



## BC ASSEMBLY OF FIRST NATIONS

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**BCAFN ANNUAL GENERAL MEETING**  
**September 19, 20, & 21, 2023**  
**Hybrid - In person & online via Zoom**

**Resolution 14/2023**

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**SUBJECT:** **SUPPORT FOR BCAFN TO JOIN NATIONAL COALITION SUPPORTING GENDER-AFFIRMING HEALTHCARE INFORMATION**

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**MOVED BY:** **SPOKESPERSON CHARMAINE THOM, TAKU RIVER TLINGIT FIRST NATION**

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**SECONDED BY:** **CHIEF DAN MANUEL, UPPER NICOLA INDIAN BAND**

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**DECISION:** **CARRIED**

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**WHEREAS:**

- A. Before colonization, Two-Spirit people were included and respected as valued community members, often holding diverse, unique roles within First Nations communities. As part of the colonization process, there has been an erasure of Two-Spirit people, culture and stories, which has impacted Two-Spirit peoples' wellness and connectedness to their communities and cultures;
- B. The term "Two-Spirit" reflects complex Indigenous understandings of gender roles, spirituality, and the long history of sexual and gender diversity in Indigenous cultures. Individual terms, oral traditions, and roles for Two-Spirit people are specific to each nation. The word "Two-Spirit" was introduced by Elder Myra Laramie at the Third Annual inter-tribal Native America, First Nations, Gay and Lesbian American Conference in Winnipeg in 1990. Not all Indigenous people who hold diverse sexual and gender identities consider themselves Two-Spirit;
- C. All First Nations people have the right to access quality, culturally appropriate and gender-affirming health care;

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**Certified copy of a resolution adopted on the 19<sup>th</sup> day of September 2023**

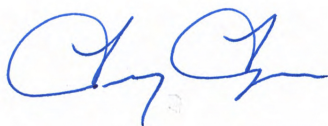
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**Terry Teegee, BC Regional Chief**

- D. Gender-affirming care encompasses a range of social, psychological, behavioural, and medical interventions designed to support and affirm an individual's gender identity;
- E. Two-Spirit, trans and gender-diverse people have individual, unique gender health goals and needs that may or may not include trans-specific medical interventions;
- F. Several challenges pose barriers to gender-affirming care for Two-Spirit, trans, and non-binary people in BC:
  - a) Lack of primary care attachment;
  - b) Demand for culturally safer providers and trans-specific medical care exceeds capacity;
  - c) Primary care providers lack awareness and knowledge in providing care;
  - d) Lack of access to training and support for care providers wanting to get involved in care;
  - e) Long waits for surgical readiness assessments, surgical consults, and surgery;
  - f) Lack of publicly funded psychosocial/mental health supports, especially for young people; and
  - g) Misinformation and malinformation campaigns are active in B.C., especially related to gender-affirming care for Two-Spirit, trans, and non-binary children and youth, leading to an increase in barriers to accessing timely care for young people;
- G. Misinformation is a broad term for incorrect or misleading information. False information can be disproven with scientific evidence. Malinformation contains some truth, but is misleading and can cause harm;
- H. First Nations people, including Two-Spirit, trans, and non-binary children and youth, have the right to access accurate, culturally appropriate, and accessible information regarding their health, which will support gender-affirming care, rather than pose a barrier;
- I. BCAFN Chiefs-in-Assembly have affirmed the inherent value of First Nations Two-Spirit, trans, and non-binary people; their rights to equity, justice, and inclusion; the role of colonialism and discrimination as barriers to the attainment of these rights; and First Nations governments' and organizations' responsibility to work to ensure the restoration and reclamation of wellbeing through resolutions 11/2020 *Support for Indigenous Women, Girls, and 2SLGBTQQIA+ People Declaration*, 28/2021 *Women and 2SLGBTQQIA+ Dialogue Session Recommendations*, 01/2022 *Intersectional Advocacy and Capacity Building Grounded in First Nations Knowledges*, and 28/2022 *Support for the Women, Gender-Diverse and 2SLGBTQQIA+ Dialogue Session Report*;
- J. Trans Care BC is a part of the Provincial Health Services Authority, and their purpose is to work with partners to set direction and provide leadership for trans health services across B.C. to ensure Two-Spirit, trans and gender-diverse people of all ages get the care they need when and where they need it;

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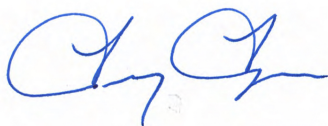
- K. Trans Care BC is hosting a National Coalition that will involve community leaders and organizations partnering to share newly developed resources and tools that will support healthcare providers, families, and Two-Spirit, trans, and non-binary youth to identify and address misinformation and malinformation. This project will highlight Two-Spirit, trans and non-binary joy and share knowledge and research related to best practices in youth gender health. This work will be guided by Two-Spirit, trans, and non-binary youth, parents/caregivers, and healthcare providers;
- L. BCAFN has the opportunity to participate as a member of this National Coalition;

**THEREFORE BE IT RESOLVED THAT:**

1. The BCAFN Chiefs-in-Assembly support BCAFN in joining the National Coalition to respond to the spread of misinformation and malinformation regarding gender-affirming care for Two-Spirit, trans, and non-binary youth; and
2. The BCAFN directs the Regional Chief to advance advocacy, together with like-minded organizations, that responds to the range of identified barriers to quality, culturally appropriate, and gender-affirming healthcare for First Nations youth, in particular, Two-Spirit, trans, and non-binary youth.

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