

No. 4 March 23, 2021

The Trans PULSE Canada project collected survey data from 2,873 trans and non-binary people in 2019. This report presents results from the first national data on health and well-being among trans and non-binary immigrants and newcomers in Canada. Results for newcomers and established immigrants frequently differed, highlighting the importance of studying the impact of the settlement process and integration on immigrant health and wellbeing.

HEALTH AND WELL-BEING AMONG TRANS AND NON-BINARY IMMIGRANTS & NEWCOMERS

Gender-based violence and barriers to accessing settlement services in Canada

Highlights

- 1 in 3 newcomers migrated to Canada due to fear of persecution related to their gender identity.
- 1 in 5 newcomers accessed a settlement service within their first year in Canada.
- Newcomers were twice as likely to not have a primary health care provider as established immigrants or those born in Canada.

Context

Policy regarding Canadian immigration and citizenship status is constantly changing. This has resulted in shifts in the profile of immigrants arriving in Canada, with notable increases in the number of economic immigrants and refugees. As of the 2016 Census, immigrants and refugees comprised 21.9% of the Canadian population, and this number continues to rise. As such, the experiences of immigrants and refugees in Canada must be considered when evaluating the health and well-being of the Canadian population.

Many transgender (trans) and non-binary immigrants report having left their countries of origin to escape transphobia, access health services, and find a connection to the trans community. 5,6 Similar to cisgender (non-trans) immigrants, they are also driven by reasons such as economic opportunity.6 However, research on both trans and cisgender immigrants finds that they endure employment discrimination, racism, limited social support, and unique barriers to healthcare. 6-8 Though immigrants tend to have better physical and mental health upon arrival compared to people born in their new country, this advantage is documented to be lost over time. 9-11 Further, in designated safe countries such as Canada, the broader trans and non-binary communities face discrimination, violent victimization, high rates of mental illness, and challenges in accessing health care, among other inequities. 12-14 Despite this, there is a lack of research that explores the intersection between transgender and/or non-binary identities and immigrant status. Using data from the Trans PULSE Canada survey, this report provides the first quantitative nationwide profile of the health and wellbeing of trans and non-binary immigrants and newcomers in Canada. Of the sample, 12% (n=336) were immigrants; 9% were established immigrants and 3% newcomers.

Trans PULSE Canada

Over a 10-week period in 2019, the Trans PULSE Canada research team collected survey data from 2,873 trans and non-binary people age 14 years or older and living in Canada. Participants were able to complete the full survey or a 10-minute short form online, on paper, via telephone (with or without a language interpreter), or on a tablet with a Peer Research Associate (only in major cities). The 10-minute short form contained key items from the full survey, and both versions were available in English or French. The Trans PULSE Canada survey included questions from Ontario's Trans PULSE project, questions from Statistics Canada surveys to allow for comparisons to the general population, and questions developed by trans and non-binary people based on community

priorities. This report especially highlights questions developed by the team's Immigrant, Refugee, and Newcomer Priority Population Team.

Table 1: Distribution of newcomer and immigrant participants across provinces and territories

	Newcomer (≤ 5 years ago) n=92 %	Established immigrant (>5 years ago) n=244 %
Current province/terr	itory	
Alberta	14	13
British Columbia	33	31
Manitoba	1	0.4
New Brunswick	2	2
Newfoundland and Labrador	0	0.4
Nova Scotia	2	2
Ontario	30	39
Prince Edward Island	0	0.8
Quebec	17	9
Saskatchewan	0	2
Northwest Territories	0	0
Nunavut	0	0
Yukon	0	0.4

How to Interpret

This report presents results comparing newcomers, established immigrants, and people born in Canada, with some tables only comparing newcomers and established immigrants. In the Trans PULSE Canada survey, newcomers were defined as those who immigrated to Canada within the last 5 years of survey completion. Established immigrants were those who immigrated more than 5 years ago. 336 respondents were newcomers or established immigrants. In total, 3% of the full sample were newcomers, and 9% were established immigrants. Nine of the newcomers had refugee status.

