

# **TRANS HEALTH IN THE CHAMPLAIN REGION & INTRODUCTION TO GENDER AFFIRMATIVE PRACTICE**

*This presentation has been created by and is the intellectual property of  
Centretown Community Health Centre's Trans Health Team*

# LAND ACKNOWLEDGEMENT

We all have different relationships to the land, and some of us are here as settlers. It is important for us to acknowledge the land we live on, locally, the unceded Algonquin Territory, the original caretakers of this land, and our relationships today. It is particularly important for us, given our focus today on Trans inclusion and gender affirming care, to acknowledge the ways in which gender and sexuality have been used as part of colonization, and to acknowledge how forms of oppression, such as colonization, homophobia, and transphobia are intimately interconnected.

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# EVALUATION

- Please help us continue this important work by completing a short pre and post presentation evaluation

- Survey link: <https://survey.alchemer-ca.com/s3/50151090/Trans-Health-in-the-Champlain-Intro-to-Gender-Affirmative-Practice>

# HOUSEKEEPING

- Please ask a question at any time; jump in, raise your hand or use the chat
- This is a confidential space
- Identifying info stays here
- Meeting people where they are at
- Fear as a barrier
- We are all on a unique journey, bring an open mind and park judgments

# Introductions

Holly Brown – she/her they/them elle/la iel/ielle

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What anchors me in Trans Health and my personal mission.

**Do you have any experience with Trans people (personal or professional)?**

# OVERVIEW

PART 1

## TRANS HEALTH IN THE CHAMPLAIN

- CCHC stats at a glance
- Increasing referrals and wait times
- Impact on patient wellness
- Projections
- CCHC Key messages

PART 2

## INTRODUCTION TO GENDER AFFIRMATIVE PRACTICE

- Terminology
- Trans and non-binary patients
- Social determinants of health
- Cultural context
- Gender affirmative language, care and spaces
- Case study

TRANS HEALTH

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# PART 1

Trans Health in the Champlain

# CCHC STATS AT A GLANCE

- Established in 2016 to provide healthcare to trans and gender diverse individuals in the Champlain Region
- Clinic focus is HRT initiation and surgery assessments, discharging back to primary care provider
- Received permanent funding in 2019
- Our Team:
  - Community Support Worker
  - Physician
  - Nurse practitioner
  - Nurse
  - Counsellors (2-3)
  - Program Lead (.5)
  - Medical Reception

Trans Health Clinic	Target	F2019-20	F2020-21	F2021-22
Unique Clients Seen	100	125	143	186
Service Provider Interactions	300	830	854	848

# CCHC STATS AT A GLANCE

## Our Patients:

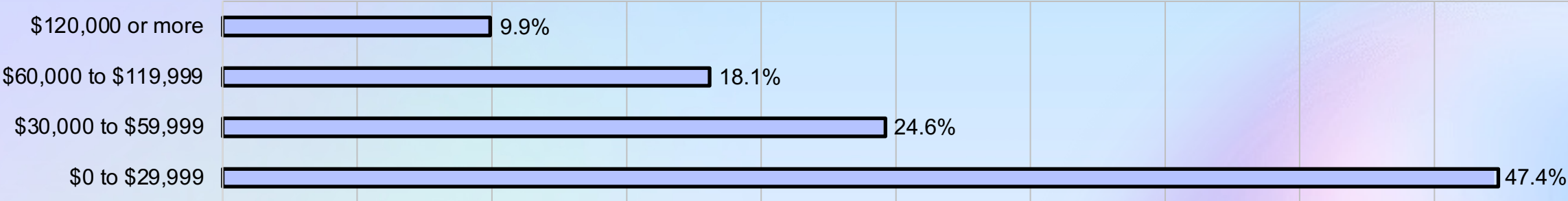
- **36.6 %** live in sole member households
- **27.6 %** belong to racialized communities; among them **3.8 %** of are Indigenous
- **53.5 %** have attained post secondary education
- **2.9%** experience homelessness
- **10%** experience substance abuse
- **96%** experience mental health issues\*

“Contrary to the notion that depression and suicidality are primarily attributable to distress inherent to being trans, we found evidence that discrimination and violence had strong adverse impacts on mental health”

