violence and LGBTQ2+ youth?

Long-answer text

How can we better support LGBTQS+ youth who are directly impacted by Gender-Based Violence?

Long-answer text

What kinds of programs or initiatives would you like to see to address the Gender-Based Violence experienced by LGBTQ2+ youth in particular?

Long-answer text

Final Report

What kind of report (infographic, videos, social sharing tool) would be useful to young people on the topic of youth and Gender-Based Violence?

Long-answer text

ANNEX A - QUESTIONNAIRE

Next Steps

Acknowledging that a survey is only one of many mechanisms to solicit input, we are organizing in-person consultations in a number of communities across Canada. We are also intending to reach out to some survey participants for virtual interviews to delve more deeply into the survey findings.

Are you interested in participating in local consultations or virtual interviews to continue the conversation on this topic?

Yes

No

Are you interested in receiving a copy of the final report that will be submitted to the Public Health Agency of Canada?

Yes

No

Are you interested in receiving a copy of the for youth by youth report?

Yes

No

If you would like to be entered into our draw to win one of six \$25 Amazon gift cards, please provide your email address.

Short-answer text

ANNEX B - YOUTH FACILITATION GUIDE

Youth Priorities on Gender-Based Violence

Context: Wisdom2Action (<http://www.wisdom2action.org/>) is working on behalf of the Public Health Agency of Canada to identify the priorities of young people, LGBTQ2+ youth in particular, aged 15-24, on the subject of gender-based violence. The project includes a survey and in-person consultations with young people across Canada.

Results from the survey, in-person consultations and other data collection initiatives will be rolled into a report that will be delivered to the Public Health Agency of Canada (PHAC) to help inform their work moving forward on Gender-Based Violence.

Your Role: As a young person involved in your community with experience as a facilitator, we are hoping you will take on the role of “Youth Facilitator” and organize a consultation in your community with young people on this topic.

Youth Facilitators are expected, with the support of W2A, do the following:

- Participate in pre-planning virtual meetings with the Project Coordinator and other Youth Facilitators from across Canada
- Lead the planning and facilitation of a youth consultation in their community
- Transcribe the notes from their consultations and provide them to the Project Coordinator by **February 28th** (with some wiggle room)
- Assist the Project Coordinator and Youth Facilitator team in analyzing the data collected from the survey and in-person consultations, providing input on deliverables and reviewing the final report to be submitted to PHAC.

Honorarium: Youth Facilitators are offered \$300 for your time and expertise.

Supports: Our project coordinator (Fae Johnstone) will be available to provide ongoing support as needed.

Timeline: The full project is to be completed by March 31st. As such, we are planning to host the consultations during the month of February, 2019.

ANNEX B - YOUTH FACILITATION GUIDE

Pre-Consultation Facilitator Information

What is Gender-Based Violence?

The Department of Women and Gender Equality defines Gender-Based Violence (GBV) as "the use and abuse of power and control over another person, and is perpetrated against someone based on their gender identity, gender expression or perceived gender. Violence against women and girls is one form of gender-based violence. It also has a disproportionate impact on LGBTQ2+ (lesbian, gay, bisexual, transgender, queer, questioning, intersex and two-spirit) and gender non-conforming people".

What does the data say about Gender-Based Violence?

- According to a 2018 survey by Nanos on behalf of Plan International Canada of young women aged 14-24, three in four (75%) report experiencing gender-based discrimination, while two in three (66%) report having a female friend who has been sexually harassed. Only 16% of Canadian girls report feeling completely safe in public spaces.
- According to the Canadian Trans Youth Health Survey, 70% of trans and non-binary youth report experiencing sexual harassment, 1 in 3 (36%) have been physically threatened or injured in the past year, and nearly two-thirds report self-harm within the past year.
- Indigenous women – First Nations, Métis and Inuit women – are more likely to be targets of violence than non-Indigenous women. For example, the self-reported rate of sexual assault was three times higher for Indigenous women (11.5%) compared to the rate for non-Indigenous women (3.5%).