Although Trans PULSE Canada used multiple approaches to make the survey accessible, it was not possible to conduct a random sample of the trans and non-binary population. Therefore, results cannot be assumed to represent true population de-

Table 2: Socio-demographics

	Newcomer (≤ 5 years ago)	Established immigrant (>5 years ago)	Born in Canada	
	n=92 %	n=244 %	n=2488 %	P-value ^a
Age				<0.0001
14 - 19	10	9	13	
20 - 24	23	16	22	
25 - 34	46	26	38	
35 - 49	20	28	19	
50 - 64	2	17	7	
65 +	0	5	0.8	
Gender				0.004
Woman or girl	23	33	23	
Man or boy	21	18	26	
Indigenous or cultural gender	1	0.4	2	
Non-binary or similar	55	49	48	
Sexual orientation (check all that apply) b				
Asexual	16	11	14	0.477
Bisexual	20	23	29	0.016
Gay	13	10	13	0.369
Lesbian	17	19	15	0.198
Pansexual	26	23	32	0.005
Queer	61	48	51	0.122
Straight or heterosexual	8	14	7	0.001
Two-Spirit	1	2	4	0.048
Unsure or questioning	5	9	9	0.493
Relationship status ^c				0.490
In a relationship(s)	55	57	53	
Not in a relationship	45	43	47	
Racialization				<0.0001
Racialized	33	35	11	
Not racialized	67	65	89	
Urban / rural ^d				0.662
Rural or small town	4	7	6	
Not rural or small town	96	93	94	
Disability identities (check all that apply)	b			
Autistic	10	10	14	0.160
Blind	1	0	0.4	0.280
Crip	1	2	2	1.000
Deaf	1	2	0.9	0.348
Disabled or living with a disability	20	18	19	0.968
Chronic pain	10	21	21	0.026
Neurodivergent	26	25	31	0.136
Psychiatric survivor, mad, or person with mental illness	39	35	44	0.012
Other	7	5	7	0.745

Table 2: Socio demographics, continued

Tuble 1. Socio delliographics, con	Newcomer (≤ 5 years ago) n=92	Established immigrant (>5 years ago) n=244	Born in Canada n=2488	
	%	%	%	P-value ^a
Education (age ≥ 25) ^e				< 0.0001
< High school	3	2	4	
High school diploma	2	4	9	
Some college or university	13	16	22	
College or university degree	45	46	48	
Grad/professional degree	37	32	17	
Employment situation (age ≥ 25) ^{c e}				0.226
Permanent full-time	43	46	43	
Employed, not permanent full-time	31	31	35	
Not employed or on leave	22	12	16	
Not employed and student or retired	4	10	6	
Personal annual income (past year, age	≥ 25) ^e			0.064
None	3	3	1	
< \$15,000	32	18	24	
\$15,000 - \$29,999	23	20	25	
\$30,000 - \$49,999	15	25	22	
\$50,000 - \$79,999	12	19	17	
\$80,000 +	15	15	10	
Low-income household (past year, age	≥ 25) ^e			0.385
Low income household	45	36	40	
Non-low-income household	55	64	60	

- a Values < 0.0500 indicate that differences between groups are statistically significant.
- b Participants could select more than one option, so total will be more than 100%.
- c These variables were missing for 10% of respondents or more.
- d Rural and small town includes participants who reported a postal code or forward sortation area for a town or municipality with population <10,000.
- e Personal income, education, and employment are reported here for those age 25 and older; additional data on student status and other factors will be reported in our youth report.

mographics. For instance, that 3% of participants were newcomers, does not mean exactly 3% of all trans and non-binary people in Canada are newcomers.

The final column of select comparative tables in this report contains a p-value. A p-value indicates whether there is a statistically significant difference between groups. In this report, the groups are newcomers and established immigrants (Tables 4, 7); or newcomers, established immigrants, and people born in Canada (Tables 2, 3, 5, 6). P-values that are

less than 0.0500 indicate that differences between groups are statistically significant, while p-values that are greater than or equal to 0.0500 indicate that there is no statistically significant difference.

