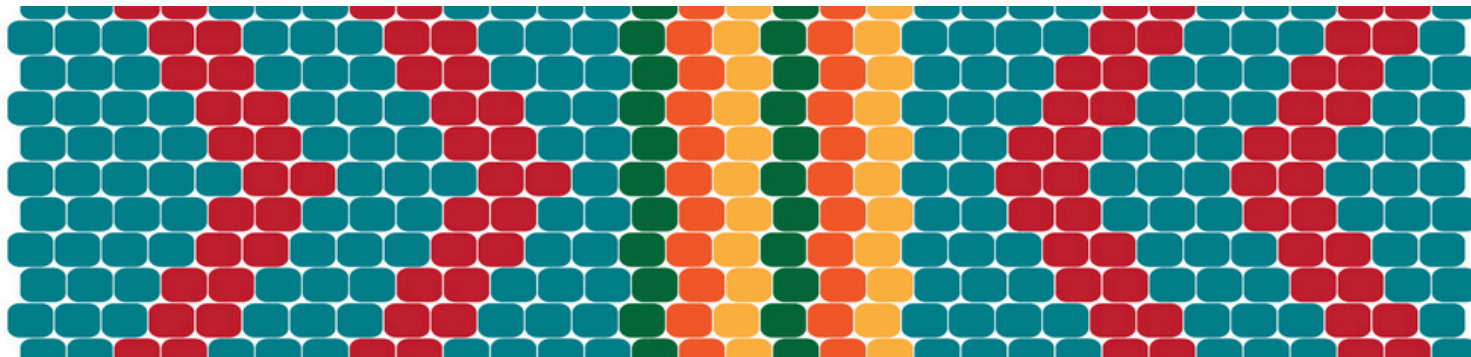




Celebrating Our Magic



Resources for Indigenous Two Spirit, Indigiqueer, trans, and gender-diverse youth, their relatives and families, and their healthcare providers



This Toolkit was authored by **Alessandra Angelino, MD** with support from several partners.

Artwork is by **Jordan Remington (Quileute)**.

Additional collaborators are the Seattle Children's Hospital Center for Diversity and Health Equity, Shaquita Bell, MD, Hannah Wenger, MD, Morgan Thomas, Itai Jeffries, PhD, and Jessica Leston, MPH.

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NOTE:

We are a collective of providers, public health researchers, consultants, and 2SLGBTQ+ community members. Many of the views expressed here are not reflective of state, national, and local entities and the realities within, especially now. We deeply believe that everyone deserves access to comprehensive healthcare, and above all, dignity. We realize that individuals and families may face significant challenges accessing services outlined in this toolkit at this time.

You are not alone.

For more information, please contact 2s-supportboat@proton.me
Reach lead author Alessandra Angelino, MD at gendermagictoolkit@gmail.com

We welcome questions, comments, and suggestions.

TABLE OF CONTENTS



ARTIST'S STATEMENT	5
ACKNOWLEDGEMENTS	6
USES AND INTENDED AUDIENCES	7
SECTION 1: BACKGROUND & OVERVIEW	9
HONORING INDIGIQUEER ANCESTORS	10
TRADITIONAL PERSPECTIVES ON GENDER	11
THE BASICS: OVERVIEW & DEFINITIONS	14
THE GENDER FROG	17
PRONOUNS & NAMES	18
HEALTH INEQUITY	21
PRIDE & CONNECTION	22
SECTION 2: YOUTH	23
YOUTH PERSPECTIVES & STORIES	25
DO MY ANCESTORS CELEBRATE ME?	28
YOU ARE NOT ALONE: FAQs	29
YOU ARE YOUR BEST ADVOCATE	35
INTERACTING WITH HEALTHCARE PROVIDERS & PRIMARY CARE	35
YOUR SEXUAL HEALTH	45
YOU ARE IN THIS WORLD FOR A REASON	46
TRANSITION & EMBODIMENT FAST FACTS	46
MINDFULNESS & MEDITATION	47
YOU ARE A CONTINUATION OF YOUR ANCESTORS: YOUR COMMUNITY	50

SECTION 3: FAMILIES & RELATIVES	53
CELEBRATING YOUR CHILD	55
FAQS	56
FOSTERING RESILIENCE	58
PARENT PERSPECTIVES	61
SUPPORT GROUPS FOR FAMILIES	63
FINDING MEDICAL CARE	64
WHY IS MENTAL HEALTHCARE SO IMPORTANT?	65
SEEKING A MENTAL HEALTH PROVIDER	66
SECTION 4: PROVIDERS	67
PATIENT ENCOUNTERS	70
CARE PROVISION RESOURCES	73
DYSPHORIA & GENDER INCONGRUENCE	76
TRAINING, CURRICULA, & SUPPORTS FOR PROVIDERS	78
SECTION 5: GENERAL RESOURCES	79
CRISIS SERVICES	80
BOOKS & MULTIMEDIA	81
ONLINE SUPPORTS & LEGAL RESOURCES	82
EXTRA-MEDICAL TRANSITION & EMBODIMENT RESOURCES	83
REFERENCES	84
APPENDIX	86
THE GENDER FROG WORKBOOK	87



Artist's Statement

Quileute stories are full of transformations, even our creation story. In that story Kwati, the Changer, is making their way up the coast getting the world ready for a changing of times. Long ago every being had an animal form and a human form, but that power was about to go away and beings would be stuck in whatever form they were at the time. When Kwati came to the beach at the mouth of the Quileute River they found the area to be so beautiful, but no beings were living there in their human form.

Kwati felt the land was too pretty for there not to be humans living there, so when two wolves ran out of the woods Kwati changed them into their human forms. Before the changing of times more animals would change into their human forms and join the wolves Kwati transformed into humans. This was the start of the Quileute Tribe.

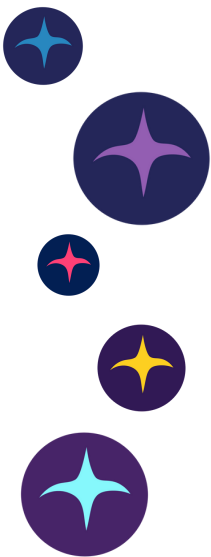
As a drag artist, I often see my art form as a modern continuation of these transformation stories. Transforming from Jordan Remington to Hailey Tayathy has allowed me to tell my stories and the broader story of the queer Indigenous experience in ways that I couldn't before. I've always loved that my Tribe's explanation for our existence was that our home was just so beautiful and now part of my transformation through drag has been finding beauty and confidence within myself.

Jordan Remington, more famously known as Hailey Tayathy, is a member of the Quileute Tribe living in Seattle. They are primarily a drag artist and help organize Indigenous drag shows for events around the Seattle area and the annual Indigiqueer Festival. They also work in digital design and fiber arts and have worked on several temporary public art projects around the area. They strive to help foster and support the queer Indigenous arts community and reclaim Seattle as an Indigiqueer city.

Acknowledgements

We would like to thank the Center for Diversity and Health Equity and Seattle Children's Gender Clinic for their support at the time of the creation of this Toolkit. We would also like to thank the providers, staff, and Tribal leadership at local Tribal clinics who advised and supported this project. This project could not have come to life without the support and dedication of Alessandra Angelino, MD, and the many contributors who helped to create this resource.

For their stories and resilience, we would like to thank the individuals who openly and authentically shared their journeys with us.



@haileytayathy

For their artwork and creativity, we would like to thank Jordan Remington (also known by their drag name, Hailey Tayathy) (Quileute).



Many thanks to the incredible **Evan Benally Atwood** (Navajo) for their photography woven throughout this toolkit.

Toolkit Uses and Intended Audiences

Youth are a symbol of the future and represent an opportunity for continuity and growth throughout our lifetimes. There are many vital points in the life cycle where youth can learn from their Elders, families, and communities. These points serve as opportunities for education and community strengthening. In a well-balanced community, the youth also reciprocally teach their Elders and are honored for their wisdom and perspectives.



“It is our nature to be whole and to be together. We are born into a circle of family, community, living creatures and the land. If we encounter racism, homophobia, sexism or other behaviors that oppress us, the balance may be disturbed and we may lose our place in the circle—but even if we lose our place we can still find guidance in our traditions, histories, memories, and collective experience of this world”

Dr. Alexandria Wilson, Two Spirit professor from Opaskwayak Cree [1]



With this toolkit, we intend to:

- Improve resources and access to healthcare for Indigenous Two Spirit, Indigiqueer, transgender, and gender-diverse youth facing barriers to accessing healthcare
- Increase healthcare provider awareness of issues faced by Indigenous Two Spirit, Indigiqueer, transgender, and gender-diverse youth in Indigenous communities
- Provide youth, families, and clinicians tools that will allow them to serve as advocates for their communities, so that they may be strong and resilient
- Reduce disparities in access to healthcare, create gender affirming clinic environments, and support positive mental health outcomes for Indigenous Two Spirit, Indigiqueer, transgender, and gender-diverse youth
- Increase tribal clinical capacity by creating long-term pathways to care for Two Spirit, Indigiqueer, transgender, and gender-diverse individuals within tribal health settings

We also hope that this toolkit honors generations and traditions that have come before us, and supports the needs and strengths of future generations.

This Toolkit was created for Indigenous youth who identify as Two Spirit, Indigiqueer, transgender, or gender-diverse, their relatives, and the healthcare providers who care for them. The Toolkit is broken up into sections for ease of access (i.e. Youth, Families, and Providers), though we aimed to make all information transparent and available for all readers of the Toolkit. All resources included in this Toolkit are meant to be affirming and inclusive for Two Spirit, Indigiqueer, transgender, or gender-diverse readers and accomplices.

The content and design of this Toolkit is based on needs identified by youth and their families in the Pacific Northwest and nationally, as well as providers working in health centers across the US. This Toolkit was developed as a result of a comprehensive literature review, community stakeholder and key informant conversations, subject matter expert consultants, advisory committee and panel reviews at **Seattle Children’s Gender Clinic**, a national survey of Indigenous Two Spirit and LGBTQ+ people, Tribal clinic site visits, and regular feedback from clinicians participating in the Trans & Gender Affirming Care Indian Country ECHO.

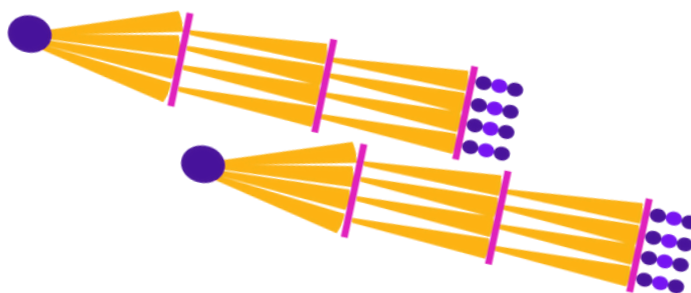
Lastly, we designed this toolkit so that it would be relatable to youth, families, Elders, and healthcare providers from different communities. We do however recognize that language use, healthcare, and relationships must be personalized for each individual and their unique journey. There is no universal approach to diversity in gender, sexual orientation, etc., especially within Indigenous communities and Nations.

A few notes on word choice throughout:

- We refer to Indigenous people throughout the Toolkit using the term Indigenous. This term is used to include all tribal nations, peoples, and communities throughout North America, although we recognize that we cannot appreciate the unique characteristics of each community and nation by doing this.
- Indigenous people from across North America live in and access care in the United States (US). This Toolkit features suggestions most specific to the context of the healthcare and political systems in the US, though some information may be applicable to other systems.
- It is also important to note that Indigenous people in the US may interact with differing and/or multiple healthcare systems with completely different structures (i.e. Indian Health Services, Tribal clinics, Urban Indian health centers, private clinics/hospitals, emergency care, University health systems, Veterans Affairs, etc.) This may result from variations in geographic location, tribal enrollment, veteran status, federal recognition, etc.
- The phrase “Indigenous medicine” is also used throughout this Toolkit to indicate the rich cultural practices and traditions such as language and ceremony that are preserved, adapted, and passed from generation to generation. Indigenous medicine practices, usually land-based, are integral to Indigenous cultures, languages, and worldviews.
- 2SLGBTQ+ is an abbreviation used for the phrase Two Spirit, lesbian, gay, bisexual, transgender, and queer/questioning. Two Spirit, which will be defined in more detail later, is a term that encompasses sexual, cultural, gender, and spiritual identities. It was created in the 1990s by Elder Myra Lamee to serve as a way to unify Indigenous people who identified in this particular way, and definitions have changed over time.[2] Today, many young Indigenous people are also using terms like Indigiqueer and pre-binary.

Please use this Toolkit with respect and in the spirit of improving health access for Two Spirit, Indigiqueer, transgender, and gender-diverse youth. It is the role of present and rising generations to carry this work forward and share it with the greater community.

NOTE: *all references for resources in this Toolkit can be found at the end of this Toolkit.*



Section 1

Background & Overview



Honoring Indigiqueer Ancestors



We'wha, Zuni
1849-1896

We'Wha was a healer, craftswoman, caretaker who traveled to D.C. in 1886 as a Zuni representative.



Lozen
Apache
1840-1889

Lozen was a renowned warrior and medicine woman who identified as male.



Woman Warchief
Algonquin, Crow
1850

Woman Warchief was a Two Spirit hero drawn to "male" tribal roles. Woman warchief was also a leader in markmanship and hunting competitions and had four wives.

Ozaawindib,
Ojibwe, Cree
Late 18th Century

Ozaawindib, also known as "Yellow Head", was an honored Two Spirit warrior.



Osh-Tisch, Crow
1870s

Osh-Tisch was assigned male at birth but lived as female during peace time and as a third gender in war. They fought in war dressed as a male

Shimkhin
Atfalati Kalapuya (Tualatin)
1821-1904

Shimkhin was a greatly respected Atfalati Kalapuya healer living on the Grand Ronde Reservation.*
*(*Anthony Hudson (A.K.A. Carla Rossi) and Felix Furby, Grand Ronde tribal members.)*



Art by Steph Littlebird

Rabbit Tail, Shoshone
1890s

Rabbit Tail is typically shown wearing hair half up and other half down, representing male and female.



Traditional Perspectives on Gender

For centuries, prior to colonization and the impacts of settler colonialism, Indigenous communities have supported and celebrated expansive definitions of gender and sexual orientation. Sexual orientation, gender identity, and gender roles were often fluid—there was a general acceptance for all gender expressions and lack of need for restrictive and/or binary definitions. This is demonstrated through oral history and by the expanse of terminology that exists describing multiple genders and sexual identities in Indigenous communities.[3,4] Commonly used terms “winkte” or “nadleeh” described individuals who were not bound by conventional Western conceptualizations of man/woman or masculine/feminine. These terms often defined societal roles rather than sexual orientations or gender identities, as an individual’s identity and way of being was more defined by their relationship to the community/village than individualized, binary identities. With the progression of colonization, these terms often began to take on derogatory and demeaning connotations. As a result, the term Two Spirit was created in 1990 by Elder Myra Laramie and a group of Indigenous activists at an annual Indigenous LGBTQ+ conference.[2] Two Spirit terminology provides unifying, positive, and encouraging language that emphasizes reconnecting to Tribal traditions. It also demonstrates transcendence beyond a colonized view of binary gender. Today, many young Indigenous people are also using terms like Indigiqueer and pre-binary for similar reasons.

While variety in terminology remains, the unifying term ‘**Two Spirit**’ describes an Indigenous person who expresses their gender identity, spiritual identity, or social role in a traditional, non-Western way. Two Spirit identity was not limited by whether the person was assigned male or female at birth. For many, the term also denotes a traditional Indigenous understanding of a non-female, non-male gender. Two Spirit individuals are not bound by gender roles, binary gender expression, or sexual orientation, and live according to a fluid and non-linear identity. Many Two Spirit individuals feel that the term **embodies all aspects of identity including sexuality, culture, gender, and spirituality**. The term also highlights how each part of identity is interrelated.[5] Beyond the term ‘Two Spirit’, there are many more identities and concepts that language (and literal translations) cannot explain. [3,4]

In a similar manner, the term ‘Indigiqueer’ refers to a person who is both Indigenous and ‘queer,’ meaning that in some way they reject binary colonial understandings of sexuality, gender, spirituality, or identity more broadly. Further, individuals who identify as Indigiqueer may not identify as Two Spirit.

Traditional societal roles

Two Spirit individuals were, and in many cases still are, honored in Indigenous society. They were viewed as the most skilled decision makers because of the ability to see arguments from multiple perspectives and recognize that all aspects of identity, including sexuality, culture, gender, and spirituality, are intersectional.[5] As a result, Two Spirit individuals have served as mediators, medicine people, warriors, peace makers, and teachers.

Settler Colonialism

The process of settler colonialism systematically compromised this acceptance of gender diversity within Indigenous communities, despite historical traditions celebrating diversity in gender and sexuality. Two Spirit people were targeted by European colonizers with physical violence, verbal violence, and genocide. As Gregory D. Smithers (2022) writes in his book *Reclaiming Two Spirits*, this was not accidental:



“Europeans recognized that Two-Spirit people played important roles as trusted elders in their respective communities, served as medicine people, educators and storytellers, and took on myriad other roles. In other words, Two-Spirit people were, and are today, knowledge keepers. So, when Europeans targeted Two-Spirit people with violence, they were actively working to destroy a vital link in the cultural, social and linguistic knowledge of...Native American communities.”[6]

The period known as the boarding school era in the US (1880-1930) contributed to discrimination and stigma. Large numbers of Native children were taken from their homes on reservations and sent to boarding schools where they were restricted from their own cultural practices and treated with violence and discrimination.[7] In a gender-binary environment, and surrounded by brutality, torture, and discrimination, it became harder for transgender, gender-diverse, and Two Spirit individuals to express themselves openly ([see more here](#)). Boarding schools compounded the already problematic historical and intergenerational trauma present among Indigenous communities resulting from settler colonialism.

Historical trauma

Historical trauma is a term used to describe cumulative emotional and psychological wounds that span time and generations. These wounds result from large scale group trauma, perpetrated on a group of people who share a specific group identity—Indigenous individuals in this case.[5] Traumatic wounds can occur in the form of loss of culture, land, language, ways of life, and family. While each individual reacts differently to historical trauma, Indigenous individuals and communities may respond with shame, anxiety, low self-esteem, anger, depression, suicidality, and rejection of culture.

Trauma becomes perpetuated when it is repeated over generations. Historical trauma impacts people directly and also indirectly across generations. For example, colonial practices of homophobia led to rejection of transgender, gender-diverse, and Two Spirit identities among many Indigenous communities. Stigma was normalized, and discrimination and homophobia continue. As a result, new generations are further exposed to homophobia, and people who identify as transgender, gender-diverse, or Two Spirit often feel they have no choice but to hide their true selves, leave home for urban centers, turn to substance use, or find other ways to cope.[8,9] To varying degrees, traditional acceptance and support of Two Spirit individuals was replaced with hatred and condemnation. This has created an environment where Indigenous gender-diverse, transgender, and Two Spirit individuals are at increased risk for violence and may struggle with identity, mental health, and physical health.[5]

Resilience

Cultural factors, Indigenous worldviews, and Indigenous approaches to healing and coping (such as tribal sweat lodge ceremonies, use of plant medicines, tribal dance, and tribal gatherings) have created resilient communities and individuals. This resilience is built from three main parts: individual level resilience (the mind), collective resilience (the body), and cultural resilience (the spirit). All three can potentially contribute to strength and acceptance among transgender, gender-diverse, Indigiqueer, and Two Spirit individuals and their communities.[10]



A selection of traditional terms for Two Spirit and Indigiqueer individuals in Indigenous languages

The following are based on Will Roscoe's work with the San Francisco Bay Area Gay American Indians organization and his book "Living the Spirit: A Gay American Indian Anthology." [11]

Nation	Term	Loose translation to English (sex assigned at birth)
Blackfoot	Aakii'skass	"acts like a woman" (Male)
	Saahkomaapi'aakiikoan	"boy-girl" (Female)
Cherokee	nudale asgaya	"different man" (Male)
	nudale agehya	"different woman" (Female)
	asegi	"both male and female assigned" (Male or female)
Cheyenne	He'eman (singular) He'emane'o (plural) (hee="woman")	(Male)
	Hetaneman (singular), Hatane'mane'o (plural) (hetan="man")	(Female)
Crow	Bote/Bate/Bade	"not man, not woman" (Male)
Lakota	Winkte	"wants or wishes to be like a woman" (Male) "speaks like a woman" (Male) [from Isaiah Brokenleg]
	Bloka egla wa ke	"thinks she can act like a man" (Female)
Navajo/ Diné	4 levels: 1)Female 2)Male 3)Nadleehi (singular), nadleehe (plural)— feminine male 4) Dilbaa—masculine female	3 and 4 translate to: "one in a constant state of change", "one who changes", "being transformed"
Omaha, Osage, Ponca	Mixu'ga	"instructed by the moon" or "moon instructed" (Male)

Note: the above definitions are only samples and may not be comprehensive. These words often have different definitions and interpretations, even within one community, Nation, or dialect.

The basics: overview and definitions

This section defines important terminology. Understanding these definitions will help you support the Two Spirit, Indigiqueer, Lesbian, Gay, Bisexual, Transgender, and Queer/questioning, (2SLGBTQ+) individuals you interact with—yourself, your friends, your relatives, or your patients.

Terminology may evolve over time to become more appropriate and accepted, so what you see here will likely change over time. Youth and adolescents are often leaders in adapting language and space to create or (re)member ways of being in relationship with community, the land, and each other. Individuals may also identify using multiple terms or unique terms not listed here, so this list of terms is not all-inclusive. It is always important to ask individuals how they self-identify.



Terms related to identity (and/or role):

2SLGBTQ+: Inclusive abbreviation for Two Spirit, Lesbian, Gay, Bisexual, Transgender, and Queer/questioning (may also be seen as 2LGBTQ+). In an Indigenous context, Indigiqueer and pre-binary may be terms that are worth mentioning but may, for now, be represented within the "+." We place 2S first to acknowledge the continual presence of Indigenous people and expansive traditions regarding gender and sexual orientation on Turtle Island since time immemorial.

Gender: Gender is socially defined and tends to dictate an individual's place and role within the community. Gender is part of the way a society organizes and defines itself, and a culture/society may have any number of genders.

Gender identity: The gender that a person identifies with, or how they perceive themselves. Gender identity can be described as the sense of being male, female, both, or another gender(s). An individual's gender identity may be different from their assigned sex at birth and is separate from their sexual orientation. Gender identity may change over time. Gender identity is both personal and cultural, often simultaneously.