For More Reading on Gender-Based Violence:

- Status of Women Canada: Gender-Based Violence: <https://swc-cfc.gc.ca/violence/strategy-strategie/gbv-vfs-en.html>
- Being Safe, Being Me: Canadian Trans Youth Health Survey: <http://www.saravyc.ubc.ca/2018/05/06/trans-youth-health-survey/>
- Girls in Canada: Gender Equality Today (Plan International Canada): https://plancanada.ca/file/planv4_files/Plan-International-Canada_Girls-in-Canada-Gender-Equality-Today_2018-Report.pdf

ANNEX B - YOUTH FACILITATION GUIDE

Planning Your Youth Consultation

Planning Needs:

- **Location:** We recommend reaching out to local youth organizations in your community to solicit free venue space to host the consultation. We suggest a space that is able to accommodate a minimum of 7 participants. If you are unable to find a free venue, we do have funds to help rent a space – as long as it is low cost.
- **Outreach:** We recommend using a diversity of outreach mechanisms – like posters, social media posts and a Facebook group – to help reach a diverse audience of young people. We also recommend reaching out to local youth organizations, and LGBTQ2+ youth organizations in particular, to get their support in outreach and promotion.
- **Materials:**
 - o Chart paper
 - o Markers
 - o Sticky notes
 - o Pipe cleaners
 - o Sticker dots
- **Food:** Who doesn't love pizza? If you are hosting your consultation in proximity to a typical meal time, we recommend ordering pizza or another cost-effective food. If you are hosting it outside of a typical meal time, we suggest picking up some snacks – a veggie tray, cookies, muffins or something similar.
- **Time:** We recommend planning the consultation to last no less than 2 hours
- **Participants:** We do not have a set goal for the intended number of participants in each consultation. That being said, we recommend that each consultation strive to have a minimum of 7 participants. Given that we only have the funding for a single youth facilitator and limited budget capacity for logistics, we recommend a maximum of 25 participants.
- **Note-taking:** Please do your best to ensure there are in-depth notes taken throughout the consultation. This can be facilitated by having a laptop and taking notes as the conversation goes, using chart paper (and getting participants to do so as well!) or other mechanisms. What matters to us is that we have in-depth notes we can use for the report.
- **Confidentiality:** Given that some people may share personal information or stories, please be mindful of the right to confidentiality for all individuals present. In terms of our own data collection, no identifying information will be used.
- **Forms:** Please encourage all participants to complete the demographic survey and mailing list sign-up sheet attached to this guide.
- **Supporting Participant Wellness:** Attached to this guide is a short list of mental health and wellness initiatives. Please ensure it is made available to participants following the consultation. **As local youth with familiarity with your area's services, we encourage you to add local resources to the list as well.**

ANNEX B - YOUTH FACILITATION GUIDE

Facilitation Guide

Introductions (est. 10 minutes):

- Begin by introducing yourself, your name, pronouns and why this work matters to you.
- Provide a brief introduction of the project. The relevant details are as follows:
 - o Wisdom2Action is working on behalf of the Public Health Agency of Canada to identify the priorities of young people, LGBTQ2+ youth in particular, aged 15-24, on the subject of gender-based violence.
 - o The project includes a survey and in-person consultations with young people across Canada. Results from the survey, in-person consultations and other data collection initiatives will be rolled into a report that will be delivered to the Public Health Agency of Canada (PHAC) to help inform their work moving forward on Gender-Based Violence.
 - o As a signatory to the United Nations Convention on the Rights of the Child (UNCRC), Canada has a responsibility to implement obligations under Article 12, which states that children have the right to be heard and considered in the decisions affecting them, in a manner consistent with their age and maturity. In support of this commitment, and a renewed federal focus on youth, PHAC is working to build internal capacity for youth engagement, in order to better engage youth on public health issues, policies and programs affecting them. The second article of the UNCRC ensures the right not to be discriminated against – in any way. This includes the right to not be discriminated against for one’s sexual orientation or gender preference.
- The purpose of this consultation is to hear from you, as young people, about your perspectives on gender-based violence, and your priorities when it comes to addressing gender-based violence. Introduction go-around: encourage everyone to introduce themselves with their name, their pronoun (if they would like) and a little bit about themselves.

