Supporting Families of Transgender and Gender Non-Conforming Youth: The Primary Care Team Approach

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Conflict of Interest

» Faculty/Presenter Disclosure:
» Thea Weisdorf has no personal relationship with commercial interests
Conflict of Interest

» Faculty/Presenter Disclosure:
» Sue Hranilovic has no personal relationship with commercial interests
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» Faculty/Presenter Disclosure:
» Giselle Bloch has no personal relationship with commercial interests
Program Disclosure of Commercial Support

» We have no connections/support for development/presentation of the program from commercial entities or organizations including educational grants, in-kind AND no connections that a reasonable program participant might consider relevant to the presentation

» Thank you to Rainbow Health Ontario, Hospital for Sick Children-Gender Identity Clinic for the use of components of their slide set (with permission)
Mitigation of Bias:

» We have presented many aspects of this workshop to our colleagues and communities and been provided feedback to ensure the mitigation of bias
Recognizing our privileges and how they impact the lens through which we experience and navigate the world.
Learning Objectives:

1. Increase awareness of gender dysphoria among Canadian youth
2. Explore the systemic, institutional, and individual barriers to accessing gender-safe health care for transgender and gender non-conforming youth
3. Identify the resources and research that validate the importance of family supports in promoting healthy outcomes
Giselle’s Story
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Giselle’s Story
Who am I today?

- **BIOLOGICAL SEX** – what the doctor assigned you at birth
  - male
  - intersex
  - female

- **GENDER IDENTITY** – how you feel on the inside
  - man
  - gender neutral
  - woman

- **GENDER EXPRESSION** – how you present yourself to others
  - masculine
  - non-binary
  - feminine

- **GENDER PRESENTATION** – how the world sees you
  - man
  - androgynous
  - woman

- **SEXUAL ORIENTATION** – who you like
  - attracted to women
  - pansexual/bisexual
  - attracted to men
Some Aspects of Transition

- Social
- Medical
- Surgical

Transition is an individual pathway. Surgeries, hormones, and presentation do not make you more or less trans, or more or less of a man/woman.
How Many Trans People?

- Prevalence unknown
- Trans not counted in population statistics
- Stats often based on clinical populations at Gender Identity Clinics
- Higher prevalence in more recent studies
- (1:200, USA – Mass) = 0.5% of general population

http://tgmentalhealth.com/2012/02/13/the-prevalence-of-transgenderism-an-update/
Gender clinics (CHEO, Sick Kids) reported 4-12 fold increase in 10-14 year olds in their clinic.

HSC Gender Identity Clinic saw 272 new youth July 2015 to July 2016 (age 12 – 16)
The Numbers at SMH FHT….A Work in Progress!

At our six sites: ~ **40,381** rostered patients

Total number of tagged transgender and gender non-binary patients: **415** patients

= 1.0 per cent of our total patient population

Higher than the 0.5% estimated prevalence in the general population
Who are Trans People in Ontario?

Trans PULSE Project
433 trans people in Ontario surveyed in 2009

Demographics:
• 63% between 16-34 year old
• 81% born in Canada
• 36% with College or University degree
• 50% with annual income <$15,000
Who are Trans People in Ontario?

- 50% live in poverty
- 30% straight
- 27% parents
- 45% Masculine, 35% Feminine
- 20% Both or Neither (Non-binary)
- 70% live outside Toronto

- TransPULSE, 2010
Case Study

Gail, a 48 year old woman and her 15 year old “son” Bryce, both your patients, are here to see you (they have scheduled a 30 minute appointment between them)

Bryce recently told their family that they were transgender and had been feeling female for several years

Aside from a few visits with Bryce in the past year or two to discuss anxiety and some school performance concerns, you had never identified gender identity as a health issue with Bryce

What would you do next?
Gender Focused Health History

Gender Identity

How would you describe it? How do you feel about it?

Gender Expression

How do you feel most comfortable expressing your gender? How would you change your appearance if you could?

Perception of others

How do other people see you? How do you wish they saw you?

Sexuality

How does your sexuality interact with your gendered sense of yourself?

Based on the BC Guidelines: Potential Areas of Inquiry - Transgender Identity Development
Support Resources

Do people in your life know you are trans? Do you know other trans people? What is your relationship to trans communities?

Hormones

Why now? What do you want them to change? What will happen if change isn’t as hoped?

Three most common gender dysphoric times: starting school, puberty, dating

Based on the BC Guidelines: Potential Areas of Inquiry - Transgender Identity Development
Three most common gender dysphoric times:

- Starting school
- Puberty
- When peer group starts dating
Barriers to Health Care Access

- 20% have been denied hormone prescription (TransPulse, 2009)
- 21% avoided emergency room care when they needed it
- 52% of persons experienced a transphobia in the emergency department (Bauer et al., 2013)
- 60% uncomfortable in public space
- 14% have used hormones not prescribed to them (Rotondi et. al., 2013)
Why is access important?

