

Freedom of Information – Response – 26785

Policies and Strategies

- a. Does the local authority have any policies, strategies, or guidelines that specifically reference any of the following (please put an X for Yes or No for each):

Reference	Yes	No	b. If Yes, please provide 1. the title(s) , 2. publication date(s) and 3. a copy of, or public link to the document
Chemsex		X	
Sexualised drug use		X	
Gamma-hydroxybutyrate (GHB) / gamma-butyrolactone (GBL) use		X	
Crystal methamphetamine use		X	
Mephedrone use		X	
LGBTQ+ health issues	X		<p>We do not have a policy/guidance that is specifically titled LGBTQ+ health issues, however the attached internal guidance for staff and managers does refer to elements linked to LGBTQ+ health issues.</p> <p>Title: Guidance on inclusion and support for transgender, non-binary and gender diverse staff. Date: 02/03/2021 Internal only.</p> <p>Note: This guide was originally published in 2021. It is currently under review and will be superseded or republished once we have received legal advice and final guidance from Equality and Human Right Commission in relation to the UK Supreme Court ruling on the legal definition of a woman.</p>

1. Services and Support

- a. Does your local authority commission or fund any services that provide support specifically for any of the following (e.g. harm reduction, sexual health, mental health, or community support) (please put an X for Yes or No for each):

Reference	Yes	No	b. If Yes, please provide 1. the name(s) of the services(s) , 2. provider organisation(s) , 3. duration of the current contract(s) , and 4. Whether the service is delivered as part of a wider contract (e.g. drug and alcohol treatment, sexual health services)
Chemsex	x		1.Suffolk Drug & Alcohol Treatment Service

			b. Turning Point c. 9 year contract d. Yes Suffolk Integrated Sexual Health Service 1. Provide Community 2. 9 year contract 3. Yes- provides support for Chemsex
Sexualised drug use	x		As above for both Drugs and Alcohol and Sexual Health
Gamma-hydroxybutyrate (GHB) / gamma-butyrolactone (GBL) use	x		As above (Only Drugs & Alcohol)
Crystal methamphetamine use	x		As above (Only Drugs & Alcohol)
Mephedrone use	x		As above (Only Drugs & Alcohol)
LGBTQ+ health issues	x		Turning Point will respond to LGBTQ+ health issues if they relate to substance misuse Provide Community provides confidential and non-judgmental sexual health support for LGBTQ+ individuals.

- c. For those that you stated no to for question 2a above, are the following issues supported under existing services (e.g. general drug and alcohol services, sexual health clinics)? Please put an X for Yes or No, or mark Not Applicable if you said Yes for question 2a above).

Reference	Yes	No	Not applicable	d. If yes, please identify which services would typically manage such cases.
Chemsex			x	
Sexualised drug use			x	
Gamma-hydroxybutyrate (GHB) / gamma-butyrolactone (GBL) use			x	
Crystal methamphetamine use			x	
Mephedrone use			x	
LGBTQ+ health issues			x	

2. Pathways and Referral Processes

- a. Does the local authority or its commissioned services have a care pathway or referral protocol for any of the following (please put an X for Yes or No for each):

Reference	Yes	No	b. If Yes, please provide a copy of the pathway/protocol or a brief description if a document is not available
Chemsex			Pathways between the drug & alcohol treatment provider and the sexual health service are in place,
Sexualised drug use			As above.
Gamma-hydroxybutyrate (GHB) / gamma-butyrolactone (GBL) use			Treatment for problematic substance misuse (including GHB and GBL) is part of the Turning Point offer
Crystal methamphetamine use			Treatment for problematic substance misuse (including crystal meth) is part of the Turning Point offer
Mephedrone use			Treatment for problematic substance misuse (including Mephedrone) is part of the Turning Point offer
LGBTQ+ health issues			N/A

- c. Are there any joint working arrangements or data-sharing agreements between drug and alcohol services, sexual health services and mental health services specifically relating to chemsex or sexualised drug use? Please state Yes or No.
Suffolk County Council does not hold copies of joint working arrangements between providers.
- d. If Yes to question 3c, please provide details or copies of relevant agreements (if not exempt).

