

Improving the Health & Well-being of Transgender Queenslanders



Queensland Association
for Healthy Communities

Introduction

Whilst in recent years the health needs of trans people have been included in the LGBT (Lesbian, Gay, Bisexual, Transgender) health agenda, it is important to note that on many, if not most indicators, trans people have poorer health and face greater stigma and discrimination than lesbian, gay and bisexual people. In addition the health & legal issues and need for health services, particularly for those who choose to transition, are very different from the needs of lesbian, gay and bisexual people.

As an LGBT health organisation QAHC recognises that while there are connections and similarities between the health and well-being needs and experiences of trans people and lesbian, gay, bisexual people, there is also a lot that is different.

This paper has been produced by QAHC to outline the particular health needs of trans people in Queensland and to recommend policy changes, activities and services that are needed to meet these needs. A range of trans organisations and individuals have contributed to this paper, in addition to research, consultation and policy reports from Australia and overseas. The paper will be used to inform both QAHC's services and our lobbying efforts with government and mainstream organisations.

Issues for children are largely not covered in this paper due to the particular and highly complex issues involved. However we recognise the move internationally to provide support to children at a younger age (including in some countries puberty blocking treatment) and acknowledge the work of services such as Open Doors in supporting young trans people and guidelines developed by the Royal College of Psychiatrists.

Terms, Definitions & Diversity

Trans people come from a diversity of backgrounds and have a range of different experiences and approaches to their gender identity.

The term 'trans' is used in this document as an umbrella term for people whose gender identity is outside or crosses the binary social norms of 'man' or 'woman', including people who are transsexual, transgender or sister-girls/brother-boys in Aboriginal and Torres Strait Islander cultures. QAHC recognises that there is a large diversity of terminology and identities among trans people and seeks to be as inclusive as possible. We also recognise that many do not identify as trans, but simply as male or female.

Trans people are defined by having a gender identity that falls outside or crosses socially accepted norms of being a man or woman. We all have a gender identity. It defines an individual's sense of identity in relation to the categories of man and woman. However a trans person's gender identity will be different to their biological sex assigned at birth, that is the categories of male and female defined by an individual's reproductive organs.

Gender identity disorder (GID) is a recognised medical and psychiatric condition for individuals whose gender identity is different or opposite to their birth sex. The Diagnostic and Statistical Manual for Mental Disorders IV (DSM IV) classifies GID as a psychiatric condition. However some trans people consider that GID is a biological condition rather than psychiatric. Others still reject the notion of a disorder, seeing their gender identity as one of many natural gender variations.

Health & Well-being Research - summary

In 2007 the Australian Research Centre in Sex, Health & Society published '*Tranznation: A report on the health and well-being of transgender people in Australia and New Zealand*'. Tranznation is a community sample of trans people recruited through a range of strategies to participate in an online survey. In total, 253 people completed the survey, 229 from Australia (90.5%) and 24 (9.5%) from New Zealand. Below is a summary of key quantitative findings from Tranznation (please note there is a wealth of qualitative information in the report):

- 35.2% rated their general health as 'good' and 28.9% as 'very good' – both lower than for the Australian population (Australian National Health Survey, ABS, 2006b).
- 36.2% met the criteria for a current major depressive episode – higher than an LGBT sample (24.4% 'Private Lives') and general Australian population (6.8%).
- 66.7% reported receiving enough satisfactory information about their gender issues from health practitioners/services.

- 73.1% had used hormone treatment for gender-related reasons.
- 39.1% had had some form of gender affirming (sex reassignment) surgery, most of these (71.7%) reported 1 or 2 procedures
- 88.9% of those who had had surgery had attempted to amend documentation to reflect current gender identity, compared to only 25.7% who had not had surgery
- 87.4% had experienced at least one form of stigma or discrimination, with 53.4% of participants being verbally abused, 33.6% had received threats of violence or intimidation and 18.6% had experienced a physical attack or other kind of violence.
- 16.1% had experienced partner violence

Accessing Information

Given that sex and gender are core to people's being and sense of self, trans people have a need for information covering many facets of their lives. This information is unlikely to be generally available, if at all. Types and examples of information needed by trans people includes (but is not limited to):

- **gender issues** – identity development, diversity of trans experience, real life stories
- **medical issues** – hormones, transitioning (inc. surgery)
- **health issues** – sex, sexual health, screening (e.g. prostate, cervical, breast, ovarian) long term effects of hormone use, interaction of hormone therapy with recreational drug and alcohol use
- **social issues** – stigma & discrimination, relationships, family
- **legal issues** – changing sex and name on official documents
- **services info** – peer support, experienced mental health & medical practitioners

Many trans people access information from other trans people. Peers can be an important source of information and real-life experience, as well as ongoing social support. However one person's experience may not be relevant to another person or their information may be out of date or inaccurate. Those who are socially or geographically isolated may not be able to make contact with other trans people. Accurate and up-to-date information that is inclusive of the diversity of people's views and experiences needs to be readily available across the state.