Medical Transition Status and Past-year Suicidality

- Attempted Suicide
- Seriously Considered Suicide

- Not planning or N/A: 3
- Planning but not begun: 20, 27
- In process: 18, 36
- Completed: 1

*Completing a medical transition was self-defined, and involved different combinations of hormones and/or surgery for different people.*
BEING SAFE, BEING ME:  
Results of the Canadian Trans Youth Health Survey 2013-14

• Only about half lived in their felt gender full time

• Those who lived in their felt gender all the time were almost 50% more likely to report good or excellent mental health.
• Safety, violence exposure, and discrimination were major issues.

• Two thirds of participants reported discrimination
• Most youth (70%) reported sexual harassment

• Mental health issues were a key concern.

• Poverty and hunger was also an issue for some trans youth

• Running away from home more prevalent
Importance of Connectedness

- Family relationships are important to outcomes
- Positive impact on mental health and decreased suicidality
- Positive impact on school connectedness on mental health
Health Care Issues

- Increased rates of self harm and attempted suicide
- Avoidance of medical and mental health care
- Over half of youth with a family doctor (53%) said their current family doctor knew about their trans identity
- Discomfort with disclosing trans identity
Impacts of Strong Parental Support for Trans Youth

- Participants were recruited through respondent-driven sampling (RDS) over a 12-month period in 2009-2010.

- This sample includes 123 trans youth, 84 of whom had socially transitioned gender (or begun to), come out to their parents, and provided information reporting how supportive their parents were of their gender identity or expression.

- This analysis is based on data from these 84 youth.

TransPulse, 2012
Parental Supports

• Data analysis for two levels of parental support “not strongly supportive” and “strongly supportive”

• It is estimated that 34% of trans youth in Ontario who are “out” to their parents and have begun to socially transition have parents they would describe as “very supportive” of their gender identity or expression

• 25% indicated their parent(s) were “somewhat supportive” and 42% “not very” or “not at all”, for a total of 67% in the “not strongly supportive” group

Impacts of Strong Parental Support for Trans Youth, TransPulse, 2012
Figure 1. Proportion of trans youth age 16-24 years in Ontario experiencing positive health and life conditions, by level of parental support

* = statistically significant difference (p < 0.05)
Figure 2. Proportion of trans youth age 16-24 years in Ontario experiencing negative health and life conditions, by level of parental support

* = statistically significant difference (p < 0.05)
Why Support for Trans Youth Matters

Based on a 2012 study of 433 individuals

Trans Youth with Supportive Parents

 Reported Life Satisfaction
72% 33%

 Described Mental Health As “Very Good” or “Excellent”
70% 15%

 Suffered Depression
23% 75%

Reported High Self-Esteem
64% 13%

 Faced Housing Problems
0% 55%

 Attempted Suicide
4% 51%


For more information, go to transstudent.org/graphics

Infographic Design by Landyn Pan  Illustrations by Ethan Lopez

St. Michael’s
Inspired Care. Inspiring Science.
ADDITIONAL FINDINGS FROM TRANS PULSE:

• The support of parents mattered greatly even when a transgender person was well into adulthood.

• The risk of suicidal thoughts dropped 44% among trans Ontarians who could get legal forms such as birth certificates or OHIP cards with their new gender.

• Those who experienced low levels of trans-based hate were 66% less likely to consider suicide than those who endured high levels through things such as abuse.

http://www.torontosun.com/2015/06/08/suicide-rate-much-higher-for-transgender-canadians-study
Article

Young Adult Psychological Outcome After Puberty Suppression and Gender Reassignment

Annelou L.C. de Vries, MD, PhD, Jenifer K. McGuire, PhD, MPH, Thomas D. Steensma, PhD, Eva C.F. Wagenaar, MD, Theo A.H. Doreleijers, MD, PhD, and Peggy T. Cohen-Kettenis, PhD

ABSTRACT
Psychological Outcomes

Testing (T0)  

Repeat Testing (T1)  

Hormone-Blockers  

Cross-Sex Hormones  

(DeVries et al. 2010)
DeVries 2010

Post-Blocker (T1)

• Improved global functioning
  ➥ Depression
  ➥ Anxiety
  ➥ Emotional problem
  ➥ Behavioural problem
  ➥ Gender Dysphoria
  ➥ Body Satisfaction
Psychological Outcomes

Testing (T0)

Repeat Testing (T1)

Repeat Testing (T2)