3. Data and Monitoring

- a. Does the local authority or its commissioned services collect data on service users presenting with chemsex or sexualised drug use issues? Please state Yes or No. **Note:** we recognise that there are no ICD-10 codes or nationally recognised format to record chemsex or sexualised drug use related issues therefore if this information is collected within your local authority, it would be through a unique system that was set up locally.
No
- b. If Yes to question 4a, please indicate:
- o Which service(s) collect this data;
 - o What indicators or categories are used (e.g. “chemsex,” “GHB use,” “sexualised drug use”);
 - o The total number of clients recorded under those indicators for each of the last three years (if available).
- c. If No to question 4a, please confirm whether there are any plans to include it in future data collection systems or reporting frameworks. Please state Yes or No.
Not at this current time.
- d. If Yes to question 4c, please provide any documents related to these plans or state any details about the future plans (e.g. when it will start, what data will be collected and from what services etc)
N/A

4. Additional Context

- a. Please provide any publicly available reports, needs assessments, or evaluations produced or commissioned by the local authority since 2020 that include information about chemsex or sexualised drug use, GHB/GBL, crystal methamphetamine, mephedrone use or LGBTQ+ needs.

All Needs Assessments conducted by Public Health & Communities (a directorate within Suffolk County Council) can be found via accessing the Healthy Suffolk website. [Healthy Suffolk - Healthy Suffolk](#)

Guidance on inclusion and support for transgender, non-binary and gender diverse staff



This guide was originally published in 2021. It is currently under review and will be superseded or republished once we have received legal advice and final guidance from Equality and Human Rights Commission in relation to the UK Supreme Court ruling on the legal definition of a woman.

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Introduction and statement of intent

The Council aims to create an inclusive trans-friendly culture, workplace and learning environment, free from discrimination, harassment, or victimisation, where all transgender, non-binary and gender diverse people are treated with dignity and respect.

Suffolk County Council will give support and understanding to those individuals who do not identify with the sex assigned to them at birth, or whose gender identity or gender presentation varies from a traditional binary approach. We believe that people perform best when they can be themselves at work, and so we want to ensure that all our people, including trans, non-binary and gender diverse colleagues, work in an environment where they are accepted, respected, and valued.

Suffolk County Council has taken an inclusive approach with regards to gender fluid and non-binary people for some years; this has now been confirmed in caselaw as a requirement of the Equality Act 2010¹

This guidance is designed to help raise understanding of transgender, non-binary and gender diverse issues, in order to provide the best support in the workplace. It focuses on issues affecting our *staff*, so additional steps will need to be taken when considering how to have inclusive provision for customers, although some of the same principles will apply.

This guidance will not cover every eventuality or unique situation. A glossary of terms is provided at the end for those who may be unfamiliar with them.

There are also FAQs at the end that provide answers to common questions arising, for the employees themselves, and for their managers and colleagues.

¹ See: <https://www.personneltoday.com/hr/gender-fluid-and-non-binary-workers-protected-under-equality-act/>
Last updated February 2021

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Guidance for supporting staff

