



# Information for Users

## Healthcare

**Read through the entire leaflet before engaging with public healthcare.**

- Keep the leaflet for future reference.
- This information is for personal use but feel free to share it.

### **Myth 1: Doctors can tell if you are trans\* or not**

#### **CAN THEY?**

You say who you are: you never know who is trans\* or otherwise gender variant until you ask the person. Health practitioners may assume that they know because of their textbooks but rarely do they have any real experience working with trans\* people.

There should be no compulsory treatment for variations of gender identity and gender expression. Having a trans\* identity is, in and of itself, perfectly sane and healthy.

When requesting medical assistance, a diagnosis should just check if you are able to care for yourself. Informed consent should be the only pre-requisite for help. Medical care should not be about being pathologised and classified.

### **Myth 2: All you need is a boob- or dick-job and then you're done**

Realising your gender identity is about becoming you. It is not about hormones and surgeries, particularly as not everyone wants them. Doctors

exaggerate their role and importance: *life is about more than body parts.* Experience tells us that we are learning and creating our lives while living them everyday. Therefore, we need to get out of the psychiatric manuals and be seen as real people. You are the person who best knows *your* healthcare needs.

### **Myth 3: Trans\* people only need (healthcare for) surgeries and hormones**

The reality is that trans\* people need healthcare for all types of reasons, just like everyone else. Trans\* people can get colds, the flu, broken bones, even cancer. Transphobia does not only occur when trying to access gender-related care; transphobic incidents happen at all levels in healthcare. Not getting appropriate treatment? Then complain to health regulators and Equality Bodies at national and European level if you experience discrimination or victimisation.

#### **TOO SMALL A MINORITY?**

How often do trans\* people hear "*We are so sorry, but you are too small a minority to develop special expertise*"?

We are not. Trans\* people have the right to healthcare just like everyone else. There should be more informed, respectful and trans\*-competent healthcare provision that responds to the diverse health needs of trans\* people. The same level of professionalism is required as for other disciplines.

Maltreatment is medical transphobia and mostly comes from having little or no information and understanding; this leads to the neglect of trans\* people's health needs.

### **MORE, NOT LESS CARE FOR THOSE WHO NEED IT**

There is not enough trans\* - competent healthcare anywhere, regardless of your gender identity or whether you may or may not choose certain treatment. For individuals who need and want it, we need good gender healthcare with social assistance, therapy, and legal support for all of us.

### **NOT GETTING WHAT YOU NEED? COMPLAIN TO HEALTH REGULATORS!**

Access to good healthcare is a problem for many people – whether or not you are trans\*. You should decide what options are appropriate for you, rather than be pressured into particular decisions or certain routes by healthcare providers, legislative requirements or wider societal attitudes about gender.

### **BUT WHAT IF THERE WERE NO GATEKEEPERS?**

Do we really need them? Humanity is diverse, there is not just male and female. Changing your sex is not a trivial thing. Hordes of people will not storm the gender clinics. Many trans\* people do not need special healthcare, just a better social situation – this includes full access to appropriate and respectful healthcare.

### **RIGHT TO HEALTHCARE**

Universal Declaration of Human Rights, Article 25:

*"Everyone has the right to a standard of living adequate for the health and*

*well-being of oneself and one's family including food, clothing, housing, and medical care."*

European Social Charter, Article 11: *"Everyone has the right to benefit from any measures enabling him to enjoy the highest possible standard of health attainable."*

European Court of Human Rights judgements oblige States to provide for the possibility to access gender reassignment (L v Lithuania)<sup>1</sup> and to cover medical costs for treatment related to gender reassignment (van Kück v Germany)<sup>2</sup>.

### **EVERYONE HAS THE "RIGHT TO HAVE RIGHTS"<sup>3</sup>**

Being a political minority is about rights, being de-privileged, living in less favourable circumstances, legally, socially, economically, educationally and otherwise. Because of transphobia, there is little reliable research on trans\* experiences but variations of gender identity and gender expression are becoming more and more visible.

### **IT'S ABOUT MONEY**

Our healthcare issues, like those within the rest of society, deserve a budget and resources. The issue at stake here is creating a more inclusive society, which has to adapt and be flexible to the needs of all people, including trans\* people.

1 Application No. 27527/03 ECHR (2007)

2 Application No. 35968/97 ECHR (2003)

3 Hannah Arendt