Services that Reflect the Priorities of Trans **Patients**

Collaboration and United Voice

Coordinated, Community Driven Health Care



Inability to secure assessment and referral

for hormones and surgery create barriers to

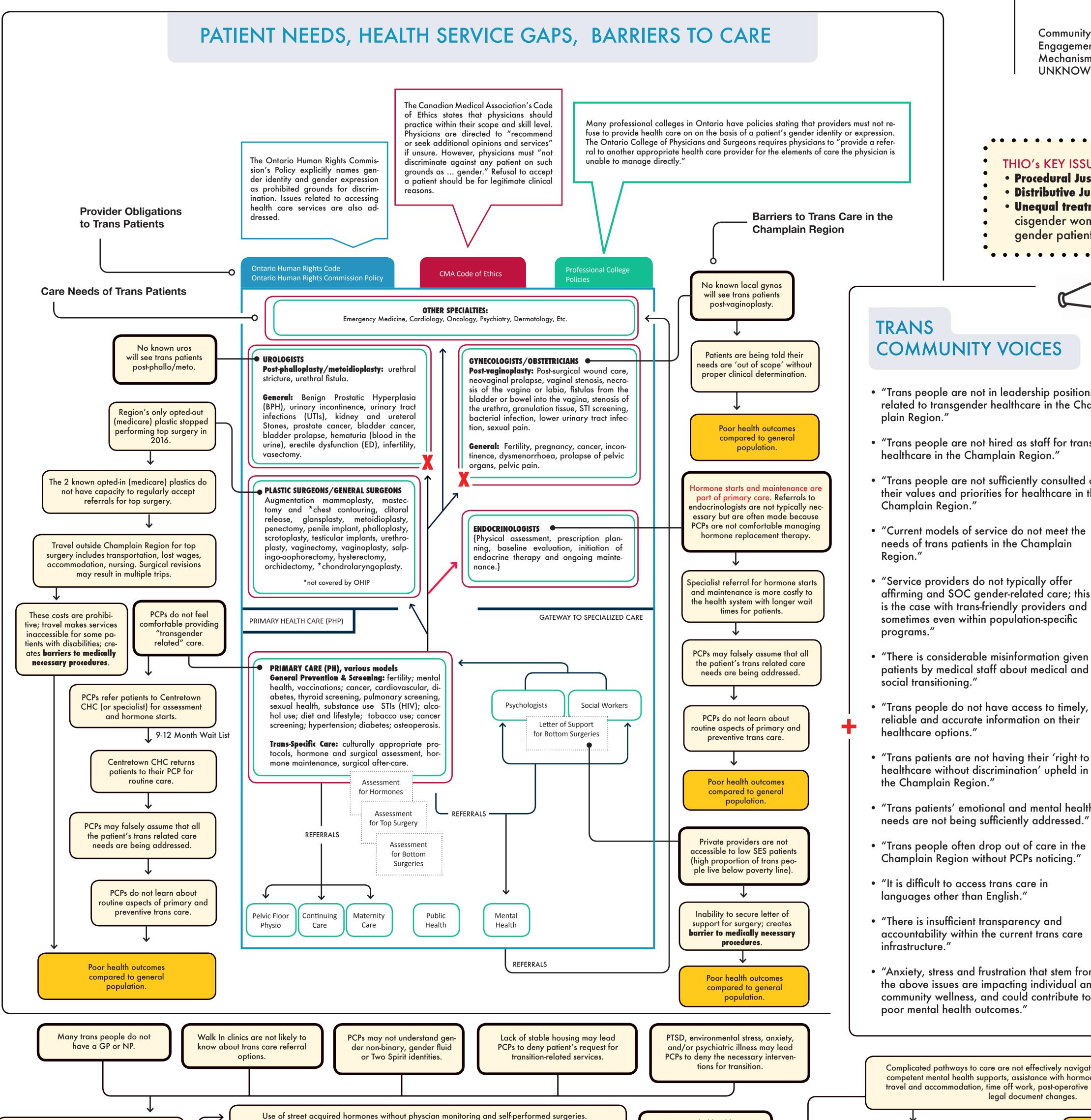
medically necessary procedures.

