



Position Paper #101

Transgender Inclusivity

A transgender person (“trans” person¹) is someone whose current gender identity is different than the gender they were assigned at birth. Trans people may identify as men or women or as something else, including as nonbinary or agender. (See sidebar →)

Some trans people specifically identify as trans (for example, as trans men, trans women, or nonbinary trans), while others do not add that word to their personal gender identities.

Some trans people can become pregnant, and all trans people deserve access to sexual and reproductive health services. As such, ARCC fully supports trans people’s right to access abortion and other healthcare, including the right to have that healthcare delivered in inclusive and affirming ways, where trans people’s identities are respected.² ARCC also advocates for the affirmation and inclusion of all people when discussing or advocating for reproductive justice.³

Nonbinary is an identity on its own, and also an umbrella term for gender identities beyond the gender binary, including genderqueer, pangender, multigender, etc.

Agender is an identity on its own, and also an umbrella term for people who describe themselves as having no gender, including gender neutral, neutrois, etc.

¹ Not all trans persons identify with the term “transgender” or other terms listed here, but the word “trans” is used in this paper as a convenient umbrella term. For definitions, see: <https://www.hrc.org/resources/glossary-of-terms> (May 31, 2023), or: <https://glaad.org/transgender/transfaq/> (2023).

² Lowik, A. (2018). *Trans-Inclusive Abortion Services: A Manual for Operationalizing Trans-Inclusive Policies and Practices in an Abortion Setting, Canada*. FQPN and National Abortion Federation, Canada. <https://www.optionsforsexualhealth.org/wp-content/uploads/2019/07/FQPN18-Manual-EN-BC-web.pdf>

³ Abortion Rights Coalition of Canada. *Why ARCC Supports Reproductive Justice*. September 2020. <https://www.arcc-cdac.ca/wp-content/uploads/2020/06/100-reproductive-justice.pdf>

Discrimination Against Trans People

Trans people often endure shocking violence and profound discrimination because of their identities, and due to pervasive cisnormativity – the presumption that people will and should be cisgender. A cisgender person is someone whose current gender identity is consistent, aligned with, or the same as the gender they were assigned at birth.⁴

The following facts come from research conducted or compiled by the Trans PULSE Canada Report.⁵ Of 2,873 trans people surveyed in 2019:

- 16% had suffered physical violence in the past five years.
- 26% had experienced sexual assault in the past five years.
- 37% had experienced physical intimidation or threats in the past five years.
- 42% had been subjected to sexual harassment in the past five years.
- 68% had been subjected to verbal harassment in the past five years.
- 6% had attempted suicide in the past year.
- 31% had considered suicide in the past year.
- 64% had avoided several public places in the past five years due to fears of harassment or being outed.
- 12% had avoided going to the emergency room in the past year, despite needing care.
- 45% reported having one or more unmet healthcare needs in the past year.

Trans people face discrimination when seeking housing, employment, and health or social services. They may have difficulty changing their identity documents to reflect their gender identities. They risk losing access to their children when they transition,⁶ and face barriers when trying to access assisted reproduction, fertility preservation, and other sexual and reproductive healthcare services. They frequently avoid public spaces or situations where they fear and experience harassment, including public washrooms, gyms, schools, and restaurants. About one-third of trans people surveyed in Ontario were forced to move out of their communities for their safety or to access services.

⁴ A cisgender woman, then, is a woman who was assigned the sex of female and the gender of girl/woman based on that sex assignment and who continues to identify as such. A cisgender man is a man who was assigned the sex of male, and the gender of boy/man based on that sex assignment and who continues to identify as such.

⁵ The Trans PULSE Canada Team. *Health and health care access for trans and non-binary people in Canada*. March 10, 2020. <https://transpulsecanada.ca/results/report-1/>

⁶ Five major surveys in Ontario, the United States, and Europe have reported that between 27% and 44% of trans people have children. <https://familieslgbt.org/wp-content/uploads/2022/03/Scientific-Research-to-Deconstruct-Myths-about-Trans-Parent-Families.pdf>

An earlier Trans PULSE Project in 2015⁷ researched the social determinants of health for 500 trans people in Ontario. About 40% of trans people with a family doctor had experienced discriminatory behaviour from that doctor at least once, such as being refused care, being ridiculed, and being exposed to demeaning language. When accessing emergency services at a hospital, 10% of trans people surveyed had either been refused care or had their care cut short because they were trans.