General principles

- People are protected from harassment and discrimination in law on the basis of their trans or non-binary status – there is no requirement for any medical process or gender recognition certificate in order to be protected.
- SCC goes further and requires its staff to act inclusively towards gender diverse staff also, who may be cisgender but present in ways that are not traditionally or stereotypically associated with their sex.
- Staff are required to use the correct pronouns and names for all staff. Any deliberate or repeated incorrect use of pronouns and names may constitute harassment and be liable to disciplinary action. Asking about a trans person's previous name without a need-to-know can be highly offensive and should not be done.
- Confidentiality is particularly important: a person's trans, non-binary or gender diverse status should not be disclosed without their permission. Staff should guard against an assumption that because someone is open about their trans status in one forum, or to one group of people, that they will feel safe or comfortable to be so in another, or all, forum(s).
- All trans, non-binary and gender diverse people are different. As with everyone else, managers and colleagues should speak to them to find out what their personal preferences are.
- Being transgender, non-binary or gender diverse is not all about a transition. Some people decide to make a medical or social transition; others don't. Different people chose different transition options. It is a personal journey. Where staff are transitioning, or coming out, SCC expects managers to provide a sensitive and thoughtful response, that focuses on the needs and preferences of the employee.
- It is important to note that you cannot tell a person's sex and gender by looking at them: although most cis people will present in a way that is traditionally associated with one gender or another, trans people may "pass" or not, and/or may prefer an androgynous look, or may vary from one day to the next. A non-binary person may present in a way that is traditionally associated with one sex. It is always best to ask and not assume.
- Staff are entitled to time off as sick leave for medical appointments for gender affirmation under the Absence Policy (see FAQ 4 in Appendix 3 of this document). This will not count towards their Bradford Factor score, and any reasonable absence for gender affirmation purposes should not be included if performance management steps are being taken.
- We have an LGBT+ staff network, which staff are encouraged to join, either as a member of one of the primary groups, or as an ally. This includes a 'blind list' so LGBT+ staff can be copied into emails without others seeing their name, if they prefer. Managers are encouraged to signpost LGBT+ staff and allies to the staff network, and to allow them reasonable time to attend meetings and take part in network activities, where possible.
- Best practice includes cis people confirming what their pronouns are in meeting introductions and/or on emails: this helps trans and non-binary people feel more included and able to state their own pronouns.
- Wearing a rainbow lanyard is another way that allies can help LGBT+ people feel included in the workplace – it really works!

Supporting transition or coming out

Using an action plan can help employees and their managers to consider the issues that may arise, and to plan what support or actions may be needed at that time. It can address issues such as the timing of using a particular changing area or toilet, or of a name or pronoun change. Each action plan will be different because each situation is unique, and people will want different sorts and levels of support. **The template action plan is available in appendix 1.**

Managers should be aware that coming out as trans, non-binary or gender diverse may well cause the employee to be having extra concerns or issues in their personal life. Many families, unfortunately, are not supportive of people when they come out as trans. Trans, non-binary and gender diverse people suffer high amounts of discrimination and hate crime, with trans women (particularly trans women of colour) amongst the most likely group to be murdered². Managers should seek to support the employee, as they would other employees needing support with concerns outside of work.

Sources of support

There are many sources of further support, information, and guidance, for trans staff and/or their managers, including:

- your line manager or senior manager
- [HR](#)
- the [LGBT+ Network](#)
- My Learning, (search for 'equality' and 'harassment' to find relevant courses)
- the [Suffolk Coaching and Mentoring Partnership](#)
- the Employee Assistance Programme, which can give advice, support, and counselling for a range of issues, including health, financial and family issues
- [Occupational Health](#), if there are mental or physical health issues needing additional advice for how to support in the workplace, and only with the permission of the employee, if it involves disclosing their trans status
- your trade union, some of which have specific representatives for LGBT issues – see for example [UNISON](#)
- community groups such as [Outreach Youth](#) and [Gender Xplored](#)
- and online information, such as at:
 - [Healthy Suffolk's Gender Identity Hub](#)
 - [The Gender Identity Research and Education Society \(GIRES\)](#)
 - [Mermaids UK \(support for children and young people\)](#)
 - [Gendered Intelligence](#)

² See for example Galop's Transphobic Hate Crime Report 2020, which stated that "trans people are under such high rates of physical, sexual, and verbal attack that more than half feel less able to leave their home," and that 80% had suffered a transphobic hate crime in the last year. Source: <http://www.galop.org.uk/transphobic-hate-crime-report-2020/>

For information about trans women of colour being at higher risk of being murdered, see: <https://www.hrc.org/resources/violence-against-the-trans-and-gender-non-conforming-community-in-2020> and <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5551594/>

Single-sex facilities

The underlying principle to be applied is that all staff, including trans, non-binary and gender diverse staff, can make use of the facilities that are the most appropriate to them, at any time. If a member of staff has a particular issue they wish to discuss, they can do so with their line manager, but they should be aware of the above principle. Staff must not make a colleague or customer feel uncomfortable for using the facilities of their choice. If an employee is uncomfortable sharing the facilities, for any reason, they may choose to make use of other facilities, but they cannot expect other people to do so in order to make them feel comfortable.

