

## Appendix B:

### PROPOSED ADDITIONS TO THE USA-SWIMMING POLICIES & PROCEDURES MANUAL

**\*Updated with recommendations from 5/12/18 Board Meeting**

#### **\*SECTION 27: ATHLETE INCLUSION PROCEDURES (Proposed NEW section)**

All eligible athletes will have the opportunity to participate in swimming in a manner that is consistent with their gender identity and expression. Should a situation arise regarding an athletes' intent to change competition category to one consistent with their gender identity, an athlete may seek eligibility review for participation in the different competition category, through the procedures set forth below.

##### **27.1 Process to change competition category – Applicant Intake Procedure**

STEP 1: Contact USA Swimming with request (Phone: 719-866-4578, or Email: [inclusion@usaswimming.org](mailto:inclusion@usaswimming.org))

STEP 2: USA Swimming intake process interview

STEP 3: Required documentation provided to USA Swimming

STEP 4: Eligibility Review Panel reviews request with established criteria

STEP 5: Panel decision will be communicated in writing, and in person when possible, to athlete/parent/coach.

STEP 6: Administrative change initiated in SWIMS

STEP 7: Compete in new category\*

\*Limit: 2 changes per year

\*All eligibility rules apply for meets selection, NAG, etc.

\*Elite athletes who may qualify for high-level or international meets must also refer to the guidelines provided by USADA, WADA, FINA, and IOC, regarding drug testing, qualifications, and other rules.

**.1 Notification to USA-Swimming.** The athlete, or someone on the athlete's behalf, shall contact USA Swimming at any time, indicating the athlete has a consistent gender identity different than the competition category in which the athlete was registered, and desires to participate in competition in a manner consistent with their gender identity. This is a formal process and can take up to 2 weeks from the time all required paperwork is submitted.

**.2 USA Swimming intake process interview** gathers information regarding the request and provides the member with required paperwork to complete and return. Please email all paperwork to [inclusion@usaswimming.org](mailto:inclusion@usaswimming.org).

**.3 Required documentation provided by applicant.** The written request to change competition category must include the following:

- 1) Name of person making the request
- 2) Relationship of requester to the member seeking the change
- 3) Athlete's USA Swimming ID number
- 4) Athlete's first, last, middle name as it currently appears in SWIMS
- 5) Current contact info: email, phone number
- 6) LSC, Team Contact Info (Team's Head Coach)
- 7) Athlete's Coach (if different from head coach)
- 8) The specific request, written out for clarity: example:
  - a) "My daughter's name in SWIMS is the following: First: Henry, Middle: John, Last: Smith"
  - b) "Her gender listed is: M. Please change to the following: First: Jane, Middle: blank, Last: Smith"
  - c) "Please Change competition gender to F."
- 9) Completed Statement of Review - Athlete Support Plan
  - a) NOTE: USA Swimming will assist and facilitate the provision of resources and training for any member seeking assistance regarding gender identity and expression procedures and requirements.
- 10) Letter of support from a health-care professional who has treated or is treating the applicant. This can include:

- a) Licensed Medical provider (family physician, endocrinologist, pediatrician, etc.)
  - b) Licensed Mental health professional (psychiatrist, psychologist or licensed mental health professional such as school counselor, etc.)
- 11) Any other pertinent documentation or information which the applicant believes to be relevant and appropriate.

**.4 Eligibility Review Panel reviews request.** Once the required paperwork is received, it will be sent to a panel for review. Supporting documentation may be required if determined necessary by the review panel. The eligibility panel will have 1 week to provide a recommendation to USA Swimming staff. A written determination of the applicant's eligibility to participate in a new competition category will be provided by the intake staff member.

## **27.2 Eligibility Review Panel**

### **.1 Panel members must include:**

- 1) Safe Sport National Committee member
- 2) Diversity & Inclusion National Committee member
- 3) R&R National Committee Chair
- 4) Medical professional

**.2 Medical Eligibility criteria:** Medical professional defined as a board certified, licensed provider, preferably familiar with the World Professional Association for Transgender Health (WPATH) Standards of Care

**.3 Athlete Support Plan:** Document intended to aid the applicant and family in exploration and discussion of their category change request. A signed Statement of Review of the ASP must be received.