Gender expression: The manner in which an individual expresses their gender and/or gender identity, typically through clothing, body shape, body language, hairstyle, makeup, voice, etc. Gender expression may change over time and can be fluid. Gender is one important way that human beings express their unique personality and self-concept. In a cultural sense, gender expression can also be seen in the roles one outwardly participates in within ceremonial or cultural settings.

Gender-expansive: A wider, more flexible range of gender identity and/or expression than typically can be accounted for within a binary gender system (a culture that sees gender as exclusively male/female).

Cisgender: A term referring to people whose gender identity corresponds with the sex they were assigned at birth.

Transgender: A term that refers to someone whose gender identity is different than the sex they were assigned at birth. (*Note: not all people whose gender identity is different from their sex assigned at birth may use this term to describe themselves*)

Two Spirit: A unifying term that describes an Indigenous individual who expresses their gender identity, spiritual identity, or social role in a traditional, non-Western way; a term that often encompasses spiritual, sexual, gender, and cultural identity. The term can also relate to an individual's role in their tribe and contribution to their community.

- The term itself originates in the early 1990s and was first coined by Myra Laramie (Fisher River Cree). Is sometimes seen as a unifier and stand-in for words denoting 2SLGBTQ+ ways of being in original tribal languages, but can also be used as a way to denote the inextricability of gender or orientation to one's experience of their Indigeneity. Hundreds or thousands of other conceptualizations have existed in Indigenous languages, and many are still used today. Two Spirit is thought of and used in many diverse ways.

Non-binary: An individual whose gender identity does not align with the male/female gender binary (see pre-binary for a more recent Indigenous version of this identity).

- **Pre-binary:** A non-binary individual who specifically rejects the gender binary and views it as an act of colonial genocide against Indigenous gender expansive traditions

Sex: Medical classification of individuals assigned at birth as male or female, based on genitalia as perceived by a clinician and documented at birth. Chromosomal identification also plays a role in this classification.

Intersex: The term "intersex" describes infants born with genitals that do not appear male or female, or those who have anatomy that doesn't match with chromosomal sex.

- Vocabulary such as "differences of sex development", "variations in sex development", "endosex", and "intersex" all serve as umbrella terms to describe individuals falling under this category.
- While the diagnostic category "disorders of sex development" (DSD) was previously used, there was significant stigma associated with this term.
- Some Intersex variations are not based solely on genital appearance or function, but also on variances in hormone distribution or other endocrine differences.

Sexual orientation: Describes who an individual is attracted to and makes intimate emotional and romantic attachments/relationships with. It is independent of a person's gender identity or expression of gender. Some associated common sexual orientations include:

- **Heterosexual/Straight:** A person who is physically, emotionally, sexually, and/or spiritually attracted to people of the opposite gender.
- **Homosexual:** A person who is physically, emotionally, sexually, and/or spiritually attracted to people of the same gender.
 - *Note: While "homosexual" may still appear as a technical term, it is commonly not preferred by individuals. Lesbian, Gay, Queer, etc. are more frequently used to by individuals to self-describe their sexual orientations.*
- **Lesbian:** Refers to a woman attracted to a woman in the characteristics described above. Some lesbian individuals may refer to themselves as gay or queer, or may not identify as such at all.
- **Gay:** Refers to a person attracted to a person of the same gender in the characteristics described above.
- **Bisexual:** A person who is physically, emotionally, sexually, and/or spiritually attracted to both male and female identifying individuals.
- **Pansexual:** A person who is physically, emotionally, sexually, and/or spiritually attracted to people of multiple genders' or who do not define their attractions on the basis of a person's gender
- **Questioning:** The process through which individuals question their gender identity, gender expression, and sexual orientation. These individuals may be exploring their identity or may not want to conform or define themselves as one identity.
- **Queer:** A person whose identity challenges the notion that sex/gender/orientation can be defined binarily or linearly

- **Indigiqueer** - A person who associates their unique expression of queerness with their Indigeneity

Note: There is often variation in ways individuals express their attraction and orientation. For example, a bisexual male may only have sexual relationships with females, even though he is attracted to male individuals as well.

Related terms, in alphabetical order:

Accomplice: A person who does not identify as 2SLGBTQ+ but demonstrates support for 2SLGBTQ+ people; they may promote equality and advocate for 2SLGBTQ+ individuals in a variety of ways. Some may use the term "ally" but we prefer "accomplice" as it implies active rather than passive resistance to inequitable conditions.

Coming out: The process in which an individual acknowledges, accepts, and appreciates their sexual orientation or gender identity and shares it with others. Some Indigenous folks call this process "coming in". This reflects sharing and celebrating one's true self rather than changing it.

- *Note: Some tribal cultures assigned multiple names to people over their lifespan because of a recognition that we evolve and our spirits are always in a state of growth and change. Therefore, individuals historically did not need to "come out" in so far as their roles and contributions naturally shifted as they grew and developed as a person in the community.*
- *Note: When gender expansive systems are truly (re)membered, the need for "coming out" will be obsolete.*

Transition, gender transition, gender embodiment: The process of working towards more closely aligning one's internal knowledge of gender identity with their outward appearance. Some people socially transition to another gender through changing how they dress and using new names and pronouns. Others may undergo physical transitions that involve body modification through medical intervention. The ultimate goal is to live more fully and authentically in one's gender as they understand it.



If you or a friend needs any mental health support or is having a mental health crisis and/or suicidal thoughts, the following resources are available. They are all 2SLGBTQ+ friendly!

Crisis Services:

- **Trans lifeline:** 877-565-8860
 - Crisis line staffed by transgender folks, for transgender folks; toll-free; no active rescue*
- **The Trevor Project:** 866-488-7386
 - Crisis intervention and suicide prevention available 24/7 from counselors trained in supporting LGBTQ youth
- **Crisis Text Line:** text HOME to 741741 any time to start texting with a crisis counselor
- **988 Suicide Crisis Line:** If you need support, you can call, text, or chat with 988. Someone is available 24/7.
- **Text NATIVE** to 741741 for free, 24/7 support.
- **SAGE ELDER CRISIS LINE:** 877-360-LGBT (5428). Someone is available 24/7.

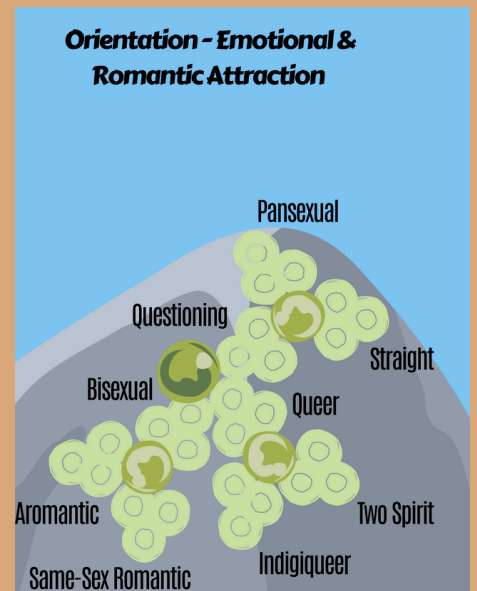
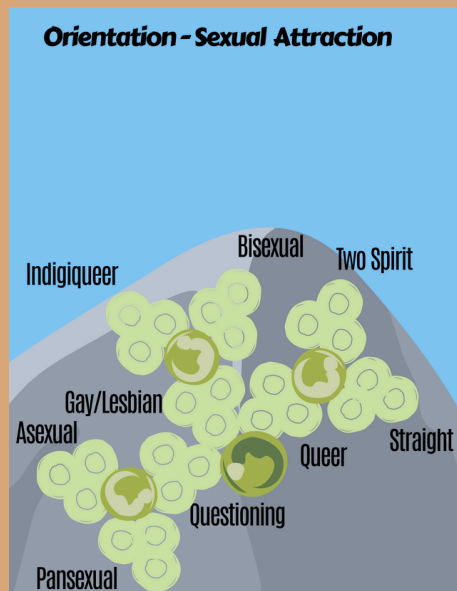
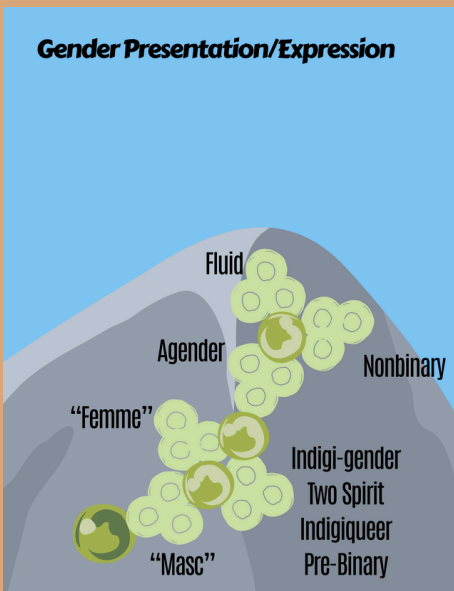
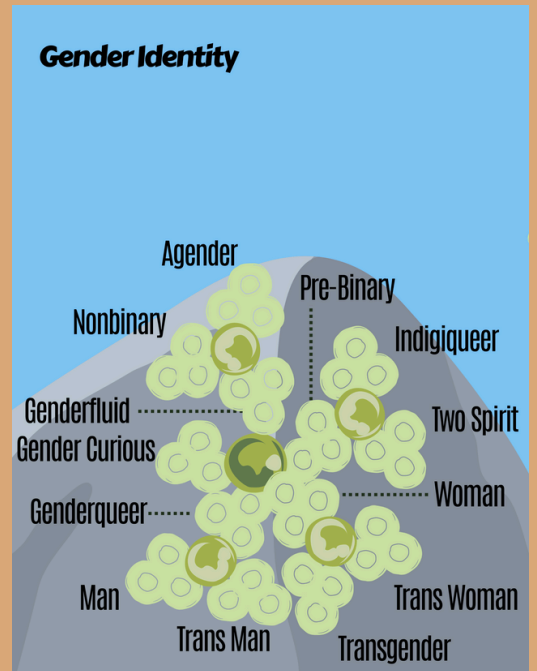
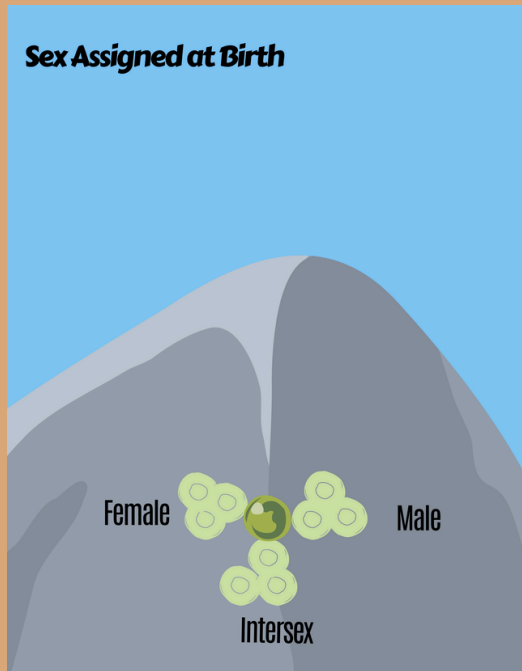
***NOTE:** *Some of these services may engage in active rescue (communicating information about suicide risk to local law enforcement when they believe it necessary to ensure safety).*



The Gender Frog

The Gender Frog is an interactive worksheet/graphic that helps portray the distinction between gender, sex assigned at birth, and sexuality. It is an Indigenized model demonstrating the the complexity in the ways that we each think of ourselves and identify that was an imagined as a culturally adapted interpretation of **the gender unicorn**. With this worksheet, you can explore your relationship to aspects of your identity in a way that is informed by Indigenous worldview. Frogs represent sex, gender, and orientation variations for many tribal peoples. There is a full version of this tool in the appendix, including instructions for using this tool. Salish frog artwork was created by Corey Begay, and this tool was developed by Itai Jeffries, PhD.

See **Appendix Page 87** for the full interactive workbook.



PRONOUNS & NAMES

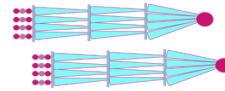
A pronoun is a word that refers to the person or people talking (such as I or you). It can also refer to someone or something that a person is speaking about (such as she, them). Gender specific pronouns such as she, he, they, and ze refer specifically to the individual someone is referring to.

The table below shows examples of gender pronouns. The first four rows show the most commonly used pronouns, but there are many other pronouns used.

It is important to note that the vast majority of Indigenous languages did not utilize gendered pronouns at all. To make space for (re)membering Indigenous gender expansiveness, we must make adaptations to colonial languages such as English by broadening use of pronouns. Indigenous societies place incredible importance on respectful communication. With this in mind, it is imperative that we refer to people in ways that feels respectful and affirming to them. We are, after all, one another's relatives.



How to use pronouns



Why are pronouns important?

Pronouns are important to a person's identity. Pronouns allow people to be truly seen and acknowledged in all settings (home, school, work, sporting events, a doctor's office, etc.) You cannot assume pronouns based on how someone looks, so it is always best to ask them which pronouns they use. Asking about someone's pronouns is also a sign of respect. Using the wrong pronoun or forgetting to ask for someone's pronouns might cause people to feel ignored or alienated.

It's okay to feel uncomfortable asking about pronouns at first. It may take some time to make this part of your routine, but pronouns will help to make others feel comfortable. They can also help you form more trusting relationships.

What are some tips for asking about which pronouns someone uses?

- Keep it simple!
- Introduce yourself using your chosen name and pronouns.
- "What pronouns do you use?" and "I use she/her/hers pronouns"
- Be respectful and non-judgmental.
- Some individuals may not use pronouns or identify with any gender in particular. These people may not wish to provide any pronoun. Instead, they may ask that you call them by their name only. Asking questions will help you understand what is most appropriate.
- This may feel uncomfortable or awkward at first, but it can help you create an inclusive and affirming environment.
- *Note: an individual's pronouns may change over time and from context to context. One's level of outness, comfort, and gender fluidity may cause these to vary. When working with youth, be particularly mindful of a young person's wishes when it comes to the pronouns they would like for you to use with other people, especially other adults and caregivers.*

For clinic and health provider information on **pronouns**, see **Section 4 of this toolkit**.

Gender Pronouns

Subjective	Objective	Possessive	Reflexive	Example
She	Her	Hers	Herself	She is looking. I looked at her. The basket is hers.
He	Him	His	Himself	He is looking. I looked at him. The basket is his.
They	Them	Theirs	Themselves	They are looking. I looked at them. The basket is theirs.
Ze	Hir/Zir	Hirs/Zirs	Hirself/Zirself	Ze is looking. I listened to hir. The basket is zirs.
e/ey	Em	Eir	Eirs/Eirself	E is looking. I listened to em. The basket is eirs.
Ve	Ver	Vis	Vis/Verself	Ve is looking. I listened to ver. The basket is vis.
Xe	Xem	Xyr	Xyrs/Xemself	Xe is looking. I listened to xem. The basket it xyrs.

[12]



The importance of chosen name

Using a person's chosen name is another way to show that you respect and understand their identity. For individuals who are socially transitioning, using a new name can be a powerful step.

Using a chosen name has great impact on health! In one research study, youth who were able to use their chosen names in more than one place (school, home, work, and/or with friends) had lower rates of depression and suicidal thoughts. There was also a 56% decrease in suicidal behavior![13]

Note: the use of chosen names versus birth names is common even among cisgender and/or straight Indigenous people, where nicknames and traditional names are commonly used and central to relationship maintenance. In some cases, the conveyance of a spiritual, ceremonial, or traditional name is an important rite of passage, and is a way to align a person's physical, spiritual, and social identity. Naming ceremonies are part of hundreds of tribal traditions.

How to ask about chosen name?

"What name do you go by?" and "What would you like to be called?"

Friends, families, teachers, and healthcare providers can all help support this positive practice by calling everyone by their chosen names and using the appropriate pronouns!

What happens when you make a mistake?

We are all human and make mistakes from time to time. When you realize you have made a mistake about someone's name or pronouns, the best thing to do is apologize and ask questions (if the timing and setting are right) so you can learn for next time. You can ask clarifying questions right away or later on. The important thing is that you learn from your mistake and show that you are acting with respect and try hard to get it right next time.

Terms to avoid:

The following terms may be offensive to individuals identifying as transgender or Two Spirit. Terminology is constantly changing so we should remain aware of our word choice and how we use language.

- X. Transgendered, transgenderism
- X. Two-spirited (as opposed to Two Spirit)
- X. 'a transgender'
- X. Tranny
- X. Cross-dresser, transvestite, or drag queen (if not the case or wrongly attributed)
- X. He-she, she-male, referring to someone as "it"
- X. Phrases such as, "She was a man before" and "He's really a woman"
- X. Phrases such as, "She thinks/feels she is a man" or "He thinks/feels he is a woman"



Health Inequality

Because historical trauma spans spiritual, mental, physical, and emotional realms, it often leads to health inequity and disparities. Youth who identify as transgender, gender-diverse, Indigiqueer, and Two Spirit experience higher rates of health disparity across most health factors when compared to their cisgender, non-Indigenous peers. With regard to physical health, rates of disease and substance use are increased, most often due to lack in access to care and inequity.[14] In terms of mental health, youth who identify as transgender face higher levels of psychosocial distress including bullying, discrimination, violence, family and peer rejection, and homelessness.[15] These youth are also at increased risk for experiencing anxiety, depression, and suicidal ideation, as well as suicide completion.[16,17]

Despite these inequities that result from the lasting impacts of historical traumas and settler colonialism, 2SLGBTQ+ individuals demonstrate pride and resilience in both Indigenous and gender diverse identities.[18,19] Building on this knowledge, this Toolkit aims to help educate youth, their families, Elders, and their healthcare providers to work toward reducing health disparities. It also hopes to cultivate positive action from already existent resilience woven within Indigenous practices, histories, and cultures, and communities/Nations.



Existing Research

2022 The Trevor Project Survey: The Mental Health and Well-Being of Indigenous LGBTQ Young people

These data are from a study that looked at the experiences of 1,792 13- to 24-year-olds who identified as AI or AN. Key findings included diversity among participants with regard to sexuality, gender, and tribal/Nation identity, high rates of mental health challenges compared to non-AI/AN LGBTQ+ youth, and high rates of structural inequity reported.

2015 U.S. Transgender Survey Report on the Experiences of American Indian & Alaska Native Respondents [20]

- 23% unemployed (vs. 5%)
- 41% living in poverty (vs. 12%)
- 21% experienced homelessness in the last year due to gender identity (vs. 12%)
- 21% have lost their job because of being transgender (vs 13%)
- 65% have been sexually assaulted due to their gender identity (vs 47%)
- 50% have had at least one negative experience with a healthcare provider related to being transgender (vs 33%)—includes refusal to treat, verbal harassment, physical or sexual assault, or need to teach provider about transgender people in order to get treatment
- 37% did not see a doctor when they needed to because of fear of mistreatment as transgender person (vs 23%)
- Respondents were 35% transgender men, 35% transgender women, 28% non-binary
- Note: 2024 U.S. Transgender Survey is currently being analyzed.

Study participants were 18 years old and older and identified as both transgender and AI/AN. They reported the following (Note: the AI/AN results listed are compared to non-AI/AN transgender individuals surveyed in parentheses)

The Honor Project: Two Spirit Health Study

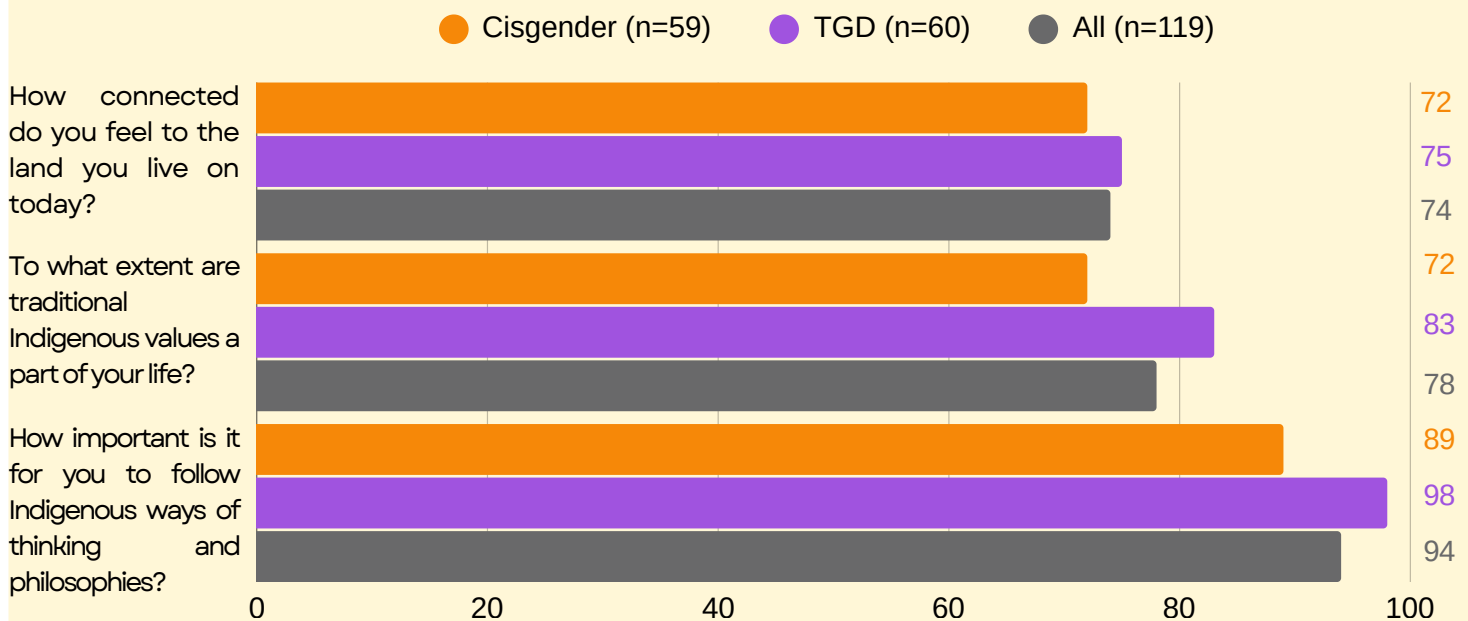
This was a 5-year multi-site national study (2002-2007) that involved interviews of Native LGBT and Two Spirit individuals. These folks shared information about physical health, mental health, traumatic experiences, life events, cultural and ceremonial practices, and LGBT and Two Spirit culture and connectedness. Some key findings are listed here:

- Two Spirit individuals who attended boarding schools reported higher rates of alcohol abuse. They were more likely to attempt or think about suicide compared to non-attendees.[7]
- Two Spirit people raised by boarding school attendees were more likely to have anxiety, PTSD, and suicidality in their lifetime.[7]
- Two Spirit women reported increased risk of childhood trauma, including physical or sexual assault.[21]
- Mental health improves and suicidality can decrease if Two Spirit individuals are connected to their culture and traditions, and understand the impacts of colonization.[22]

Pride & Connection

While certainly facing a high number of barriers and inequities, Indigenous trans and gender-diverse (TGD) adolescents and young adults (AYA) also express a high degree of resiliency through cultural connection and pride. The following chart compares Indigenous TGD AYA to their cisgender queer peers.

