

Trans Surgery Briefing Note

Submitted to: House of Commons Standing Committee on LGBTQ2S Health in Canada

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Situation: Trans people have limited access to gender-affirming surgery in Canada. Gender-affirming surgery is a recognized and effective treatment for gender dysphoria. The goal of all gender-affirming treatments is to align people's internal sense of self and gender with their external gender presentation. Across Canada, access to gender-affirming surgery is limited by provincial funding policies, few available surgeons and lack of comprehensive pre- and post-op care for trans people.

Background: Trans people live in all parts of Canada and have been recently estimated at 1 in 200 adults (Scheim and Bauer, 2015). For many trans people, gender-affirming surgery is essential for their health and well-being. There are a number of different gender-affirming surgeries. For example, hysterectomy, orchiectomy breast augmentation, chest masculinization, vaginoplasty, facial feminization may be crucially important to a person's transition. There are few providers in Canada who are performing gender-affirming surgeries; most people either have to travel to Montreal, the U.S. or to other countries to have surgery performed. This varies by type of surgery. Many provinces require people to be assessed at the Centre for Addiction and

Mental Health in Toronto prior to having access to provincial funding for surgery. In Ontario, where this stipulation has been lifted, trans people still have limited access to required procedures.

For example, while Ontario has a process for approving surgeries that has not necessarily resulted in meeting the true need for gender affirming surgery. The data shows that although the number individuals being approved for surgery has increased significantly, only approximately 38% of these result in surgery being completed. (MOHLTC, 2018). There are a number of barriers that are contributing to this. There is a lack of surgeons willing to provide this surgery, resulting in wait-times often longer than 12 months to consultation. There are a number of out of pocket costs, sometimes thousands of dollars that prevent individuals from being able to access surgery.

It is well-documented that prolonged waiting times for gender-affirming surgery can increase the risks associated with gender dysphoria, such as depression and suicidality (Bauer et al., 2013). Other services – such as orthopedic surgery – have trialed approaches to streamlined referral services with resulting decreases in wait times (Health Quality Ontario, 2019) In this context, patients are matched to programs that have availability to most quickly meet their needs. This is a method that can be adapted to this purpose. The model requires availability of: 1) surgeons to perform the procedures; 2) allied care providers for support around the surgeries and to help clients access other care; 3) primary care providers to provide ongoing care, referrals, etc.

Analysis: The current data shows a need for increased capacity for gender-affirming surgeries in order to decrease wait times and to diminish the negative health effects on the patients who are waiting to access care. However, the Ontario data is not capturing all the people who could access surgery since it does not include people who were not approved for procedures, people

who pay out of pocket for procedures or those who have difficulty accessing primary and allied care professionals in order to get referrals.

The current data does not allow us to break down the reasons for the current wait times in Ontario. The process has already been appropriately streamlined in this province with the removal of a stipulation that trans clients be seen at the Centre for Addiction and Mental Health prior to surgeries being approved. Based on our clinical experiences, we suspect that much of the reason for long wait-times is lack of access to surgery because of the few resources being allocated to this population impacting surgeon's willingness and ability to provide these services.

Recommendation: Based on current research, we recommend timely access to a gender-affirming surgeon. We recommend a more streamlined approach for referral. We recommend that provinces strive to provide primary care services for people in their own communities and as many surgical procedures as possible within their own province.

Because of the provincial implementation of health care services, we advocate that each province develop an approach to processing surgery referrals that involves a decrease in wait times. This requires involvement of various levels of health care including primary care providers, surgeons, and health care service administrators. We support the move that Ontario has made to remove the stipulation of CAMH review of clients prior to surgery, which supports international recommendations (WPATH, 2012). We recommend that other provinces also make this move. The federal government has a role in encouraging provinces to have a systems approach which would be compatible with international standards for providing trans care.

About the Women's College Transition-Related Surgeries* Program

THEx supports the expansion of health services for trans individuals and communities across Ontario. Under the umbrella of THEx, the Transition Related Surgery Sub-committee led by WCH, is charged with the goal of creating an accessible, and quality surgical program.

WCH is dedicated to supporting the health and wellness of our transgender and gender diverse clients. The surgical team of the Transition-Related Surgery (TRS) Program includes specialists in plastic surgery, urology, gynecology and anesthesiology as well as nurse practitioners, nurses and other health care providers. This program represents the first public hospital-based surgical program in Canada focused on providing safe and timely access to transition-related surgical care.

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