13.6 y 16.7 y 20.7 y

Hormone-Blockers

Cross-Sex Hormones

(DeVries et al. 2014)
DeVries 2010 & 2014

Post-Blocker (T1)

• Improved Global functioning
↓Depression
↓Anxiety
↓Emotional problem
↓Behavioural problem
= GD
= Body Satisfaction

Post-Cross Sex Hormone or Gender Reassignment (T2)

• Improved Global functioning
↓Depression
↓Anxiety
↓Emotional problem
↓Behavioural problem
↓GD
↑ Body Satisfaction
Surgical Access Legislative Change

- As of March 1, 2016
- OHIP has changed the funding criteria for sex reassignment surgery by allowing qualified providers throughout the province to assess and recommend patients for surgery
# Readiness: WPATH SOC and MOHLTC Surgery Criteria

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<th>Gender Dysphoria</th>
<th>12 months Hormones</th>
<th>12 months GRE</th>
<th>12 months GRE</th>
<th>Medical and Mental Health Conditions reasonably well controlled</th>
<th>Medical and Mental Health Conditions well controlled</th>
<th>Capacity to make informed decision (^2)</th>
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<td>Gonadal (Orchiectomy, Hysto+BSO)</td>
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\(^1\) MOHLTC requires 12 months continuous hormone therapy with no breast growth defined as Tanner Stage 1

\(^2\) There is no age of consent/age of majority in Ontario Where clinically indicated
Key Findings:

• Give people an opportunity to describe their gender in their own words

• Time spent waiting varied greatly

• (60%) easily or very easily got referred to an assessor

• Nearly 2 out of 3 had their surgery funded entirely by a government health plan.

• Over half of respondents (57%) were able to choose the surgeon they wanted

• Travel 2 or more hours to their surgery appointments

• Surgeon created a space that was safe enough to ask questions and talk about the surgery process

• Self-reported complication rates

• Post surgery support in place rated 7/10
Recommendations

- Transparent, streamlined assessment process, with reduced wait times
- More consistency in the assessment process
- Informed consent
- Cost coverage of assessments
- Transparent, streamlined path to surgery, with reduced wait times
- Increased choice of surgical options
- Clearer pathway to surgery for people with a high BMI
- Greater number of trans-competent local primary care providers
- Better coverage of travel and aftercare costs
- Broader access to surgeries that facilitate participation in society
Exercise with the group:

• What are some things you can do in your clinic/work environment to create a “safe space”?  
  
• Who/what would this involve?  
  
(5-10 minutes to discuss amongst yourselves and with the larger group)
Final Thoughts:

Support for families of trans youth:
Families are a key source of support for young people

Safer schools:
Schools need to become safer and more welcoming for trans youth, even before these youth make themselves known to school staff.
Knowledgeable and accessible health care services:

• Adequate and timely access to gender-affirming healthcare for trans youth.

• Additional high quality training for all disciplines necessary
How are we at SMH responding?

• Essentially no wait list
• EMR “tagging”
• Hospital wide policy
• Knowing about trans sensitive referral sources
• Building a provider network
Sometimes we’re not asking the right questions…

are you a boy or a girl.

no
Giselle’s Story
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Canadian Centre for Substance Abuse. Lesbian, Gay, Bisexual, Transsexual, Transgender, Two-Spirit, Intersex and Queer (LGBTTTIQ). [http://www.ccsa.ca/Eng/Topics/Populations/LGBTTTIQ/Pages/default.aspx](http://www.ccsa.ca/Eng/Topics/Populations/LGBTTTIQ/Pages/default.aspx)


References


Resources for professionals

*My Guide to Caring for Trans and Gender-Diverse Clients.* 2016 Rainbow Health Ontario
[https://www.rainbowhealthontario.ca/TransHealthGuide/](https://www.rainbowhealthontario.ca/TransHealthGuide/)


*Guidelines for Psychological Practice with Transgender and Gender Nonconforming People.* 2015 publication by American Psychological Association.

*Guidelines and Protocols for Hormone Therapy and Primary Health Care for Trans Clients.* 2015 publication by Rainbow Health Ontario (Sherbourne Health Centre).
A Practitioner’s Resource Guide: Helping Families to Support Their LGBT Children. Prepared by Caitlin Ryan, PhD, ACSW, Director of the Family Acceptance Project at San Francisco State University for SAMHSA, 2014

Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People. 2012 publication by World Professional Association for Transgender Health (WPATH).
http://www.wpath.org/uploaded_files/140/files/Standards%20of%20Care,%20V7%20Full%20Book.pdf

http://thehub.utoronto.ca/obgyn/transgender-health/
In-person support for families in Toronto