Perspectives on Traditional Indigenous Practices Among 2SLGBTQ+ AYA



Percentage (%) of respondents who responded “mostly” or “extremely”.

Pride and Connectedness survey, 2020, Paths (Re)Membered Project, NPAIHB. Angelino et al. 2023.[19]

Section 2

Youth

**You are
in this
world for
a reason**

**You are
your best
advocate**

**You are
not
alone**

**You are the
continuation
of your
Ancestors**

Each person's experience is unique and beautiful. The advice and information in this Toolkit may not always apply to your life, your relatives, and your community. Follow your intuition as you read through this material, just as you trust yourself throughout your gender affirming journey.

Before we get started

If you or a friend needs any mental health support or is having a mental health crisis and/or suicidal thoughts, the following resources are available. **They are all 2SLGBTQ+ friendly!**

Crisis Services

- **Trans lifeline: 877-565-8860**
 - Crisis line staffed by transgender folks, for transgender folks; toll-free
 - No active rescue*
- **The Trevor Project: 866-488-7386**
 - Crisis intervention and suicide prevention available 24/7 from counselors trained in supporting LGBTQ+ youth
- **Crisis Text Line: text HOME to 741741 any time to start texting with a crisis counselor**
- **988 Suicide Crisis Line: If you need support, you can call, text, or chat with 988. Someone is available 24/7.**
- **Text NATIVE to 741741 for free, 24/7 support.**
- **SAGE ELDER CRISIS LINE: 877-360-LGBT (5428). Someone is available 24/7.**

**NOTE: Some of these services may engage in active rescue (communicating information about suicide risk to local law enforcement when they believe it necessary to ensure safety).*



Youth Perspectives & Stories

I trust that my ancestors would still call me magic.

Arielle Twist, Two Spirit artist/educator from George Gordon First Nation in Saskatchewan [23]

Indigenous queer joy means resting in the land.

Swinomish Tribal Member & Artist

Indigiqueer Joy is a beautiful thing to see. People being themselves makes me happy! To have support and community in this time, and to live with other queer people is amazing.

Indigiqueer from Klamath, Modoc, and Northern Paiute tribes

I feel like I am really part of the circle, like I belong to something bigger...things seemed to make sense once I found the Two Spirit community. It was and is healing. Two Spirit is healing.

Dr. Alexandria Wilson, Two Spirit professor from Opaskwayak Cree Nation [24]

Queer Indigenous people are what's right in the world; how we exist, how we resist, how we smile, how we rage. We have every reason to be exactly as we are.

Purhépecha. Indigiqueer





Joey's Story

During the creation of this Toolkit, we had the opportunity to speak with a young person who was excited to share their gender journey. Some aspects of their story, including their name, have been changed to keep their identity anonymous. We do not claim to own their experience or mean to trivialize their rich journey. Instead, we hope to share their story so that you can read through it and gain support and comfort through a peer's lived experience.

Joey grew up on a reservation in the Pacific Northwest. Early on in his gender affirming journey, Joey isolated himself and hid his gender identity because on the reservation, "you're kind of family with everyone". He was worried about how people might react to sharing his transmasculine identity and wasn't sure whom to tell first. Once he found the words to describe his identity and was able to say them to himself, it took Joey about one year to share his identity with others. He first began to socially transition at school with friends because that was the most comfortable. Once Joey became more confident and certain of his identity, he slowly shared his identity with his teachers and other friends. Over time he felt better about telling his parents and relatives, and so he was able to share his identity with them. "Everyone I've known that I've told still love me. They still respect me. That's never changed."

Finding a therapist really helped Joey along his journey. "If you can get a therapist, I definitely encourage you to do that. Do not just settle. Find a therapist for you. If you do have to settle, make sure your therapist understands you. And if you can't get a therapist, I would talk to a school counselor." Great friends helped along Joey's journey too. "Talk to them as often as you can, even if it's just little conversations or if you saw something that was absolutely ridiculous but made you laugh...they can help you get through your current tough situation." It took Joey a long time to realize that all of these people were always there for him. He encourages others to find those supports and to trust in them.

Joey also shared how his culture and traditions are related to his identity. "Being Native is a really big part of who I am." Growing up, Joey regularly participated in Pow Wows and ceremonies that separated boys and girls. These events contributed to how he now understands himself and his role in his community. Throughout his journey, Joey also found it helpful to reach out to community and tribal members. Joey hasn't yet been able to find any information recorded in his tribal language related to Two Spirit people. Even so, he has been able to talk with his Elders and community members about traditional perspectives related to gender. He has found even more loving supports through this process.

There were definitely moments when Joey felt unsure, alone, and upset. These feelings were especially present during the time he was keeping his identity to himself. In those moments, to get through the tough times, he kept thinking about the little things that he enjoyed. He thought about what he would miss out on if he left or tried to change who he was.

Today, Joey attends college at a tribal affiliated university and is passionate about helping others. He is a great example of the great things that can happen when you trust yourself and love yourself along your gender affirming journey.

strength

hope

youth



magic

future

love

Do my
Ancestors
celebrate me?

YES!

Native traditions have honored Two Spirit and gender nonconforming relatives for their commitment to serving the community! This relationship has existed since time immemorial!

My worldview is the Earth. It's the sky. It's the animals. It's trees. It's the elements of the world, of the Earth and why they come to us and what we learn from them.

Two Spirit First Nations member[22]

Everyone has a **unique** journey toward gender acceptance and affirmation. An important part of this journey is embracing your truest self. Think about what you are and why you **love yourself** so you can share this with others. Many Two Spirit, transgender, and gender non-conforming individuals feel that this leads to “coming in” rather than “coming out” as a new individual. **Be yourself** and embrace your journey rather than trying to fit into a pre-existing identity or label. Explore what feels right with you, and what your inner self is telling you.

We become self-actualized when we become what we've always been... They are just being, that is the way the Great Mystery made them. They come out into this world like that. And they are living their lives.

Two Spirit person[25]


By embracing who you were **meant to be**, you can fill important roles in your community as an empowered Two Spirit, transgender, or gender-nonconforming person. You can share your gifts with others, and make your Ancestors proud.

How could your ancestors not celebrate you?!

Research Two Spirit and Indigiqueer Artists, Musicians, Poets, Leaders, Scholars, and Influencers that you can look up to! Learn about others who live their fullest truths!

you are not alone

common questions about sharing your identity with relatives, friends, and school



I am transgender and want to tell my friends and family, but I am not sure how to. I have felt like this for a while now, but I am finally feeling ready to share my identity with others. What should I do to prepare myself?

Hello there! This is a great question! I am so glad you are ready to share your gender identity with your friends and family. You are so brave! How and when you share your identity is unique to your special journey—it depends on your comfort, readiness, and safety in your environment. Taking things step by step and remembering to stay true to yourself will help you share your identity with others. This is who you were meant to be!

The first thing you may want to think about is who you will tell first. Sometimes it can be easier to start sharing your identity with the people you know will support you no matter what. These may be your relatives, friends, team members, teachers, doctors, or religious or spiritual leaders. Sometimes the people who are closest to you (like your parents or siblings) are actually the hardest to tell, and that's okay too.

Once you decide who you want to tell, you can start thinking about how you will tell them. There are a number of ways you can do this, and the choice is entirely yours. You can talk on the phone, send an e-mail, write a story, talk face to face...the list goes on and on. There is no right or wrong way to tell someone!

If you choose to call someone on the phone or talk face to face, it might help to practice your conversation and think through what you will say. You might also want to think about how people may react, and how you will respond to them. Thinking through this can help you feel more confident before the discussion.

Timing and location are also important to think about when talking with your relatives. Is somewhere private better than around a lot of people? Does a weekend or weekday work better? What about during a ceremony or special event?

Next, prepare yourself for the range of reactions people may have. You should think about having a safety plan in place just in case your family takes some time to come around to what you share with them. This may mean planning to stay at a friend or auntie or uncle's home for a few days. You might also want to think about your options for food, school, and transportation.

What if someone responds negatively or gets upset? A lot of times, negative reactions are not related to you or how someone feels about you. A person may respond negatively because they feel surprised and may not know what to say. While you have been living with your feelings and identity for your entire life, the person you are telling is most likely learning something completely new about you. They may take some time to process and fully understand what you are sharing with them. They still love you and want the best for you but may need time to find the words to share these feelings with you. While you are waiting, try to find support from the other friends or mentors you thought about earlier.

My one last piece of advice is to think about connecting to traditional knowledge when sharing your identity. Drawing on the strength of your Ancestors might increase your self-confidence. Talking about tradition and ceremony can also help your family remember how Ancestors have celebrated gender-diverse, transgender, Indigiqueer, and Two Spirit people throughout time.

Remember to trust yourself no matter what and know that wherever you are on your journey it is yours to control. Embrace your identity and celebrate how far you have come along your journey! You are in this world for a reason!



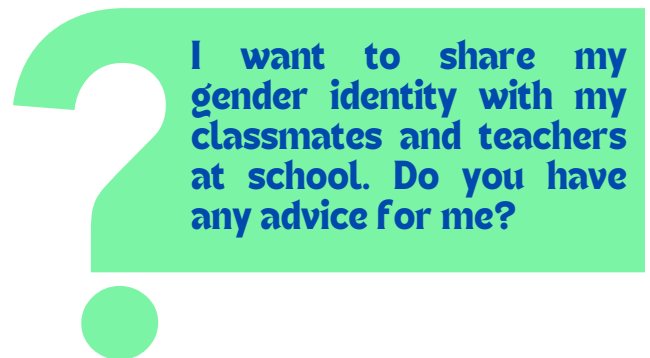
What a great question! I am glad to hear that you are ready to share your identity, chosen name, and pronouns with your teachers and schoolmates. This process can be challenging, but you have already come so far.

Think about who you would like to tell first at school. Have you told anyone already? If you have already shared your identity with your parents or relatives, telling your friends might be a little easier since you have some practice. If you haven't told anyone yet, think about one person at school who you would feel comfortable telling today.

Telling this one person can help you build confidence and trust in the people who love and support you. This person can be a great start to your support system both in and out of school. Some ideas include a best friend, teacher, coach, or counselor who can help you through the journey and remind you of how great you are. Note that in some school districts, some employees (like your teachers or coaches) may be mandated to share your identity with your parents. If that could compromise your safety, double check legislation in your school district and school policy before sharing your identity to make sure you'll be safe. You can usually find this information on your school or school district's website.

There is no rush to tell your entire school right away. Over time, the more people you tell, the easier it will be to talk about.

It is also okay if you don't want to label yourself as a specific identity or with a specific term. This is your choice! If you do choose a label, think about how you'll explain it to your friends. If you identify as Two Spirit for example, there may be individuals both within and outside of the Indigenous community who do not fully understand what Two Spirit means.



If you are worried about your safety at school, there are laws to protect every student. One law is called Title IX and is part of the Civil Rights Act. It helps ensure that each student is treated fairly and has an equal opportunity to learn. This law also protects from discrimination based on sex and gender. Many other regulations are state specific and can be found online. A great place to start learning more about your rights is the [National Center for Transgender Equality](#). This site also provides tips on how to talk to your school leadership and report violations.

You can also find support and advice on how to navigate school and relationships through school-based 2SLGBTQ+ groups. Many schools have created 2SLGBTQ+ groups to provide safe spaces on campus. There is no pressure to join, but these groups can help you identify people with similar experiences and interests. You can hear their stories and help support one another. If your school does not have an existing group, you may want to think about starting one with some friends or a trusted school advisor. Schools are obligated to support the formation of these groups through Title IX.[26]

Check out [these websites and documents](#) if you want some more information about sharing your identity at school and with friends. Your teachers might find these really helpful, too!



What happens with bathrooms? Can I use whichever one I choose?

This is another great question. For many schools, this includes allowing students to use the bathroom of their choice. Each state may enforce this differently, and policies are constantly changing, so researching and sharing what you find with your school principal or leadership can be really helpful.

Being able to use a bathroom that is consistent with your gender identity is really important. Some states and cities explicitly protect the right of Two Spirit, transgender, and gender-diverse students to use restrooms and locker rooms consistent with their gender identity. Some courts have also ruled that excluding Two Spirit, transgender, and gender-diverse youth from using the restroom that matches their gender identity violates federal education law. This is an area of the law that is changing a great deal right now. Some schools cannot make all facilities gender neutral, but will still make other options available for you to use. For example, schools can designate single stall or private use bathrooms as alternative options that may help you feel more comfortable. You can ask a trusted adult (relative, school counselor, teacher, or healthcare provider) to help with this process if you feel like you need additional support.

In some states, non-discrimination policies protect you from being excluded from sports, clubs, or extracurricular activities based on your gender identity. The specific team you will play on (sex assigned at birth or gender identity) varies by state. Some states have passed regulations that prevent discrimination against transgender students who wish to play sports. For example, in Washington state, you can play on the team that matches your chosen gender identity and can switch teams as you prefer.

Does being transgender, gender-diverse, or Two Spirit impact my ability to play sports?

Other states continue to require students to compete on teams that match the sex on a student's birth certificate, instead of the gender they live in every day. You can research your state's specific laws online. **This website** may be helpful. You can also learn more about your legal rights by visiting the **American Civil Liberties Union (ACLU)**.



I hear that some relatives go through something called a grief process. What does that mean? I don't understand because I am still here and haven't changed. Why do they seem sad?

Hi there, thank you for sharing. Experiencing this sort of reaction can be really tough and confusing. You may feel like people are acting as if you aren't there. "Watching people mourn the loss of you while you are standing right in front of them is a surreal experience that only someone who is transgender can truly understand."

Your relatives may respond with a period of grief and mourning even if they accept and celebrate your chosen identity. They may be grieving their attachment to a perception they held as true or dear, which is not actually about you. In these moments, remind yourself that your relatives love you and need time to process. They want to provide the best support for you and continue to love you. They may just need time to think about how they can do this best. Your relatives may also have a lot of questions that they don't know how to ask yet. Over time, they will find the words.

This can be an uncomfortable experience and may cause you to feel sad or alone. In these moments, take a step back, and think about your interests and skills that make you who you are. Focus on your strengths. Think about what you are passionate about, and what your goals are for the future. Think about all the little things you enjoy. No matter what, you deserve to be here and make a difference in this world. You are in this world for a reason. It may also be helpful to reach out to the people you've identified as your support system, or reach out to other 2SLGBTQ+ students or community members for guidance.

In time, the grieving process will pass, and your relatives will be better able to express their feelings to you. They will be able to fully share their excitement with you and embrace your identity and spirit.

I haven't told my romantic partner that I am transgender yet. I am worried they will want to break up with me when they find out. Do you have any advice?

Hey there, thank you for sharing! It is great to hear that you are living as your true, authentic self, and want to share that with your partner.

There are two important things to remember when sharing your identity with a romantic partner: self-compassion and safety.

First things first—love yourself! Treating yourself with compassion can be really powerful. It can help you remember that you are in charge of your journey. Can you love or treat yourself the way your closest friend or loving family member, mentor, or even pet treats you? Even though making your partner happy may seem like the most important thing sometimes, you need to remember to take care of yourself first. Loving yourself and treating yourself with compassion can be comforting and empowering as you progress along your journey. Who you are as a person is more important than how you identify or what body parts you have! Also remember that you are loved by your family, friends, and community, even when things may seem rocky in your relationship.

On to the second point: safety. Since we are talking about love, there are certain ways a loving partner should act in a relationship. A partner should:

treat you with love, compassion, and respect.

empower you to be your true self...your best self.

encourage and support you through great times and tough times.

celebrate your identity.

inspire you to love yourself more.

With that said, your partner should love you and celebrate your identity when you share it with them. It may take them time to understand, and they may have a lot of questions, but they should continue to support you and respect you. Talking through your journey and feelings with a partner may help.

If your partner does not respect you after sharing your journey and identity with them, you should think about breaking up. You cannot depend on this person to love you if they cannot respect you and your journey.

You are worth it, and you deserve to be in a relationship that makes you feel secure, comfortable, and loved. You should always feel safe in your relationship—physically, mentally, and emotionally.

If you have concerns about your partner or safety in your relationship, or even if you just have a weird feeling in your gut, reach out to people who you trust so they can help you get the appropriate help.

Check out the **Stewarding Relationships Zine** to learn more about relationships, love, and growth. It may help with some of these conversations and inspire you on your journey.

These conversations can be tough. Know that if you stay true to yourself and love yourself, things will fall into place.



This is a great question. You do not need to be 100% certain as you progress along your journey. Only you can know who you are. If you cannot find something to describe you, or a word that describes how you want to show who you are, that's okay too. You are not defined by a word. Gender identity can also be fluid and might change over time.

If you have questions and doubts as you explore your identity, remember to stay true to yourself. Take the time to think about how you see yourself, and how you want to be seen. Questions and doubts are a natural part of growing up—growing up is a time for exploration.

People keep asking me if I am “certain” about my gender identity. Do you have any advice?

I was 15 or 16 when I first came out and I wasn't 100% certain. And it's okay to not be so certain, because you are so young...for me, 15/16 wasn't that long ago. It feels like an entire lifetime ago that I had all those doubts of me being trans, but now I am 6 months post-op, two and a half years on testosterone, and I've never been so happy with my body and how I perceive it.

Trans Youth

You Are Your Best Advocate

Interacting with health providers and primary care

It may not always be easy to find a healthcare provider who has experience working with transgender, gender-diverse, Indigiqueer, and Two Spirit youth. To advocate for yourself as a patient, it is important to know what to expect from healthcare providers. Learning about treatment options can also help you gain independence and ask for the best care possible.

STARTING THE CONVERSATION with a healthcare provider

When you meet with a provider, you can a) wait for the provider to take the lead or b) share your pronouns and chosen name at the beginning of the encounter, when you introduce yourself. Volunteering your pronouns right away may feel awkward, and correcting a provider's mistake can be uncomfortable, but doing so will help you feel better respected. With time, this will become easier.

You are a gift from the Creator. You should be treated like one. If the staff or providers treat you in any way that makes you feel uncomfortable, you should look into choosing other providers. You can use the resources listed in the **Families and Relatives section**, or speak to a trusted adult who can help you find other providers. If seeing someone else is not an option, you can show your current provider the materials in this Toolkit so that they can become more aware of your specific needs. What's important is that a provider is willing to admit what they don't know and work to learn more about how they can best help you. They also should make you feel comfortable and be someone you can trust.

PRIMARY CARE

It is important that you trust your healthcare provider and that you are able to tell them your full history. Your history includes what illnesses you have experienced, medicines you have taken, surgeries you have had, or mental health concerns you've dealt with. Other information such as where you live, who you live with, and where you work are also important. If your provider knows what has happened to you in the past, they can better help you today and into the future.

Some other important things to discuss with your primary care physician may include: safe sex practices, alcohol and tobacco use, mental health, physical activity, diet, heart health, and cancer risk factors. You don't have to talk about these all at once, and your doctor will know to ask you these questions—you don't need to memorize anything. Some medications used to block puberty or help medically transition may impact your health, so it is important to be open with your health team when possible. Having honest conversations about effects, including unintended side effects, can help your provider to make sure you are on the best regimen to balance your physical goals with overall health and safety.

It may also be helpful to create a safety plan with your health team (or another trusted adult such as a teacher, counselor, coach, or family member). A safety plan is for moments when you are feeling sad or unsafe. Think about who you will talk to when you are feeling sad, where you will go if you feel unsafe, and coping methods you will use. Also keep in mind the resources available to you locally and nationally (such as **The Trevor Project** and other lifelines listed at the beginning of this section and in the resources section) in case you need additional or emergency support.



ROADMAP FOR TRANSITION AND GENDER EMBODIMENT

Are you ready to embody your authentic gender identity? There is no right time or right way to transition, but there are a few things to think about before you proceed. Your mental health, medical readiness, and support from friends and relatives are all important. They can help you be successful along your gender affirming journey and are especially important during transition (see graphic to the right).

You can be your best advocate by learning about what the transition process involves. Remember, the journey is different for each individual. Each of the medical services and transition choices discussed are completely optional. Each person's journey is unique, and there are different paths to achieving each person's unique goals. These steps may vary from person to person and provider to provider.



Some youth and families may decide they do not want to medically transition. Others may not be ready to begin gender affirming treatments when they first visit a medical provider. If this applies to you, you can talk to your healthcare provider about options to help you during this period of time. For example, mental health support and menstrual (period) suppression are services available if puberty blockers or gender affirming hormones are not an option at this time. These options can help you feel comfortable in your body and supported along your journey. Additionally, there are many non-medical ways to support an authentic gender expression. (**Seek inspiration from Ancestors**).

Talk to your health team about your options!



Medical Transition Options

This section contains more information about puberty blockers, gender affirming hormones, and surgeries.

Note: *The information provided is not official medical advice. Please talk more with your health provider to explore your options. Some of the information below is based on information previously found at Seattle Children's Gender Clinic handouts on Puberty Blockers and Hormones.*

Puberty Blockers

What is puberty?

- Puberty is a process the body goes through so it can become capable of making a baby (reproduction). It also helps the body and brain reach adult size and development. Puberty starts when your brain tells your pituitary gland (also in your brain) to start releasing hormones. This happens at different ages for different people.
- During puberty, your body increases the amount of certain puberty-related hormones (Luteinizing Hormone-LH and Follicle Stimulating Hormone-FSH). This causes testicles to start producing testosterone or ovaries to start producing estrogen. These hormones do not cause acne, pubic or armpit hair—those effects are caused by other hormones.



- For people with testicles and testosterone, puberty includes testicle growth, penis growth, facial hair, increase in height or “growth spurt” and voice changes (deepening of the voice).
- For people with ovaries and estrogen, puberty includes increases in chest/breast size, body shape changes including hip fullness, and start of menstrual cycles (periods).

How do puberty blockers work?



- Puberty blockers cause your body to stop releasing puberty hormones. This is like hitting a ‘pause button’ on puberty. Puberty blockers will not stop pubic or armpit hair from growing or improve acne. Blockers will only make a difference for the changes that make you look female or male. For example, in bodies with ovaries, breast size may get smaller if breasts have already started to develop. In bodies with testicles, testicle size may decrease, and penis growth will be stopped.
- You might also see puberty blockers called GnRH analogues.