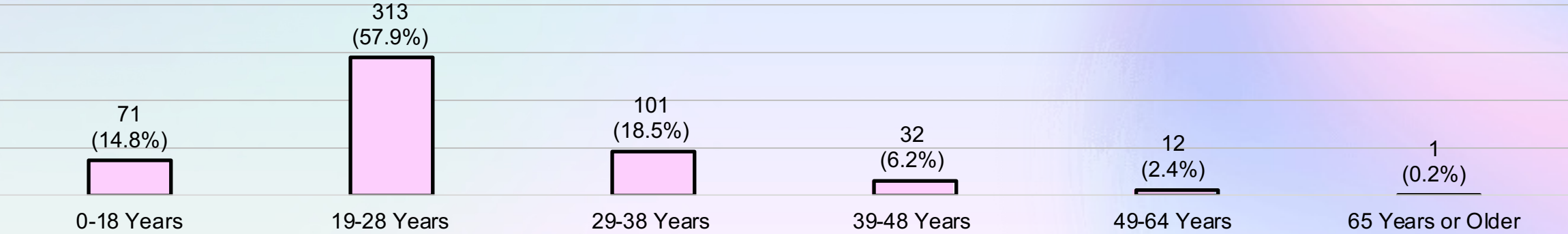
– *Trans Pulse*

# CCHC STATS AT A GLANCE

CCHC Trans Clinic Clients Household Income

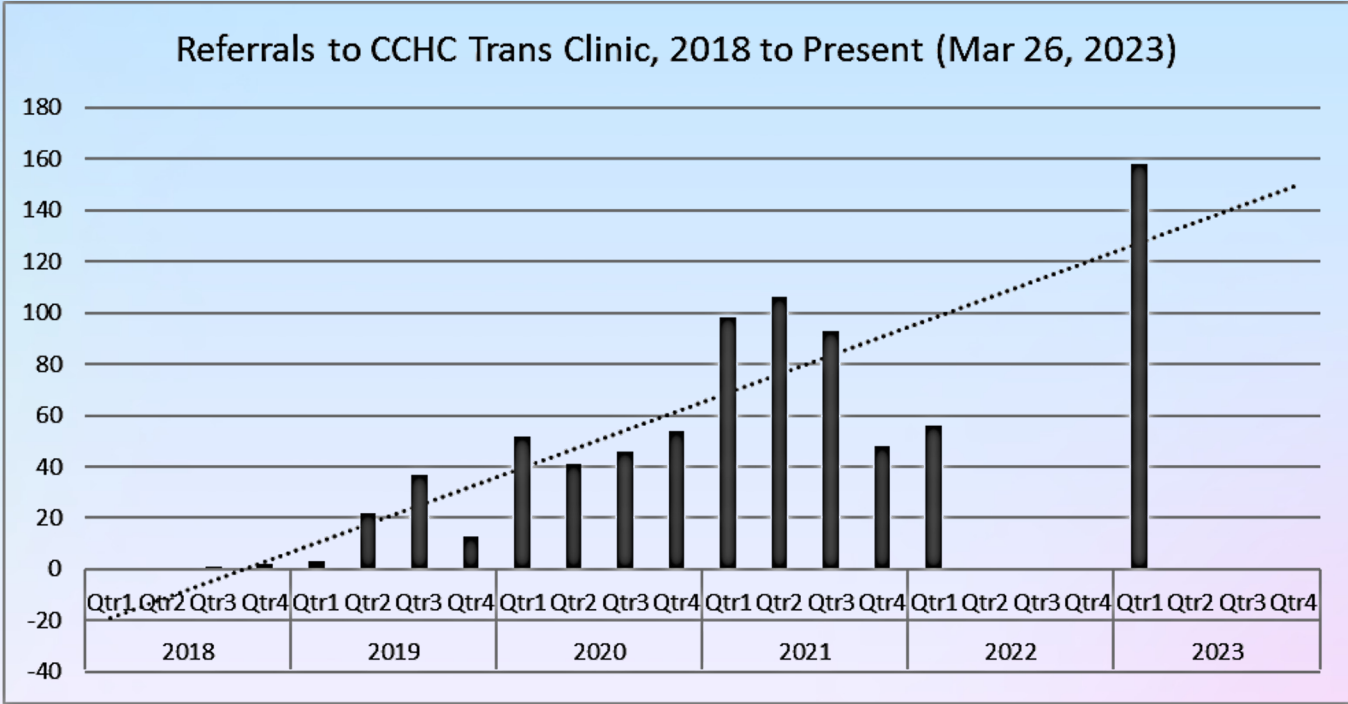


CCHC Trans Clinic Clients by Age Group



# INCREASING REFERRALS

- Referrals to CCHC’s Trans Clinic at least **double** annually
- Growing number of referrals highlight gaps in trans-friendly primary care



