



OFFICE OF THE MAYOR  
CITY OF HAMILTON

November 20, 2017

Ms. Donna Cripps  
Chief Executive Officer  
Hamilton Niagara Haldimand Brant Local Health Integration Network  
264 Main Street East  
Grimsby, ON L3M 1P8

  
Dear Ms. Cripps:

I am writing to you today – Transgender Day of Remembrance, a day memorializing trans and gender-diverse people murdered because of transphobia – to ask for your advice and assistance in eliminating the inequity that is experienced by trans and gender-diverse people in local health care, and in building Hamilton’s capacity to provide them with high-quality health care. Giblon and Bauer (2017) report that as of 2016, an estimated 200,000 trans adults are living in Canada, and 77,000 are living in Ontario. This number does not include the growing number of youth under the age of 18 who are identifying as trans or gender-diverse. In Ontario, evidence that trans people face systemic barriers to equitable health care has been building since the 2009 TransPulse Project, which completed research with almost 450 trans Ontarians. For example, TransPulse data reveals that over 43% of trans Ontarians had an unmet health care need in the past year (Giblon & Bauer, 2017, p.1). Reasons for unmet needs include: lack of access to local services resulting in long waitlists, knowledge gaps among health care providers (HCPs), and stigma and discrimination against trans and gender-diverse people. Despite the lack of Hamilton-specific demographic data, the local need for support and services is evident.

An example that illustrates these unmet needs in Hamilton is that trans individuals must travel to another city for services. Quest Community Health Centre in St. Catharines is overwhelmed by the number of trans people seeking health care and has closed its waiting list as a result. Patients are being forced to wait a year for an intake appointment. This poses a serious problem; trans individuals who want to proceed with medical transitioning but do not have a HCP are at highest risk for suicide ideation, attempt, and completion (Bauer, Pyne, Francino & Hammond, 2013). The majority of patients accessing Quest are travelling to St. Catharines from Hamilton—often at great

cost and disruption—because their own family physician is reluctant to work with a trans patient due to lack of knowledge, lack of confidence, or sometimes refusal to work with an individual due to transphobic bias.

The demand for service and resulting waitlists highlight the need for increased service provision within Hamilton. For example, McMaster Hospital's Adolescent Medicine Program is managing a waitlist of over 12 months for gender-diverse youth (per Dr. Natasha Johnson, Department of Pediatrics, McMaster University). Dr. Johnson also notes that "the waitlist for adolescents that we refer for top surgery is longer than 12 months." Local need is highlighted at the twice-monthly, half-day Trans Community Health (TCH) clinic run by the Shelter Health Network (SHN), which began in April 2017. Since that time, the family physician at TCH has seen 31 new patients. Over 75% of these patients are under the age of 29, and 100% have tried, unsuccessfully, to find a HCP for medical transitioning elsewhere (Dr. Siobhan Callaghan, TCH). In addition, over the past 8 months, another family physician in Hamilton has seen approximately 50 trans patients ranging in age from 16 to 60 years. In most cases, patients report feeling uncomfortable discussing gender identity with their family doctor. Dr. Callaghan explains that "most experiences in the health care system are traumatizing for trans individuals and adding them to a waitlist further intensifies the trauma." Transgender youth experience the most psychological distress when compared to their cisgender peers (Jefferies & Tobon, 2017, p.4) It is evident that more local trans- and gender-diverse-friendly health-care is needed urgently.

A consistent theme in studies examining health care access for trans and gender-diverse individuals is that HCPs feel a lack of confidence and knowledge surrounding trans health care, and they identify a "lack of training in transgender-related care as a significant barrier" (Vance et al, 2017). The Hamilton Trans Health Coalition (HTHC) was formed at the end of 2016 to bring local HCPs together with trans people in order to increase the capacity of Hamilton's primary health care system. The HTHC works to provide education to physicians and other HCPs. Support for additional education and training opportunities is necessary. Being denied by a HCP who claims not to know enough about trans health care is a pervasive barrier that trans individuals face (Bauer et al, 2015).