Key actions could include:

- support to trans organisations to provide peer support and contact
- production of a printed and electronic guide/manual for trans people, that is kept up to date
- making available a wide range of personal testimonials from trans people (e.g. digital stories)
- increase human interest & factual stories in LGBT and mainstream media
- online services directory of trans friendly and experienced mental and physical health practitioners (including GPs), support groups, legal support etc (including facility to print hard copy versions)
- promotion of the Gender Clinic (at Biala) as a centre of excellence in Queensland

Standards of Care

The standards of care for trans people in use by practitioners in Queensland are based on those produced by the World Professional Association for Transgender Health (WPATH), now in its sixth version. These are also known by their previous name, the Harry Benjamin International Gender Dysphoria Association Standards.

The international standards recommend those with gender identity issues seek help from a mental health professional to assess and diagnose their situation. Those seeking hormone treatment should be supported and assessed by a mental health practitioner and usually participate in psychotherapy. A letter from the mental health professional to the prescribing physician (usually an endocrinologist) is required to access hormone treatment. To receive genital surgical interventions the person must be diagnosed with Gender Identity Disorder (GID), have completed 12 months of continuous hormonal therapy and 12 months of successful, continuous full-time, real-life experience (i.e. living as one's gender identity). They also need letters from 2 mental health professionals. Ideally a multidisciplinary team should be assembled to support the person through their transition. The standards of care are different for children and adolescents.

While the need for thorough assessment and standards of care are generally accepted by trans people, there are a range of criticisms of the WPATH standards, or the way they are interpreted and implemented by some practitioners, including (note: these views are not shared by all trans people):

- GID should be a biologic disorder, not a psychiatric disorder
- standards are interpreted too rigidly, including definition of gender identity (disorder)
- confusion between sexuality and gender identity by some service providers
- the focus of the standards become tests that must be passed or hoops to jump through, rather than a supportive, healing process (needs to be a balance)
- difficulty in accessing skilled and experienced professionals (including: long waiting times, very few sex reassignment surgeons in Australia, emergency support, lack of choice)
- very high cost of mental health & other professionals, hormones and surgical procedures
- length of time needed to get access to hormone or surgical intervention
- lack of detail, especially relating to wider health and well-being issues (e.g. safe sex advice, healthy living, dealing with stigma & discrimination)
- lack of specific information regarding the appropriate administration of hormone therapy for trans people
- above difficulties lead some people to access hormones on the via the internet and/or access surgery overseas (with little opportunity for follow-up care)

Real Life Experience/Transitioning

Under the Standards of Care, trans people must live as their gender identity for a minimum of 12 months before they are eligible to access surgery. However many people decide not to have any surgery, only partial surgery (e.g. chest/breast) or not to have surgery for many years. This means the vast majority of trans people need support to transition from the gender assigned at birth to their true gender identity, over a long period of time. Examples of support used include by some trans people:

- hormone treatment (through PBS* or internet)
- hair removal (electrolysis)
- speech therapy and/or vocal surgery
- movement coaching/deportment
- clothing & make-up advice
- surgery (e.g. hysterectomy, chest surgery, breast augmentation, nose re-shaping, orchiectomy)
- ongoing counselling/psychotherapy (pre and post-op)

* The Commonwealth Government's Pharmaceutical Benefits Scheme (PBS) provides subsidised access to medicines. Each prescription costs the patient \$31.10 or \$5 if you have a concession card.



Key actions could include:

- Federal government to develop national trans policy, based on WPATH, and establish national centre for excellence in trans health and welfare issues with a role to monitor and update policy, best practice standards and provide training and advice for practitioners
- Queensland Health to adopt a Queensland wide trans policy, based on WPATH Standards and Gender Clinic policy, but which addresses the wider issues raised above
- provision of funded care packages and a multi-disciplinary team with a case co-ordinator who is able to co-ordinate all services
- increase the capacity of the Gender Clinic to see more clients and reduce waiting lists, especially psychologists
- increase the capacity of the Gender Clinic to provide support and advice to clients and professionals across Queensland
- explore options for subsidising the costs of accessing private psychiatrists/psychologists

Most of these services have to be paid for by the trans person (at least in part), and so limits the amount of support that can be accessed, the time it takes to complete transition and creates real financial hardship. Self medication (of hormones) can lead to dangerous side effects if not properly supervised.



