



# Building Accomplices: Transgender Healthcare

**Stephanie Vail, she/her**

Community Health Worker, Rainbow Niagara 2SLGBTQ+ Services, Quest CHC

**Celeste Turner, they/them**

LGBTQ2+ Support Coordinator, NFCHC





# Land Acknowledgements





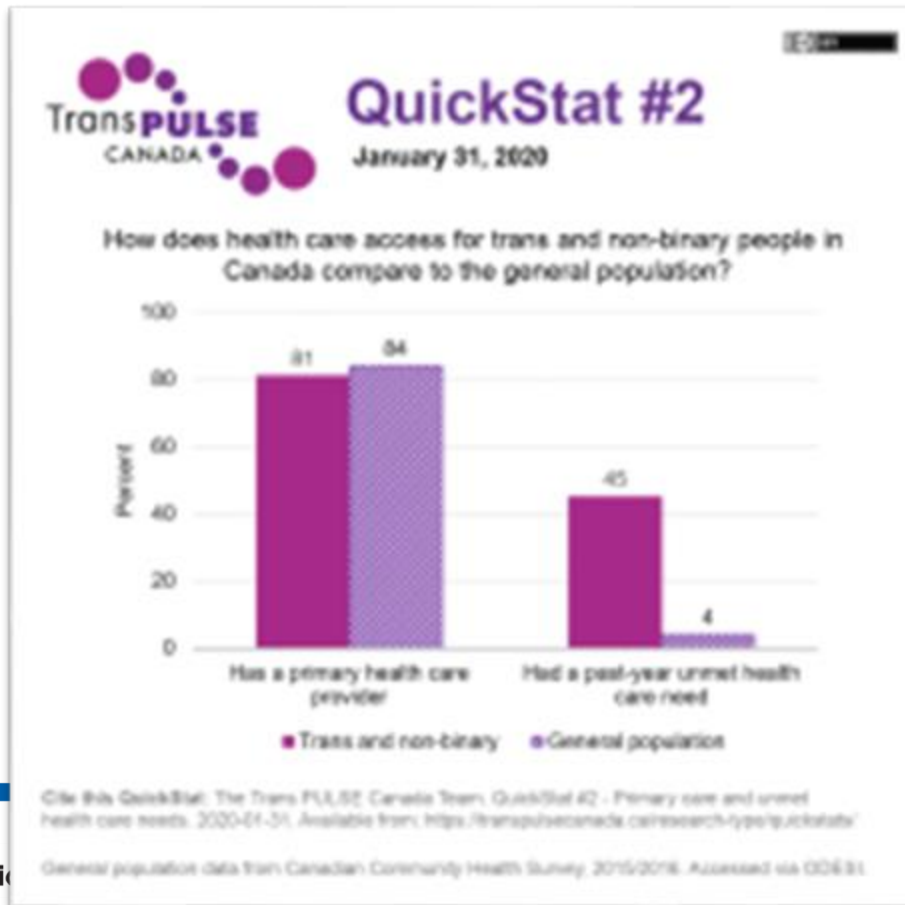
# Content warning:

- Mentions of suicide, mental health challenges, abuse, harassment, etc.
  - Please do what is needed to take care of yourself
- Do not share identifying details in personal stories





# Desperate need for Trans Affirming Healthcare



“...because they were trans or non-binary, 12% had avoided going to the emergency room in the past year, despite needing care.”

Source: [https://transpulsecanada.ca/wp-content/uploads/2020/03/National\\_Report\\_2020-03-03\\_cc-by\\_FINAL-ua-1.pdf](https://transpulsecanada.ca/wp-content/uploads/2020/03/National_Report_2020-03-03_cc-by_FINAL-ua-1.pdf)



# Why?

## Negative experiences & mistreatment

- Many have had negative experiences including discomfort, denial of care, and discrimination.
- 50% were not comfortable discussing trans issues with their doctor.
- 30-40% perceived their physician to be not at all knowledgeable about trans health issues.
- 20% have been denied hormone prescriptions.
- 21% have avoided emergency room care because they perceived their trans status would negatively affect the encounter.\*\*\*
- 11% have obtained hormones from non-medical sources.

<https://www.rainbowhealthontario.ca/TransHealthGuide/>





# WHY the Why?

- Providing Trans-affirming and 2SLGBTQ+ Competent care in general, is not mandatory learning
- It is not discussed in any formal healthcare educational programs
- Providers must seek training on their own accord (which fortunately in Ontario is fairly easy to access)



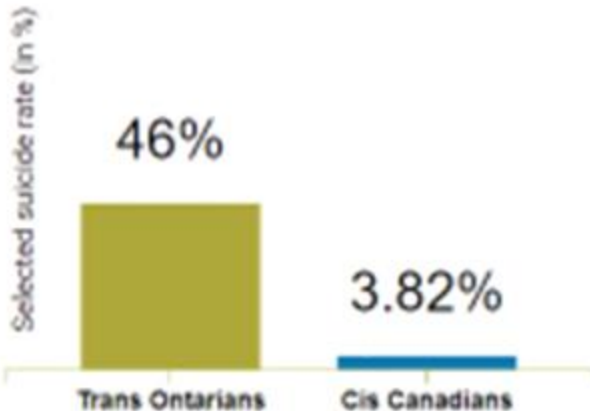


# Life-saving treatment

The 2010 TransPulse survey of 433 trans people in Ontario aged 16 and older found extremely high rates of suicidal ideation and suicide attempt.