Creating a Safer Space (est. 15 minutes):

- First and foremost, we want to ensure that everyone here feels supported and safe to share their own experiences and perspectives.
- In order to do that, we’d like to do a mini-activity called “Rights Relations”.
 - o In the middle of the table, there’s a large piece of chart paper. I would invite each of you to spend the next thirty seconds considering what you need to feel meaningfully engaged and safe during the time we share together today. Provide a number of examples, such as “respecting my pronouns”, “maintaining anonymity” or “not judging me if I make unexpected noises or gestures”.
 - o Give everyone 5 minutes to write down the things they need to feel engaged and safe.
 - o Ask everyone to spend 2 minutes reading over what everyone else wrote.
 - o Ask the room if they have any questions about what was written, or if they would like to elaborate on what they wrote.

ANNEX B - YOUTH FACILITATION GUIDE

- Once all questions have been answered, ask the room to collectively agree to do their best to abide by the needs written on the chart paper throughout our time together.
- **Additional Guidelines:**
 - Right to pass: Throughout our time together, all participants have the right to pass. You are never obliged to answer a question or share any personal experiences.
 - You know your body best: You also are encouraged to do whatever you need to help participate meaningfully and maintain your wellness. You can leave at any point, including for breaks as needed.
 - Content warnings: Given that gender-based violence is a difficult issue that is very personal to many of us, and given our desire to ensure everyone feels safe and supported, please provide a content warning before going into depth on a potentially triggering topic. A content warning consists of saying “Content warning: topic”, and then giving folks a few seconds to prepare themselves, or to step out of the space if they chose to.
 - Confidentiality: Given that some people may share personal information or stories, please be mindful of the right to confidentiality for all individuals present. In terms of our own data collection, no identifying information will be used.

Question #1: What does gender-based violence mean to you? How would you define it? (Open Discussion, Est. 10 minutes)

- Use chart paper to collectively take notes on what GBV means to all participants.
- Following the discussion, read over the Status of Women Canada definition, which is as follows: Gender-Based Violence (GBV) is "the use and abuse of power and control over another person, and is perpetrated against someone based on their gender identity, gender expression or perceived gender. Violence against women and girls is one form of gender-based violence. It also has a disproportionate impact on LGBTQ2+ (lesbian, gay, bisexual, transgender, queer, questioning, intersex and two-spirit) and gender non-conforming people".

Question #2: What issues are most important to you when it comes to Gender-Based Violence and LGBTQ2+ youth? (Open Discussion, with a list taken on chart paper)

Question #3: What aspects or issues related to Gender-Based Violence are receiving insufficient discussion? What is missing in these discussions? (Open Discussion)

Question #4: We know that Gender-Based Violence is connected to other systemic issues like racism, classism, homophobia, transphobia and more. How can we ensure our approach to ending Gender-Based Violence is truly inclusive? (Open Discussion)

Question #5: What kinds of programs or initiatives would you like to see to address Gender-Based Violence against LGBTQ2+ youth? (Open Discussion, with a list taken on chart paper)

ANNEX B - YOUTH FACILITATION GUIDE

- **Dotmocracy:** After the discussion, provide every participant with 5 sticker dots. Each dot represents a vote. Multiple dots can be used to vote on the same program or initiative. This activity will help us as we seek to prioritize what programs and initiatives are the highest priorities of young people.

Question #6: What GBV programs or initiatives have you seen that have worked? What's been successful? What has helped make those initiatives successful?

Question #7: As part of this project, we will be creating a resource, but before doing so, we wanted to consult with young people. What kind of resource (an infographic, video, social media shareables, etc.) would make a meaningful contribution to this issue? What topic should such a resource focus on?

Wrap Up & Check Out

- Thank all participants for taking the time to share their knowledge, experiences and expertise.
- Provide participants with a mailing sign-up sheet. Let them know that if they would like to add their email to the list, we will circulate a copy of the final report for them to check out.
- Do a check-out with all participants. One check-out option is Head Heart Feet:
 - o Ask each participant to spend 30 seconds reflecting on where their head is at (what they are thinking), where their heart is at (what they are feeling) and where their feet are going (what their next steps are).
 - o Go around in the circle and have each participant (if they desire) reflect on their heads, hearts and feet.
- Thank everyone again.