# WAIT TIMES ARE TRENDING HIGHER


Hormone Replacement Therapy

- from referral to first appointment

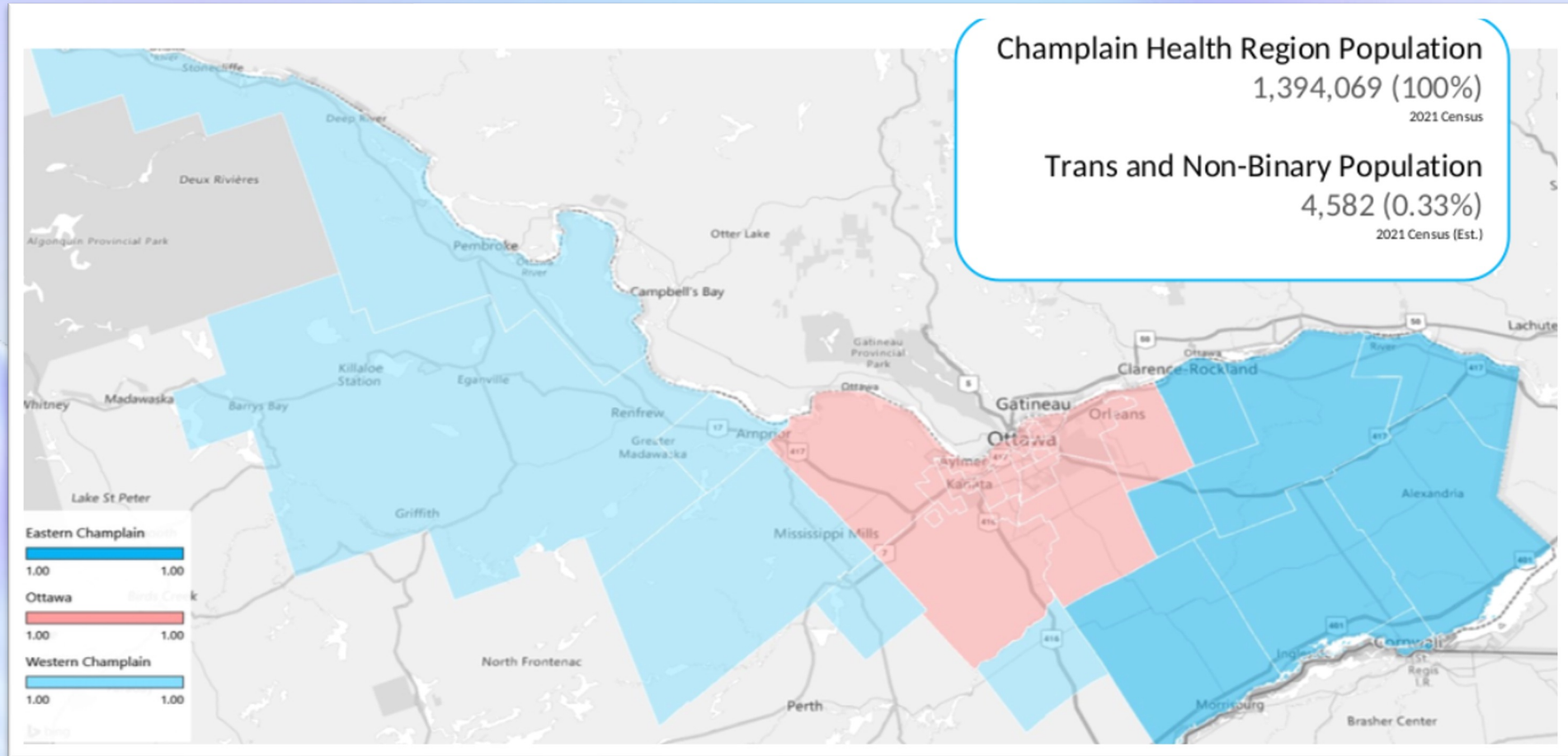
26 months  


Surgical Assessments

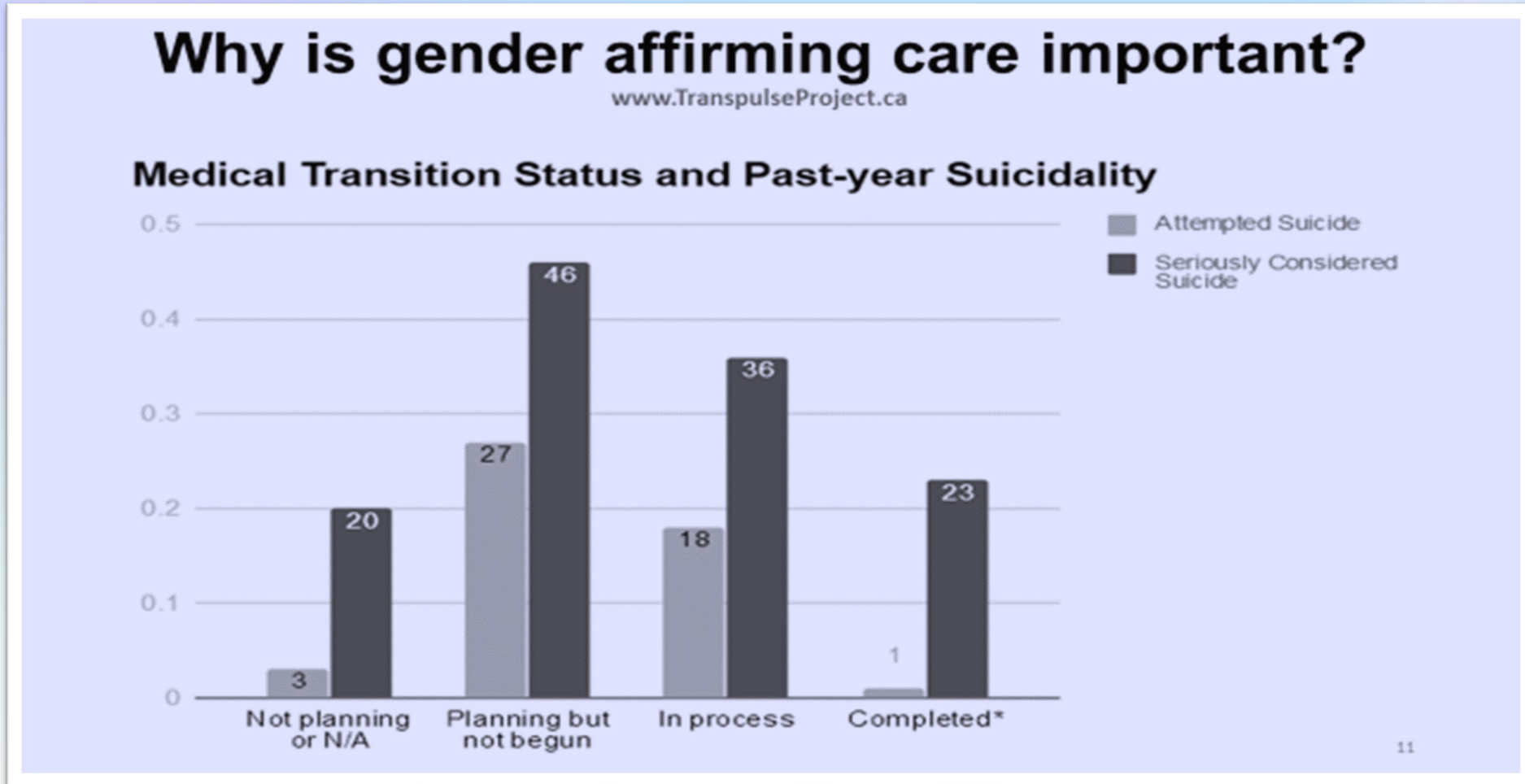
- from referral to first appointment

55 months  


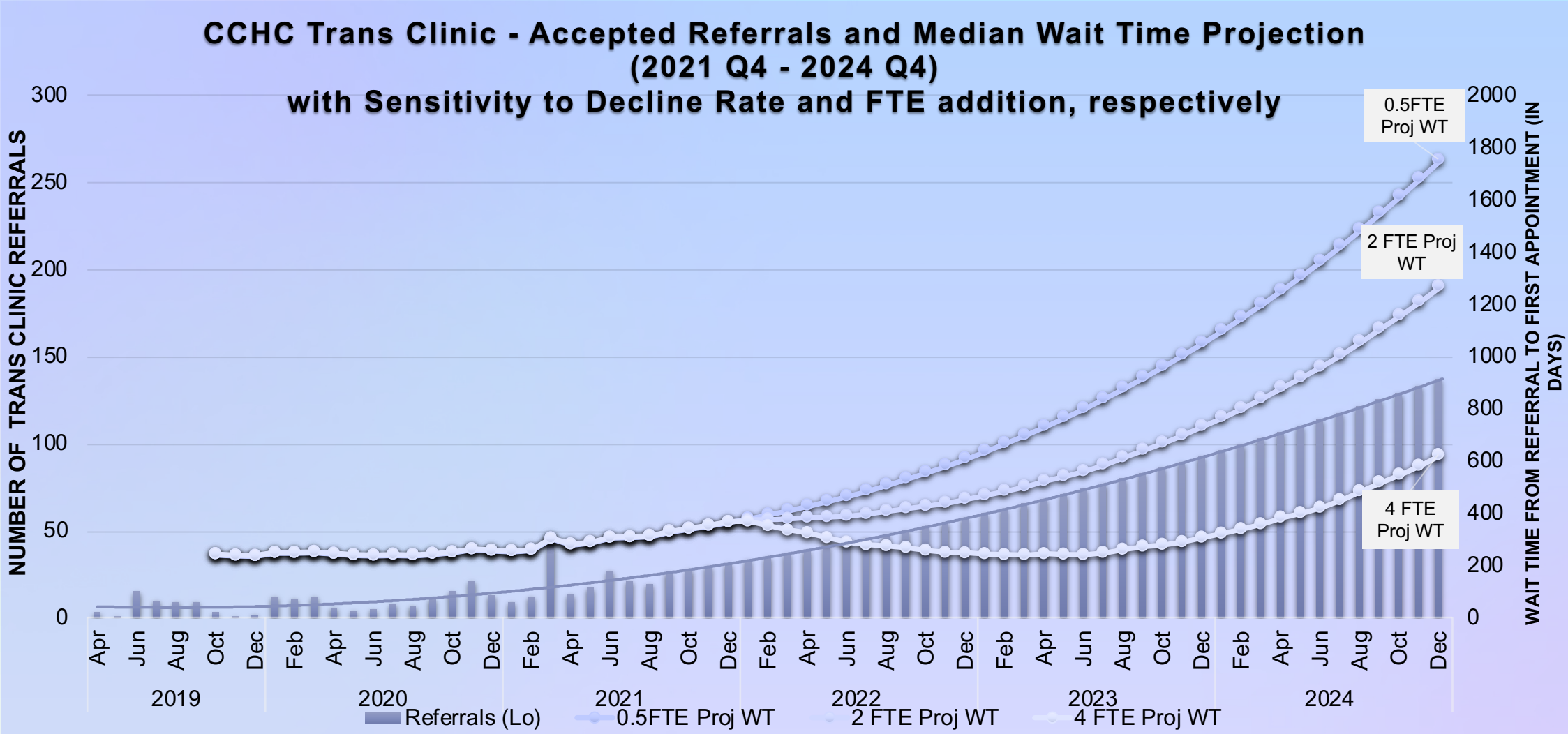
# GEOGRAPHIC REACH OF OUR REFERRALS



# WAIT TIMES AS A HEALTH CONCERN



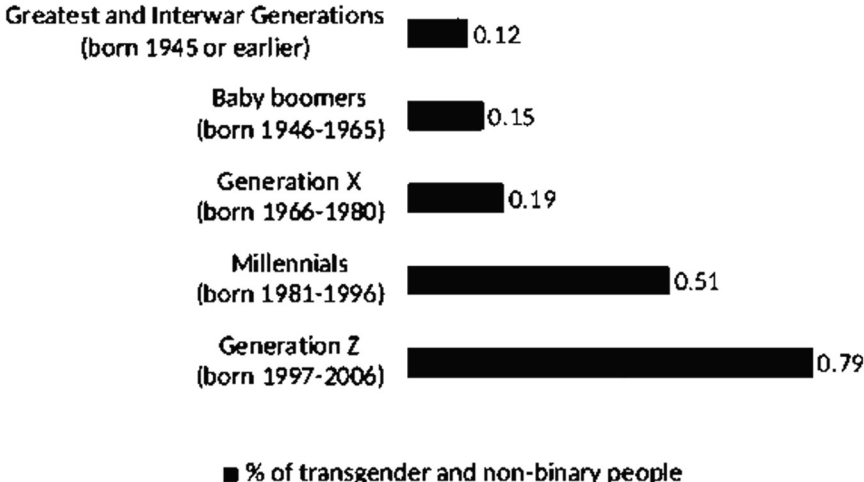
# PROJECTION



# PROJECTION

Today's youth are over 3x more likely to identify as trans or non-binary than their Gen X parents.

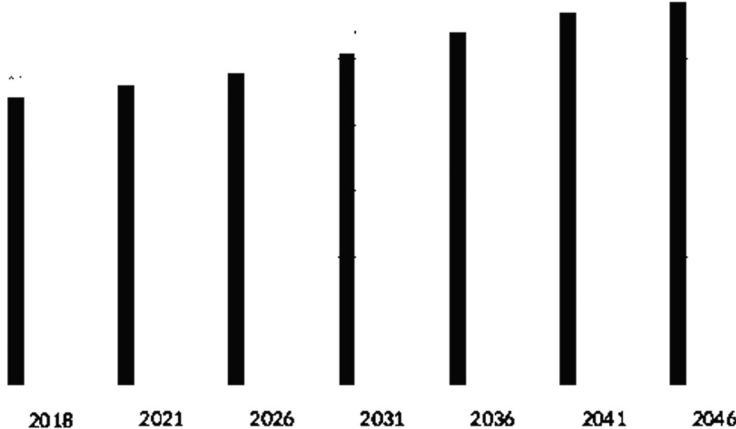
**% of Transgender and Non-Binary People by Generation**



Source(s): Census of Population, 2021 (3901).

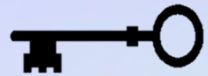
From 2018 to 2046, Ottawa's 0 to 19 y population is projected to increase by 33.1%.

**City of Ottawa's Population Projection (Medium Growth Scenario), 2018-2046 (0 to 19 years)**

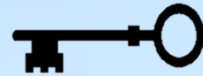


Source(s): City of Ottawa, 2018 (Growth Projections for the New Official Plan, Methods and Assumptions for Population, Housing and Employment 2018 to 2046).

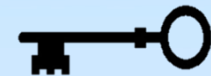
# CCHC KEY MESSAGES



- CCHC continues to employ continuous quality improvement strategies to optimize efficiency, including:
  - regularly reassessing clinic flow and client care pathways
  - implementing digital health tools



- Current state is **NOT** sustainable amid existing resources considering the rate of incoming and projected referrals



- Pressing needs in Champlain are two-fold:
  - Direct access to services (hormones and surgery assessments)
  - Capacity Building

# HOW YOU CAN HELP



## LEARN

- Rainbow Health Ontario
- Sherbourne Health Guidelines and Protocols for Trans Care
- Centertown Community Health Centre – that’s us!
  - Presentations to primary care practitioners
  - Shadowing opportunities for medical residents and professionals
    - Professional consulting



## ADVOCATE

- Sharing is caring – tell your peers about learning opportunities