Socio-demographics

Table 1 shows the distribution of newcomers and established immigrants across the provinces and territories. The largest proportion of newcomer respondents were in British Columbia (33%) and Ontar-

io (30%), followed by those in Quebec (17%) and Alberta (14%). 39% of established immigrant respondents reported living in Ontario, followed by 31% in British Columbia, and 13% in Alberta.

Table 2 displays the sociodemographic characteristics of newcomers, established immigrants, and individuals born in Canada. Almost half of the newcomer respondents (46%) were between 25-34 years old. A greater proportion of the established immigrant respondents were over the age of 50, compared to newcomers. One-third of the entire immigrant sample identified as racialized or were perceived as or treated as a person of colour.

Table 2 shows that newcomers (37%) and established immigrants (32%) over the age of 25 were more likely to have graduate/professional degrees than Canadian-born respondents (17%). However, no statistically significant differences were found in the employment situation and low-income household status across all three groups. This is consistent with the frequently documented observation that, despite being highly educated, skilled immigrants have lower employment rates than their Canadian-born counterparts. This may be due to factors such as discrimination and unrecognized foreign credentials.

Table 3 displays the ethnoracial composition of new-comers and established immigrants. Respondents were able to select more than one ethnoracial group, if applicable. 70% of newcomers and 65% of established immigrants identified as White European, White Canadian, or White American. Most established immigrants and newcomers emigrated from the United States and Europe, followed by Asia, and Latin America or the Caribbean.

Immigration

Table 3 includes variables related to immigration, including region of origin, reasons for coming to Canada, and current immigration status. A majority of both newcomers and established immigrants came to Canada for reasons relating to education and employment. Newcomers were more likely than es-

tablished immigrants to report coming to Canada due to experiencing persecution as a trans or non-binary person (31% vs. 7%), and for access to gender-affirming health care (26% vs. 8%). Respondents reported a range of immigration statuses, with a larger proportion of established immigrants holding Canadian citizenship compared to newcomers (79% vs. 8%). Newcomers were more likely to report being permanent residents (42% vs. 19%), students (28% vs. 2%), and here on work permits (20% vs. 3%).

Table 3 also compares the experiences of newcomers and established immigrants with immigration or settlement organizations. Newcomers were about three times more likely than established immigrants to have accessed immigration or settlement organizations during their first year in Canada (21% vs. 6%). Although the difference was not statistically significant, newcomers were two times more likely to feel that these organizations met their needs as a trans/non-binary newcomer compared to established immigrants, among those who accessed them during their first year in Canada.

Health & Well-being

Table 4 shows that newcomers (38%) were twice as likely to not have a primary health care provider as established immigrants (16%) or those born in Canada (19%). Past-year emergency room (ER) avoidance was lower in newcomers (4%) than in established immigrants (9%) and individuals born in Canada (12%). However, newcomers (37%) were more likely to report never having needed ER care (vs. 24% of established immigrants and 20% of those born in Canada). Out of all Trans PULSE Canada respondents, about 1 in 4 reported fair or poor physical health. Both newcomers (43%) and established immigrants (45%) were more likely than those born in Canada (35%) to report excellent or very good physical health. Over half of newcomer (56%) and Canadian-born (57%) respondents reported fair or poor mental health, though established immigrants (46%) still reported high rates.