**27.3 Final Determination of Review.** When there is sufficient documentation and confirmation, the Eligibility Review Panel will affirm the athlete's eligibility to participate in a new competition category. This eligibility is granted and binding for the duration of the athlete's participation in swimming. All discussion and documentation will be kept confidential, unless the applicant makes a specific request. If a change in competition category is denied by the Eligibility Review Panel, an athlete may seek recourse with the National Eligibility Appeal Panel.

**27.4 National Eligibility Appeal Panel (NEAP)** The National Eligibility Appeal Panel will handle all gender-related eligibility protests from any USA Swimming member, including non-athlete members.

**.1 Panel Original and Exclusive Jurisdiction** Any athlete denied a category change by the Eligibility Review Panel may file an appeal with the National Eligibility Appeal Panel. Any USA swimming member may lodge a protest for gender eligibility concerns arising from an approved competition category change.

**.2 Panel Authority:** Falls under the current USA Swimming President and CEO or his/her designee

**.3 Panel contributors** must include 5 individuals, appointed by the USA Swimming Board Chair

- 1) Rules and Regulations - National Committee Chair (same individual from initial Eligibility Panel)
- 2) Medical Professional (same professional from initial Eligibility Panel)
- 3) Medical Professional (outside consultant)
- 4) Safe Sport - National Committee coach or athlete member\*
- 5) Diversity & Inclusion - National Committee coach or athlete member\*

\*There must be one coach and one athlete represented on the NEAP

**.4 Medical Eligibility criteria:** Medical Professional is defined as a board certified, licensed provider, preferably familiar with the World Professional Association for Transgender Health (WPATH) Standards of Care

#### **27.5 Procedure for filing Protests or Appeals with National Eligibility Appeal Panel (NEAP)**

- STEP 1: Petition is filed in writing to the Rules and Regulations National Committee Chair
- STEP 2: NEAP conducts investigation (organized by the Rules and Regulations Chair)
- STEP 3: NEAP completes investigation which may include a possible in-person hearing
- STEP 4: NEAP report and decision will be communicated in writing, and in person when possible, to athlete/parent/coach within 14 business days of filing
- STEP 5: Any necessary administrative changes are completed in SWIMS (race results, category change, etc.) within 5 business days of NEAP decision

**27.6 Final Determination of NEAP Review.** When there is sufficient documentation and confirmation, the National Eligibility Appeals Panel will affirm or deny the protest filed. This ruling is granted and binding for the duration of the athlete's participation in swimming. All discussion and documentation will be kept confidential, unless the applicant makes a specific request.

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#### **SECTION 22: SWIMS MANUAL (already exists – see redline addition below)**

##### **5.0 SWIMMING RECORDS**

World Records and USA Swimming Records (including American and United States Open Records, National Age Group (NAG) Records, Zone Records, and LSC Records) must comply with the requirements stipulated under the Rules for Timing Records section of the Technical Rules portion of the USA Swimming Rules and Regulations. USA Swimming record applications shall be submitted to USA Swimming and shall be approved by the Times and Recognition Committee.

- 5.1. Applications for all USA Swimming records shall be posted on the USA Swimming website.
- 5.2. Applications and all required paperwork for American and United States Open Records must be submitted within 14 days of performance. An American Record may be established only by United States citizens eligible to compete under and achieving an official time in accordance with USA Swimming rules. Records may be established in or outside of the United States.
- 5.3. Applications and all required paperwork for NAG records must be submitted within 30 days of performance.
- 5.4. Specific requirements for Zone records and LSC records will be set by the appropriate Zone or LSC
- 5.5. A Record will be recognized in the competition category in which it was earned.



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USA Swimming  
Athlete Support Plan

The purpose of this document is to create shared understandings about the ways in which the athlete will be supported at USA Swimming practices, competitions and hosted events. Athletes, legal guardians/parents, coaches and USA Swimming Staff may be included in the process to complete this document. If you have any questions about this document, please email: [inclusion@usaswimming.org](mailto:inclusion@usaswimming.org).

**PARENT/GUARDIAN INVOLVEMENT**

Are guardian(s) of this athlete aware and supportive of their child's gender status?

\_\_\_\_ Yes \_\_\_\_ No

If not, what considerations must be accounted for in implementing this plan?

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**CONFIDENTIALITY, PRIVACY AND DISCLOSURE**

How public or private will information about this athlete's gender be (check all that apply)?

\_\_\_\_ LSC Officials will know.

Specify the adult staff members: \_\_\_\_\_

\_\_\_\_ Board of Directors of the team will know.