- More inclusive and equitable mandated curricula in medical learning institutions
- Recognize and prioritize access to care for high-risk populations within your future practice

TRANS HEALTH

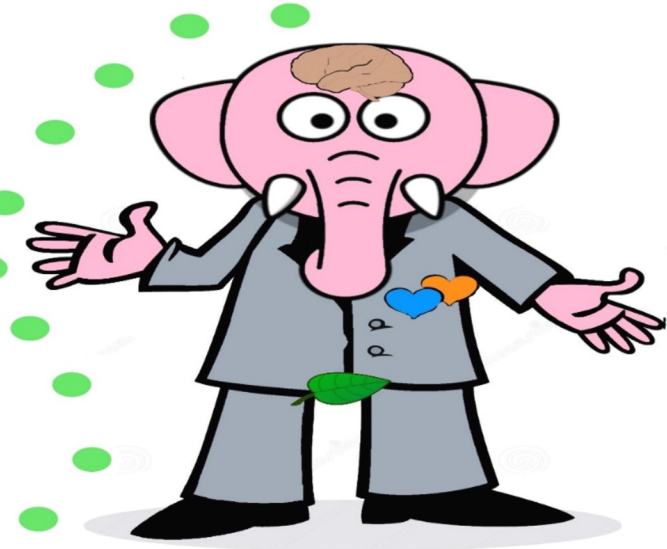
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# PART 2

Introduction to Gender Affirmative Practice

# TERMINOLOGY

## The Gender Elephant



**THE CANADIAN CENTRE FOR GENDER+SEXUAL DIVERSITY**  **LE CENTRE CANADIEN DE LA DIVERSITÉ DES GENRES + DE LA SEXUALITÉ**

**Gender Identity** (Brain icon)

- Female/Woman/Girl
- Male/Man/Boy
- Other Gender(s)

**Gender Expression** (Green circle icon)

- Masculine
- Feminine
- Other

**Sex Assigned at Birth** (Green leaf icon)

Female — Other/Intersex — Male

**Physically Attracted to** (Orange heart icon)

- Men
- Women
- Other Gender(s)

**Emotionally Attracted to** (Blue heart icon)

- Men
- Women
- Other Gender(s)

To learn more, go to [ccgsd-ccdgs.org](http://ccgsd-ccdgs.org)

*inspired by*  
*its pronounced METROsexual*  
**TSER**

# GENDER TERMINOLOGY

- **Cisgender** - Identifying with the same gender that one was assigned at birth. A gender identity that society considers to “match” the biological sex assigned at birth. The prefix cis- means “on this side of,” in reference to the gender binary model.
- **Gender Binary** - A concept or belief that there are only 2 genders (man & woman) and that one’s biological sex will align with traditional social constructs of these identities, expression and sexuality
- **Transgender** - An umbrella term for people whose gender identity and/or gender expression differs from what is typically associated with the sex they were assigned at birth.
  - **Transman** - Binary masculine gender identity
  - **Transwoman** - Binary feminine gender identity
  - **Non-Binary** - Term used by some people who experience their gender identity and/or gender expression as falling outside the categories of man and woman. They may define their gender as falling somewhere in between man and woman, or they may define it as wholly different from these terms.