Catch the Baton on Trans Health

A Call for Coordinated Care in the Champlain Region

PROBLEM

Trans (transgender, Two Spirit, gender non-conforming) people are an estimated 0.5% of the general population. In the Champlain Region (pop'n: 1.2M), this is about 6150 residents. While the Ontario human rights code, Canadian Medical Association and professional college policies protect trans people's right to timely, high quality and dignified health care in the Champlain LHIN, this population faces unique barriers when seeking health services. Specifically, Primary Care Providers (PCPs) do not have the training, exposure and practice experience they need to confidently deliver routine and population-specific primary care services to trans patients. Instead, referrals are often made to Centretown Community Health Centre (CCHC)'s transgender health services. CCHC's scope of services for this population is narrow and their waitlist for hormone assessment alone is 9 months. Of note, hormone assessment is a service that can typically be completed by a patient's GP or Nurse Practitioner in one to three visits. Additional barriers to health system access include wide refusal of care by specialists who consider transg patient needs "out of scope" without first assessing the individual's clinical needs. These Champlain LHIN-wide barriers to care create inequities between trans and cisgender patients. Provincially, there are also disparities. In March 2016, there was an uneven allocation of capacity building funds for trans care across Ontario by the Ministry of Health and Long Term Care (MOHLTC); 100% of this \$2M was awarded to three agencies located in the TC LHIN (pop'n 1.8M). The Trans PULSE study reports that more than half of trans people in Ontario experience clinical depression and 43% had a history of attempting suicide. Evidence suggests that these poor health outcomes are a result of discrmination and violence, and that culturally appropriate health interventions could lead to significant population health improvements. Recent political, regulatory and social changes make this a critical time to organize a collective voice within the Champlain Region. Let's catch the baton during this wave of reform for the rights of transgender Ontarians by implementing coordinated and patient-centred health care for this underserved population.

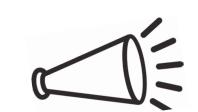


Poor health outcomes compared to general population.

RECENT PROVINCIAL REFORMS & NEW FUNDING Roll Out Plans **UNKNOWN** MOHLTC **ENHANCED ACCESS** TO G.A.S. REFERRAL Assessment of VIA PRIMARY CARE Province-Wide March 2016 **Priorities and Values** UNKNOWN MOHLTC ALLOCATES \$2M FOR CAPACITY BUILDING in ONTARIO Community March 2016 Mechanisms Sherbourne CHC & Rainbow Health Ontario **UNKNOWN** (\$909,000) Women's College Hospital (~\$250,000) CAMH (~\$750,000)

THIO's KEY ISSUES with RECENT PROVINCIAL REFORMS & NEW FUNDING

- Procedural Justice (Not transparent; Insufficient outreach; Insufficient timeline to participate)
- Distributive Justice (Uneven regional allocation of funds; services centralized in Toronto)
- Unequal treatment for equal needs (OHIP coverage for chest reconstruction in
- cisgender women after medically necessary mastectomy vs. no chest reconstruction for transgender patients after medically necessary mastectomy).



TRANS **COMMUNITY VOICES**

- "Trans people are not in leadership positions related to transgender healthcare in the Champlain Region."
- "Trans people are not hired as staff for trans healthcare in the Champlain Region."
- "Trans people are not sufficiently consulted on their values and priorities for healthcare in the Champlain Region."
- "Current models of service do not meet the needs of trans patients in the Champlain Region."
- "Service providers do not typically offer affirming and SOC gender-related care; this is the case with trans-friendly providers and sometimes even within population-specific programs."
- "There is considerable misinformation given to patients by medical staff about medical and social transitioning."
- "Trans people do not have access to timely, reliable and accurate information on their healthcare options."
- "Trans patients are not having their 'right to healthcare without discrimination' upheld in the Champlain Region."
- "Trans patients' emotional and mental health
- "Trans people often drop out of care in the Champlain Region without PCPs noticing."
- "It is difficult to access trans care in languages other than English."
- "There is insufficient transparency and accountability within the current trans care infrastructure."
- "Anxiety, stress and frustration that stem from the above issues are impacting individual and community wellness, and could contribute to poor mental health outcomes."

Trans patients drop out of care.

No peer-led healthcare

navigation or advocate roles in

Champlain LHIN.

THIO's Call for Enhanced Regional Planning & Coordination includes:

- A community needs assessment and evaluation of current services.
- A Transgender Healthcare Steering Committee for the Champlain LHIN that incudes leadership from the trans community.
- A streamlined system for referral to gender-affirming care, developed in partnership with trans people, community-base organizations, PCPs and specialists within the Champlain Region.
- Improved primary healthcare (PHC) capacity for trans patients across the Champlain Region.
- Improved surgical and perioperative capacity for gender-affirming surgery in the Champlain Region.
- A peer-led and staffed program for culturally appropriate information and care coordination with a focus on patients with complex care needs.
- A properly resourced community of practice for trans healthcare in the Champlain Region.
- Monitoring and evaluation using both performance indicators and community feedback.
- A unified voice for the Champlain Region that is able to influence decisions and secure resources at the provincial lev-

DRAFT - NOT FOR CIRCULATION

Trans Health Information Ottawa Independent, representing community interests Information in this poster comes from trans Town Hall meetings held in Ottawa in 2015 and 2016. Additional content comes from conversations with healthcare agencies, Ontario physicians, peer review and grey literature. See accompanying literature. Contact: transhealthinfo.ottawa@gmail.com

Complicated pathways to care are not effectively navigated by patients, e.g. trans competent mental health supports, assistance with hormone administration, ODSP, travel and accommodation, time off work, post-operative care, social transitioning, legal document changes.

Poor health outcomes

compared to general

population.