**Families in TRANSition**

**PFLAG (Toronto chapter)**
Phone and group-based support for parents, family, and friends of LGBTQ youth. 416-406-6378 (support); 416-406-1727 (general inquiries). [www.torontopflag.org](http://www.torontopflag.org)

**Transceptance**
Monthly drop-in, parent-run, peer-support group for parents of trans children. 416-924-2100. [www.ctys.org](http://www.ctys.org)

**Trans Partner Network – Sherbourne Health Centre**
Online resources for families

**Family Acceptance Project**
Family education information and research about the experiences, health, and well-being of LGBTQ youth. [http://familyproject.sfsu.edu/](http://familyproject.sfsu.edu/)

**Gender Creative Kids**
Resources for gender creative kids and their families, schools, and communities. [www.gendercreativekids.ca](http://www.gendercreativekids.ca)

**Gender Spectrum**
Information to create gender-sensitive and inclusive environments for all children and teens. [www.genderspectrum.org](http://www.genderspectrum.org)

**A Guide for Parents**

**Our Trans Children**
PFLAG Transgender Network’s introduction to trans issues for loved ones of trans people. [https://lgbtrc.usc.edu/files/2015/05/Our-Trans-Children.pdf](https://lgbtrc.usc.edu/files/2015/05/Our-Trans-Children.pdf)
Online resources for families

Rainbow Health Ontario
Information about LGBTQ health and links to LGBTQ-friendly physical and mental health services in Ontario.  www.rainbowhealthontario.ca

RR Consulting
Includes extensive and specialized listings of Toronto-based resources for trans people and their families.  http://rrconsulting.ca/resources.html

Trans Care: An advocacy guide for trans people and loved ones

Transgender Health Information Program
BC-wide hub providing information about gender-affirming care and supports.
www.transhealth.vch.ca

TransParent Canada
Parent-to-parent support network.  www.transparentcanada.ca
In-person support for trans youth in Toronto

The 519
Downtown Toronto’s LGBTQ community centre, offering an extensive variety of specialized programming and services. 416-392-6874. www.the519.org

Planned Parenthood Toronto

Pride & Prejudice Program - Central Toronto Youth Services

Queer Asian Youth – Asian CommunityAIDS Services
Workshops, forums, and social events for LGBTQ Asian youth. (416) 963-4300 ext. 229. http://www.acas.org/cause/youth-program/

ReachOUT Program – Griffin Centre
In-person support for trans youth in Toronto

**Stars @ The Studio - Deslile Youth Services**
A social drop-in space created by and for youth (13-21); an LGBTQ drop-in takes place monthly. 416-482-0081. [http://www.delisleyouth.org/pages/STARS-at-the-Studio](http://www.delisleyouth.org/pages/STARS-at-the-Studio)

**Supporting Our Youth (SOY) – Sherbourne Health Centre**
Diverse and specialized programming for LGBTQ youth (29 and under). 416-324-5077. [www.soytoronto.org](http://www.soytoronto.org)

**The Triangle Program – Oasis Alternative Secondary School**
TDSB’s alternative school program dedicated exclusively to LGBTQ youth (21 and under). 416-393-8443. [http://schools.tdsb.on.ca/triangle](http://schools.tdsb.on.ca/triangle)

**YAAHA! - YouthLink**
Housing & employment services in Toronto

_Egale Youth OUTreach_
Mental health counseling and drop-in centre for LGBTQ youth (29 and under) experiencing homelessness. 416-964-7887 ext. 9. [http://egale.ca/outreach/](http://egale.ca/outreach/)

_Thrive! - Fred Victor_
Trans-positive support group focusing on life skills, employment and housing issues. [http://fredvictor.org/thrive](http://fredvictor.org/thrive)

_YMCA Sprott House_
Supported residential living dedicated exclusively to LGBTQ youth (16-24), including education and employment programming. 647-438-8383. [https://ymcagta.org/youth-programs/youth-housing](https://ymcagta.org/youth-programs/youth-housing)
Other youth mental health services in Toronto

*David Kelley Services - Family Service Toronto*
LGBTQ adult individual, couples and family counselling (inc. walk-in services). 416-595-9618.
http://www.familyservicetoronto.org/programs/dkslesgay.html

*LGBTQ Peer Support Drop-In Group – Mood Disorders Association of Ontario*
For LGBTQ persons living with a mood disorder. First & third Wednesdays monthly, 7-9pm.
http://www.mooddisorders.ca/event/toronto-drop-in-group-lgbtq-peer-support-drop-in-group

*Rainbow Services – Centre for Addiction and Mental Health*
Drug and alcohol counselling and supports for LGBTQ persons. 416-535-8501.
http://www.familyservicetoronto.org/programs/dkslesgay.html