# TRANS AND NON-BINARY PATIENTS

- Sex assigned at birth is incongruent with gender identity
- Can identify as binary (male/trans man, female/trans woman) or non-binary (gender queer, agender, gender fluid...)
- Identities can change over time (including pronouns and name)
- Some individuals will decide to medically transition through hormones and/or surgery and others will not
- Many trans individuals have had negative encounters within the healthcare system which has led to a lack of trust in the system
- **17.2%** of trans Ontarians do not have a regular family physician
  - Overall average for Ontarians at the time was **9.2%**
  - Our own clinic data reveals that approximately half of our clients do not have primary care

Over representation of trans and non-binary individuals:

- among low-income Canadians
- among underemployed Canadians
- reported hate crimes
- rates of suicide
- Ontarians without access to primary care

Whereas, trans and non-binary individuals are under-represented:

- in research and education
- positive, affirming representations of gender diversity in public spaces

# SOCIAL DETERMINANTS OF HEALTH

\*the social determinants of health improve vastly with access to gender affirmative care and with the presence of good social/familial supports

# RESILIENCE AND TRAUMA

- The pathologizing of gender and sexual diversity
  - Implicit bias and preconceived notions
- Minority stress theory
- History is in the room with you (and any harm is on top of that)
- Recognizing the connection between oppression and health is critical for improving/repairing patient trust

# CULTURAL CONTEXT

Provider behaviors and attitudes have a **direct correlation** on health disparities

**43.9%** Trans Ontarians reported unmet health care needs

**52%** of Trans Ontarians have reported discrimination/care refusal at an E.D.; **21%** avoid these spaces due to fear.

**61%** Trans Ontarians do not receive PC annually due to fear of “what the doctor might say or do”

# CULTURAL CONTEXT

## MINORITY STRESS

**86%** of Trans/non-binary youth say anti-Trans policies and debates have negatively impacted their mental health

## IN OUR OWN BACKYARD

**2SLGBTQIA+ HATE** is on the rise in Canada, especially for those with intersecting identities

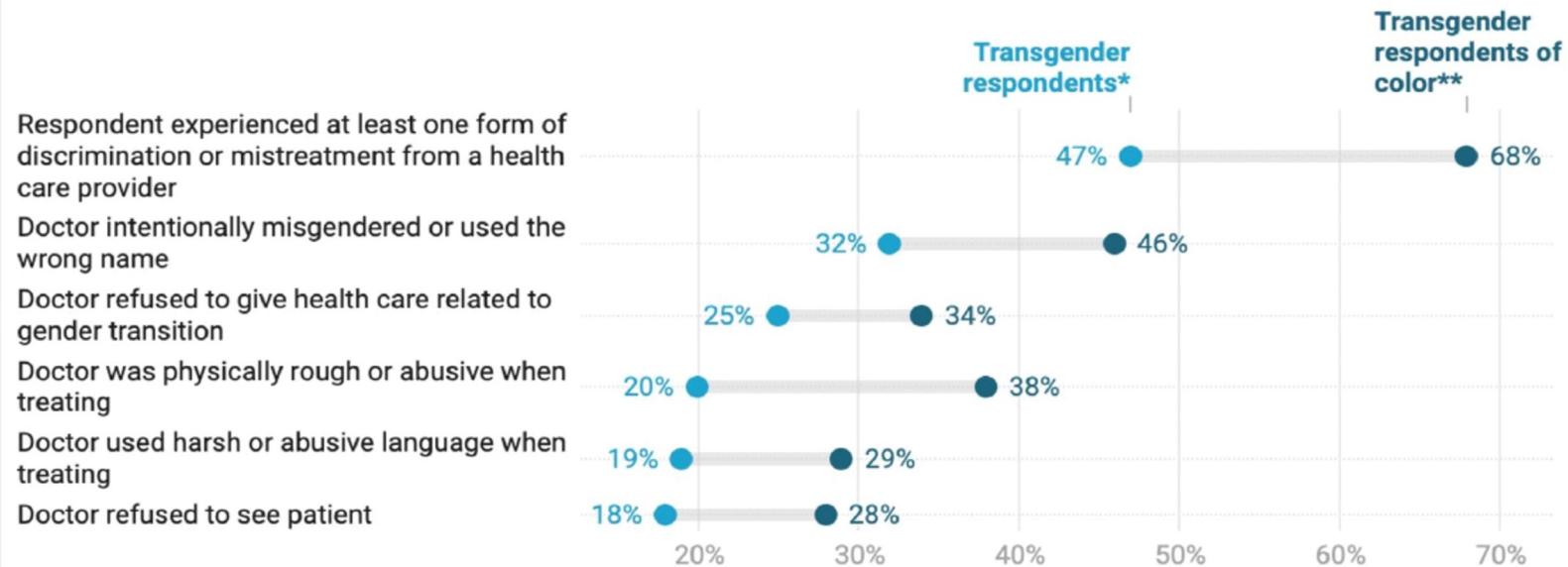
## HERE TO STAY

Today's youth are **3X** more likely to identify as Trans or non-binary

# CULTURAL CONTEXT

## Nearly half of transgender adults report having negative or discriminatory experiences with a health care provider

Shares of transgender adults who reported discrimination in the health care industry in the year prior, 2020