Genuine occupational requirements

A few jobs have a genuine occupational requirement for applicants to be of a particular sex – for example, when a person who is having personal care delivered to them wants the care to be delivered by a person of the same sex as them.

The current legal position is unclear, with, at the most, only trans people with a Gender Recognition Certificate (GRC) in the required gender being able to apply for such roles, whilst other trans or non-binary people would not. This is an area under legal review.³

Given that trans people do not require a GRC legally to change their official sex for work purposes or on documents such as passports, it follows that a person could officially be of a particular sex in all but having a GRC. Also, there are no comfortable or acceptable ways to question or check an applicant's sex if it is in question during a recruitment process

Therefore, in order to have the best inclusive practice and avoid any undue discrimination or distress, the Council's position is that any jobs it advertises with a genuine occupational requirement may ask **all** applicants as a screening question if they identify as the required sex, and will thereafter accept all declarations, without further question.

HR records

Employees are able to update and amend their sensitive personal information, including their gender and transgender status, on the HR system at any time. Employees who would wish to have all trace of any documents saved by HR that record their previous name and/or official gender will need to contact HR and/or the Data Protection Team. There may be some information we are required to keep for legal or tax purposes or need to keep (but possibly amend names and pronouns of) if, for example, there have been HR cases or live warnings on the employee's record. We will work with the employee to meet their requirements as closely as possible, within these constraints.

³ See points 125-132 of: <https://publications.parliament.uk/pa/cm201516/cmselect/cmwomeq/390/39007.htm>

Appendix 1: Action plan for employees transitioning or coming out in the workplace

Action Plan to support employees who are coming out or transitioning					
<p>Levels of confidentiality</p> <p>From the first, it must be agreed how all communication and information will be dealt with. Information relating to transgender, non-binary or gender diverse status must not be disclosed or shared with others without the express consent of the employee.</p>					
<p>Plan between employee and line manager</p> <p>As the line manager you need to discuss with the person what help and support, they would prefer. As every situation is unique, it is important to agree an individual action plan based on the specific circumstances. Do not make any assumptions. The potential actions below are suggestions, which may or may not be relevant. Some people will choose not to have an action plan.</p>					
<p>What is the expected timeframe? And where relevant, the expected timescale of any medical/surgical procedures (if known)? Are there known absence dates, how frequent will these be?</p>	<table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				
<p>Does the individual want there to be any communications to colleagues and or customers? What are the individual's preferences with regards to the method and timing of these, and who they would prefer to do it (the manager or them)?</p>	<table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				
<p>Are there any health concerns about workplace duties during or following the transition that the employee wishes to raise? Is there any additional well-being support that the employee is needing?</p>	<table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				
<p>Does the individual feel that any other specific support would be helpful within the team to create as supportive environment as possible?</p>	<table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				
<p>Toilet and changing facilities – the employee can use any facilities that are appropriate, at any time. Would they prefer the manager to give any support for this or make any communication about this on their behalf to colleagues?</p>	<table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				

Action Plan (continued)

<p>Will the employee's name and/or pronouns be changing, if so, what will they be? When would they like people to start using these? How will this be communicated?</p>	
<p>Will employee records/information/systems need amending? Who does what? Information regarding process of doing this will be added (HR/IT).</p>	

Appendix 2: Terminology/ glossary of terms relating to gender identity

There are many different terms that are used to describe the range of gender positions and identities. The definition of these is often contested, and others question the need to use labels at all. A glossary of some terms has been given below to aid understanding but is not an absolute or complete picture. It is always best to ask a person how they identify, and which terms they feel are appropriate to them.