What will happen if I start puberty blockers late in puberty?

- If puberty blockers are started late in puberty, they cannot reverse most changes that have already happened. However, puberty blockers can stop any further puberty changes.

Are puberty blockers permanent?

- Puberty blockers are **not** permanent. If you decide to stop puberty blockers and **do not** start gender affirming hormones, your body will start going through puberty associated with your sex at birth. You can stop the puberty blockers at any time (with the help of your provider). It is important to understand that there are some side effects of using puberty blockers that may be permanent, such as decreasing fertility (see the question about risks below).

How long will it take for blockers to start working?

- It can take several months for puberty blockers to start working. Everyone’s body is a little different, so it is hard to know how quickly your body will respond. In the beginning, your body may actually show more signs of puberty. These will lessen as you continue to take the blockers.

What are the different types of puberty blockers?

- Lupron or Leuprolide (Eligard): This medication is given every 3 months in the clinic as a shot.
- Histrelin (Supprelin): This medication comes in a little plastic rod that is placed under the skin in your upper arm. It can work from 1-2 years and will need to be replaced at that time. The insertion and removal can be done in a clinic or operating room depending on healthcare setting.

How will my body change?

- Puberty changes that your body would have gone through without medications will not occur.
- You **will not** begin to develop physical changes related to your gender identity until you begin gender affirming hormones (if physical transition is something you are interested in).

Will I feel pain?

- Lupron injections are given in your arm, leg, or bottom. The area where you get the shot may be sore for 1-2 days after the injection. Using numbing cream (topical lidocaine) before your injection can reduce pain.
- Before the Histrelin implant is inserted into your arm, you will receive an injection to numb the upper arm so you will not feel any pain with insertion. You may be sore for 2 days after the procedure.
- You may take acetaminophen or ibuprofen to decrease the pain from injection or implant. Check in with your healthcare provider before beginning medication.
- You can learn more about Histrelin insertion [here](#) and coping strategies for injections [here](#).

What are the risks of puberty blockers?

- Puberty blockers are relatively new, so we do not have a complete understanding of long-term risks. We do know about some of the short-term risks.
 - Bone health: Because bones are built during puberty, blocking puberty can cause your bones to be weaker (or to lower bone density). This risk can go away if you stop the puberty blockers or start gender affirming therapy but is still important to think about. To help prevent injuries while taking blockers, you can take calcium and vitamin D supplements (ask your healthcare provider), and do weight bearing exercises like walking, jumping, and weight lifting. These can help make your bones stronger.
 - Your doctor may check your bone health with something called a DEXA scan. This takes a picture of your bones and helps to see how you are growing before you start treatment. It can also help check your bones during treatment. This is like an X-ray and is not painful.
 - Fertility: Puberty blockers should not impact fertility or your chance of having a baby in the future, when taken **alone** (without gender affirming hormone therapy). Please see below for more information.

Are puberty blockers right for me?

- The decision to use puberty blockers is an individual decision. It is important to think about the benefits and risks and to ask all the questions you may have.
- Puberty blockers can give you time to make decisions about your gender transition that are more permanent, like starting gender affirming hormone therapy. Blocking puberty can help your body to develop in a way that matches your chosen gender identity.

Are puberty blockers right for me?

- The decision to use puberty blockers is an individual decision. It is important to think about the benefits and risks and to ask all questions you may have.
- Puberty blockers can give you time to make decisions about your gender transition that are more permanent, like starting gender affirming hormone therapy. Blocking puberty can help your body to develop in a way that matches your chosen gender identity.
- This is helpful because puberty can be distressing for many transgender people. Puberty blockers are like a 'pause button' on the puberty that does not match your gender identity.
- Puberty blockers may also reduce the need for future medical or surgical treatment, if preferred by an individual. For example, limiting chest growth or hair growth may make chest surgery (for people with ovaries) or hair removal (for people with testicles) easier in the future if they choose to pursue those options.
- For example, a transgender female who took blockers to pause puberty was given time to reflect on gender identity. She then made the decision to start gender affirming hormone therapy (estrogen). Because she took puberty blockers, she now has physical features that are indistinguishable from someone assigned female at birth.
- You may not have access to puberty blockers or doctors who prescribe them. However, learning about what is out there can help you be better informed and keep your options open. It can also help you to reach out to providers who may work in another community or on another reservation close by.



When is a good time to start taking puberty blockers?



- Most doctors will start you on puberty blockers once your body starts to show signs of puberty. Most of the time, this happens when bodies with testicles start to have increased testicle size and penis growth, and bodies with ovaries start to have breast changes.
- It is not safe to start puberty blockers before puberty. There are a few tests your doctor can run to confirm that your body has started the process of puberty.
- Working with a health team, when safe and available, from early on in your journey can be helpful. Scheduling some visits before you reach puberty can help you and your family build trust and get to know your options.

How long can I take puberty blockers for?

- Puberty blockers can be taken for any period of time until you decide you want to start gender affirming hormone therapy or resume the puberty of your sex assigned at birth. However, as listed above in the risks section on the previous page, there is a chance that your bone density will be lessened, causing weaker bones. For this reason, most providers will provide blockers for a maximum of 4-5 years, and many choose to limit it to 2-3 years.

Gender Affirming Hormone Therapy

If transitioning physically is part of your journey, the charts below may be helpful. The teal table below presents an overview of the hormone you would receive based on your gender identity. Unfortunately for non-binary patients, sex hormones are binary. Your healthcare team should be able to work with you to find a hormone dose that feels right for you and your identity. The yellow table describes the hormone treatment in more detail.

Hormone therapy changes the levels of sex hormones in your body. Gender affirming hormone therapy can allow your body to more closely match your gender identity, by causing a number of physical features associated with sex and gender. Remember that this information is not official medical advice and choosing to medically transition is completely optional. Be sure to explore your individual options with your medical care team.

Gender Affirming Hormone Overview

Key Gender Affirming Hormone	Referred to as:
Estrogen	“Estrogen Therapy” “Gender Affirming Hormone Therapy with Estrogen” “Feminizing Hormone Therapy”
Testosterone	“Testosterone therapy” “Gender Affirming Hormone Therapy with Testosterone” “Masculinizing Hormone therapy”

Gender affirming hormone therapy options and details

	Gender affirming hormone therapy with estrogen	Gender affirming hormone therapy with testosterone
Hormone function	Estrogen is produced in the ovaries and is responsible for breast development, genital growth, and distribution of body fat in biologic females.	Testosterone is produced in the testes and causes deep voice, body hair, facial hair, and a specific body shape.
Treatment form	Treatment usually involves: <ol style="list-style-type: none"> 1. Estrogen, typically 17-beta-estradiol <ol style="list-style-type: none"> a. Most common: pill (oral), injection, patch (transdermal) 2. A medicine to block testosterone, often referred to as an “androgen blocker” 3. Sometimes, a medicine called progestin or progesterone is added 	Most common: injections, gel Other: bioidentical hormone pellets, patch (transdermal)

<p>Treatment effects</p>	<ul style="list-style-type: none"> • Body fat: Many individuals will experience redistribution of body fat away from the belly and towards the hips/buttocks in a “feminine pattern”. • Facial and body hair: Even with treatment, hair may not go away completely and may require hair removal treatments. If individuals undergo puberty suppression, facial and body hair are typically prevented. • Voice: Estrogen has no direct change on voice. Puberty blockers are helpful to prevent voice changes that occur. • Breast growth: Typical over 1-3 years along with nipple growth. However, breast size is often more related to family history than to hormone therapy. • Erections: Erections decrease over time and may disappear completely. Sperm production decreases over time. • Testicular size: Shrinkage of testicles occurs over time. 	<ul style="list-style-type: none"> • Body fat: Many individuals will experience redistribution of body fat towards the abdomen rather away from thighs and buttocks; described as a more “masculine pattern”. • Facial and body hair: Over time thicker and darker hair will grow, although beard growth may take up to a few years. • Voice: Testosterone leads to deepening of voice; changes usually occur within one year of starting treatment. • Menstruation: Individuals tend to stop getting a period within six months of starting treatment. • Clitoral and vaginal changes: the clitoris enlarges and may become erect when stimulated; growth to around 1 inch; the vagina loses lubrication. • Skin: Baseline acne may worsen as skin becomes more oily. • Fertility: Testosterone typically prevents AFAB individuals from becoming pregnant, but this is not definite. It is therefore necessary for AFAB individuals to have access to appropriate forms of birth control and condoms to prevent unwanted pregnancies and sexually transmitted infection. • Emotions: Some patients report feeling emotionally unbalanced, irritable, and aggressive. These can usually be managed by your health provider, without stopping treatment.
<p>Treatment form</p>	<p>Treatment usually involves:</p> <ol style="list-style-type: none"> 1. Estrogen, typically 17-beta-estradiol <ol style="list-style-type: none"> a. Most common: pill (oral), injection, patch (transdermal) 2. A medicine to block testosterone, often referred to as an “androgen blocker” 3. Sometimes, a medicine called progestin or progesterone is added 	<p>Most common: injections, gel</p> <p>Other: bioidentical hormone pellets, patch (transdermal)</p>
<p>Common side effects</p>	<ul style="list-style-type: none"> • Nausea and vomiting • Headaches and migraine • Skin rashes 	<ul style="list-style-type: none"> • Headaches • Acne
<p>Risks</p>	<ul style="list-style-type: none"> • Blood clots • Breast cancer • Potential for chronic diseases such as diabetes, high blood pressure, high cholesterol 	<ul style="list-style-type: none"> • Heart disease • Increased cholesterol • Increased blood cell count

Androgen blockers: For individuals undergoing hormone therapy with estrogen, they often must take an androgen blocker or medication to reduce testosterone in the body. These medications decrease physical traits that are typically associated with testosterone such as facial hair or male pattern baldness. The most common androgen blocker prescribed is called spironolactone. Taking an androgen blocker can support estrogen and reduce to overall amount of estrogen you need to get the same effects. This helps to decrease risks associated with taking estrogen.



Video: Hormone Therapies with Testosterone



Video: Hormone Therapies with Estrogen

Check out these videos to learn more about hormone therapies

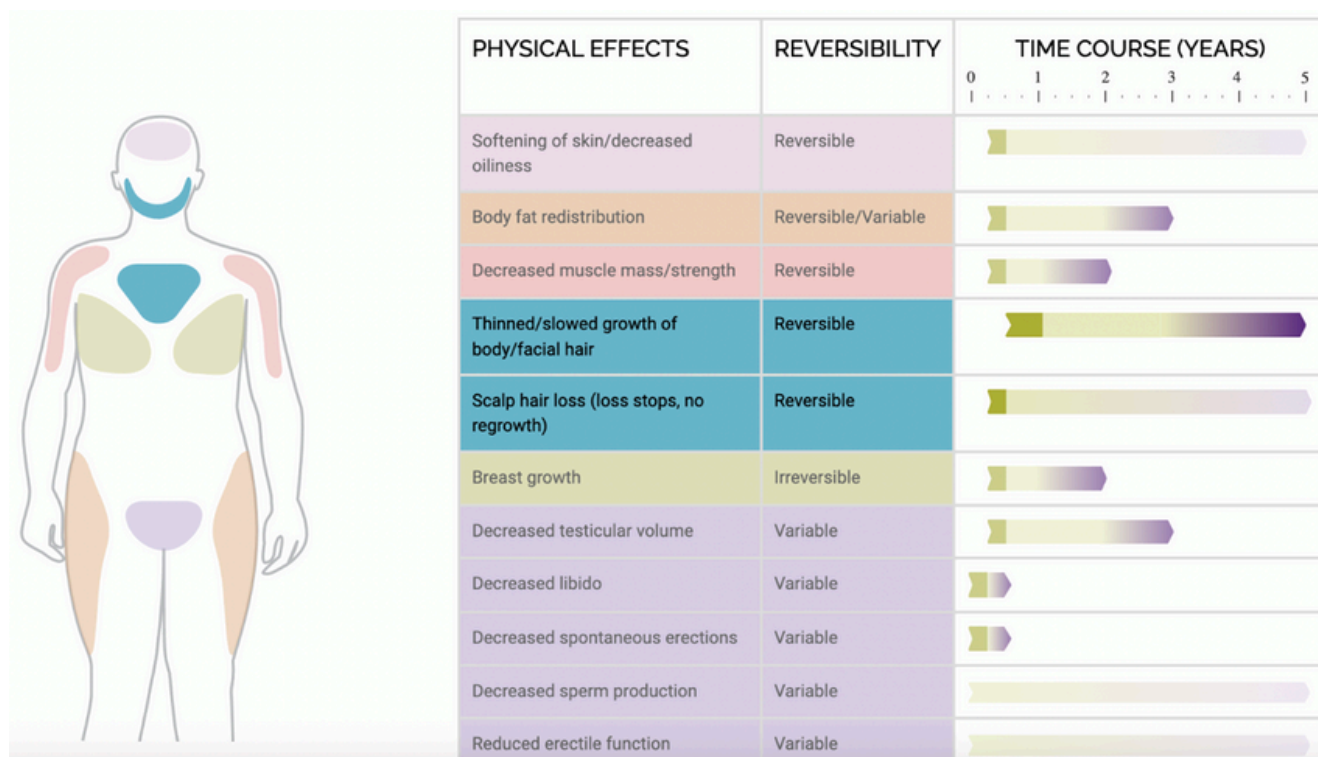
What does the timeline look like for gender affirming hormone therapy?

- Each person responds to hormone changes differently. These changes are related to your age, the hormone receptors in your body, and the way your body responds to the medicine.
- You can better understand the expected changes by checking out the timeline resource from **Rainbow Ontario** (see below)

What are the risks of gender affirming hormone therapy?

- The majority of changes caused by gender affirming hormones are irreversible.
- Estrogen: If hormone treatment is stopped, breast growth and decreased sperm production may be permanent. Other changes will disappear.
- Testosterone: Taking testosterone for a long period of time may increase the risk of certain cancers and heart disease.
- Gender affirming hormones are relatively new. This means there isn't a lot of existing research to fully understand long term effects of gender affirming hormones. Regular follow-up with your team of health providers is important to keep track of your health while receiving treatment.

Gender affirming therapy with estrogen:



Rainbow Ontario

Gender affirming therapy with testosterone:



PHYSICAL EFFECTS	REVERSIBILITY	TIME COURSE (YEARS)					
		0	1	2	3	4	5
Skin oiliness/acne	Reversible	█	█	█	█	█	█
Deepened voice	Irreversible	█	█	█	█	█	█
Body fat redistribution	Reversible/Variable	█	█	█	█	█	█
Increased muscle mass/strength ^b	Reversible	█	█	█	█	█	█
Facial/body hair growth	Irreversible	█	█	█	█	█	█
Scalp hair loss ^c	Irreversible	█	█	█	█	█	█
Cessation of menses	Reversible	█	█	█	█	█	█
Clitoral enlargement	Irreversible	█	█	█	█	█	█
Vaginal atrophy	Reversible	█	█	█	█	█	█
Infertility	Variable	█	█	█	█	█	█

Rainbow Ontario

What about shots?

If your transition involves giving yourself shots, check out the following resources:



Video: “Subcutaneous Injection Training - Introduction”



Video: “Subcutaneous Injection Training - Injecting the Medication”

Check out these injection training videos from Dr. Kevin Hatfield at The Polyclinic in Washington State

Fenway Health
Transgender Health
Injection Guide



Fertility Considerations

Kids of my own? What?!?! I am too young to think about that! Even though having kids of your own may seem far away, it is important to think about what your future family might look like before starting any gender affirming medical treatment. There is a chance that gender affirming hormone treatment may change your fertility permanently. Talking about your options with your relatives, friends, health providers, and/or counselor can help you think about your options.

Some things to consider



- 1 Is having children something you could see in your future?
- 2 Would you consider other options besides having biologic children (such as adoption)?
.....
Preservation (which means storing your eggs, embryos, or sperm) is expensive and currently not covered by insurance. What are your financial options?
.....
- 3 Who can you discuss this with, or speak to about your decision?
.....
Have you gone through puberty already? If you have not gone through puberty, there are different considerations. Speak to your health provider.
.....
- 5

Fertility Preservation Options

Transgender women and those receiving estrogen-based therapies	Transgender men and those receiving testosterone-based therapies
Sperm preservation	Oocyte cryopreservation (egg)
	Embryo cryopreservation

Other transition related questions

If you are currently sexually active, you should continue to use barrier methods like condoms to prevent sexually transmitted infections. Even though you are on hormone treatment or puberty blockers, there is still a risk of pregnancy or getting your partner pregnant. **Here are some options** (you can also google search “ACOG birth control options” for this resource). ACOG is the American College of Obstetricians and Gynecologists. **Bedsider** is another good resource to learn about contraception and sexual health.

Do I have to think about birth control while I am receiving puberty blockers or gender affirming hormones for my medical transition?



Do I need to see a mental health provider or receive therapy to medically transition?

Most health providers recommend connecting with a mental health professional who has experience working with gender-expansive patients. They can provide helpful support before, during, and after your medical transition. Mental health providers can also help you talk through tough decisions and changes as you get older. They can also support your family as you go through those changes. If doctors or insurance companies need letters, your mental health provider can help you with those too.



What about surgery?

- Some transgender, gender-diverse, and Two Spirit individuals choose to have gender affirming surgery as part of their journey.
- Some states and some surgeons require that you must be 18 or older and have lived for 1-2 years as your chosen gender before you can have surgery.
- Surgery can be expensive, and your insurance may not cover it, so it is important to talk to your provider and health team about your options. They can help you find the right surgeon and help you navigate the financial details involved. If you're accessing care at a tribal or federal clinic, surgery may require a referral for care at a different facility. It can be very difficult to get these referrals, which are known as Purchase and Referred Care requests, approved.
- There are a number of surgery options available. They are described below briefly. Remember, gender affirming surgery is completely optional. If you are interested in surgery, talk to your health care team about your options and what works best for your journey. You can also read more about these [here](#).
 - You may have heard about top surgery. Top surgery includes mastectomy (removal of breast tissue), chest reconstruction, or breast augmentation.
 - You may have also heard about genital surgery types, including hysterectomy (removal of the uterus), salpingo-oophorectomy (removal of the ovaries and fallopian tubes), or orchiectomy (removal of the testes). Genital reconstructive surgeries are also related options.
 - Voice surgeries and facial feminization procedures are also options.



What about state laws prohibiting gender affirming care for minors?

- As of May 2024, 25 states have banned best-practice medical care for youth.
- At the same time, 14 states have shield laws protecting gender affirming care for minors and the doctors who provide it.
- If you are living in a state with a care ban and aren't sure how to access care, resources found on [2S-SupportBoat](#) may help.
- If you're not sure about the status of care in your state, you can use [this map](#) to find out.



If you're wondering how to help youth in other states with care bans, the Gender Affirming Care Strategic Vision and Action Plan in the Document Library at the [2S-Support Boat website](#) has tips and tools you can use to work with adults and advocate for trans rights.

You Are Your Best Advocate

Your Sexual Health

Transgender, gender-diverse, and Two Spirit youth may experience risk when engaging in sexual activity. You can protect yourself and your friends by learning more here. You are a gift from the Creator. Draw upon your strengths and knowledge to overcome these risks.

General sexual health and wellness resources:



Sexual health, wellness, and relationship exploration: **“Safer Sex for Trans Bodies”**



“Trans Youth Sexual Health Booklet”



Bedsider has further reproductive and sexual health information



DoxyPEP or Doxycycline Post-exposure prophylaxis is a medication used to help prevent sexually transmitted infections. Info found at the **2S-Support Boat**



We recognize that **stigma against larger bodies** is common in medical settings. Here’s a resource that may help advocate with your provider around body size and health. Info at **2S-Support Boat**

Safer sex guide by identity:



Primed2: A Sex Guide for Trans Men into Men™: how to have safe sex, prevent HIV and sexually transmitted infections, and find safe sex

Trans Men



“Brazen 2.0: Trans Women’s Safer Sex Guide”

Trans Women

Protection is Community LOVE

IA² INTERNATIONAL ASSOCIATION FOR INDIGENOUS AGING

Play it Safe

If you are sexually active, other ways to reduce chances of being exposed to mpxv until after vaccination include:

- Reducing skin-to-skin contact as much as possible
- Covering areas where rash is present with condoms, gloves, clothing, latex/leather fetish gear
- Washing hands, fetish gear, sex toys, and any fabrics before and after having sex
- Consider masturbating together at a distance
- Have virtual sex

For more information & resources, visit: <https://bit.ly/VXSite>



Sexual freedom is sovereignty

DoxyPEP gives sexual freedom

Ask your provider about DoxyPEP today!

THE RAVEN COLLECTIVE



You Are In This World For a Reason

Transition & Embodiment Fast Facts



You Are In This World For a Reason

Mindfulness and Meditation

Your journey as a transgender, gender-diverse, Indigiqueer, or Two Spirit individual is unique. The journey is filled with many changes, emotions, and thoughts, so feeling overwhelmed is natural. You can use mindfulness as a tool to grow along your gender affirming journey. There may also be times when you need to reach out to others for support, and that is okay, too. When you are feeling overwhelmed or hopeless, think of our many Indigiqueer Ancestors who loved and were loved, and found beautiful and creative ways to live and express themselves since time immemorial.

What is mindfulness?



Mindfulness is medicine. Mindfulness is about living in the present and accepting where you are in your journey. It can give you space to think about the difficulties you are having and reflect on how they fit into the bigger picture. Mindfulness can be centering because it helps you recognize how your personal journey is related to your ancestors and their journeys. Taking time to honor and care for your spiritual and emotional self is important to staying healthy.

Mindfulness also involves loving yourself and giving yourself compassion. This can help you find strength as you progress on your journey. Mindfulness is also a way for you to build up your resilience—how well you adapt to and overcome changes, challenges, and stress.[28] Resilience can help you trust more in your journey.



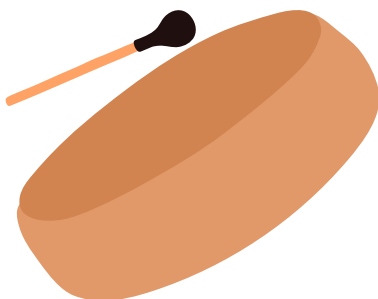
What are some ways to practice mindfulness?

Meditation and poetry! Here are some meditations that you can do on your own, with family members, or with friends. You can read through the text or listen to some of the audio files or videos whenever you have the time. Most of them are short and easy to do in less than 15 minutes!