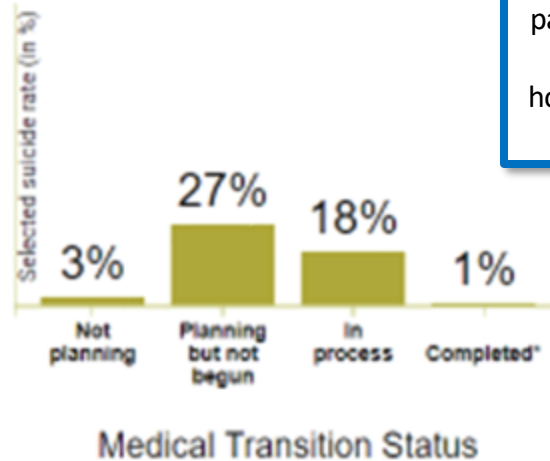
Compare rates between *trans* and *cis* people:

SUICIDE ATTEMPT (ACROSS LIFESPAN) ▾



Suicidal ideation and attempt rates of *trans* people at different stages of medical transition:

SUICIDE ATTEMPT (PAST YEAR) ▾



\* In this study completed transition was based on participant self-report and may involve any combination of hormones or surgery/surgeries



# Is it that bad even in Niagara?

- There is a **lack of general practitioners and affordable counsellors** in the region, and an even greater gap in practitioners who are knowledgeable and supportive of 2SLGBTQQIA+ health.
- **Discrimination, stigma, and ignorance** are common across family health and urgent care, as well as physiotherapy, massage therapy, and chiropractic care, especially for trans folks
- Community members experience healthcare providers' refusals to take on 2SLGBTQQIA+ patients, deadnaming, misgendering, fat shaming, poor shaming, heteronormative assumptions about sexual health, birth control, and family planning.

<https://www.outniagara.org/community-report/>







# Is it that bad even in Niagara?

- There is a **distinct lack of physicians willing and trained to provide trans healthcare**. Wait lists are long.
- There are **no** providers who do trans care for children and youth under 16 years old. As one community member describes,  
*“Gender transition support is not available for my 13-year-old. We were referred to Ron Joyce and have been waiting for 6 months without any word of when the first appointment will be.”* Community members express frustration in delays of gender-affirming surgeries, deemed unnecessary.
- Even within the few health centres in Niagara region that provide trans health, experiences vary. While some community members have had terrific experiences, others describe negative experiences and doing a lot of **self-advocacy** to get the healthcare they need.

<https://www.outniagara.org/community-report/>





# Is it that bad even in Niagara?

- 2SLGBTQQIA+ community members identified health as the **biggest challenge they face, with more than half (243/438) of survey respondents naming issues related to health when asked about the biggest issue for 2SLGBTQQIA+ communities in Niagara region**
- Long waitlists due to limited providers

<https://www.outniagara.org/community-report/>





# Is it that bad even in Niagara?

“These kinds of [trans health] waiting lists cause untold physical and mental harm to gender diverse people, who are already at high risk of self-harm and suicide.” – Parent of 2SLGBTQQIA+ youth

<https://www.outniagara.org/community-report/>





# ...so now what?

- What can folks do as accomplices to move trans care forward in Niagara?





- Advocate for the Gender Affirming Health Care Act to improve gender affirming health care in Ontario
  - If passed, the Gender Affirming Health Care Advisory Committee Act will mandate the Ontario Ministry of Health to strike a provincial advisory committee (including both members of the trans and gender diverse community, and gender-affirming healthcare providers) to make recommendations to the Minister of Health for improving access to and coverage for gender affirming health care in Ontario
  - [Bill 17, Gender Affirming Health Care Advisory Committee Act, 2021 - Legislative Assembly of Ontario \(ola.org\)](#)





- Advocate for primary care providers to access education such as what's offered through Rainbow Health Ontario (RHO)
  - Trans health knowledge base
  - Trans primary care Guide
  - Sherbourne's Health Centre's Guidelines and Protocols for Gender Affirming Primary care with Trans and Non Binary Patients





- Advocate for folks who work in human service role (and everyone!) to become educated around 2SLGBTQ+ health and wellness
  - RHO education and training
  - NFCHC and Quest offer education sessions around sexual and gender diversity to offer a local lens





- How do we increase support for folks who are on wait lists to access trans care? (circles back to slide 14)
  - Trans youth under 16 in particular
- How do we increase support/services for folks who are increasingly marginalized such as BIPOC communities, sex workers, newcomers, seniors, migrant workers?