The below has been adapted from glossaries available from Stonewall (<http://www.stonewall.org.uk/help-advice/glossary-terms>) and CBS news: (<https://www.cbsnews.com/news/transgender-gender-identity-terms-glossary/>)

Agender: a term for people whose gender identity and expression does not align with male, female, or any other gender. A similar term used by some is 'gender-neutral'.

Androgynous: identifying and/or presenting as neither distinguishably masculine nor feminine.

Ally: a cis person who supports members of the trans and non-binary community; trans and non-binary people can also be each other's allies.

Bigender: someone whose gender identity encompasses both male and female. Some may feel that one side or the other is stronger, but both sides are present.

Binary: the gender binary is a system of viewing gender as consisting solely of two identities and sexes, man and woman or male and female. Some societies historically have not done this (see appendix 4).

Cisgender/ cis: someone whose gender identity matches the sex they were assigned at birth. '

Coming out: in the context of gender when a person discloses their identity as trans. Coming out is often a process that has to be repeated over and over again for the individual, to different people, and in different situations. Other people may choose not to 'come out', and their choice must be respected.

Crossdresser: a person who is cisgender but wears clothing that, in their culture, has not been traditionally assigned to or associated with their gender

Dead-naming: calling a trans person by their birth name after they have changed their name. Very offensive because it can be a sign of not accepting who they are.

Gender: often expressed in terms of masculinity and femininity, in accordance with societal expectations (which are often stereotypes) of the behaviours and manifestations of each sex.

Gender affirmation: another way of describing a person's transition, involving some sort of social or medical transition, including, potentially, things such as hormone therapy, surgery, changing name or pronouns, dressing differently and/or changing official documents.

Gender dysphoria: clinically defined as significant and durational distress caused when a person's assigned birth gender is not the same as the one with which they identify.

Gender euphoria: The joy or comfort felt or experienced when a person presents as or is perceived as their true gender and/or joy experienced when imagining themselves as a given gender.

Gender expression: the external appearance of a person's gender identity, usually expressed through behaviour, clothing, haircut or voice, which may or may not conform to societal expectations of gender. Not all people who do not conform to societal expectations of gender will identify as trans.

Gender-fluid: A person who does not identify with a single fixed gender and expresses a fluid or unfixed gender identity. One's expression of identity is likely to shift and change depending on context.

Gender identity: a person's innate sense of their own gender, whether male, female, non-binary, or something else, which may or may not correspond to the sex assigned at birth.

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Gender Recognition Certificate (GRC): this enables trans people to be legally recognised in the gender they identify as, and to be issued with a new birth certificate. Not all trans people will apply for a GRC, and it is only issued to over 18s. Trans people do not need a GRC to change gender markers at work or to legally change gender on other documents, such as their passport. SCC does not require a GRC to recognise the trans and non-binary identities.

Gender-queer or gender diverse: a term for people who reject notions of traditional or static categories of gender. People who identify as genderqueer may see themselves as being both male and female, neither, or as falling completely outside these categories. (It should be noted that 'queer' is a reclaimed term that some people within the LGBT+ community use to describe themselves, but offence may be caused if someone else uses it to describe them.)

Intersex: a term used to describe a person who may have the biological attributes of both sexes, or whose biology does not fit with traditional binary thinking in terms of what constitutes male or female.

Misgender: Referring to or addressing someone using words and pronouns that do not reflect the correct gender.

Non-binary: a term for a person who does not identify as only male or only female, and who may identify as both or neither. Often, non-binary people use the pronouns 'they/their', rather than 'he/his' or 'she/her'.

Outing a person: when a person's trans or non-binary status or assigned sex at birth is disclosed to someone else without their permission. A criminal offence if someone holds a gender recognition certificate.

Passing: if a trans man or woman is regarded, at a glance, to be cisgender. This will be important to some trans people; to others, especially those who identify as non-binary or on the genderqueer spectrum, this may not be important or relevant. 'Passing' should not be used as a marker of acceptance of a trans person.