Key actions could include:

- federally funded care package for trans people which covers costs of transitioning
- full access to hormones on PBS for both trans men and women (needs to comply with Health Insurance Commission prescription standards)
- education on safe injecting techniques (for hormones)
- production of a printed and electronic guide/manual for trans people, that is kept up to date
- trans organisations funded to provide peer support and information
- online services directory of trans friendly and experienced support services

Surgery

While not all trans people can, want or go on to access sex reassignment surgery, it is an important milestone for many and provides a sense of completion and ease with one's body.

The cost of sex reassignment surgery for trans women ranges from around \$12,000 to \$15,000 in Australia. Medicare provides rebates for a number of procedures involved in sex reassignment surgery and private health insurance may also cover some costs (the higher the rate of private insurance, the more it covers). There will also be other additional costs for Queensland trans people, such as interstate travel and accommodation. Costs overseas are around \$20,000 to \$25,000. The cost is much higher for trans men, and the surgery may not be as successful.

As mentioned previously, access to surgeons trained in sex reassignment surgery is limited (3 only in Australia), and none are based in Queensland (although other surgical procedures such as chest surgery are available). Queensland Health does however assist with transport costs to the Monash Gender Dysphoria Centre in Melbourne and follow-up, through the Patient Travel Subsidy Scheme. Many people, especially trans women, access surgery from overseas (usually Thailand). While the quality of the surgery is very good (in part due to the relatively high number of operations performed by those surgeons) follow-up due to complications can be difficult and costly. A stay of 4 weeks is usually recommended, including two follow-ups.



Key actions could include:

- full sex reassignment surgery provided through Medicare
- training bursary provided for Queensland surgeon/s to be trained in sex reassignment surgery

Social, Practical and Emotional Support

Whatever choices a trans person makes about how they view and deal with their gender identity, there will inevitably be a need at times for social, practical and emotional support.

Telling family members of one's true gender identity and beginning transition can be a very stressful time for all in the family. While some families are supportive, others can reject the trans person, causing further emotional damage. While trans people need support, so too do families who will have their own questions and concerns. Family issues can be further complicated by legal problems, including the non-recognition of what become same-sex relationships.

Given the high cost of transitioning and surgery, most trans people wish (or need) to stay in work. Once again, telling work colleagues and employers about one's gender identity and beginning transition can be very difficult. Some people choose to leave work and find other employment in their real gender identity, rather than telling their existing workplace.

Rejection by family and loss of employment can lead to significant financial difficulties and even homelessness for some trans people. Access to safe homeless shelters and group homes is difficult and some trans people have faced violence and discrimination within shelters.

As mentioned previously, peers (other trans people) are an incredibly important source of information and support. There are a number of trans organisations in Queensland, but these rely on the dedication of volunteers and do not receive any significant funding to support their operations.



Key actions could include:

- joint project with Trans organisations and PFLAG to build awareness, knowledge and skills to support families of trans people
- training and guidance available for Centrelink and other employment support agencies
- training and guidance for employers on how to assist trans people and how to ensure their workplaces are safe for trans people
- funded packages to support re-training & job searching and access to a Job Placement Officer trained in trans issues
- priority, safe housing available for trans people in need
- funding of trans organisations to provide peer support and information
- awareness campaigns in the general community to reduce stigma and discrimination against trans people

Other Health Issues

There are a range of health issues that are particular to trans people, or affect trans people differently, including:

- **mental health** – dealing with one's own feelings as well as the reactions of those around you (stigma & discrimination), high levels of suicide among trans people
- **domestic violence** – breakdown of relationships can lead to domestic violence
- **smoking** – use of hormones can increase risk of heart disease in smokers
- **screening** – trans men are at risk from cervical, breast and ovarian cancer, which may be increased due to testosterone therapy and therefore need appropriate screening, trans women are at risk from prostate cancer and breast cancer and need appropriate screening
- **diet & exercise** – using hormones can create weight gain and reduce energy levels of trans women (especially when used to the metabolism of a man)
- **liver health** – damage can be caused to the liver by taking hormones and needs to be monitored
- **reproductive health** – trans women can freeze their sperm (at their own cost) before they start transitioning (long term hormone treatment can lead to infertile sperm), transmen have fewer options, including child birth before transiting (which may increase distress at physical changes to the body during 'motherhood') or have eggs stored for later fertilisation and implantation into a surrogate. Storing of sperm and eggs can however be extremely expensive. Surrogacy is only legal for residents of Canberra at this time, but Queensland has begun a review of its surrogacy laws.
- **sexual health** – risks of various sexual acts pre and post transition, sexual enjoyment and fulfilment (for self and partner), issues for sex workers and those experiencing sexual violence
- **spiritual health** – reconciling teachings of the church to one's own views and situation. Access to trans friendly churches or congregations
- **access** – access to other (non trans related) health services can be delayed due to fear of discrimination or lack of money (e.g. dentists)