-  **Guided meditations** for personal use, related to self-compassion, mindfulness
-  The **CalmHarm interactive app** for youth that can help you stay safe and manage self-harm using breathing and relaxation techniques.
-  **Video** about mindfulness shared through a story.

Indigenous Mindfulness Practices

Drumming and Singing



Intentionally activating the Vagus nerve can calm your body's fight-or-flight response. The nerve is connected to your vocal cords and the muscles at the back of your throat. You could dust off your drum and sing a song from your family/tribe.

Humming your favorite bop, chanting affirmations, and even gargling warm water or tea can have a similar calming effect!

Breathe with the Directions

4. NORTH- Repeat steps 1 to 3 until you feel re-centered.

3. WEST- Slowly exhale through your mouth for 4 seconds.



1. EAST- Breathe in, counting to four slowly. Feel the air enter your lungs.

2. SOUTH- Hold your breath for 4 seconds. Try to avoid inhaling or exhaling for 4 seconds.

Note: your tribe may have its own teachings regarding each direction and what each brings/represents. Those teachings can easily be built into your meditation. Ask a family member, leader, elder, or knowledge bearer for more information about this wisdom. You could say them aloud or reflect on them silently as you do your breaths. Also, your tribe may honor more than four directions, which can also be accounted for in the way that you utilize this culturally adaptable calming and grounding exercise.

Ground Yourself

Sit or stand with your feet firmly planted. Many prefer to do this with bare feet directly on the earth/ground, but you can do whatever you are comfortable with (shoes, indoors, etc.). Notice the stability of the ground beneath you. Begin to imagine the feeling of Mother Earth's energy moving up from the ground into your feet. Then slowly imagine it moving up through the rest of your body. Imagine it moving upward and out your limbs as if you are a tree and it is moving from roots to the branches.



Other Helpful Meditative Practices

Reading poems can also help you practice mindfulness. When you read poetry, your creativity begins to flow, and your mind can start to form new connections between thoughts and ideas. This may help you remain present in the moment and reflect on your journey.

The Center for Mindfulness at UC San Diego shares a number of [poems online](#) that many youth and adults find helpful for meditation. You can also find poems written by Indigenous individuals from different nations [here](#).

Other techniques for mindfulness and relaxation include going for a walk, hiking, listening to music, going fishing, swimming, writing in a journal, being in nature, and using some breathing techniques. Breathing deeply when you are stressed can help you lessen some of your body's reactions to stress.

Personal Wellness Plan

It is important to remember that we all have times when we may struggle to navigate or manage our own mental health or wellness. As Indigenous people, we have always been communal, as well. For these reasons, we can account for measures we may need to take if we need help and support navigating our own mental health needs. You can also take your mindfulness to the next level by creating a self-care and wellness plan. Here is one example/template:



The **Wellness Recovery Action Plan workbook** also has useful exercises for overcoming distress and improving wellness

Indigenous Ancestral Magic as a Wellness and Meditative Practice

As Indigenous Two Spirit, trans, and gender-diverse people, we can also gain inspiration and hope from our Indigiqueer ancestors. Though limited, we do have access to stories and even images, in some cases, of prominent Two Spirit figures. Historical figures like those listed on **page 10** demonstrate widely-accepted practices of gender diversity present in Indigenous societies going back through history.

Two Spirit people can find it frustrating to live in a mainstream culture defined by binary and limited understandings of gender. Every generation of Two Spirit people have found ways to live and thrive, even before Western medicine, hormone therapies, and gender affirming surgical procedures. When faced with the very real limitations of gender affirming medicine, it may be useful to imagine the lives of our Two Spirit ancestors and draw inspiration from them, their creativity, and their ways of presenting themselves to their communities and societies.

In this exercise, spend a week in the mind of a prominent Two Spirit historical figure. Based on all that you are able to find out about that person, how do you think they might navigate decisions you are faced with making today? Can they help you find your magic?

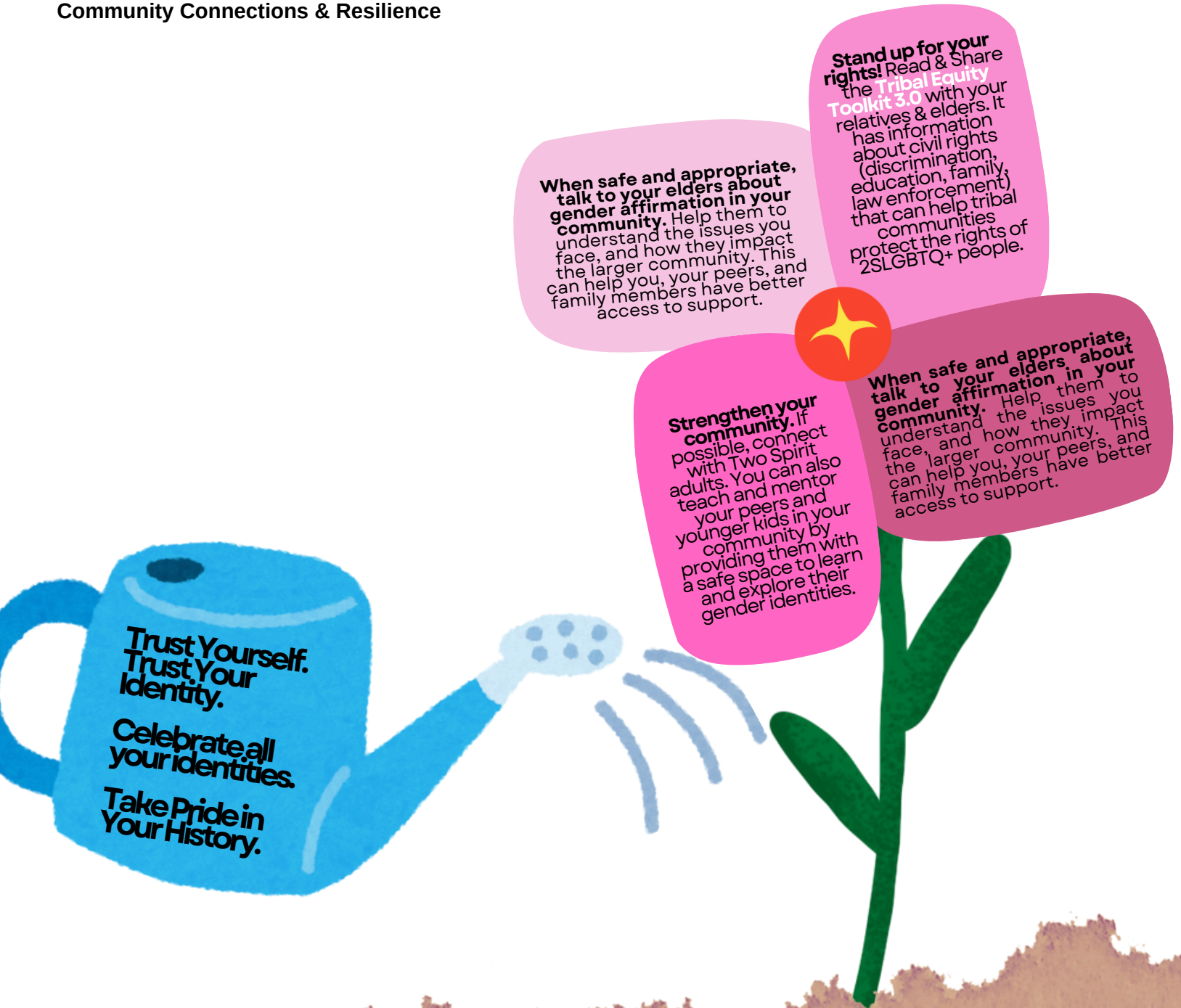


You are a continuation of your Ancestors

Your Community

As a young person, you play an important role in creating new norms and raising new ideas in your community. This can be as simple as talking to your friends and classmates about gender and gender identity. The graphic below suggests some other ways you can get connected in your community.

Community Connections & Resilience



Community Involvement

It can be tough at times to feel fully immersed in your culture and traditions. For example, Indigenous youth and adults who identify as transgender, gender-diverse, Indigiqueer, and Two Spirit may feel uncomfortable participating in Pow Wows or ceremonies with categories for only men or women. Regalia choice and presentation at these events can also cause discomfort. In these situations, you can ask event leadership or the arena director if it would be possible to enter into a category of your choosing. You can also speak to trusted community members who may be able to connect you with other transgender, gender-diverse, Indigiqueer, and Two Spirit friendly events.

You can also look for opportunities to engage in the larger Two Spirit community through Two Spirit gatherings and specific Pow Wow events. “There is magic at the Two Spirit Pow Wow. Our people feel safe to be themselves.”[29] These events create a space for individuals of all genders to celebrate both their gender identity and Indigenous identity. **Two Spirit Pow Wows** are setting the example for other Pow Wows to remove the gender category during events.

 **Arizona**

 **Bay Area, San Francisco, CA (BAAITS)**

 **BAAITS Powwow Video**

 **Phoenix Indian Center and South Mountain Community College**

Celebrating yourself at these events can help you find your place within your own culture and traditions. It can also help you use your Indigenous identity to celebrate and support your gender identity, and vice versa.

Gatherings and Youth Camps and Stories About Gatherings

 **Montana Two Spirit Society Annual Gathering**

 **Two Spirit youth camp**

 **Seattle’s Annual Indigiqueer Festival**

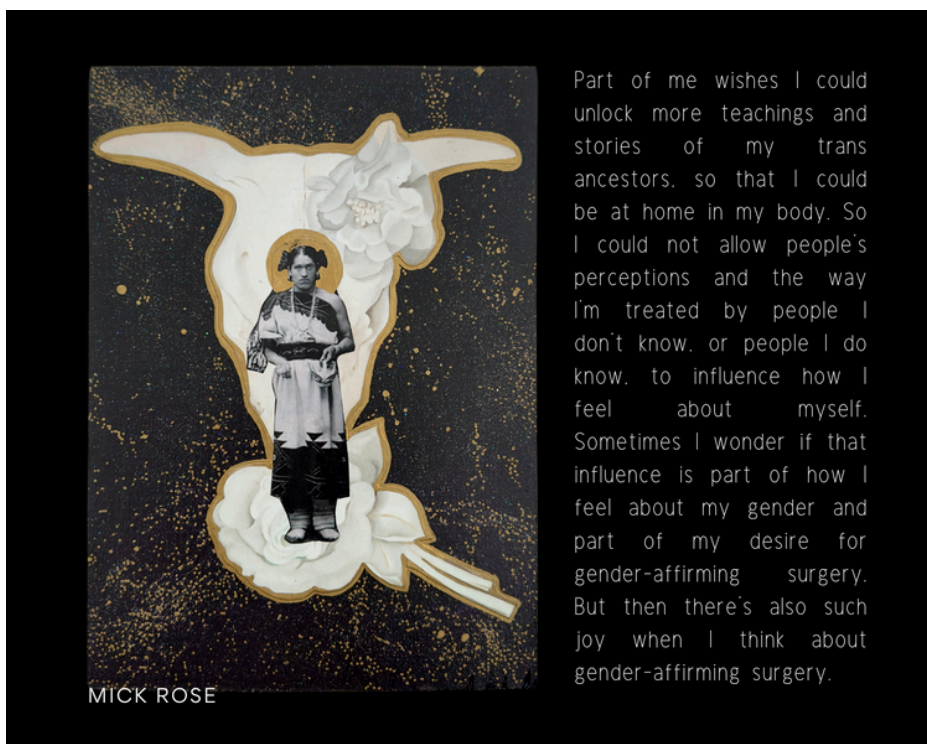
Photos of 2024 Indigiqueer Festival by Evan Benally Atwood



Looking for other ways to get involved in your community and share your gender identity?

Art is another great way to share your identities! Do you like painting? Acting? Beading? Dancing? Making people laugh? Think about ways you can share your story and experiences with your community in a creative way. Expressing yourself through art can help you grow as a transgender or Two Spirit community member. Art is a powerful form of medicine.

The image to the right is part of a story shared between Mick Rose (they/them), Diné, Omaha & Pawnee Nations, and the Paths ReMembered Project in 2022. Mick is able to use art to move through feelings and emotions about life, transness, and the power of our Ancestors.



Additionally, Two Spirit artist Ryan Young created this **Eighth Generation blanket** to express Two Spirit struggles. The crow comes from the Native story below:

“The story goes that the crow was once very colorful and had a beautiful singing voice, but during a forest fire, it spent so much time trying to help the other animals that its colorful feathers became blackened with soot and its beautiful singing voice turned hoarse from the smoke... this story reflects all the struggles and sacrifices made by Two Spirit people to get to where they are today. The blanket mirrors the story, as one side features two brightly colored crows while the other side the two crows are all black.” [30]

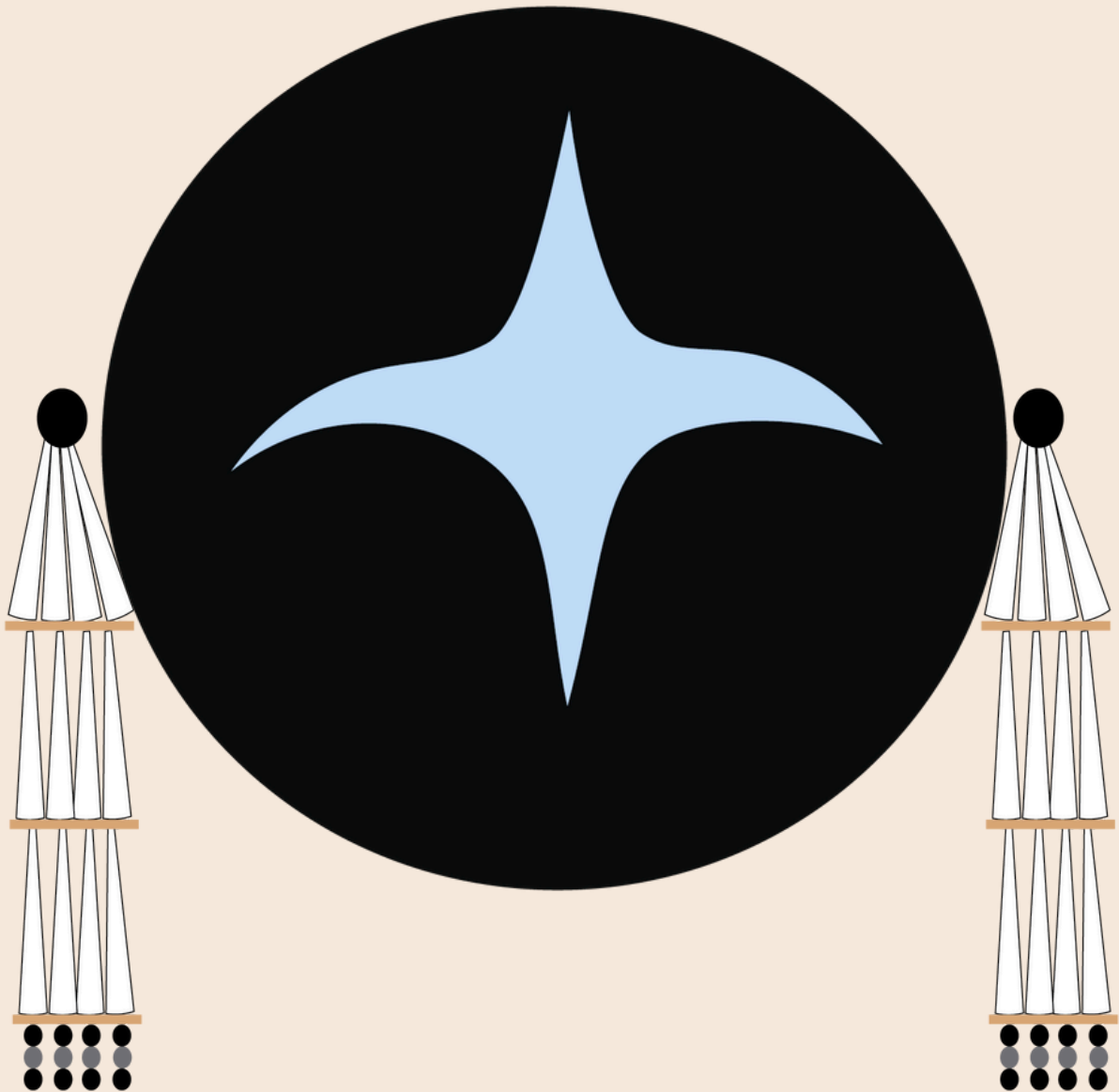


What about music?

There are numerous Two Spirit, transgender, and gender-diverse musicians including Black Belt Eagle Scout, Quinn Christopherson, Jeremy Dutcher, Marx Cassidy, and Roger Kuhn, to name a few! Check out these three videos by **Quinn Christopherson**, **Marx Cassidy** and **Tony Enos**.

Section 3

Families & Relatives



For Families & Relatives



“What kind of ancestor did my ancestors envision me to be? What kind of ancestor do I want to be? What kind of ancestor do I want or envision future generations to be?”

Dr. Karina Walters[31]
Choctaw Nation of Oklahoma

It is normal for you as a parent or relative to feel overwhelmed by your child’s journey. For many families this journey involves a lot of questions. You may feel lost, confused, and out of place. You may have a strong desire for support. The information presented here hopes to help you understand your child’s journey. It also hopes to provide you with comfort and support along this journey. You have a unique role as a caregiver and have the wonderful ability to positively influence your child’s journey. Your child needs you now more than ever.

This document is not meant to replace the support that you may find in your local health clinics and among community members.

This Toolkit can be shared with your support figures, tribal council, and Elders to increase education and spread awareness. Additionally, this **parenting FAQ** offers questions and answers from other parents of Indigenous transgender, gender-diverse, and Two Spirit youth.

In some scenarios, support may not be available, or reaching out to others may not be the best safety decision for you and your child. In those cases, we hope that the information in this section and in the remainder of the Toolkit will provide you with tools to support your child on your own if necessary.



Photos of 2024 Indigiqueer Festival by Evan Benally Atwood

Celebrating Your Child

Family support should move beyond just *acceptance* towards **celebration!** This is a critical time in your child's life and your support is important. ***Your child needs you now more than ever.*** Your celebration will also help create a community that is safe for your child and future children to come. Your celebration is good medicine.

How can you celebrate your child?

Aim to bring back traditional ways of respect and ceremony and recognize that transgender, gender-diverse, Indigiqueer, and Two Spirit Ancestors were celebrated. Remembering this love and acceptance and sharing it with current generations can help bring back the supportive environment of your Ancestors.

Family support and acceptance are essential to the health and happiness of 2SLGBTQ+ children! Two Spirit, Indigiqueer, transgender, and gender-diverse youth with family support have better outcomes compared to transgender youth without family support. 2SLGBTQ+ youth with family support:

- ♥ have similar levels of anxiety and depression as cisgender siblings and peers[32]
- ♥ are more likely to have positive adult health outcomes such as self-esteem, social support, and better general health[33]
- ♥ are less likely to experience depression, substance abuse, and suicidal ideation and attempts[34]
- ♥ have improved self-esteem and coping ability[34]

Transgender children who have socially transitioned (live in accordance with their gender identity) also have levels of depression and anxiety similar to their cisgender peers.[35]

“For me, once I realized that my family was responding to me and interacting with me with respect and acceptance, and once I realized that this respect and acceptance was a legacy of our traditional Native past, I was empowered to present my whole self to the world and reassume the responsibilities of being a Two Spirit person.”

Michael Red Earth, Two Spirit activist[25]

Frequently Asked Questions

Since gender identity is often established by 2-3 years old, many children may identify with a gender different from their sex at birth from a young age. They may not realize the mismatch or have discomfort from the mismatch because they are so young. As a child gets older, they may start to experience discomfort with who they feel they are on the outside versus who they know they are on the inside. These feelings often escalate around puberty when the body starts changing and the child further realizes their feelings will not resolve.

Why didn't my child tell me sooner?

Youth may struggle with the “right way” to tell their parents and relatives because these individuals tend to be the most important in their lives. Some youth may be worried about not being accepted, understood, supported, or loved. Others may not have the words to explain how they are feeling or to express their identity. This may be because of their developmental stage or because of a lack of exposure to the language and concepts used to describe gender and gender identity.

In many cases it may be easiest for youth to first share their gender identity with friends to help them practice and gain confidence telling people. Friends may be more likely to accept them, and the “stakes are lower” since there is less fear of outright rejection and creating familial worry. In this journey, youth may learn more about themselves and their identity, and how they want to present themselves, which may make telling relatives later on easier (for the youth and relatives receiving the information).



Why didn't we notice—did we do something wrong?

Many parents and relatives struggle with the fact that they never realized signs of their child being transgender. This is common since youth have often spent years trying to better understand their own identity and learning to deal with the discomfort they feel with their bodies. They may hide their identity not only from their family and relatives, but also from themselves. This makes it even more difficult for others to recognize signs.

Even if there were signs during childhood, you as a caregiver may not have been aware of what to look out for so may not have recognized signals that were present. It is also common for families to characterize some of their child's behaviors/expression as a temporary phase (such as changing their hair or wearing different types of clothes) rather than part of the child's gender exploration or journey.

If you currently have a young child who is discussing gender identity or showing signs of exploration, Planned Parenthood has some [helpful resources focused on preschool aged children](#).

At the end of the day it is most important to focus on the present and future, and to think about how you can best support your child moving forward. Celebrating them as they are now will help them love themselves and lead happier lives. Also remember that your child is sharing this with you now because they trust you. They need you now more than ever.

Is it normal to be scared as a parent or caregiver?

We are scared.

Fear can be a common initial reaction to learning a youth in your life is transgender or Two Spirit. You may:

- fear for your child's safety and want to protect them from harassment.
- fear that their identity will cause them to experience physical harm—from others, or from themselves.
- fear that your child has a mental illness.
- fear your family members and relatives will judge your child.

While these and many other fears are valid, it is important to remember that **your child needs you and your support now more than ever**. Indigenous Ancestors have **honored** transgender and Two Spirit individuals as **sacred**, and moving forward we all must do the same. In many tribal traditions, Two Spirit people are the protectors of the rest of the village. With that in mind, balance your fears about their safety with their need to also feel involved in supporting and protecting others. Your support will help increase your child's confidence, self-acceptance, and comfort level sharing sensitive information with you. All of these can help your child remain safe.

Your concerns about mental illness may be related to societal ideas concerning transgender or more broadly LGB individuals. Gender expansive expressions are not signs of mental illness. This idea is typically a result of a colonized view of gender, and is contrary to Indigenous beliefs that celebrate & honor transgender and Two Spirit relatives.