Person with a trans history: often used by a person who has completed their transition, to acknowledge both their own gender identification, but also that they were assigned a different sex at birth.

Pronouns: words we use to refer to people's gender in conversation, such as he/his, she/her, or they/their. There are also neo-pronouns, such as ze/zir, xe/xem/xir and ey/em/eir. Once a person has designated the correct pronouns to be used to address them, these should be used without question. For more information, see:

<https://www.transgendertraininginstitute.com/pronouns/>

Questioning: in the context of gender, a person who is in the process of exploring their gender identity.

Sex assigned at birth: the classification of a person as male or female at birth. Infants are assigned a sex, usually based on the appearance of their external anatomy.

Trans: an umbrella term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Trans people may describe themselves using a wide variety of terms including (but not limited to): transgender, genderqueer, gender-fluid, non-binary, crossdresser, agender, bigender, etc.

Transgender: An umbrella term for people whose gender identity and/or expression is different from cultural and social expectations based on the sex they were assigned at birth.

Trans man: a person who was assigned female at birth but identifies as a man.

Transmasculine/ trans masc: A person who was assigned female at birth whose gender identity and/or expression tends to lean more towards the masculine but does not necessarily identify as male. Can include non-binary people, gender fluid, gender queer, trans men and other gender diverse people.

Trans woman: a person who was assigned male at birth but identifies as a woman.

Transfeminine/ transfem: A person who was assigned male at birth whose gender identity and/or expression tends to lean more towards the feminine but does not necessarily identify as female. Can include non-binary people, gender fluid, gender queer, trans women and other gender diverse people.

Transphobia: the fear, dislike, or disavowal of trans people; abuse on the grounds of trans status.

Appendix 3: FAQs

1. I intend to undergo a gender transition process, or to come out as trans, non-binary or gender diverse at work. Who do I need to inform?

In order to get organisational support you will need to talk to your manager, when you feel ready to do so, or HR if you do not feel comfortable to approach your line manager.

2. I don't want my colleagues to know yet, can SCC guarantee confidentiality?

Yes, no staff should disclose information about your transgender, non-binary or gender diverse status without your express consent. As with other sensitive personal information, it should be disclosed on a need-to-know basis only, with the consent of the individual. The only time this would not apply is if there are any safeguarding concerns that over-ride the need for consent, which would be in very exceptional circumstances.

3. Do I need to tell my colleagues about my gender identity and/or my intention to start my gender affirmation process?

You don't have to, you can present at work in any gender identity, and it is expected that your managers and colleagues should be supportive. You may want to discuss if, how and when communication with your team is managed with your manager. Every situation is unique, and which information is shared, and how, must be agreed with you.

4. How will any time off be dealt with for gender affirmation medical processes?

Time off for surgery and recuperation from surgery for gender affirmation will be recorded as sick leave. It may be necessary to discuss how it will be sub-categorised on the system (in terms of the type of sick leave recorded). Other medical appointments relating to gender affirmation will be recorded as sick leave when it has not been possible to make them outside of working hours.

There may also be a need for some non-medical appointments, for example for electrolysis or speech therapy. These will not qualify for sick leave. Managers should reasonably consider requests for unpaid leave or allow annual leave or flexi leave for these appointments when it has not been possible for them to take place outside of work time.

Any reasonable absence because of treatment for, or recuperation from, gender affirmation should not be taken into account for the purposes of action for unsatisfactory attendance, and also will be excluded from Bradford Factor scores

The employee does not have to provide proof of a gender transition, but normal arrangements will apply to any medical absence: i.e. that proof of appointments and surgery can be required.

5. I would prefer to work in another part of the organisation once I've come out or transitioned, can SCC accommodate this?

This may be possible through the Flexible Resourcing Pool, or, within a service, by local solution, but a suitable vacancy being available at the right time cannot be guaranteed. Please discuss with HR.