Because of the fear of discrimination, many trans people may present as cisgender via the gender they were assigned at birth, allowing themselves to be misgendered. Or they may choose to pass or blend as cisgender according to their current gender identity, concealing that they are trans.⁸

In the 2015 U.S. Transgender Survey,⁹ respondents encountered high levels of mistreatment when seeking health care in the year prior to taking the survey. One-third (33%) had at least one negative experience with a healthcare provider because of their gender identity, such as being verbally harassed or refused treatment. Nearly one-quarter (23%) of respondents did not seek the health care they needed for fear of being mistreated, and 33% did not go to a health care provider when needed because they could not afford it. Another survey done by the Washington Post and KFF in November 2022,¹⁰ 17 percent of trans adults said their identity has led them to be refused service from a health-care provider.

According to 2021 Census data, there are 100,815 binary-identified trans people and 41,355 nonbinary-identified trans people aged 15 or older in Canada, accounting for 0.33% of the population in this age group.¹¹ However, due to the reluctance to disclose that they are trans, and issues with the methodology for measuring gender identity and sex assignment, the number of trans individuals in Canada is probably higher than the current best estimates.

⁷ Trans Pulse. 2015. *Transgender People in Ontario, Canada: Statistics from the Trans PULSE Project to Inform Human Rights Policy*. <https://transpulseproject.ca/wp-content/uploads/2015/06/Trans-PULSE-Statistics-Relevant-for-Human-Rights-Policy-June-2015.pdf>

⁸ Lowik, A. 2022. "I gender normed as much as I could:" Exploring nonbinary people's identity disclosure and concealment strategies in reproductive health care spaces. *Women's Reproductive Health*, online ahead of print. <https://doi.org/10.1080/23293691.2022.2150106>

⁹ James SE, Herman JL, Rankin S, Keisling M, Mottet L, & Anafi M. 2016. *The Report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality. <https://www.ustranssurvey.org/reports>

¹⁰ KFF/The Washington Post Trans Survey. Nov 10-Dec 1 2022. <https://www.washingtonpost.com/tablet/2023/03/23/nov-10-dec-1-2022-washington-post-kff-trans-survey/>

¹¹ Stats Canada. 2022. "Canada is the first country to provide census data on transgender and non-binary people." <https://www150.statcan.gc.ca/n1/daily-quotidien/220427/dq220427b-eng.htm>

Bodily Autonomy and Stigma – the Commonalities

The abortion rights movement has always placed a very high value on the ability of every cis woman to decide for herself whether or not to have a baby. This same right to bodily autonomy must also extend to trans people, who deserve explicit recognition of their identities and autonomy over their bodies including their reproductive capacities.

American journalist and trans woman Parker Molloy says: “Abortion is an issue of bodily autonomy. Being trans is an issue of bodily autonomy. Abortion is a trans issue.”¹² This means reproductive justice and abortion rights are for transgender people, too. Dr. Cheryl Chastine, an abortion provider from Illinois, says: “The movement can’t deny trans people a seat at the table in the abortion conversation; they were already there. It’s up to everyone else to acknowledge them.” In other words, activists, healthcare providers, law and policymakers alike should never assume that only cis women need abortion care.¹³

Having an abortion and being trans are both stigmatized experiences, even though one is an action, and one is an identity. Steph Herold, now a researcher at Advancing New Standards in Reproductive Health, pointed out the many commonalities to these stigmatized experiences that we can draw on to strengthen our reproductive justice work and advocacy, including the following: (*Pers. comm, March 16, 2015*)

- Policies that inhibit access to medical care, whether it's access to hormones, surgery, or abortion.
- Inaccurate media representations that rely on stereotypes, misinformation, and myths about trans folks or about folks who have abortions.
- Institutions that don't know how to interact with you, whether it's a hospital that won't provide trans people with affirming care or provide abortions, or insurance that won't cover the care you need.
- In communities, where people may hear about the ‘evil’ of LGBTQ folks or the ‘evil’ of abortion from their religious leaders or from family/friends.
- In interpersonal relationships, where both trans folks and people who have had abortions may fear being shunned by family and friends, being judged, and may feel totally isolated.

¹² Chastine, Cheryl. *Cisgender Women Aren't the Only People Who Seek Abortions, and Activists' Language Should Reflect That*. March 18, 2015. Rewire News Group. <https://rewirenewsgroup.com/2015/03/18/cisgender-women-arent-people-seek-abortions-activists-language-reflect/>

¹³ Ibid. Chastine 2015.