Lastly, it is natural to be concerned about the opinions of your extended family and community. However, this journey is about your child, not your relatives and their opinions. You can educate your relatives about gender identity and expression and remind them of historical esteem for transgender and Two Spirit individuals. This can also help you work towards building a network of allies in your community.



“Often family members experience transition as a living death, wherein the trans-identified person is perceived as somehow present and absent, the same and different, at once.” [36]

I have heard of something called the grieving process. What is that?

Many parents go through a period of grieving after they discover that their child identifies as transgender or Two-Spirit. Grieving may also take place after medical transition has occurred. Grieving is different for each individual, ranging from feelings of sadness to feeling as if one's child has died and will never return.[37]

These feelings are natural. They can be related to you realizing that your child's future will not be exactly the same as you had imagined it. This is often difficult for parents. As hard as it may be, it is important to accept these feelings and channel them into support and respect. Also remember to take care of yourself so that you can better take care of your child and support them through this journey. Trust yourself and your child along this journey, and know that your emotions and experiences are authentic.

It may be helpful to continue reflecting on your feelings throughout the journey. Talking circles or support groups for parents going through similar experiences may help.

It is okay to tell your child that you are processing their journey, but you don't want to place an extra burden on them by showing them you are afraid, upset, or unsure of what to do next. Do not expect them to be your support system—they are already being so brave to tell you about their identity and journey. Asking questions can help both you and your child progress along the journey, but try to remain unbiased and non-judgmental while doing so. Your child needs you now more than ever.

Fostering Resilience

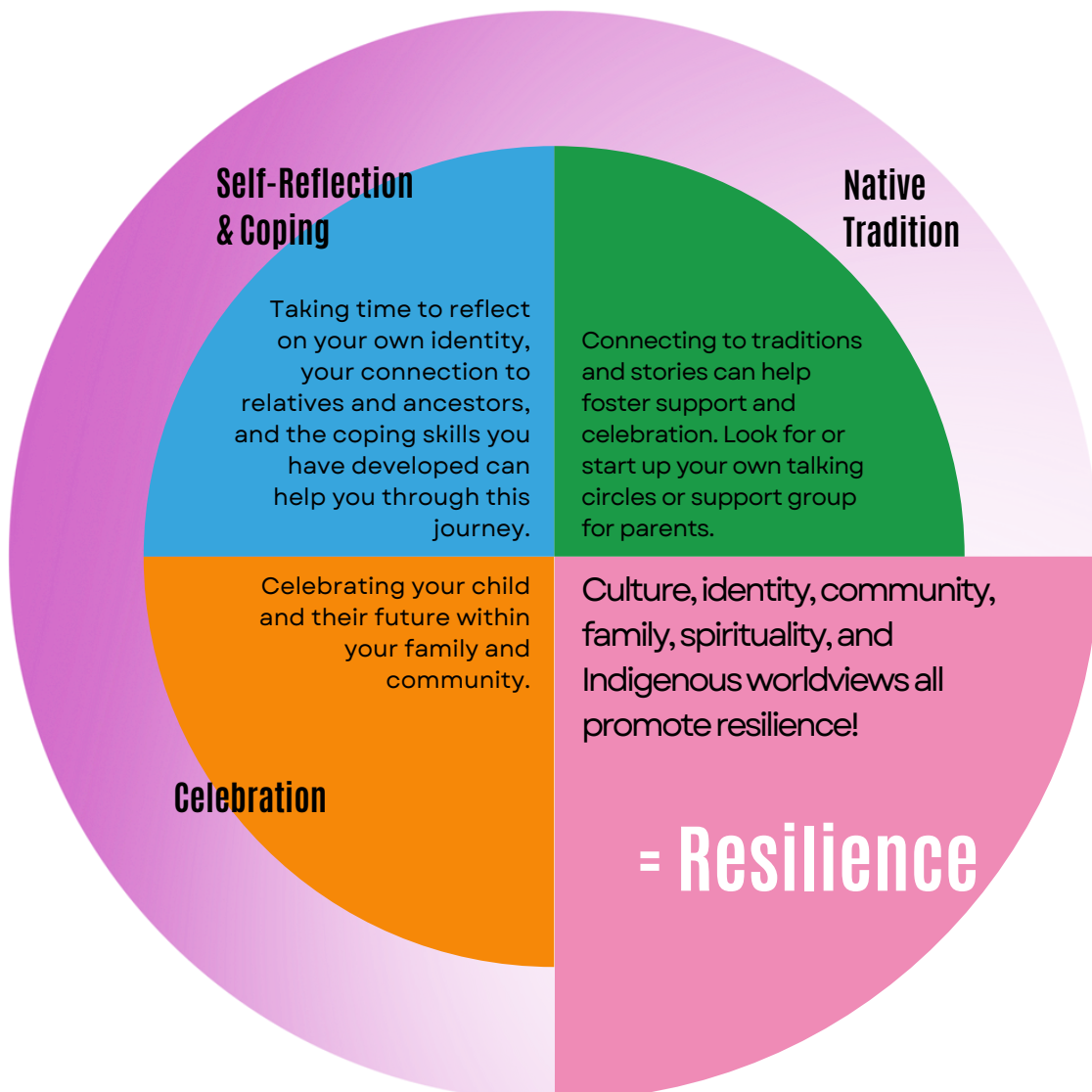
The journey you and your child have embarked on may be filled with strong emotions, unpredictable changes, and unanswerable questions. Trust in your ability to succeed along this journey, no matter the challenges you face. Trust is healing.

Your resilience is defined by how you can handle tough times and change for the better. Resilience is a sign of your strength.

“

Human resiliency is like a willow tree branch, able to stretch, bend and then come back to almost the exact shape, but changed. When we experience life events that require us to be resilient, who we become is also changed.”[38]

You may find the following techniques helpful in strengthening your resilience: self-reflection and coping, connecting with Indigenous medicine and traditions, and continual celebration of your child.



Self-Reflection & Coping

- Mindfulness helps us to compare two contrasting things or ideas to each other, and to accept both without judgement. This process helps us become aware of the present moment and release fears about the past and the future.
- Meditation is a mindfulness tool that helps us reflect on our emotions and experiences. Self-reflection allows us to be present and listen to our hearts.
- We also learn self-compassion through mindfulness and meditation. This is especially important as we go through life changes. When we practice self-compassion and treat ourselves with kindness, we can let go of difficulty and move forward. Positive thoughts and self-compassion are good medicine.
- You can learn more about self-compassion in this [TED talk by Kristin Neff](#) and on her [website](#).
- Self-reflection can also assist with reconnecting to traditions. We can think about where our lives and challenges fit into the larger picture, and how our actions relate to what Ancestors experienced. Self-reflection is grounding.
- Mindfulness and meditation are especially useful when accessing mental health resources is difficult. They can be done anywhere, on your own, and are free.
- You can teach your child these skills so they can develop their coping mechanisms and resilience from a young age.
- Watch [this video](#) with your child to learn more about mindfulness through the story of two wolves.
- These are important steps in supporting youth. You can learn more about this by texting **MIND4HEALTH** to **65664**.

(Re)Connection & (Re)Membering

Reconnecting with Indigenous medicine and traditions is another important step towards building resilience. Finding talking circles or support groups in your community, or online sources of connection, may help you accomplish this. Any action that helps you and your child reclaim pride in their transgender, gender-diverse, Indigiqueer, or Two Spirit identity can help to erase colonized, binary gender expectations.

“

“Two spirit identity is about circling back to where we belong, reclaiming, reinventing and redefining our beginnings, our roots, our communities, our support systems and our collective and individual selves.”

Dr. Alexandria Wilson

Two Spirit professor from Opaskwayak Cree Nation[2]

“

"My main outlet is online because that's the only place I'm really allowed to exist as me. It's a community that I feel I definitely belong in. ... For other people I've met who are in tribes that went through a lot of forced assimilation where they were ripped from their traditional lands, where there are very few people who know anything anymore, or there's literally no-one who knows anything or anyone who wants to tell you anything, so it's been interesting finding that [Indigiqueer] community online. ...That's the only place where I can connect to it because in person my family knows everything; where I'm going, what I'm doing, who I know."

Coyote

21-year-old, Two Spirit transgender man

Embracing community and online sources of connection are so important for healing. They may help promote your child's self-esteem and confidence, allowing them to “come in” to their true identity. The larger community also benefits, and traditions are revitalized.

Celebration

Celebration is the third technique you can use to develop your resilience. You and your child can celebrate their gender identity through the arts. Painting, graphic art, music, acting, dancing, and comedy are all ways transgender, gender-diverse, and Two Spirit peoples have shared their worldviews and experiences. Youth may find special connection to art as it creates an opportunity for them to express their individual views as they progress along their gender affirming journey. The arts also provide an opportunity for parents, relatives, and communities to celebrate transgender, gender-diverse, and Two Spirit people. Celebration can also come in the form of preparing sacred foods for your child, embracing them with good words and kind thoughts, and advocating for them in community ceremonies.



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Parent Perspectives

Strong and supportive Indigenous mothers in the Pacific Northwest share thoughts and experiences related to raising a transgender child.

What are some ways you have been able to take care of yourself through this journey?

“I had gone back into my own therapy and my counselor helped me. It was more about me putting aside my hurt and anger to really sit down and listen and accept [my child] and go on the journey. It was hard for both of us, it really was, and it took a while for us to get there...where we could talk to and understand one another. And then once we got to that point then I had to go through my mourning period. I was losing the [child] that I thought I had, and now I had a [another child]. So it took me a while to get to that point. It was hard. To say, ‘Okay, mourn this loss’, and become more loving and accepting of the [child].”

“All we do is rely on interpersonal relationships, and trust in the family.”

What advice do you have for other parents experiencing this all?

“No two journeys are the same. When I look back on it, I can see little signs from when [my child] was little. Elementary school, maybe even pre-school...that he wasn’t the female assigned at birth that I thought he was going to be. But he had to come out in his own time and his own way. Some people, boom, as soon as they can form a coherent sentence at 3 or 4...well not everybody is going to follow that path. There’s taking the time and being able to fully express yourself and to hear the other person...and be able to have a conversation. But whatever way you need to get to that point, I just hope that you can get to that point. Because things will be so much easier for everybody. Your thoughts, emotions, and identities...and be able to have real conversations and acceptance.”

What is your advice for people who want to connect to history to help with this journey, but grew up away from home or off the reservation?

“My family is a product of intergeneration trauma. My grandfather went to boarding school and literally had the Indian beat out of him, so he and my grandmother went out of their way to make sure my Dad and Dad’s family stayed away from tradition...When [my child] started coming out I was looking for history to see how [our] people dealt with transgender people...We have been taking comfort and solace in the large number of transgender and gender non-conforming and other LGBTQ within our community...we are trying to band together until we unearth some research that will get us back 100+ years to find out how this was handled traditionally.”

Important Note: As much as contemporary Indigenous communities have been shaped by centuries of violence and trauma, we are also shaped by our unique and inspiring ability to adapt, survive, and thrive. Be encouraged by the fact that you and your Indigenous youth are here. You survived despite all odds. Furthermore, you know who you are. In fact, Two Spirit traditions have survived and are here for you to reflect on in this guide. The opportunity to reflect on Indigenous survivance and thriving provides a new perspective during moments of change, even if it feels difficult.



Counseling can help with healing.

“All I know is that [my child] was so confused. It took a long time to listen and understand what the other was saying and going through. I hooked him up with a counselor...was able to help navigate through this. He still sees his counselor to this day, and they have a good relationship.”

Using pronouns and chosen names can take time to get used to.

“It’s tough but you can’t get down. Mistakes are okay, we are trying ...we’re slipping up. [I tell him] we’re human, we’re slipping up, please try to be patient and we will do better with it. I’m not perfect.”

It is natural for you to be afraid as a parent.

“Safety is a valid concern. My child isn’t gonna grow into the man he needs to be if I don’t let him leave the house. So I just have to trust that he’s listened to my concerns and that he makes good choices. I remind him that I’m worried about him and that I don’t want anything to happen to him.”

It is good medicine to engage in tough conversations.

“Talk about what happens on the news. We will watch ‘I Am Jazz’ together and talk about things that Jazz experiences. We have discussions together and that way we stay informed and we have an idea...and there will be times when I can say, ‘You see, this is why I’m scared’. I would recommend, have the conversations about these different topics. Granted bathroom bills may be bigger in [one state] than they are in [your state], but still have the discussion. Just because it’s over there doesn’t mean it won’t happen over here, or you won’t end up over there.”

“Don’t be afraid to have these frightening conversations. It’s a chance for everyone to get their point of view out, so there’s more understanding. And when there’s more understanding you can see where everyone is coming from and support each other with this.”



Photos of 2024 Indigiqueer Festival by Evan Benally Atwood

Support Groups for Families

Washington State

- **Transgender and Gender-Diverse Children Support Group**
 - Parent/family groups by child's age (3-9 years old, 9-13 years old, 14-20 years old, adult aged children)
 - Facilitated play group and tween group meets at same time as parent/family group
- **Ingersoll Gender Center:**
 - Support groups for students and significant others, families, friends, and allies
- **Gathered In This Place Two Spirit Drum**



Online information about Indigenous people who identify as transgender, gender-diverse, Indigiqueer, or Two Spirit is somewhat limited, but that doesn't mean you are alone. Tribal leaders and cultural centers may have a better sense of local support systems. There are also online opportunities to connect with parents from other tribal nations or communities.



Think about setting up talking circles for parents and families with similar experiences. This can help provide support and connect to traditional practices.



Always remember to think about safety for yourself and your child when seeking information.

National

- **City of Angels Two-Spirit Society** (Los Angeles):
- **Bay Area American Indian Two-Spirits** (San Francisco)
- PFLAG- **find a chapter**
- Online support group/forum from **Gender Spectrum**
- **Ally Parents:** Stand With Trans—phone call, text service as well as online information

If you or a friend needs any mental health support or is having a mental health crisis and/or suicidal thoughts, the following resources are available. They are all 2SLGBTQ+ friendly!

Crisis Services:

- **Trans lifeline:** 877-565-8860
 - Crisis line staffed by transgender folks, for transgender folks; toll-free; no active rescue*
- **The Trevor Project:** 866-488-7386
 - Crisis intervention and suicide prevention available 24/7 from counselors trained in supporting LGBTQ youth
- **Crisis Text Line:** text HOME to 741741 any time to start texting with a crisis counselor
- **988 Suicide Crisis Line:** If you need support, you can call, text, or chat with 988. Someone is available 24/7.
- Text NATIVE to 741741 for free, 24/7 support.
- **SAGE ELDER CRISIS LINE:** 877-360-LGBT (5428). Someone is available 24/7.

**NOTE: Some of these services may engage in active rescue (communicating information about suicide risk to local law enforcement when they believe it necessary to ensure safety).*

Finding Medical Care

There are many places where you and your child can seek care. If you're comfortable, you may access care at a local tribal or IHS clinic, or an urban Indian clinic. You may also access care at a larger hospital, free clinic, pharmacy, dental office, and even schools.

Where do I begin?

When seeking any kind of care for your child, it is important to think about finding a provider who has experience working with 2SLGBTQ+ patients. You may ask friends and allies in your community for their gender affirming care recommendations. You may also reach out to local 2SLGBTQ+ support groups, when available.

An online search using the general provider links listed below may also be helpful.

General Provider Search

- [WPATH provider search](#)
- [GLMA provider search](#)
- [HRC Healthcare Equity Index survey](#)
 - ratings for facilities across the US about their ability to provide gender affirming care for 2SLGBTQ+ people
- Comprehensive [clinical care map](#) for transgender and gender-expansive youth

Telehealth & Virtual Services

- You may be able to access gender focused care from an online provider.
 - For example, [QueerDoc](#) provides a wide range of health services.
 - To find similar options in your state, try googling a combination of the following words: telehealth, virtual health, online appointments for transgender or LGBTQ patients.

You may face challenges supporting your child and accessing gender affirming care in the wake of legislative changes. If you are living in a state where gender affirming care is banned, you can learn more about how to support your child [here](#).

If your child is able to find a provider who is affirming of their gender identity and willing to support them, that is such an important first step. If that provider finds themselves unable to write prescriptions for things like gender affirming hormones or finds themselves otherwise limited by anti-trans state or federal laws, you or the child's clinician can seek a clinician consult at [2S-SupportBoat](#) for support navigating to other options to get the care needs met.



Why is Mental Healthcare so Important?

As a result of the lasting history of settler colonialism and systemic inequity, Transgender, gender-diverse, and Two Spirit youth face experience increased risk of low self-esteem, substance misuse, and other mental health challenges. This increased risk results from biases and prejudice they experience in society. Indigenous youth face similar risks due to historical and intergenerational trauma. This makes mental health care even more important for Indigenous youth who identify as transgender, gender-diverse, and Two Spirit.

Mental health providers can help youth think through their feelings and concerns related to gender identity and possible transition. Mental health professionals can also help youth develop coping mechanisms that will be beneficial along their journey.

Early support from mental health providers and families is extremely beneficial to support youth in healing from current mental health challenges, and to prevent new ones. Mental health providers should not convince your child to accept a gender identity that does or does not align with their assigned sex at birth. Instead, their overall role is to create a welcoming space for youth to discuss and explore all of their identities. They are also great at helping youth develop strategies around disclosing their identity, helping with social transition, and building self-esteem and acceptance. The best healing takes place when culture and traditions are incorporated. Mental health providers also play a role as advocates and educators for parents, family members, and schools.[39]



Seeking a Mental Health Provider

The following graphic demonstrates some helpful tips to keep in mind when seeking mental health care. Mental health providers may not always be available in your community, and you or your child may fear being discriminated against, but it is important to seek help if needed. Your primary care doctor can be an extra resource to help you find mental health care. If your child needs emergency support, refer to the **Crisis Hotline section** of this Toolkit.

Are they a good fit?

- Does provider seem at ease talking with you and your child?
- Did your child feel comfortable during the encounter?

Does the provider have relationships with other 2SLGBTQ friendly providers?

Finding a therapist or counselor may take multiple tries-with multiple providers-before the fit is right.

Other Considerations

You've found one... now what?

Questions to Ask

Does the provider have experience working with children and adolescents dealing with similar gender-related challenges?

Give the office a call and ask about provider experience with similar patients.

Do they take your insurance? Are they scheduling new patients?

Does your child want to go to the visit alone, or with a friend or relative?

Types of provider:

- Therapist
- Counselor
- Social Worker
- Psychologist
- Psychiatrist

Search Options

- Word of mouth from primary care provider
- GLMA, WPATH, Healthcare equity index searches
- Virtual (online) care

Finding a Mental Health Provider

Section 4

Providers



Providers



Acknowledge: understanding your biases

A great place to start thinking about how you can best care for your Two Spirit and LGBTQ+ patients is to consider your own biases. It is difficult to accept that we may have certain biases, especially in a profession focused on helping and improving the lives of others. However, we are all susceptible to bias as a result of belief systems and exposures from a young age.[40]

Taking time to become aware of one's own biases can help lead to equitable, gender affirming care and the development of trust between provider and patient. It is not your fault that you may have been unaware of Indigenous gender expansive traditions, but it is now your responsibility to help gender-expansive individuals navigate a system that was not designed to meet their needs.

The **National LGBTQ Health Education Center** has developed a series of case studies focused on helping health providers address implicit bias related to 2SLGBTQ+ patients. You can find the **implicit bias test and a case study guide here**. It may also be helpful to take the **Harvard Implicit Assessment Test (IAT)** focused on sexuality, which can be accessed free of charge. This may help providers further understand their biases associated with gender and sexuality.

Ask, and Listen: how to begin the conversation with youth

There is no “right answer” to a perfect encounter with your 2SLGBTQ+ patient. However, developing a trusting relationship with them and understanding them as a whole person are some benchmarks to aim for.

Asking questions about the child or adolescent's pronouns is a great place to start. Because gender identity is typically formed between the ages of 2-4 years old, healthcare providers can begin asking questions about gender from an early age.[41] For young children, ask age appropriate questions such as “Do you think of yourself as a boy, girl, neither, both, or something else?” Other approaches can involve the use of a children's book that discusses gender identity and asking a child which book character they identify with (**see list near the end of Toolkit**).

As children get older, you can ask more specific questions about the child's pronouns. Doing so may help you assess the child's readiness to move forward in their gender affirming journey. It is best to ask about pronouns at the beginning of the encounter when you and the patient make introductions and greet each other. You also have a second opportunity to discuss pronouns and gender identity during the sexual history portion of an encounter or in the HEADDSS assessment (home, education, activities/employment, diet, drugs, suicidality, sex).

It is your decision whether to ask these questions and have these conversations with parents in the room, especially as each child grows up. In scenarios where discussions are between youth and provider alone, it is important to explain confidentiality practices. Refer to the discussion on informed consent in the following section (affirm and advocate: creating a welcoming space).

Similarly, asking questions about pronouns helps to normalize talking about gender identity in the healthcare setting. You can further normalize asking about pronouns by:

- Asking all patients these questions so it becomes part of your routine practice
- Telling your patients that you ask these questions each visit with all patients

Be cognizant of the fact that you may be the first person your patient is sharing this information with. It is important to educate and help connect your patient with resources, and to be supportive and celebrate with your patient throughout their journey. Ask the young patient if there are any particular ways they would like for you to use or safeguard that information, including but not limited to whether they would like the information to be used with their parents/caregivers.

Affirm & Advocate: create a welcoming space

The creation of a safe, inclusive, and welcoming space is critically important in providing gender affirming care. It is also important to recognize that, no matter how safe of a space we create, it may not always be safe for 2SLGBTQ+ individuals (and their allies as well) to be out to their families and communities. In these scenarios we need to remain supportive and allow 2SLGBTQ+ individuals to trust us in a space of support and respect. Youth may present differently in other settings besides a primary care or specialist office, such as schools and dental clinics; gender affirming care is critical across all of these settings.

A helpful initial exercise is to speak with your colleagues, youth, family, friends, and community members to determine what “welcoming” means to them. Seeking out community opinions and building upon Indigenous traditions often helps inform this. There is much diversity even within communities, so having this conversation can help address the needs of as many individuals as possible. Similarly, spaces should recognize that individuals may be experiencing discrimination and oppression as a result of their multiple identities. For example, a Two Spirit adolescent may be struggling with their gender identity in addition to cultural identity as an Indigenous person.

“

“There is no such thing as a single-issue struggle because we do not live single-issue lives”

– Audre Lorde

”

Creating spaces that address this intersectionality and are as safe as possible is a continual process; one that requires accountability and buy-in from everyone who creates the space and accesses it. There are a number of ways that we can work towards the goal of creating welcoming spaces, especially in the clinical environment.