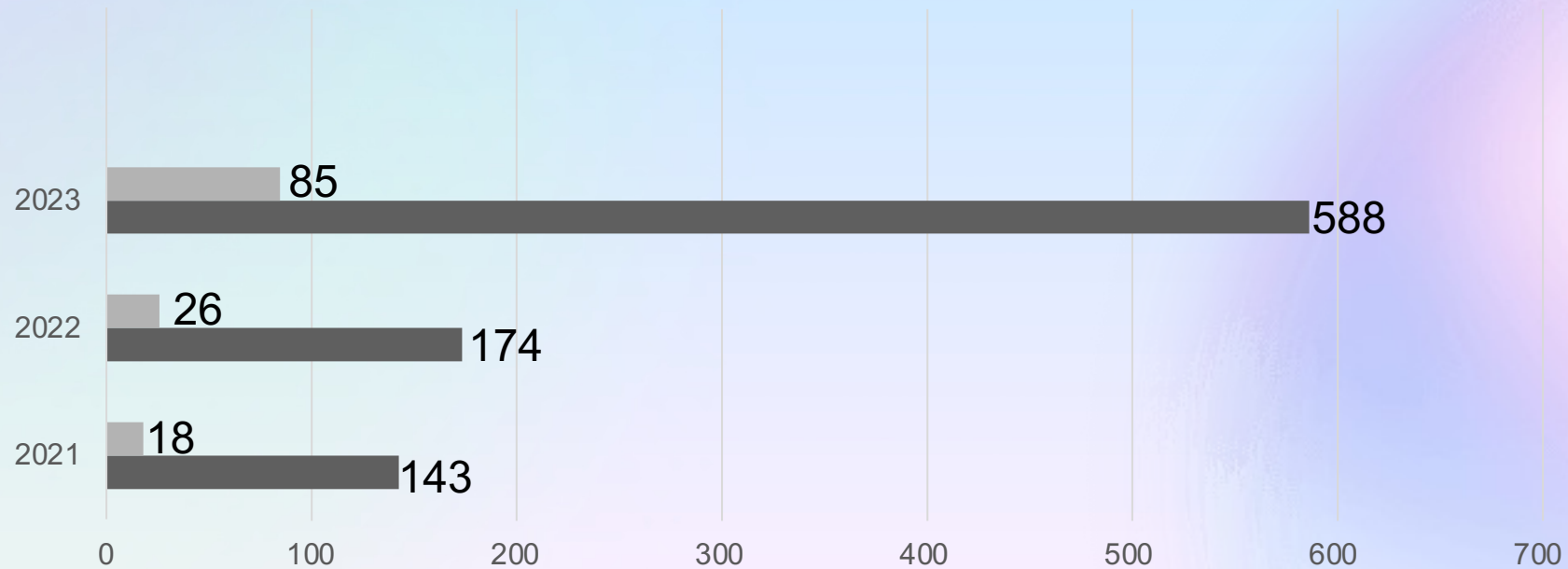
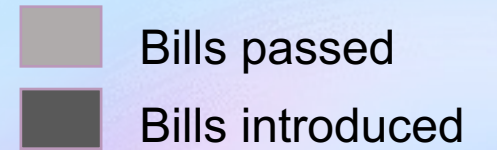


Medina, C., Santos, T., Mahowald, L., & Gruberg, S. (2021). *Protecting and Advancing Health Care for Transgender Adult Communities*. Washington, DC: Center for American Progress. Retrieved from <https://www.americanprogress.org/article/protecting-advancing-health-care-transgender-adult-communities/>



# PEAKING STRUCTURAL VIOLENCE

Trans Legislation Tracker (U.S.)  
translegislation.com



# PEAKING STRUCTURAL VIOLENCE

Politics

## Conservatives approve policies to limit transgender health care for minors, end race-based hiring

Other debate focused on female spaces, the energy industry and Canada's passport



[John Paul Tasker](#) · CBC News · Posted: Sep 09, 2023 4:55 PM EDT | Last Updated: September 12, 2023

Politics • News ①

## Anti-trans policies at Conservative convention met with apathy and outrage

“People are going to die,” says a former Conservative candidate, while party leaders refuse to take a stand on LGBTQ2S+ rights

By [Denio Lourenco](#) · September 11, 2023 2:14 pm EDT

## PHOTOS: Anti-SOGLI protests sharing misinformation, inciting hate: B.C. educators

Superintendent says local groups are spreading misinformation about learning resources



[Jessica Peters](#)