ARCC's Approach to Language

ARCC aims to be gender inclusive in our language around reproductive justice, a critical feminist framework founded by the SisterSong Women of Color Reproductive Justice Collective.¹⁴ The three tenets of reproductive justice are that all people should have the right to parent, the right not to parent, and the right to parent in safe and healthy environments.

The basis of feminism has been to abolish the notion that “biology is destiny,” and enable cis women to enjoy equal opportunity and respect as autonomous human beings, instead of being held primarily to a childbearing and/or sexual role in which they are generally subordinated to cis men.

ARCC's vision of feminism includes the advancement of transgender rights because freeing ourselves from gender roles, norms, and stereotypes means ensuring that every individual has the right to define themselves according to the gender they feel themselves to be, whether it's the one they were assigned at birth, another gender, or no gender at all. The adage of “biology is *not* destiny” can and should be extended to trans people, where every individual's right to live their own life should be respected and protected – regardless of how they identify.

ARCC uses a mix of both gender-neutral, gender-additive, and gender-specific terms in our advocacy around reproductive justice.

Gender-Neutral Language - When referring in general to people who have childbearing capacity or who need abortions, gender-neutral terms such as “pregnant person”, “people with a uterus” or “people who access abortion” are used.

Gender-Additive Language - Where appropriate, we also use gender-additive language, where we explicitly name all people who can become pregnant or all people who need abortions – for example, when we say that abortion is a healthcare need for cis women, trans men, nonbinary people, and others. Gender-additive language is a way of recognizing and explicitly naming the diversity of people who experience a particular issue or who have a particular need (like abortion), without reverting to gender-neutral language.

Gender-additive language is helpful because it can effectively render visible the basis of oppression that motivates the reproductive justice movement – gender. Historically and still today in many parts of the world, cis women have been oppressed based on their gender. Their traditional gender roles continue to be enforced by patriarchy and organized religion, and this important fact can become lost when gender-neutral language is used in reproductive justice.

¹⁴ SisterSong Women of Color Reproductive Justice Collective. *Visioning New Futures for Reproductive Justice Declaration 2023*. <https://www.sistersong.net/visioningnewfuturesforrj>

The recognition of transgender rights in recent decades adds trans people to the list of those oppressed based on gender. Both cis women and trans people have difficulty achieving justice because society expects them to adopt and maintain certain roles and norms and to adhere to certain stereotypes, due to intersections of patriarchy and cisnormativity. Gender-additive language, alongside language like “people who are marginalized based on their genders” is used by ARCC to draw attention to gender and systems of oppression that are used to marginalize, minoritize, or stigmatize people based on gender.

Gender-Specific Language – Gender-specific language names cis women, or trans men, or nonbinary people, or others, as appropriate. For example, gender-specific is the language we use when referencing historical events or documents that addressed the needs of only cis women and not others. It would be inappropriate to signal that a historical event or document was inclusive to all pregnant people by using neutral language, when it was focused exclusively on cisgender women. In these instances, gender-specific language is the most accurate.

We also use gender-specific language when talking about certain subsets of the population of people who can become pregnant, since cis women, trans men, nonbinary people, and others may experience specific and unique barriers to abortion care. In these instances, gender-specific language allows us to consider and highlight how different pregnant people experience reproductive injustices, or experience reproductive health care.

We also recognize that individual pregnant people may be women, men, nonbinary, etc. and will want to be referred to as such. During interpersonal communication, individuals should be referred to via their names, pronouns, and gender identities, and using language that they find affirming. As such, gender-specific language is appropriate on personal and interpersonal levels, including during one-on-one communications or when talking referring to someone whose gender identity is known.

Canadian groups and resources on transgender rights and health

- **Trans Pulse Canada project**: a national community-based survey of the health and well-being of trans and non-binary people in Canada, with special reports on two-spirit Indigenous people, transgender sex workers, racialized trans people, and others.
- **Canadian Professional Association for Transgender Health (CPATH)**: the largest national multidisciplinary, professional organization in the world, working to support the health, wellbeing, and dignity of trans and gender diverse people.
- **Egale Canada Human Rights Trust**: Canada’s only national charity promoting lesbian, gay, bisexual, and trans human rights.
- **Canadian Medical Protective Association**: Treating transgender and non-binary individuals (June 2023).
- **Transgender Map** by Andrea James: Canada Transgender Resources.
- **Justice Trans**: Access to justice and legal information for two spirit, trans, non-binary, and gender non-conforming communities across Canada.