Creating clinic ground rules and posting them in the waiting room and patient rooms can demonstrate a commitment to upholding the safe clinic space. Posting and sharing non-discrimination, diversity, and harassment policies that include sexual orientation and gender identity may also be helpful.

Next, place yourself in a patient’s shoes. Think about what they see and hear from the moment they enter the clinic until they leave. Below is guidance for **patient encounters**.

★ Intake

- How do front desk staff address patients? Do they ask for a patient’s pronouns? Where is this information listed?
 - Ask: What name do you go by?
 - Ask: What pronouns do you use?
- What forms are being used?
 - Is office staff handing out pink and blue colored intake forms or handouts? → switch to white or a color uniform for everyone
 - Are there opportunities to disclose pronouns, gender identity, and sexuality on intake forms?
 - Legal first and last name & chosen name (if different)
 - “Gender / Sex -> sex assigned at birth
 - Gender identity
 - Sexual orientation (only if relevant for care)
- Sex listed on insurance plan
- Are staff and forms using gender neutral language?
- Does the office/clinic have gender neutral ID bands and stickers?
 - For additional recommendations and sample intake documents, you can visit the Strategic Plan by the former Paths (Re)Membered Project in the Documents Library of the **2S-Support Boat**

★ Waiting Room & Patient Rooms

- Is gender neutral language used in posters and advertisements?
- Are gender neutral/all-gender bathrooms available?
- Are there signs that read ‘menstrual products’ rather than ‘feminine products’?


★ Encounter


- Does the provider introduce themselves using their own pronouns, and clarify the patient’s chosen name and pronoun (see section above)?
 - “How do you identify your gender?”
- I ask all patients what pronouns they use. “What pronoun would you like me to use today?”
- Does the provider ask a thorough history that includes gender affirming care?
 - “To help assess your health risks for ____ / to better understand your risk factors...can you tell me about any history you may have had with hormone use?”
- Does the provider mirror patient’s own language regarding their history, identity, body parts, partnership, etc.? Do they incorporate gender neutral language into the encounter?


- Are records in the EMR appropriate and accurate?
- Does the provider ask appropriate questions related to the medical/mental health issue for that encounter, rather than ask about gender related issues simply out of curiosity?


 **Physical Exam-** sensitive exams include:

- Patients assigned female at birth (AFAB): pap smear, gonorrhea/chlamydia screen, breast exams, mammogram (age dependent)
- Patients assigned male at birth (AMAB): testicular and prostate exams, appropriate HIV/STI screenings
- Intersex individuals must also be treated in a respectful manner that ensures they receive medication, screening, and treatment for overall health. It is important to avoid medically unnecessary surgeries. [Learn more here.](#)
- Note: Consider using anatomical language rather than gendered language during these exams.

 Each clinic and healthcare setting faces their own barriers that may limit the creation of a safe space. However, using some of the above strategies can help make small changes that will positively influence a patient's clinic experience. Similarly, they help create an environment that promotes 2SLGBTQ cultural safety. This has been described as a "set of congruent behaviors, attitudes and policies that enables the system to work effectively with diverse populations and to provide care and services in a sensitive, meaningful and knowledgeable manner" [42].

 Additionally, the American Academy of Pediatrics (AAP) released a policy statement in 2018, and **reaffirmed** the policy in 2023, entitled, "Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents". You can [access this statement online](#). It promotes a gender affirming model that focuses on family resiliency and freedom for each child to develop and experience life as their desired gender.

 Acknowledge the importance of your role as a clinician in each patient's journey.

 A note on informed consent: Informed consent rules vary from state to state so it is important to be aware of the regulations where you are practicing. Informed consent protects the autonomy of adolescent patients receiving care and recognizes that a physician's role is limited with some aspects of medical care. For example, in Washington State, physicians can protect medical information regarding sexual health and mental health after the patient is 13-14 years old (i.e. the information will not be shared with the child's parents or guardian). However, this does not cover gender identity or gender affirming care. Youth seeking this care typically must have parental permission before being prescribed puberty blockers or gender affirming hormones.

Affirm & Advocate: how to be an accomplice and supporter

By following suggestions provided in this Toolkit, you are well on your way towards becoming a supportive figure for your Indigenous 2SLGBTQ+ patients, even if you do not identify as 2SLGBTQ+ yourself. Other considerations include:

- listening to your patients and their families.
- asking about gender pronouns, gender identity, and chosen name.
- respecting confidentiality.
- understanding that not all patients you interact with will be out to their friends, families, and communities.
- considering patient safety when developing care plans.
- asking how you can be helpful and provide support.
- showing respect, even if you do not agree with a decision.
- recognizing your limits as an accomplice.

For non-Indigenous providers: Another component to being an accomplice for the youth you work with is being able to better understand their history and culture. Of course, each community has its own customs and traditions, but there are some common themes that one should think about when working with Indigenous communities. The following **Toolkit** created by the Montreal Urban Aboriginal Community Strategy Network offers wonderful suggestions and thought exercises to help allies listen, ask, build, and support Indigenous cultures and practices [43]. Additionally, one important component of being an accomplice within Indigenous communities is advocating for Indigenous medicine to be integrated to the clinical center and treated/reimbursed by insurance with parity to Western medical procedures.

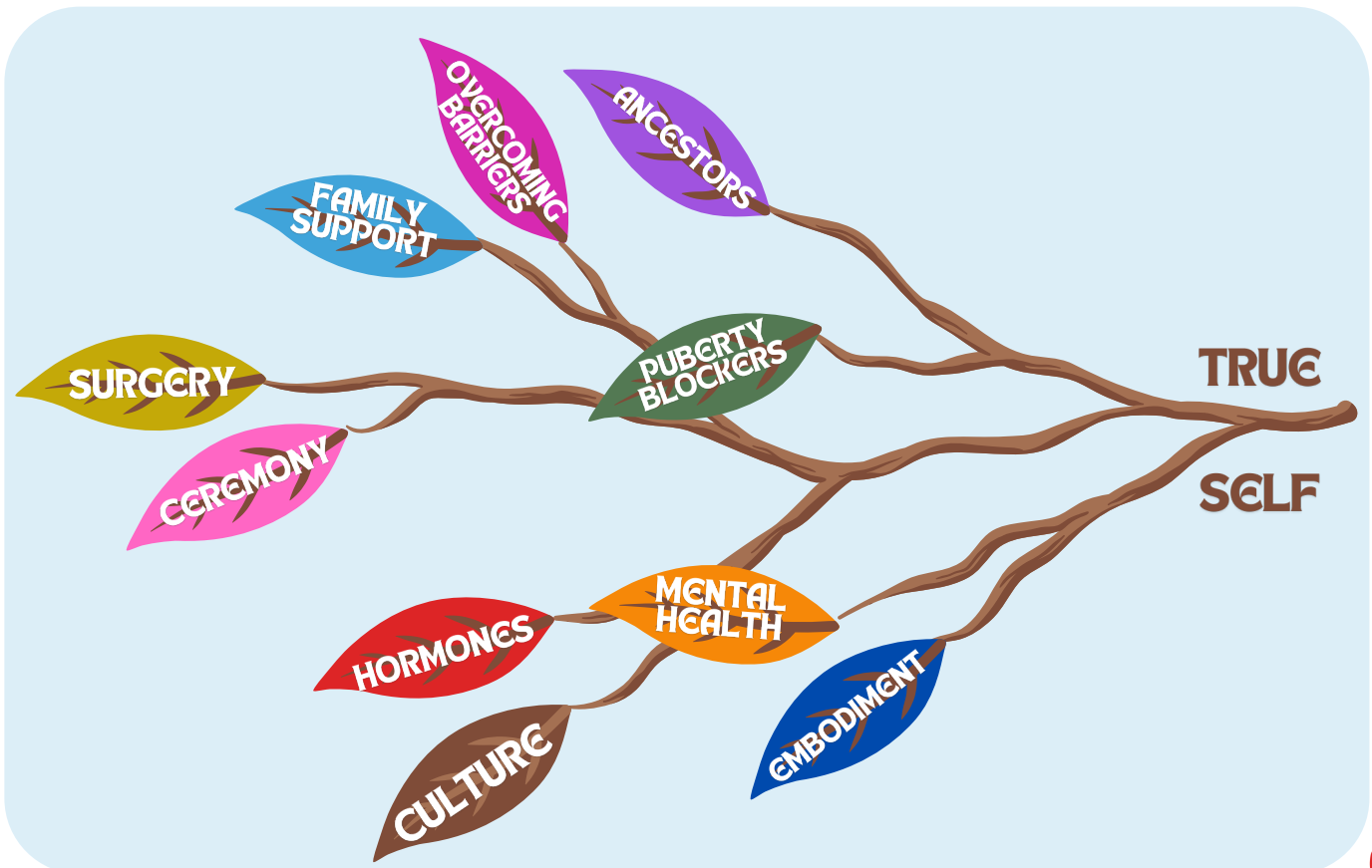
Additionally, Appendix E from the Gender Affirming Care Strategic Vision and Action Plan may be useful.

Acknowledge: engaging youth and communities

Your clinic can also uphold 2SLGBTQ+ cultural competency by developing paths for feedback and understanding community opinions. Feedback from patients and their families can help inform future changes and make the clinic increasingly welcoming. Talking circles, focus groups, community advisory boards, and community partnerships can also help ensure that there are channels for feedback and communication.

Address: the embodiment and transition process

The information in this Toolkit includes general recommendations about the transition process and links for specific guidelines regarding medical transition. This Toolkit is intended to help you start thinking about the social and non-clinical aspects related to transition so you can better support your patients. As such, the included information is not a medical guideline or training manual. It is meant to serve as a starting point for your ability to care for youth as a part of the embodiment and transition process (see graphic below).



Care Provision Resources

The following are excellent resources detailing standards of care for transgender and gender-expansive youth. While medical guidelines remain the same for most populations regardless of race or ethnic background, providers should remember to incorporate Indigenous medicine, traditions, and practices into gender affirming care for Indigenous youth who are transgender, gender-diverse, Indigiqueer, and Two Spirit. Keep in mind that the linked resources do not offer an Indigenous specific perspective. You will also note that guidelines vary based on resource. As with any other medical care you provide, it is important to consider what works best for the patient when making a decision.

1. **WPATH Standards of Care**, Volume 8 (updated regularly)
 - a. Includes information related to all health fields, such as primary care, gynecologic and urologic care, hormonal and surgical transition options, and mental health services.
2. **UCSF Center of Excellence for Transgender Health Guidelines**
 - a. An online textbook/guidebook involving all aspects of care for transgender and gender-expansive youth.
3. Summary of recommendations from **The Endocrine Society**
 - a. Open access article, **“Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society Clinical Practice Guideline”**

The following information provides an overview of what is involved in medical treatment during the transitioning process. You can also refer to **Section 2 (Youth)** to further review what is included in medical care for these patients. Again, the information provided in this Toolkit is not meant to serve as official medical advice. You can explore this information further with experts, colleagues, and through the trainings listed below.

Options for puberty suppression (also known as puberty blockers or blockers):

- Lupron or Leuprolide (Eligard) (injection)
- Histrelin (Supprelin) (implant)

When to start gender affirming hormone therapy (social considerations):

- What is the child (and family’s) compliance with medical care to-date? Will they be able to keep up with care? What about issues with hormone affordability?
- Beginning hormone treatment is often a family decision when the child is young. Be sure to think about how each child functions within their family, and assess their level of independence. In some cases, a child may have the capacity to make a decision about their treatment without their family.
- Again, it is important to consider regulations regarding informed consent and need for parental approval. These vary by state. (See discussion on **Page 72**).

Surgical options

In many settings, youth and adolescents must be 18 years old and show consistent desire to live as their true/chosen gender prior to surgery. It is helpful to have a sense of surgical options when discussing transition with your patients.

- Top surgery types:
 - Mastectomy
 - Chest reconstruction
 - Breast/chest augmentation
- Genital surgery types:
 - Hysterectomy
 - Salpingo-oophorectomy
 - Orchiectomy
 - Genital reconstructive surgeries
- Facial feminization surgeries:
 - Tracheal shave
 - Laryngoplasty
 - Other surgical procedures not listed here



Risk considerations: There are many changes involved in the transition process that are accompanied by health risks. It is important to think about the following for youth undergoing pubertal suppression or hormone treatment: Reversible vs. irreversible physical changes (puberty blockers vs. hormones)

- Fertility implications
- Metabolic changes
- Mental health implications
- General safety implications

Acknowledge: The Importance of Primary Care

Indigenous transgender, gender-diverse, Indigiqueer, and Two Spirit youth require primary care, just like their peers. Primary care visits present unique opportunities for youth support and education, since visits typically occur at least once a year.

Well-visits should cover the appropriate developmental questions and physical exam (i.e. the HEADSS assessment for adolescents) regardless of a child's gender identity or sexual orientation. It is also important to cover some additional screening topics that relate to safety and behaviors specific to transgender, gender-diverse, Indigiqueer, and Two Spirit individuals (see table below).

Safety Assessment

<i>Transmasculine</i>	<i>Transfeminine</i>	<i>All</i>
Menstrual history	Tucking (How? When?)	Eating disorders and/or exercise disorders
Stress related to menstruation and breast development	Pubertal changes— distress from hair growth, voice changes	Risky behaviors: alcohol, drug, substance use; sexual behaviors
Binding (How? When?)		Mental health
Concerning symptoms		Bullying, relationship safety
		Assessment of support at home

During sick visits, use your best judgement to determine whether or not the patient's gender identity and/or sexuality impacts the present illness. While it may not be necessary to ask about sexual practices or perform a genital exam during the encounter, providers should still use the patient's preferred gender pronouns and chosen name. Excessive questioning or unnecessary examination may lead to patient wariness and mistrust.

For youth who decide that a medical transition is part of their gender affirming journey, your backing as a provider is critical. Supporting each patient before, during, and after the transition can help the process occur safely and smoothly. While some transition treatments may take place in a separate clinic or with an outside provider, each patient benefits greatly from the continual support of a primary care provider who has known them throughout their journey.

Keep in mind that you may possibly be the only supportive person in your patient's life at this point in time. It is important to reflect on the significance of this role and to ask for support from colleagues (near and far) if need be, so you can best support your patient.

It is also possible that you may not have facilities or resources to refer your patients to. In these situations, you can still play a large role in fostering your patient's self-confidence by showing them you are an accomplice and support their journey. You can look towards opportunities for virtual consultation or reach out to your professional peers who are engaging in this sort of work. Resources and search options are detailed beginning on [page 78](#) and in [Section 5](#).

Acknowledge: sexual health

Do not assume that your patient's sexual health and wellness is being addressed because they are transgender, gender-diverse, or Two Spirit. Sexual health sometimes falls through the cracks amidst the primary care visits, specialist visits, and mental health visits.

The following resources include information specific to sexual health in 2SLGBTQ+ patients. They provide suggestions on what to cover during clinical encounters. They may also be helpful resources for patients who want more information.

General sexual health and wellness resources:

- Sexual health, wellness, and relationship exploration: [“Safer Sex for Trans Bodies”](#)
- [“Trans Youth Sexual Health Booklet”](#)
- [Bedsider.org](#) has further reproductive and sexual health information
- [I want the kit](#) has information about sexual health and testing.
- DoxyPEP or Doxycycline Post-exposure prophylaxis is a medication used to help prevent sexually transmitted infections. [Find more info at the 2S-SupportBoat.](#)
- We recognize that stigma against larger bodies is common in medical settings. You can find a helpful self-advocacy resource at the [2S-SupportBoat](#) to support interactions with clinicians.

Safer sex guide by identity:

- Trans Men: [“Primed2: A Sex Guide for Trans Men into Men”](#)
 - how to have safe sex, prevent HIV and sexually transmitted infections, and find safe sex
- Trans Women: [“Brazen 2.0: Trans Women's Safer Sex Guide”](#)

Address: combat human trafficking

Indigenous youth are at increased risk for becoming trafficked as a result of the long lasting impacts of settler colonialism including exposures to physical or sexual abuse, poverty, homelessness, and historical trauma. One hundred sixteen (116) cases of human trafficking involving Indigenous youth have been reported from 2011-2017, and it is expected that this is only a fraction of the cases occurring.[44] Check out the [Combating Trafficking: Native Youth Toolkit on Human Trafficking](#) by the Administration for Children and Families (2017) for useful information and tips.[45]

Address: making mental health a priority

Indigenous youth are at increased risk for experiencing mental health issues such as anxiety, depression, and suicidal ideation and attempt. 2SLGBTQ+ youth also face these increased risks. Indigenous youth who also identify as 2SLGBTQ+ therefore face a dual risk for mental health issues. Survey results from Paths (Re)membered highlight these trends, with 89% of trans and gender-diverse Indigenous people reporting that they have contemplated suicide at least once in their life, and over half report having attempted at least once.[46]

Your attention to youth mental health is critical.[35] Incorporating quick mental health check-ins at each appointment can make a difference and help you detect underlying issues.

In addition to anxiety, depression, and suicidality, the term 'gender dysphoria' is often associated with transgender mental health care. While there is stigma associated with the term and some providers are moving towards gender incongruence, you may be limited by billing requirements.

What is gender dysphoria or gender incongruence?

Signs and symptoms that result from the incongruency between an individual's gender identity and sex assigned at birth. These can include:

- Depression and anxiety
- Social rejection and isolation (may be self-inflicted)
- Issues with self-esteem and self-worth
- Self-harm behaviors
- Suicidal ideation and attempt

Gender dysphoria is currently listed as a diagnosis in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, 5th edition. As mentioned previously, there is currently disagreement and controversy regarding the use of the term gender dysphoria because it may perpetuate stigma and erroneously suggest that gender variance and non-conformity are pathologic.

Classification with this "disorder" may cause labeling, especially among young children who do not yet have the ability to advocate for themselves. Similarly, the terminology medicalizes gender identity and makes it difficult for individuals to have autonomy over their body and gender expression. For example, many health centers require a mental health provider to sign-off and/or diagnose an individual with gender dysphoria before they can undergo transition.

Additionally, the label of gender dysphoria may not be appropriate within an Indigenous cultural framework. For Indigenous youth, a cultural dysphoria framework may be more appropriate.

“

"I don't know if this is really how I felt or if it's because of that cultural programming that was put onto me from a young age, but I've been through years of feeling like I was a man trapped in a woman's body, until now. I feel like I'm just a spirit in a body that happens to be in a world that sees me as cisgender, which is very difficult because I present very feminine because of my body. It's always been this strange experience for me because people think I look like a woman. I have also battled with body dysmorphia. I think that has a lot to do with my gender. I always felt like an alien in my body. [Not] until I identified as Two Spirit did I finally start to come into my body and make it a home for myself. "

-Indigenous Two Spirit relative

The **World Professional Association for Transgender Health (WPATH)** has made a statement regarding this pathologizing: “The expression of gender characteristics, including identities, that are not stereotypically associated with one’s assigned sex at birth is a common and culturally diverse human phenomenon which should not be judged as inherently pathological or negative. Psychopathologizing gender variance reinforces stigma, rendering transgender and transsexual people more vulnerable to social and legal marginalization and exclusion, and increasing risks to mental and physical well-being.”[47]

On the other hand, classification with the gender dysphoria diagnosis does enable identification of individuals and in some cases increased access to care, medical assessment, and empowerment. Co-morbid mental health illnesses may also be better detected when an individual is assessed using the DSM framework.

Understanding both perspectives can help providers deliver the most patient centered care. Additionally, referring patients to a mental health provider who has experience working with gender-expansive patients may be beneficial. Mental health providers can serve as a support system for both patients and their relatives, and can be an integral part of your patient centered medical team.

In scenarios where you are unable to refer to a mental health provider, or access to mental health care is limited, you may need to spend a bit more time with your patients to ensure they are supported socially and psychologically. You may also be able to refer them to local support groups or provide them with resources related to mindfulness and meditation that they can practice independently (see **Page 47**). Mindfulness has been shown to alleviate the negative impact of stress and trauma, including those related to adverse childhood experiences (ACEs), and can help improve short and long term health outcomes.[48]

Having crisis resources readily available for youth, their families, and friends is also beneficial.

If you or a friend needs any mental health support or is having a mental health crisis and/or suicidal thoughts, the following resources are available. They are all 2SLGBTQ+ friendly!

Crisis Services:

- **Trans lifeline:** 877-565-8860
 - Crisis line staffed by transgender folks, for transgender folks; toll-free; no active rescue*
- **The Trevor Project:** 866-488-7386
 - Crisis intervention and suicide prevention available 24/7 from counselors trained in supporting LGBTQ youth
- **Crisis Text Line:** text HOME to 741741 any time to start texting with a crisis counselor
- **988 Suicide Crisis Line:** If you need support, you can call, text, or chat with 988. Someone is available 24/7.
- Text NATIVE to 741741 for free, 24/7 support.
- **SAGE ELDER CRISIS LINE:** 877-360-LGBT (5428). Someone is available 24/7.

***NOTE:** *Some of these services may engage in active rescue (communicating information about suicide risk to local law enforcement when they believe it necessary to ensure safety).*

Training, Curricula, & Supports for Providers

The following trainings and informational lectures provide foundational knowledge that may help you advocate for and provide gender affirming care to this subset of patients.

Trainings

- **WPATH certification program:** offers 50 hours of core training for medical and mental health providers.
- **Cultural competence webinar series** aimed at understanding health needs of 2SLGBTQ+ people, creating a welcoming clinic environment, and sharing tips for clinical care.
- **Transexuality resources for healthcare providers**
- **Online modules and exercises** to help individuals and organizations support 2SLGBTQ+ youth, from *A Way Home Canada*.
- **Transgender Health ECHO:** web-based trainings for health centers and health organizations

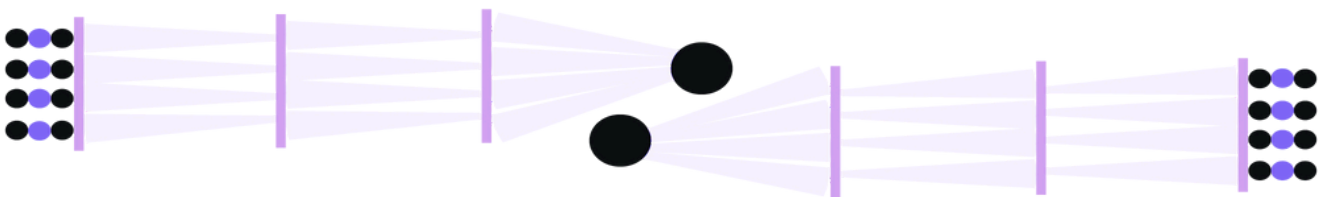
Clinician Warmline

- You can request a clinician consultation from the **2S-SupportBoat**.