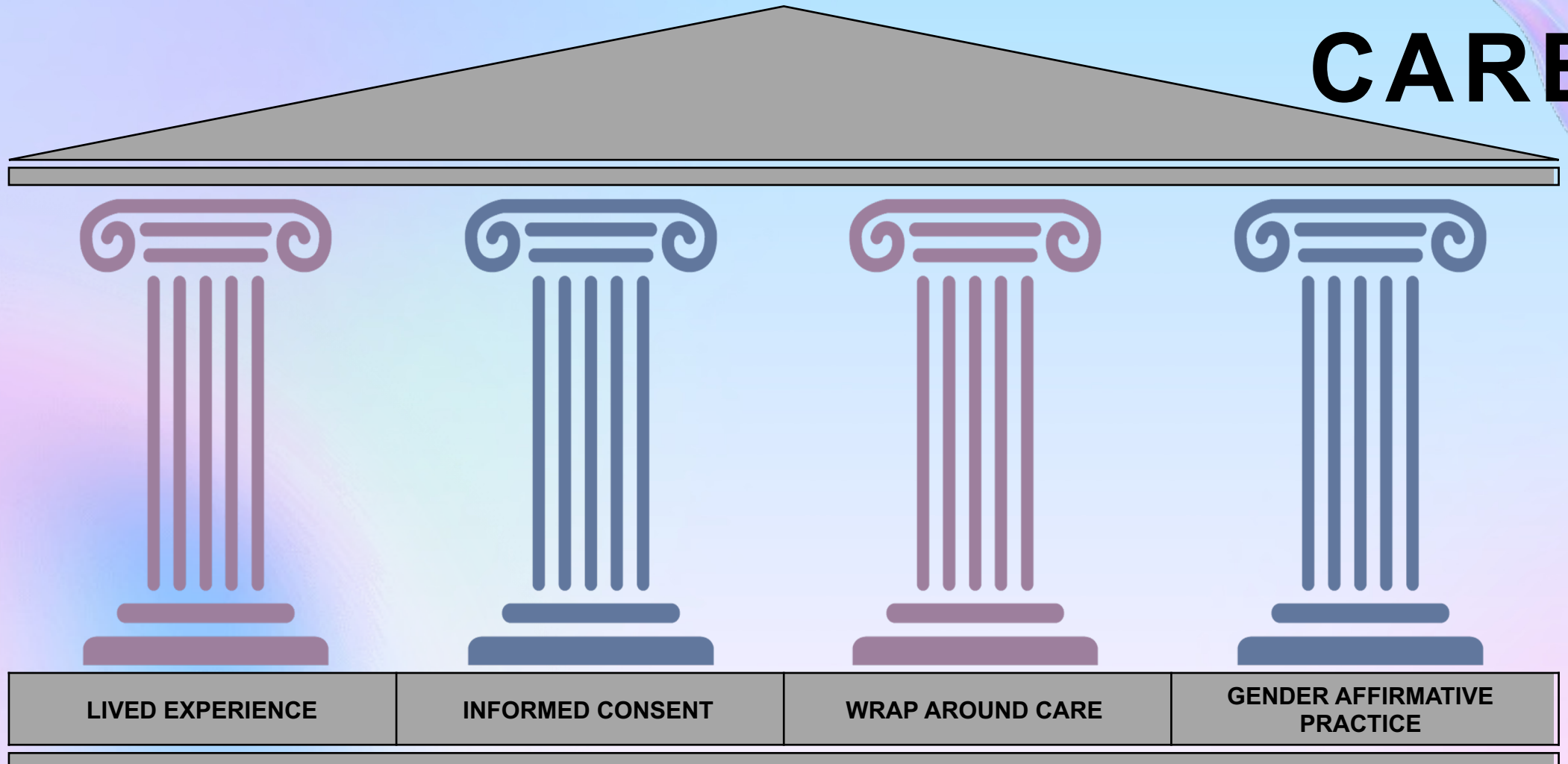
Oct 19, 2023 2:52 PM

Updated Oct 19, 2023 3:22 PM



TRANS HEALTH

# PILLARS TO CARE



# GENDER AFFIRMATIVE SPACES



## STAFF

- Training
- Diversity of staff to reflect client base
- Consider using nametags with pronouns



## VISUAL ENVIRONMENT

- Posters & Art that have a broad diversity of representation
- Flags (rainbow, trans)
- Website/social media representation
- Pamphlets –pamphlets of inclusive services

# GENDER AFFIRMATIVE LANGUAGE

**YOU DO NOT NEED TO KNOW ALL THE TERMINOLOGY**

We all make mistakes

- Apologize. Correct and move on.

**Practice makes perfect!!!**

**Neutral language:**

- Be aware of the message the language you are using is sending
  - Do you have a **boyfriend**? VS Do you have a **partner or partners**?
- It is better to not gender someone than to misgender them
  - Has **he** been tested for STIs recently? VS Have **they** been tested for STIs recently?
  - How are you today, Ma'am/Sir? VS How are you today?

# PRONOUNS. STOP ASSUMING THEM

## 01

You go first

“Hi, my name is Holly and I use she/they pronouns.”

## 02

Ask

“What name and pronouns can I use when addressing you?”

## 03

Mistakes Happen

Apologize.  
Correct your error.  
Move on.

## 04

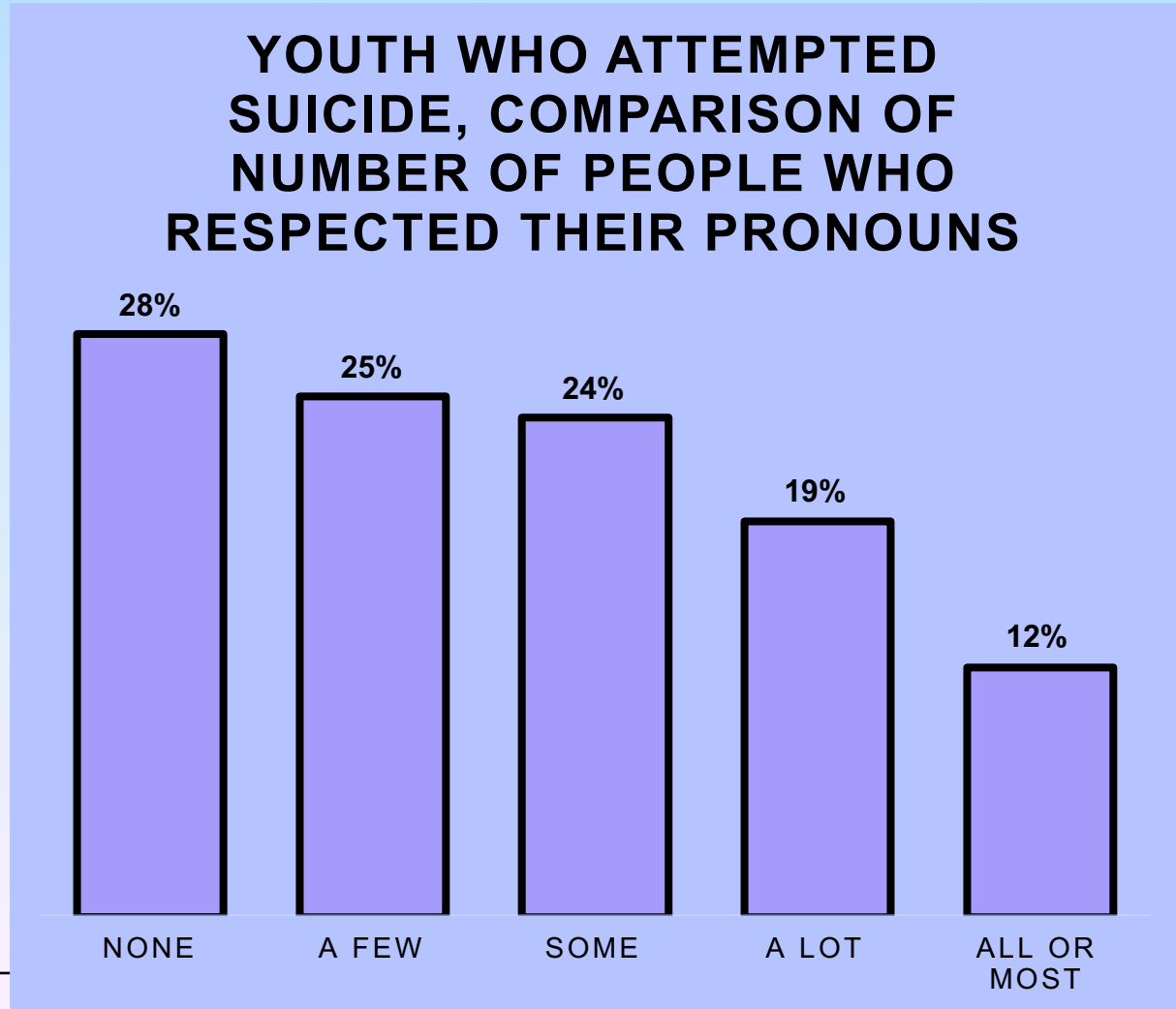
Repeat – with everyone  
not just folks you think  
are Trans