Table 3: Immigration

New- comer (≤ 5 years ago)	Estab- lished immi- grant (>5 years ago)	
n=92 %	n=244 %	P-value

White European, White Canadian, or White Ameri- can	70	65	0.393
Cari	70	05	0.393
Latin American	13	10	0.432
East Asian	9	8	0.848
South Asian	7	7	0.916
Black African, Black Carib- bean or Black Canadian	8	7	0.703
Jewish	2	8	0.050
South East Asian	6	6	0.943
Middle Eastern	8	5	0.321
Other	6	4	0.560
Indigenous	4	3	0.496
Indo-Caribbean	2	3	1.000
Region of origin ^c			0.051
United States	44	29	
Europe	26	32	
Asia	11	19	
Latin America or Caribbean	10	10	
Africa	3	8	
Oceania	6	3	
		h d	

Reasons for coming to Canada b, d

"			
Persecution due to sexual orientation	15	7	0.050
Gender-affirming health care	26	8	0.0001
Persecution as a trans or non-binary person	31	7	<0.0001
Humanitarian claims	25	21	0.466
Education	41	31	0.127
Employment	32	38	0.373

Current status in Canada b

Citizen	8	79	<0.0001
Permanent resident	42	19	<0.0001
Student	28	2	<0.0001
Work permit	20	3	<0.0001
Asylum/refugee claimant, or pending status	9	0	<0.0001
Refugee/protected person or admitted on humanitari- an grounds	5	0	0.001
Visitor	1	0	0.274
Undocumented person	1	0	0.274

Table 3: Immigration, continued

New- comer (≤ 5 years ago)	Estab- lished immigrant (>5 years ago)	
n=92	n=244	P-
%	%	value ^a

Accessed immigration or settlement or-

gar	nization during first ye	ear in Cana	aa -	0.001
	Yes	21	6	
	No	79	94	

Immigration or settlement organization met needs as a trans/non-binary new-comer d, e

Comer			0.258
Agree	48	24	
Disagree	39	31	
Neutral	13	45	

- Values <0.0500 indicate that differences between groups are statistically significant.
- b Participants could select more than one option, so total will be more than 100%.
- Classifications based on the United Nations Geoscheme— Geographic Regions. ¹⁶
- d These variables were missing for 10% of respondents or more
- e Of people who accessed such an organization.

Table 5 reports other variables associated with health care and social support. About one in four Trans PULSE Canada respondents were diagnosed with PTSD. Newcomers (34%) were twice as likely as established immigrants (17%) and those born in Canada (17%) to have moved to be closer to trans or non-binary services. Established immigrants and newcomers scored slightly higher on measures for thriving compared to respondents born in Canada (median scores of 2.60, 2.50, and 2.40, respectively, on a scale from 1.0 to 5.0).

Table 4: Health and well-being

	Newcomer (≤ 5 years ago)	Established immigrant (>5 years ago)	Born in Canada	
	n=92 %	n=244 %	n=2488 %	P-value ^a
Has primary health care provider				<0.0001
Yes	62	84	81	
No	38	16	19	
Unmet health care need(s) (past year)				0.116
Unmet need(s)	46	38	45	
No unmet need	54	62	55	
Avoided emergency room (past year)				0.001
Yes	4	9	12	
No	59	67	67	
Never needed ER care	37	24	20	
Gender-affirming medical care status ^b				0.107
Had all needed care	22	32	25	
In the process of completing	33	28	32	
Planning, but not begun	12	9	15	
Not planning	13	14	11	
Unsure if going to seek care	19	18	16	
Self-rated health				0.035
Excellent or very good	43	45	35	
Good	31	32	37	
Fair or poor	26	23	28	
Self-rated mental health ^b				<0.0001
Excellent or very good	20	27	15	
Good	24	27	29	
Fair or poor	56	46	57	
Considered suicide (past year) ^b				0.068
Yes	26	26	32	
No	74	74	68	
Attempted suicide (past year) ^b				0.643
Yes	7	4	6	
No	93	96	94	
Experienced violence or harassment (pas	st 5 years, check a	all that apply) b, c	;	
Verbal harassment	72	63	69	0.170
Physical intimidation or threats	37	38	37	0.943
Physical violence	18	18	16	0.735
Sexual harassment	40	37	43	0.190
Sexual assault	31	24	26	0.438