Two Spirit Specific Trainings and TA

These webinars, in-person trainings, and technical assistance consults help raise awareness of Two Spirit history, culture, and issues faced by Two Spirit and Indigenous 2SLGBTQ+ individuals. Having an increased understanding can help providers affirm, acknowledge, and better advocate for their Two Spirit patients.

- Access trainings on 2SLGBTQ+ Health and healthcare delivery from **The Raven Collective**.
- **SAMHSA webinars** - related to justice, gender identity, general resources for Two Spirit individuals
- **Indian Health Service 2SLGBTQ+ support:** information regarding Two Spirit peoples and links to additional webinars
- **"(W)righting Our Relations-** Working with and For Two Spirit Individuals"
- **"Walking in Good Way-** Cultural Considerations when Working with Two Spirit Individuals"



Section 5

General Resources



Crisis Services

Each individual, family, and community will have different perspectives and values that make them unique. Not every resource listed below will be relatable or directly applicable, but they offer some starting points for exploration.

Crisis Services

- **Trans lifeline: 877-565-8860**
 - Crisis line staffed by transgender folks, for transgender folks; toll-free
 - No active rescue*
- **The Trevor Project: 866-488-7386**
 - Crisis intervention and suicide prevention available 24/7 from counselors trained in supporting LGBTQ+ youth
- **Crisis Text Line: text HOME to 741741 any time to start texting with a crisis counselor**
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- **SAGE ELDER CRISIS LINE: 877-360-LGBT (5428). Someone is available 24/7.**

**NOTE: Some of these services may engage in active rescue (communicating information about suicide risk to local law enforcement when they believe it necessary to ensure safety).*



Native Specific Book List

- ***A History of My Brief Body*** - Billy Ray Belcourt
 - refer to the section near the end, "notes on livability" for a relevant and interesting discussion regarding suicidality
- ***Reclaiming Two Spirits*** – Gregory D Smithers
- ***Circle of Love*** by Monique Gray Smith
- Two Spirit children's books by Itai Jeffries, Victoria Ferguson, and Trae Middlebrooks
 - ***Sassy Sassafras***
 - companion coloring book
 - ***Cosmo, From the Stars***
 - companion discussion guides
 - article about this book



Check out a great list of books for kids, youth, and families involving LGBTQ+ topics at [Read Your World](#)

Documentaries, Podcasts, and Media

- ***Two Spirits* documentary**
- ***As They Are: Two-Spirited People in the Modern World*** (USC Anthropology) documentary
 - **Part 1** and **Part 2**
- ***Frameline Voices: Two-Spirits* documentary**
- **Short video** from the Atlantic Two Spirit Gathering (2011)
- ***We R Native* video** with Garni (Blackfoot Nation) who discusses coming out as a lesbian along with her Two Spirit identity
- ***Two Spirit Pow Wow* video**
- ***Two Spirit Talks* podcast**
- ***Your Two Spirit Aunties* podcast**



General Online Resources

- [Center of Excellence for Transgender Health](#)
- [National Center for Transgender Equality](#)
- [TransFamily Support Services](#)
- [PFLAG](#)
 - [Native PFLAG](#)
- [I Know Mine](#)

Legal Rights

The following websites and manuals are helpful for learning more about legal and civil rights for the 2SLGBTQ+ community. These can help you become a better advocate for yourself (or your child), and can be shared with providers, teachers, coaches, and community members too. Remember that laws can change and information may not be up to date.

Indigenous Resources/Services

- [Tribal Equity 3.0 Toolkit](#)
- Gender Affirming Care Strategic Vision and Action Plan 2.0 can be found at the [2S-SupportBoat](#)
- [2S-SupportBoat](#)
- Tribal Resolutions, copies housed at document library at the 2S-SupportBoat
 - Support for Delivery of Gender Affirming Medical Care for Two Spirit, and American Indian/Alaska Native Transgender, and Gender-Diverse Children, Youth, and Adults
 - Support for Trans Gender affirming Care in IHS, Tribal, and Urban Indian Health Facilities – 2021 Strategic Vision and Action Plan
 - Support for Quality Care and Improved Health Outcomes for Two Spirit and LGBTQ+ People
 - In Support of Native Students, Educators, and Community Members who Identify as LGBTQ2S
 - Standing in Support of our Two Spirit Relatives in our Communities and Nations

Non-Indigenous Resources

- [GLAD: GLBTQ Legal Advocates & Defenders](#)
- [NCLR \(National Center for Lesbian Rights\)](#)- for all 2SLGBTQ+ individuals
- [Transgender Law Center](#)
- [National Center for Transgender Equality](#)

Name Change

Using a chosen name is an important step in many people’s gender affirmation journey. Making this change legal and official can involve many steps. Laws are different depending on where you live. To find out how to get a legal name change in your state, you can [visit this website](#). More information can be found using the legal rights resources listed above.

[Teen Vogue](#) features stories about individuals who have changed their names.

Name changing can be expensive. Check out [this resource](#) for scholarships.

Information on affirming tribal ID documents can be found in the Gender Affirming Care Strategic Vision and Action Plan—see appendix C of that document. (housed at the document library of the [2S-SupportBoat](#)

Extra-Medical Transition & Embodiment Resources

Other resources: binding, tucking, etc.

- **Gender expression essentials**
- Binding:
 - If you cannot afford a chest binder or safely obtain one, you can look apply for a free one through **Point of Pride**
 - They also offer a **guide on safe binding**
- Tucking
 - **Safe tucking**
 - **Tucking comfort tips**
- Packing
 - **Safe Guide to Packer Use**
- **Voice therapy exercises and resources**



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Appendix



The Gender Frog



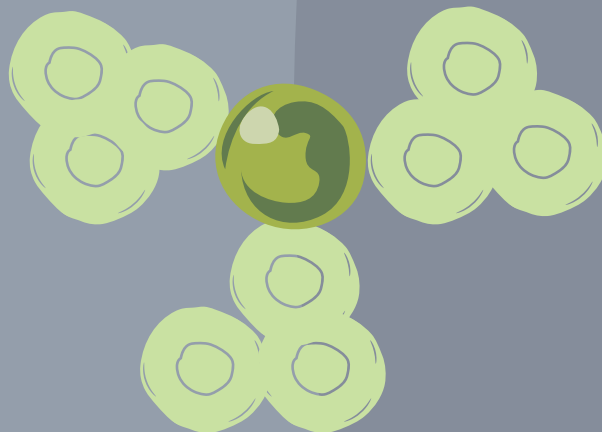
The Gender Frog is an interactive worksheet/graphic that helps portray the distinction between gender, sex assigned at birth, and sexuality. It is an Indigenized model demonstrating the complexity in the ways that we each think of ourselves and identify that was an imagined as a culturally adapted interpretation of the gender unicorn. With this worksheet, you can explore your relationship to aspects of your identity in a way that is informed by Indigenous worldview. Frogs represent sex, gender, and orientation variations for many tribal peoples. There is a full version of this tool in the appendix, including instructions for using this tool. Salish frog artwork was created by Corey Begay, and this tool was developed by Itai Jeffries, PhD.

Fill in frog eggs to demonstrate your connection with words used to describe aspects of identity, and visualize the complexity that is YOU!

Note: these may change over time

Sex Assigned at Birth

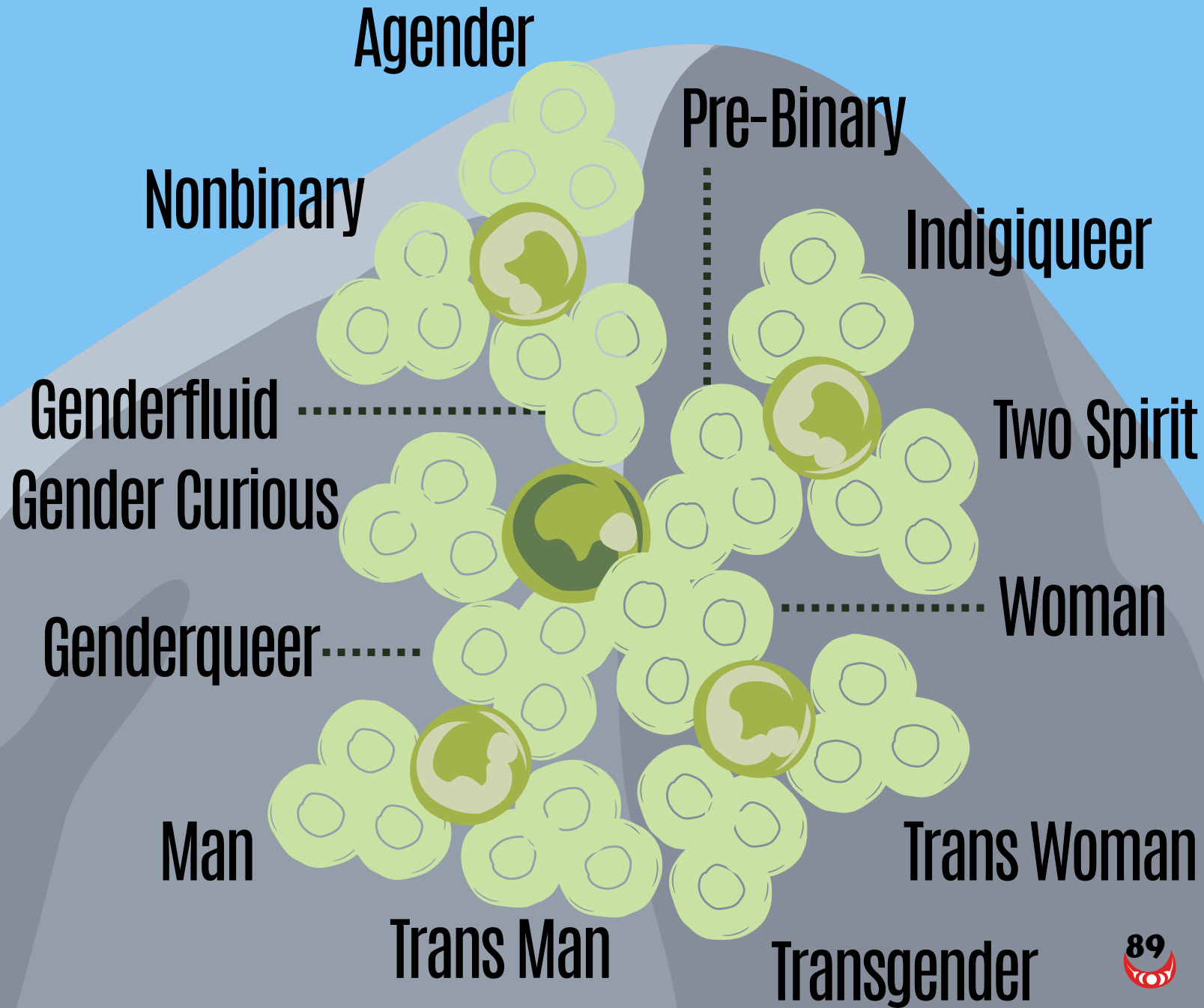
Female



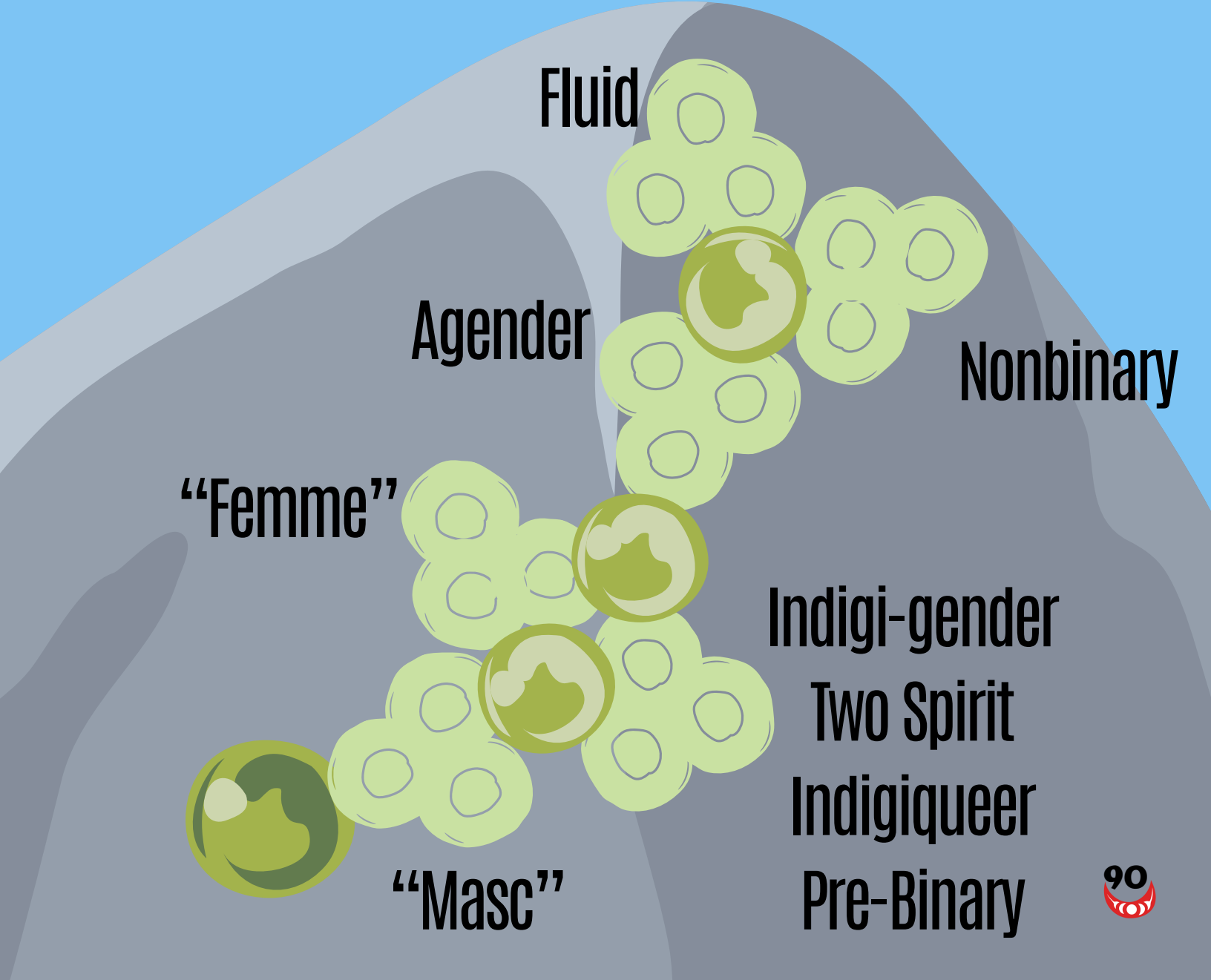
Male

Intersex

Gender Identity



Gender Presentation/Expression



Orientation - Sexual Attraction

Indigiqueer

Bisexual

Two Spirit

Gay/Lesbian

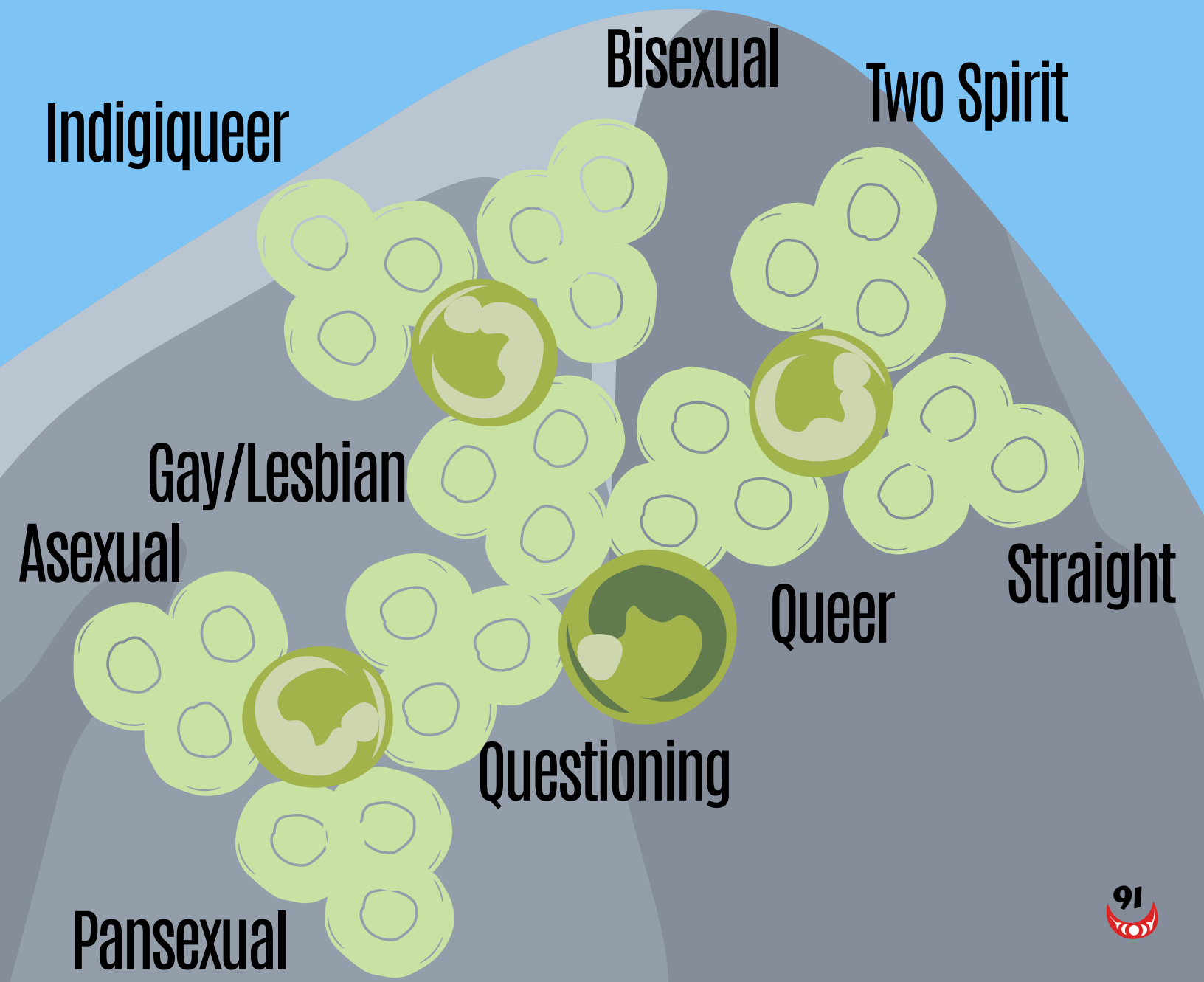
Asexual

Straight

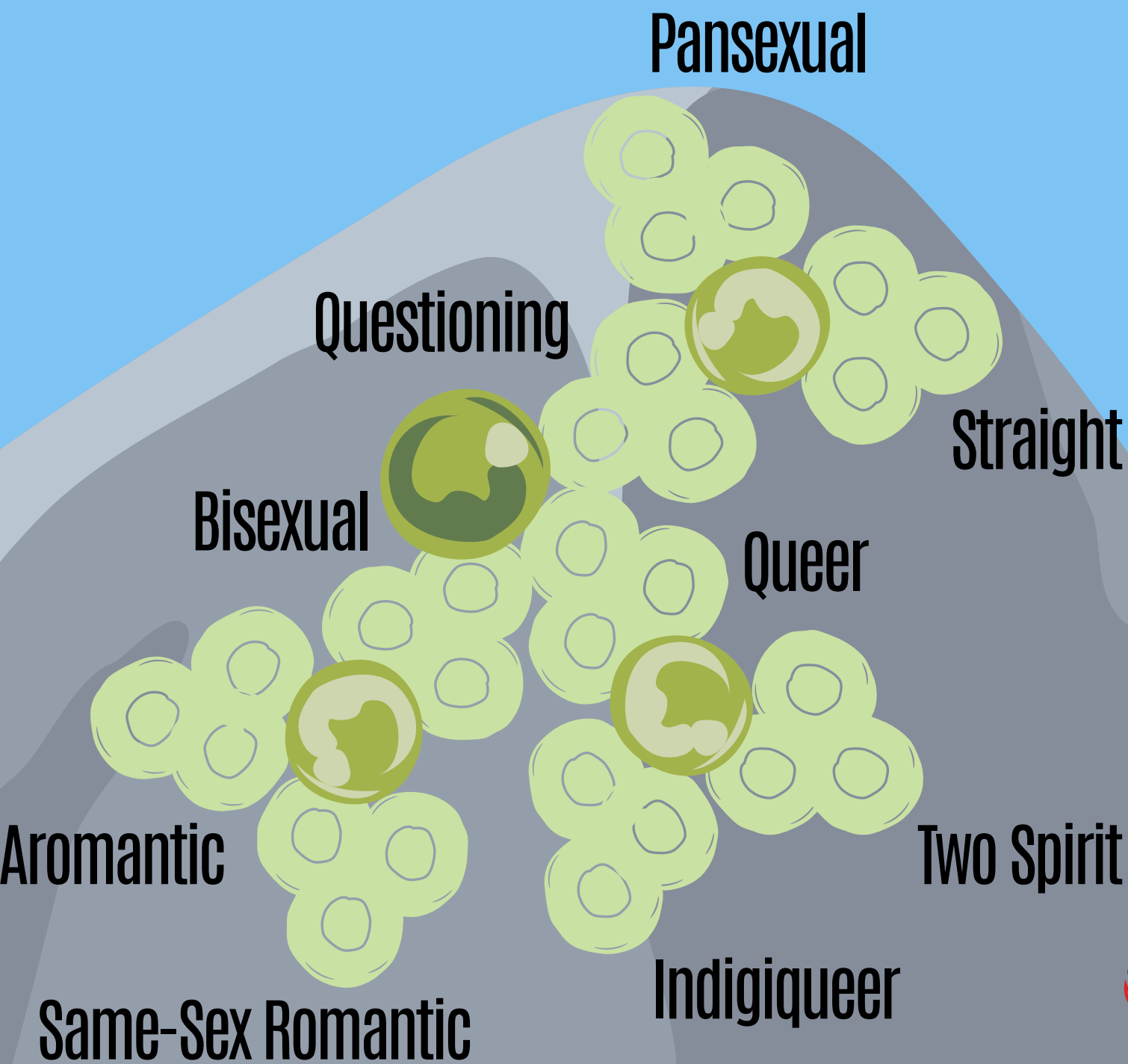
Queer

Questioning

Pansexual



Orientation - Emotional & Romantic Attraction



Gender Identity

EXAMPLE