6. My work involves interaction with clients; I'm worried this could complicate my relationships. How will SCC support me?

You should discuss with your line manager how you would prefer this to be dealt with, and whether you want there to be any communications to customers and partners, at what time, and whether you prefer these to be done by your manager or yourself.

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7. When will I be able to use single sex facilities?

Staff can use any facilities that are the most appropriate, at any time. Sometimes the point for starting to use the other gender facilities may be the day you start coming to work presenting as your chosen gender. Every situation is unique, and you may wish to discuss this with your line manager and possibly an HR Advisor, but you don't have to: you can just do what you feel is most suitable to you.

8. When will my gender and name details be updated on SCC systems?

You will need to agree with your manager when you want this to happen. You do not need a gender recognition certificate to request this.

9. Will my pension be affected?

It can affect your pension in terms of what the data that is held on the HR system as opposed to the tax office. Please contact the pensions team to understand the implications for your specific situation, you can also speak to your local tax office for more information in the meantime.

10. I am unhappy about the way a colleague is treating me, linked to me being transgender, non-binary or gender diverse, what can I do?

In the first instance, we would encourage you to speak to your line manager or HR about it – in many cases, people are unaware of the impact of their actions and issues can be resolved informally. If this does not work, or the issue is more ongoing and/or serious, employees have recourse to the grievance procedure. This may result in the colleague having disciplinary action taken against them if misconduct is found to have occurred. A list of sources of support for you is provided in the guidance above.

11. A member of staff has disclosed that they are trans, non-binary or gender diverse, or that they want to come out as such to their colleagues, or that they intend to start a gender affirmation process. What does the line manager need to do?

Managers in this situation must familiarise themselves with the guidance information and proposed action plan and then contact our HR Advice team so they can best support the individual.

12. If an employee hasn't told their colleagues/manager about being transgender, non-binary or gender diverse and I think they need to know, should I tell them?

*No, you **must not** do this. As with other sensitive personal information, it should be disclosed on a need-to-know basis only, with the consent of the individual, unless there are any safeguarding concerns that over-ride the need for consent.*

13. Once an employee has completed a transition, are they required to provide the line manager with a Gender Recognition Certificate (GRC)?

No, and they should not be asked for one.

14. My colleague is transgender, non-binary or gender diverse, or has started a gender transition. What can I do to support them?

Most trans people just want to be treated the same as everyone else. Ensure you address and refer to them by the correct name and pronouns, and challenge and/or report any inappropriate comments made by others. Many LGBT+ staff report feeling safer when seeing colleagues wearing the rainbow lanyards too.

Appendix 4: Gender Diversity Through Time and Cultures, from The Proud Trust

This information has been included to provide examples of how societal and cultural expectations of gender and sex, and the way they are expressed and defined, have varied in different times and places. This can be surprising to people who are used to thinking about gender identity in a fixed or binary way.

GENDER DIVERSITY THROUGH TIME AND CULTURES



Ninauposkitzipxpe

Translating as “manly-hearted women”, the Ninauposkitzipxpe were recognised as a third gender in the North Peigan tribe of the Blackfoot Confederacy, Southern Alberta, Canada. This was a person that had been assigned female at birth, and although may not have dressed in “male” clothes, was otherwise unrestricted by social restraints placed on women in this society.



Guevedoche

Upon birth, children are assigned a sex based on observation of their external genitalia. Some female assigned people, at puberty, grow a penis and testicles descend from inside their bodies. This is unusually common for people from Salinas village in the Dominican Republic, who may then choose to live their lives as a “man”, “woman” or as this third gender “guevedoche”.



Hijra

For hundreds of years, Hijras have been a part of South Asian cultures. They are people who were assigned as males at birth, but who identify, and live their lives as women.

During colonisation, when the British came to power in India, they passed a law in 1897, which made “cross-dressing” a crime, this resulted in many Hijras becoming ostracised from society.

Many years and much lobbying later, India now has laws that recognise the Hijra as a “third gender”, and challenges discrimination against them.