Table 4: Health and well-being, continued

	Newcomer (≤ 5 years ago) ⁿ⁼⁹² %	Established immigrant (>5 years ago) n=244 %	Born in Canada n=2488 %	P-value ^a
Avoided public spaces for fear of harassn	nent or outing (pa	st 5 years, check	all that apply) b, d	0.083
No avoidance	13	19	15	
1 or 2 types of spaces	27	25	20	
3 or more types of spaces	60	56	65	
Avoided specific spaces for fear of harassment or outing (past 5 years) b,c				
Public washrooms	52	52	63	0.001
Support groups	14	12	17	0.181
Travelling in Canada	10	12	13	0.598
Housing security ^b				0.337
Secure	91	93	90	
Insecure ^e	9	7	10	
Household food security (past year) b				0.021
Always had enough to eat	86	92	84	
Sometimes did not have enough	10	5	12	
Often did not have enough	5	3	3	

- a Values < 0.0500 indicate that differences between groups are statistically significant.
- b These variables were missing for 10% of respondents or more.
- c Participants could select more than one option, so total will be more than 100%.
- d Of 14 spaces given as options in survey (e.g., public washrooms, schools, being out on the land, public transit).
- e Includes living in shelters, motels or boarding houses, temporarily with partners/friends/family, on the street, in a car, or in an abandoned building.

Discrimination and Access to Identity Documents

Table 6 describes trans and nonbinary experiences related to discrimination and harassment. Using the Intersectional Discrimination Index, 15 there were no statistically significant between-group differences in scores for major (lifetime), day-to-day (past-year), and anticipated discrimination. However, newcomer respondents had higher scores on a measure for identity siloing compared to established immigrants and Canadian-born respondents. This indicates that newcomers reported having less freedom to express all aspects of themselves in day-to-day life. Specifically, a greater proportion of newcomers (28%) reported needing to change their own language, dia-

lect, or accent "always" or "most of the time" compared to established immigrants (16%) and Canadianborn respondents (10%). Newcomers (18%) were also more likely than established immigrants (7%) and Canadian-born respondents (1.4%) to report needing to avoid talking about their immigration history or nationality "always" or "most of the time."

Immigrants were compared across these anticipated, day-to-day, and major discrimination measures based on their language spoken at home. No significant differences were found (results not shown).

Table 7 compares newcomers to established immigrants on access to identity documents both in their country of origin and in Canada. In Canada, established immigrants (28%) were more likely to have received all pursued identity documents (IDs) with

Table 5: Primary health care, mental health care, mental health, and social support

	Newcomer (≤ 5 years ago)	Established immigrant (>5 years ago)	Born in Canada	
	n=92 %	n=244 %	n=2488 %	P-value ^a
Insurance covers all or some prescription	n medication cost	ts ^b		0.628
Insurance covers all or some medication costs	63	68	70	
No coverage for medication	24	24	23	
Unsure	13	8	8	
Moved to be closer to trans or non-binar	y services (lifetim	e) ^b		0.002
Yes	34	17	17	
No	66	83	83	
Received mental health support from: (p	ast-year) ^{b, c}			
Family doctor or general practitioner	44	39	46	0.200
Social worker or counsellor	40	42	40	0.921
Psychologist	25	23	26	0.580
Psychiatrist	12	22	20	0.136
Nurse	13	6	7	0.206
Religious or spiritual leader, or Indigenous Elder	7	5	5	0.877
Other (e.g. friends, partners, support groups)	23	24	19	0.201
Diagnosed with post-traumatic stress di	isorder (PTSD) b			0.534
PTSD diagnosis	22	27	24	
No PTSD diagnosis	78	73	76	
	Median (IQR)	Median (IQR)	Median (IQR)	
Thriving ^b				
Median score (1.0 to 5.0)	2.50 (1.00)	2.60 (1.00)	2.40 (1.20)	0.040
Social support b				
Tangible support score (1.0 to 5.0)	3.75 (2.25)	3.50 (2.00)	3.50 (1.75)	0.860
Emotional support score (1.0 to 5.0)	4.00 (1.75)	3.50 (1.50)	3.75 (1.50)	0.476

a Values <0.0500 indicate that differences between groups are statistically significant.

their true name or gender, compared to newcomers (13%). However, newcomers (83%) were more likely than established immigrants (60%) to never have tried to access IDs with their true name or gender in Canada. In their home countries, no statistically significant differences in ID access were found between newcomers and established immigrants.

b These variables were missing for 10% of respondents or more.

c Participants could select more than one option, so total will be more than 100%.