Names, pronouns can change,  
so it’s good to check-in

# PRONOUNS

## PRONOUN AFFIRMATION IS SUICIDE PREVENTION

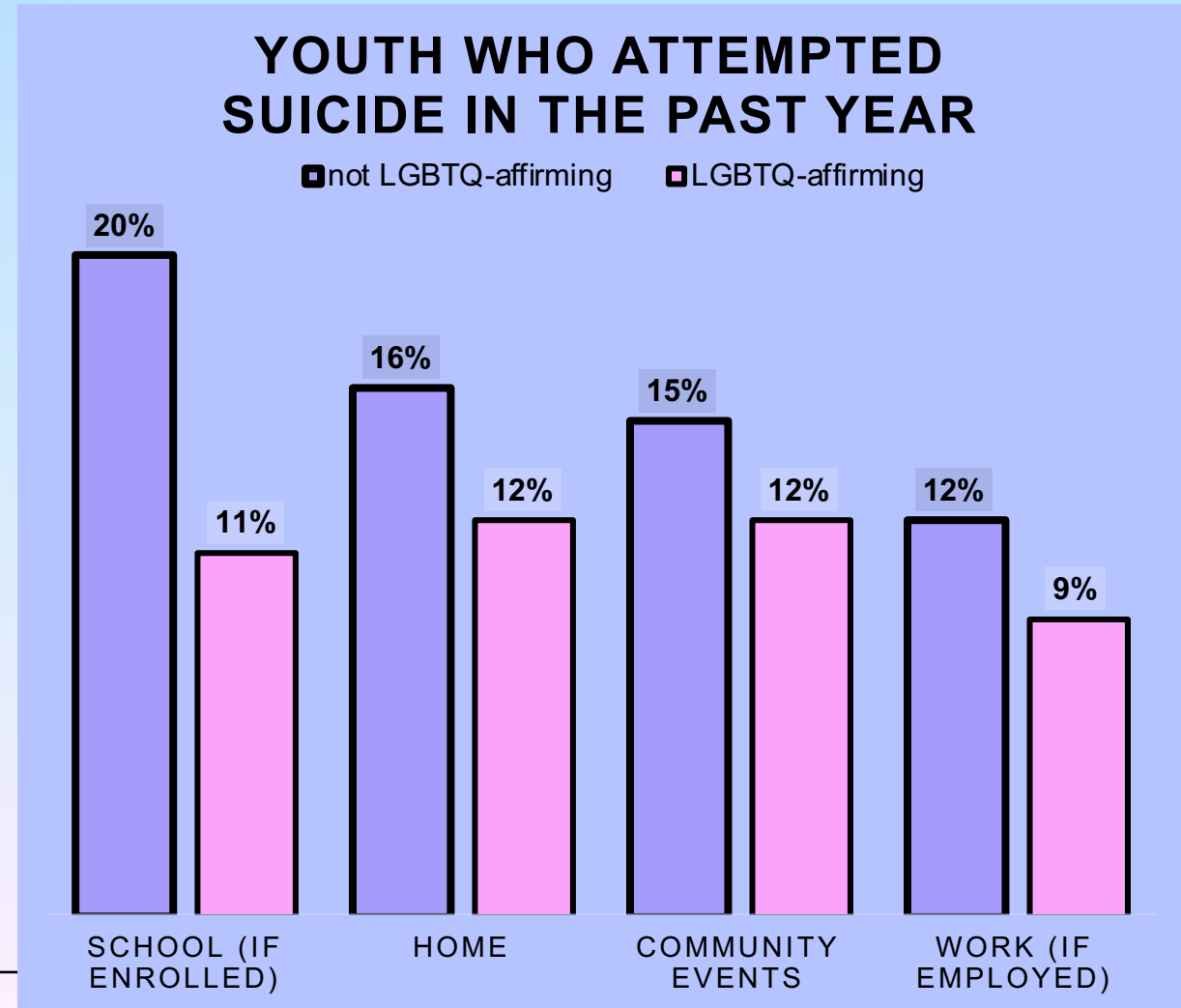
Transgender and non-binary youth who report having their pronouns respected **by all or most** of the people in their lived attempted **at half the rate** of those who did not have their pronouns respected.



# PRONOUNS

## SAFE SPACE SAVE LIVES

12% of those who reported at least one in-person LGBTQ-affirming space attempted suicide in the past year compared to **20% of LGBTQ youth without in-person LGBTQ-affirming spaces.**



# GENDER AFFIRMING PRACTICE IN HEALTH CARE

## NAMES

- Legal names and “preferred” names
- Inclusive forms
- Communication policies for staff

## PRONOUNS

- Ask and flag in the patient’s EMR
- Can change over time or in different settings
- Share yours

## ANATOMY

- Dysphoria
- Discourse around comfort with anatomical terms

# GENDER NEUTRAL ANATOMY

Try	Instead of
Upper body	Breasts/Chest
Erogenous or Erectile Tissue/External Genitals/ Genitals	Penis
Erogenous or erectile tissue	Clitoris
External genital area	Vulva
Opening of the genitals	Opening of the vagina
Internal genitals/ Genitals	Vagina
External gonads	Testes/ Testicles
Internal gonads	Ovaries
Internal reproductive organs	Female reproductive organs

# CASE STUDY

20 year old Sam presents to the sexual health centre for some advice about contraception and safe sex practices

**What are some questions you would like to ask this client to inform the education you will provide?**

# GENDER INCLUSIVE SEXUAL HISTORY

- What are your needs today?
- Are you sexually active? Do(es) your partner(s) produce sperm or eggs? Are you having the kind of sex that could create a pregnancy? That could transmit infection?
- Do you want to talk about sexual orientation or gender identity today?
- Do you have birth control needs now or do you anticipate having any in the near future?
- Are you hoping to start a family in the near future? (If so, what is your plan?)
- What is your relationship(s) like? Do you feel happy in your relationship(s)? Do you feel safe in your relationship(s)?
- Tell me how often you are using condoms (if relevant) when you have sex with your primary partner? With other partners? What allows you to use condoms/under what circumstances are you less likely to use them?

# NEXT STEPS



## WATCH

- Jamie Lee Curtis Interviews ALOK on the World Beyond the Gender Binary  
[https://youtu.be/hWAs\\_2oGNB8](https://youtu.be/hWAs_2oGNB8)
- A Guide to Pronouns and Gender Inclusive Language  
[https://www.youtube.com/watch?v=mWodmv-1\\_2A](https://www.youtube.com/watch?v=mWodmv-1_2A)
- Why Gender Pronouns Matter  
<https://www.youtube.com/watch?v=hsHXyGiCk6g>



## READ

- Beyond the Gender Binary by ALOK
- Pink, Blue and You by Elise Gravel (for kids!)



## ADVOCATE

- Ongoing learning opportunities for serving 2SLGBTQIA+ priority populations
- Embedding health equity in your practice – what does that look like with your organization?
- Internal policies to help ensure patient safety
- Promoting equity, inclusion and diversity

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# EVALUATION

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- Survey link: <https://survey.alchemer-ca.com/s3/50151090/Trans-Health-in-the-Champlain-Intro-to-Gender-Affirmative-Practice>



# THANK YOU

**Questions?**