N'Nonmiton

Sometimes called the Dahomey Amazons, this was an all-female military regiment in the present-day Republic of Benin (Africa), which lasted until the end of the 19th century.

These soldiers were rigorously trained, given uniforms, and equipped with guns. By the mid-19th century, they numbered between 1,000 and 6,000 people, about a third of the entire army. Reports noted variously that all soldiers suffered several defeats, but that the female soldiers were consistently judged to be superior to the male soldiers in effectiveness and bravery.



Bissu, Calalai, and Calabai

The Bugi people of southern Sulawesi in Indonesia recognise three sexes (male, female and intersex) and five genders: men, women, bissu, calabai, and calabai.

- Bissu are considered a "transcendent gender", either encompassing all genders or none at all. The bissu serve ritual roles in Bugi culture and are sometimes equated with priests.
- Calalai are people assigned female at birth who gender identify as men.
- Calabai are people assigned male at birth who gender identify as women.



Sistergirls and Brotherboys

Unique to indigenous culture in Australia, brotherboys and sistergirls are trans people who are Aboriginals or Torres Strait Islanders, and have a strong sense of their cultural identity.

Within the sistergirl and brotherboy communities, a sistergirl is an individual assigned male at birth who has a female spirit and a brotherboy is an individual assigned female at birth who has a male spirit.

Fāāfafine



The third gender of 'fāāfafine' has always existed within Samoan society, and when translated literally means 'in the manner of' (fāā) 'woman' (fafine).

People that were assigned male at birth, but who have a strong feminine gender orientation are fāāfafine. Recognised early in childhood, Samoan parents then raise such children as girls, or third gender children. These children are fully accepted by their families and by society.

Mahu



Long before Captain Cook's arrival in Hawaii, a multiple gender tradition existed among the Kanaka Maoli indigenous society.

The mahu could be any sex, but taking on a gender role somewhere between, or encompassing both, the masculine and feminine. Their social role is sacred as educators of ancient traditions and rituals.

The arrival of Europeans and the colonisation of Hawaii nearly eliminated the native culture, and today mahu face discrimination in a culture dominated by white European ideas of only two genders.

Nadleehi and Dilbaa



Traditionally, Navajo culture recognised four genders:

- Asdzaan; feminine female
- Hastiin; masculine male
- Nadleehi; feminine male
- Dilbaa; masculine female

The nadleehi were not shunned in tribal society. Rather, they were respected for having, what was considered to be, both genders within one person.

Gender fluidity, and diverse gender expression, as was recognised in First Nation People, was met with confusion by Western colonists. Early European conquerors went so far as to throw living nadleehi to their war dogs, to be torn limb from limb.



Quariwarmi

In pre-colonial Andean culture in Peru, the Incas worshipped the Chuqui Chinchey, a dual-gendered god. The quariwarmi were third-gender ritual attendants that performed sacred rituals to honour this god.

The quariwarmi shamans wore androgynous clothing as "a visible sign of a third space that negotiated between the masculine and the feminine, the present and the past, the living and the dead".

The quariwarmi were deemed sodomites by the conquering Spaniards.



Burrnesha

A tradition is still alive today in Albania, whereby people that have been assigned as female at birth live their lives as men, in order to escape a highly patriarchal system.

Otherwise known as "sworn virgins", a person becomes a burrnesha by swearing an irrevocable oath to practice celibacy. They are then allowed to live as a man and may dress in male clothes, use a male name, carry a gun, smoke, drink alcohol, take on male work, act as the head of a household, play music and sing, and sit and talk socially with men.

A person can become a burrnesha at any age, either to satisfy their parents or themselves.



Yirka-Lául

Among the 19th century Chuckchi of Siberia, people who were assigned male at birth but displayed "feminine" behaviour were considered to be third gender shamans. They adopted "feminine" hairstyles, then "female" clothes, and finally married men.

They were hated, scorned, and also feared by the rest of the Chuckchi, as they were considered to be much more powerful than other shamans.