Specify the adult staff members: \_\_\_\_\_

\_\_\_\_ Coaches will know.

Specify the adult staff members: \_\_\_\_\_

\_\_\_\_ Athlete will not be openly "out," but some teammates are aware of the athlete's gender.

Specify the athletes: \_\_\_\_\_

\_\_\_\_ Host Team

\_\_\_\_ Athlete is open with others (adults and peers) about gender

\_\_\_\_ Other – describe:

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If the athlete has asserted a degree of privacy, what steps will the family take if that privacy is compromised, or is believed to have been compromised?

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## **NAMES, PRONOUNS AND ATHLETE'S RECORDS**

Today's Date: \_\_\_\_\_

Athlete's Name: \_\_\_\_\_

Name on Birth Certificate: \_\_\_\_\_

Athlete's Gender Identity Assigned Sex at Birth: \_\_\_\_ M \_\_\_\_ F \_\_\_\_ Intersex

Pronouns: \_\_\_\_\_

How should an athlete, parent/legal guardian, coach or official respond to any questions about the athlete's gender from: Other teammates or athletes? Coaches? Officials? Parents/community?

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What name and gender marker are listed on the athlete's USA Swimming registration?

\_\_\_\_\_  
(USA swimming staff will be the point person for ensuring these adjustments are made.)

What are some other ways the athlete's community needs to anticipate the athlete's privacy being compromised? How will these be handled?

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## **ATHLETE'S SAFETY**

Who will be the athlete's "go to adult(s)" on the pool deck? \_\_\_\_\_

What, if any, will be the process for periodically checking in with these adults?



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What are expectations in the event the athlete is feeling unsafe and how will athlete signal their need for help:

\_\_\_ In the locker-room: \_\_\_\_\_

\_\_\_ On the pool deck: \_\_\_\_\_

\_\_\_ In the hotel (when applicable): \_\_\_\_\_

\_\_\_ Other safety concerns/questions: \_\_\_\_\_

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What should the athlete's parents/legal guardians do if they are concerned about how others are treating their child at practice, competitions or other events? \_\_\_\_\_

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### **USE OF FACILITIES**

Are training and home changing facilities conducive to your current needs?

\_\_\_ Yes \_\_\_ No

If not, what changing facilities will the athlete use: \_\_\_\_\_

Have you considered what swimwear you will be using in practice? \_\_\_ Yes \_\_\_ No

Are there any questions or concerns regarding swimwear? \_\_\_\_\_

- Please refer to local decency laws for reference.

If athlete/coach/parent have questions/concerns about facilities, then please contact the host team.

### **COMPETITION**

What are the expectations regarding travel competitions? \_\_\_\_\_

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What are the expectations regarding rooming for any overnight trips? \_\_\_\_\_



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At travel competitions, have you considered the following questions if changing facilities are not conducive to your current needs?

Athlete will use the following bathroom(s): \_\_\_\_\_

Athlete will change clothes in the following place(s): \_\_\_\_\_

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If you are an elite athlete, refer to the guidelines provided by USADA, WADA, FINA, and IOC, regarding drug testing, qualifications, and other rules. Refer to the meet information and guidelines for that meet.

If athlete/coach/parent have questions/concerns, then please contact USA Swimming.

### **OTHER CONSIDERATIONS**

Does the athlete have any sibling(s) on the team? \_\_\_\_ Yes \_\_\_\_ No

Factors to be considered regarding sibling's needs? \_\_\_\_\_

Are there any specific social dynamics with others (athletes, families, etc.) that need to be discussed or accounted for?

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How will the team work to create more gender inclusive conditions for all athletes?

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Are there any other questions, concerns or issues to discuss?

### **SUPPORT PLAN REVIEW AND REVISION**

Has this been shared with the coach/team? \_\_\_\_ Yes \_\_\_\_ No

If so, when? \_\_\_\_\_

How often will this be revisited? \_\_\_\_\_

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USA Swimming  
Athlete Support Plan

## Statement of Acknowledgement

I, \_\_\_\_\_, guardian of \_\_\_\_\_, hereby  
(printed name) (name of athlete if under 18)

acknowledge and declare that I have received, read, and understood the Athlete Support Plan. I

understand that if I have any questions or concerns about this document, it is my responsibility

to discuss it with USA Swimming, the team, and/or coaching staff.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





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USA Swimming  
Athlete Support Plan

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Signature

\_\_\_\_\_  
Date