Fear of stigma and discrimination often prevents trans individuals from seeking medical care - even urgent health care. In Ontario, about 21% of trans individuals have avoided accessing emergency services for fear of doing so as a trans person; of those who access emergency care, more than half receive "negative treatment due to being trans,

ranging from insulting or demeaning language to outright refusal of care” (Giblon & Bauer, 2017, p.2). Discomfort in accessing health care can also stem from other barriers, including “unfriendly office environments and perceived stigma,” a “lack of consistently applied protocols... [and] inconsistent use of chosen name/pronoun” (Safer et al, 2016, p.169; Gridley et al, 2016, p.254).

The long waitlists, lack of access to local services, knowledge gaps among HCPs, and stigma and discrimination against trans individuals demonstrate “the need to support health care policy-makers and providers in creating trans-inclusive environments and providing integrated and comprehensive services that actively address trans health needs in primary care settings” (Bauer et al, 2015, p.13). As the city of Hamilton is the first in Canada to have a Transgender Protocol (March 2017), it is essential to support these very same Hamiltonians in the local health care system.

We are asking for advice and assistance on immediate, medium and long-term next steps that must be taken toward the goal of trans equity in local health care, particularly in the spheres of health professional awareness-raising and capacity-building, and making public health care spaces gender-affirming.

Wylie et al (2016) identify three evidence-based themes for providing services to transgender people:

- “the core leadership role of the transgender community;
- the need for transdisciplinary services to ensure comprehensive service availability; and,
- the importance of partnerships that improve service delivery.” (p.408)

Hamilton has already aligned with these approaches in its initial steps towards increasing equity in health care access. Examples of this alignment include: the support and work of the HTHC, local research to collect data about the trans and LGBTQ+ communities, and collaboration with other regional and provincial supports. We are now asking for your assistance in moving forward with necessary enhancements to these efforts in order to eliminate inequity for trans and gender-diverse people.

Sincerely,

A handwritten signature in black ink, appearing to read 'Fred Eisenberger', with a stylized flourish at the end.

Mayor Fred Eisenberger



Elizabeth Richardson, MD, MHSc, FRCPC  
Medical Officer of Health  
Public Health Services Department  
City of Hamilton



Rob MacIsaac  
President and CEO  
Hamilton Health Sciences



Cole Gately, MA  
Chair, Hamilton Trans Health Coalition  
Hamilton, ON



Tim McClelland  
Executive Director  
The AIDS Network

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November 17, 2017

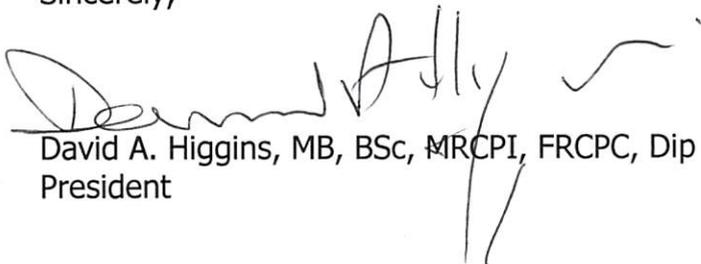
Ms. Donna Cripps  
Chief Executive Officer  
Hamilton Niagara Haldimand Brant Local Health Integration Network  
264 Main Street East  
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Dear Donna:

The complex lives and associated distress and risks suffered by transgender individuals are well documented in our Mayor's letter and the attached references. These concerns are compounded by fragmented services which may not be sensitive to, or have the capacity to meet, their particular needs.

St Joseph's Healthcare strongly supports the vision espoused by our civic leadership in creating an inclusive health and support system for our fellow transgender citizens whose needs are well articulated in the enclosed letter.

Sincerely,



David A. Higgins, MB, BSc, MRCPI, FRCPC, Dip AMSM  
President

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