Table 6: Discrimination, identity siloing, interaction with legal and emergency response systems

	Newcomer (≤ 5 years ago)	Established immigrant (>5 years ago)	Born in Canada	
	n=92 Median (IQR)	n=244 Median (IQR)	n=2488 Median (IQR)	P-value ^a
Discrimination b, c				
Anticipated discrimination, median score (0 to 4.0)	2.44 (0.89)	2.56 (1.00)	2.56 (1.11)	0.599
Day-to-day discrimination, median score (0 to 18)	7.00 (7.00)	7.00 (7.00)	8.00 (8.00)	0.074
Major discrimination, median score (0 to 25)	4.00 (5.00)	5.00 (8.00)	4.00 (7.00)	0.209
Identity siloing ^d				
Median score (0 to 3.0)	0.80 (0.80)	0.70 (0.70)	0.70 (0.60)	0.033
	%	%	%	
Need to change own language, dialect, or	accent			<0.0001
Always	10	8	3	
Most of the time	18	8	7	
Sometimes	37	34	27	
Never	35	50	62	
Need to avoid talking about own religion	or spirituality			0.040
Always	8	4	3	
Most of the time	14	12	11	
Sometimes	35	40	37	
Never	43	44	50	
Need to avoid talking about own immigra	ation history or na	ationality		<0.0001
Always	11	2	0.4	
Most of the time	7	5	1	
Sometimes	21	22	5	
Never	61	70	94	
Anticipated fair treatment from police &	legal system if ph	ysically assault	ted ^b	0.730
Yes	33	29	32	
No	67	71	68	
Anticipated fair treatment from police &	legal system if se	xually assaulted	d ^b	0.980
Yes	20	18	19	
No	80	82	81	
Avoided calling 911 for police services (p	ast 5 years) ^b			0.676
Yes	20	27	22	
No	22	20	23	
I have not needed police services	59	53	55	
Avoided calling 911 for emergency medic	al services (past !	5 years) ^b		0.985
Yes	17	18	17	
No	26	28	29	
I have not needed emergency medical services	57	54	54	

a $\,$ Values <0.0500 indicate that differences between groups are statistically significant.

b These variables were missing for 10% of respondents or more.

- Experiences happened "because of who you are", including how you describe yourself and how others might describe you. For example, skin colour, ancestry, nationality, religion, gender identity, sexuality, age, weight, disability or mental health issue, income, or source of income.
- d A scale where higher scores indicate having less freedom to be/share/express all aspects of oneself in day-to-day life (e.g. ethnicity, disability, sexual orientation).

Police, 911, and the Legal System

As seen in Table 6, immigrants and Canadian-born respondents had an equally high distrust of the police, legal system, and medical services, regardless of immigration history. 7 in 10 Trans PULSE Canada respondents would not anticipate fair treatment from the police and the legal system if they were to be physically assaulted. In the event of sexual assault, 8 in 10 respondents would not anticipate fair treatment from the police and legal system. About 1 in 5 respondents reported avoiding calling 911 for police and emergency medical services, among those who needed them. This suggests that other contributing factors, such as their shared trans/non-binary identities, may be more salient.