Key actions could include:

- production of a printed and electronic guide/manual on health & legal issues for trans people, that is kept up to date
- training and resources for health, allied and mental health practitioners on supporting trans clients
- provision of funded care packages and a multi-disciplinary team with a case co-ordinator who is able to co-ordinate all services
- supporting the ongoing role of GPs to provide care across many of these issues, with access to specialist advice (Gender Clinic) when needed
- ongoing training on trans issues to telephone help/counselling lines (e.g. GLWA, Lifeline)
- support to secure future reproductive options (i.e. sperm freezing, IVF & surrogacy)

Workforce Development

As trans people utilise a wide range of health practitioners and other support people, there is a heavy reliance on services. Unfortunately the level of knowledge of trans issues is very low (or non existent) so trans people have to educate service providers again and again. Trans people or issues are not usually included in mainstream research and are under-represented in most LGBT research, meaning little robust research evidence is available.

Recently QAHC, in partnership with trans organisations, has developed a basic guide for services in providing an appropriate and respectful service to trans people. A short training course is also being developed. Volunteers from trans organisations are also available to give talks and seminars to students and service providers.



Key actions could include:

- increased funding to roll-out QAHC trans training course across Queensland
- increased capacity for Gender Clinic to provide training and 1-to-1 support for health service providers
- inclusion of sexuality and gender identity training in undergraduate medical, allied and mental health professional training
- training bursary provided for Queensland surgeon/s to be trained in gender reassignment surgery
- on-line resource for health, allied and mental health practitioners on supporting trans people
- increase trans specific medical, health and social research and over-sampling of trans people in LGBT and/or mainstream research

Legal Issues

While not the focus of this paper there are a range of legal and bureaucratic issues that can impact on the health and well-being of trans people, including:

- **birth certificate** - can be changed in Queensland by a person over 18 years or parent/s of a child, and has been diagnosed with Gender Identity Disorder, is living full time in their gender identity, receiving hormones and has had undergone irreversible treatment (e.g. chest reconstruction, removal of reproductive organs). This must be evidenced by statutory declarations from two doctors or a Recognition Certificate from another Australian jurisdiction. "Full" sex reassignment surgery is not required (e.g. phalloplasty). The Births, Deaths and Marriages Registration Act 2003 states the person must be single/divorced, however anecdotally this condition is not always enforced.
- **marriage** – the existing "heterosexual" marriage of a trans person who transitions can not be legally recognised as they would then be seen as a same-sex couple (which current government legislation does not recognise as married). However a trans woman can marry a trans man/genetic man and a trans man can marry a trans woman/genetic woman as these unions would be considered as heterosexual.
- **passport** - can only be changed following change of birth certificate or sex reassignment surgery, even if the person presents as another gender. Following a recent decision of the Administrative Appeals Tribunal, trans people can now be issued with a passport in their true gender even if married to someone of the same gender. People traveling overseas for Sex Reassignment Surgery can not get a passport for travel in their presenting gender (this used to be available).
- **drivers license** – this is the most frequently used form of identification and so is important for trans people. Name can be changed on license, following change of name by deed pole, and sex can be changed following a letter/s from treating psychologist stating the person is being treated for gender dysphoria.
- **government/educational/service records** – it can be difficult to change sex/gender on government documents, educational qualifications or service records without a changed birth certificate. Even in the case of a new birth certificate it can take many attempts and a lot of running around to get records changed. As mentioned above, trans people who are in an existing marriage after sex reassignment surgery are able to amend their passport to their true gender, even while retaining their old birth certificate.
- **anti-discrimination** – while trans people were included in anti-discrimination legislation in 2003, there has not been widespread promotion, or campaigns to prevent discrimination in the first place. There is an exemption allowing religious bodies not to employ trans people if it is a genuine occupational requirement to adhere to the body's religious beliefs. Employers, whether state or non-state bodies, may also refuse to employ trans people if the work involves the care and instruction of minors. Trans people are not covered by federal legislation.
- **people born overseas** – Recognition Certificates from countries outside Australia are not recognised, Proof of Residency needs to be changed if entered the country as one sex, but are now recognised as a different sex, Citizenship Certificate also needs to be changed (recently changed so that Citizenship Certificates don't show sex/gender). Making changes to documentation by country of birth is complex and time consuming.
- **prisons** – trans offenders who have had sex reassignment surgery are placed in accommodation as per their gender. Trans people who have not undergone sex reassignment surgery are placed in single cells while assessment takes place. Accommodation within a placement facility is determined by the general manager, taking into account a range of factors from the perspective of the offender, accommodation facility and staff. Hormone treatment can only be accessed if started before incarceration, on the decision of the Executive Director, Custodial Operations.
- **reproductive rights** - artificial reproductive technology service providers may refuse to assist trans clients on the basis of relationship status or sexuality.