Conclusion

This report presents the first quantitative all-ages data on trans and non-binary immigrants and newcomers in Canada. Of the sample, 12% (n=336) were immigrants; 9% were established immigrants and 3% newcomers. A majority of both newcomers and established immigrants came to Canada for reasons relating to education or employment. However, despite immigrants being more highly educated than Canadian-born respondents, no differences were found in their employment situation and low-income household status. Newcomers were more likely to have immigrated due to fear of persecution as a trans/non-binary person and to access genderaffirming care compared to established immigrants. Newcomers also scored higher than established immigrants and Canadian-born respondents on a

Table 7: Identity documents

New- comer (≤ 5 years ago)	Estab- lished im- migrant (>5 years ago)	
n=92	n=244	P-
%	%	value ^a

Access to identity docu	•	s) with	0.002
Received all IDs that were pursued	13	28	
Tried but couldn't access one or more IDs	4	12	
Never tried to get these IDs	83	60	

Access to IDs with true home country	name or	gender in	0.148
Received all IDs that were pursued	14	12	
Tried but couldn't access one or more IDs	15	8	
Never tried to get these IDs	71	81	

 Values <0.0500 indicate that differences between groups are statistically significant.

measure of identity siloing. All three groups reported equally high distrust of the police, the legal system, and emergency medical services. Newcomers and established immigrants reported better physical health than those born in Canada. Established immigrants reported better mental health and higher scores when asked if they were thriving compared to newcomers and Canadian-born respondents. Future research should further examine how the health and wellbeing of trans and non-binary immigrants is impacted during and after resettlement. Specific barriers to employment for skilled workers should be studied, along with the experiences of gender-based violence in trans and non-binary immigrant communities. Other intersecting social positions such as race, disability, and age should be considered as well, particularly considering the heterogeneity of the immigrant population in Canada.

Acknowledgments

The Trans PULSE Canada team includes 109 people that contributed in different ways to the project. We would like to acknowledge the valuable contributions of the following people, and 36 additional individuals: Aaron Devor, Adrian Edgar, Alisa Grigorovich, Alyx MacAdams, Ander Swift, Angel Glady, Anna Martha Vaitses Fontanari, Asha Jibril, Ayden Scheim, Bretton Fosbrook, Caiden Chih, Callie Lugosi, Carol Lopez, Charlie Davis, Connie Merasty, Dominic Beaulieu-Prévost, Drew Burchell, Elie Darling, Emily Nunez, Eva Legare-Tremblay, Fae Johnstone, Fin Gareau, Françoise Susset, Frédéric S.E. Arps, Gioi Tran Minh, Greta Bauer, Hannah Kia, Jack Saddleback, Jacq Brasseur, Jaimie Veale, Jor-dan Zaitzow, Jelena Vermilion, Joseph Moore, Julie Temple-Newhook, j wallace skelton, Keegan Prempeh, Kelendria Nation, Kimberly Dhaliwal, Kohenet Talia Johnson, Kusha Dadui, Kylie Brooks, Leo Rutherford, Marcella Daye, Mayuri Ma-hendran, Meghan Smith, Moomtaz Khatoon, M. Roberts, Naja, Nathan Lachowsky, Nik Redman, Noah Adams, Pee-tanacoot (Winnie) Nenakawekapo, Parker L., Rainbow Hunt, Randy Jackson, Reann Legge, Rebecca Hammond, Reece Malone, Renée Masching, Renu Shonek, Robb Travers, Rosalyn Forrester, Roxane Nadeau, Sharp Dopler, Shaz Islam, Siobhan Churchill, Sizwe Inkingi, Skylar Sookpaiboon, Sophia Ciavarella, T.F., Todd Coleman, Tony Kourie, Wil-liam Flett, and Yasmeen Persad. Thank you!