Key actions could include:

- remove the exemption for employers to be allowed to discriminate on the basis of gender identity when working with children. There is no proven health, religious or ideological reason that discrimination should be allowed in this context.
- national inquiry by the Human Rights & Equal Opportunities Commission into legal, discrimination and health service access issues faced by trans people (similar to New Zealand Human Rights Commission inquiry)
- adoption of a system for gender recognition similar to the UK Gender Recognition Act 2004 (including central notification of all government departments by one department)
- adoption of a system for gender recognition similar to the Victorian legislation (January 2005) for those born off shore, but residing in Queensland.
- Births, Deaths and Marriages in Queensland to issue clear, accurate guidance on changing birth certificate for trans people

Produced by Queensland Association
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Contact Paul Martin (General Manager)

pmartin@qahc.org.au ph. 3017 1791

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Jones, L., 2005, *Guidelines for Health Organisations Commissioning Treatment Services For Individuals Experiencing Gender Dysphoria and Transsexualism*. Parliamentary Forum on Transsexualism, London.

Noonan, R. & Liddicoat, J. 2007, *To Be Who I Am: Report of the Inquiry into Discrimination Experienced by Transgender People*. Human Rights Commission, Auckland.

Sinnott, V., 2005, *Best practice models for the assessment, treatment and care of transgender people and people with transsexualism: A discussion paper for Victoria (Australia)*.

World Professional Association for Transgender Health, 2001, *Standards of Care for Gender Identity Disorders*. Sixth Version.

Further Sources of Information

QLD Trans Support Groups

Australian Transgender Support Association QLD

P: (07) 3843-5024 E: trans.atsa@bigpond.com

W: www.atsaq.com

Changeling Aspects Brisbane

P: 3286 9155 E: knoble@iinet.au

W: www.changelingaspects.com

Transbridge Townsville

P: (07) 4779-9229 E: transbridge@mail.com

FTM QLD Support Network

<http://groups.yahoo.com/group/ftmqld>

FTM Australian Support Network

P: 0403 876 393 E: mail@ftmaustralia.org

W: www.ftmaustralia.org

Seahorse Society of Queensland (Crossdressers)

E: seahorseqld@gmail.com

W: <http://seahorseqld.atspace.org/>

Information for Trans People

GQ: Gender Questioning, a resource for young people questioning their gender or those who know someone who is.

Produced by Gay and Lesbian Health Victoria

W: <http://www.glhv.org.au/files/GQv2.pdf>

Online health and fitness magazine for and by trans people

W: www.trans-health.com

Sexual Health Information QLD Health

W: www.health.qld.gov.au/sexualhealth

Queensland Association for Healthy Communities

W: www.qahc.org.au/transgender

W: www.qahc.org.au/sex

Anti-Discrimination Commission QLD

P: 1300 130 670

W: www.adcq.qld.gov.au

Information for Health Practitioners

Brisbane Gender Clinic

P: (07) 3837 5645 (Wed 1:30pm – 4:45pm)

or (07) 3837 5611 (Referral only)

E: bshc@health.qld.gov.au

W: www.health.qld.gov.au/sexhealth

Information on transgender health for health practitioners

W: www.transgendercare.com

Harry Benjamin Standards of Care Version 6

W: www.wpath.org/Documents2/socv6.pdf

World Professional Association for Transgender Health

W: www.wpath.org

Service Provision Training

Queensland Association for Healthy Communities Inc (QAHC) provides sexuality and gender identity awareness training to support health and health related services provide inclusive services for trans people in QLD.

To find out more information P: (07) 30171777

E: info@qahc.org.au W: www.qahc.org.au/training



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