References

- Kaushik V, Drolet J. Settlement and integration needs of skilled immigrants in Canada. Social Sciences. 2018;7(5):76. Available from: https://doi.org/ 10.3390/socsci7050076
- Bragg B, & Wong LL. "Cancelled dreams": Family reunification and shifting Canadian immigration policy.
 Journal of Immigrant & Refugee Studies. 2016;14:
 (1):46-65. Available from: https://doi.org/10.1080/15562948.2015.1011364
- 3. Government of Canada. Changes to citizenship requirements 2017 to 2018. Last modified: April 25, 2018. Available from: https://www.canada.ca/en/immigrati on-refugees-citizenship/services/canadian-citizenship/act-changes/requirements-2017-2018.html

- Statistics Canada. Immigration and ethnocultural diversity: Key results from the 2016 Census. Oct 25, 2017. Available from: https://www150.statcan.gc.ca/ n1/daily-quotidien/171025/dq171025b-eng.htm? indid=14428-1&indgeo=0
- Fuks N, Smith NG, Pelaez S. Acculturation experiences among lesbian, gay, bisexual, and transgender immigrants in Canada. The Counseling Psychologist. 2018;46(3):296-332. Available from: https://doi.org/10.1177/0011000018768538
- Cerezo A, Morales A, Quintero D, Rothman S. Trans migrations: Exploring life at the intersection of transgender identity and immigration. Psychology of Sexual Orientation and Gender Diversity. 2014;1 (2):170-180. Available from: http://dx.doi.org/10.1037/ sgd00000031
- Ibrahim D. Violent victimization, discrimination and perceptions of safety: An immigrant perspective, Canada, 2014. Statistics Canada, Juristat. 2018;1:3-27. Available from: https://www150.statcan.gc.ca/n1/ pub/85-002-x/2018001/article/54911-eng.htm
- 8. Kalich A, Heinemann L, Ghahari S. A scoping review of immigrant experience of health care access barriers in Canada. Journal of Immigrant and Minority Health. 2015;18:697-709. Available from: https://doi.org/10.1007/s10903-015-0237-6
- Vang Z, Sigouin J, Flenon A, Gagnon A. Are immigrants healthier than native-born Canadians? A systematic review of the healthy immigrant effect in Canada. Ethnicity & Health. 2015;22(3):209-241. Available from: https://doi.org/10.1080/13557858.2016.12465
- De Maio FG, Kemp E. The deterioration of health status among immigrants to Canada. Global Public Health. 2010;5(5):462-478. Available from: https://doi.org/10.1080/17441690902942480
- De Maio, FG. Immigration as pathogenic: A systematic review of the health of immigrants to Canada. International Journal for Equity in Health. 2010;9(27):1-20. Available from: https://doi.org/10.1186/1475-9276-9-27
- Giblon R. Bauer GR. Health care availability, quality, and unmet need: a comparison of transgender and cisgender residents of Ontario, Canada. BMC Health

Services Research. 2017;17(1):283. Available from: https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-017-2226-z

- 13. Wirtz AL, Poteat TC, Malik M, Glass N. Gender-based violence against transgender people in the United States: A call for research and programming. Trauma, Violence, & Abuse. 2018;21(2):227-241. Available from: https://doi.org/10.1177/1524838018757749
- 14. Kcomt L. Profound health-care discrimination experienced by transgender people: Rapid systematic review. Social Work in Health Care. 2019;58(2):201-219. Available from: https://doi.org/10.1080/00981389.2018. 1532941
- Scheim AI, Bauer GR. The Intersectional Discrimination Index: Development and validation of measures of self-reported enacted and anticipated discrimination for intercategorical analysis. Social Science & Medicine. 2019;226:225-235. Available from: https://doi.org/10.1016/j.socscimed.2018.12.016
- 16. United Nations Statistics Division. Standard country or area codes for statistical use - geographic regions. Available from: https://unstats.un.org/unsd/ methodology/m49/

Contributing Authors

Jose Navarro, Tatiana Ferguson, Caiden Chih, Asha Jibril, Moomtaz Khatoon (Imtiaz Popat), Sizwe Inkingi, Dominic Beaulieu-Prévost, Prerna Thaker Reports, presentations, and papers can be downloaded at:

transpulsecanada.ca

For more information: info@transpulsecanada.ca

This project is funded by the Canadian Institutes of Health Research.







