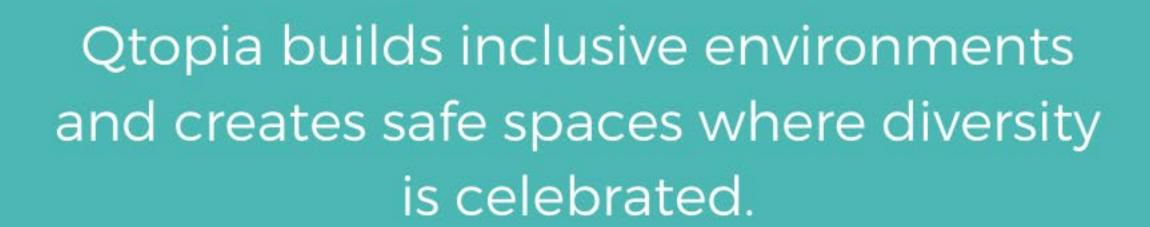


diversity and inclusion

allyship in action

who are when we have a real ways and a real ways are a real ways and a real ways are a real ways and a real ways are a real wa





key statistics findings from the Counting Ourselves study

- High levels of participants wanted, but not able to access, gender-affirming healthcare.
- 36% of participants had avoided seeing a doctor because they were worried about being disrespected or mistreated
- 71% of participants aged 15 and older reported high or very high psychological distress, compared with only 8% of the general population in Aotearoa New Zealand.
- 56% had seriously thought about attempting suicide in the last 12 months.
- 37% had attempted suicide at some point and 12% had made an attempt in the last 12 months.
- Participants who were supported by at least half of their family/whānau were almost half as likely (9% vs 17%) to have attempted suicide in the last 12 months.

Mental health of trans children supported in their identities

Socially transitioned transgender children who are supported in their gender identity have developmentally normative levels of depression and only minimal elevations in anxiety, suggesting that **psychopathology is not inevitable** within this group.

Especially striking is the comparison with reports of children with GID; socially transitioned transgender children have notably lower rates of internalizing psychopathology than previously reported among children with GID living as their natal sex.

Chosen name use is linked to reduced depressive symptoms, suicidal behaviour, and ideation among trans youth

Chosen name use in more contexts was associated with lower depression, suicidal ideation, and suicidal behavior. Depression, suicidal ideation, and suicidal behavior were lowest when chosen names could be used in all four contexts.

For transgender youth who choose a name different from the one given at birth, use of their chosen name in multiple contexts affirms their gender identity and reduces mental health risks known to be high in this group.

Mental Health Outcomes in Transgender and Nonbinary Youths Receiving Gender-Affirming Care

In this prospective cohort of 104 TNB youths aged 13 to 20 years, receipt of gender-affirming care, including puberty blockers and gender-affirming hormones, was associated with 60% lower odds of moderate or severe depression and 73% lower odds of suicidality over a 12-month follow-up.

what we know



being affirmed in our genders, supported by our whānau, and accessing gender affirming healthcare and good mental health support saves lives

language and terms

why is the language we use so important?



LGBTQIA+: The letters LGBTQIA refer to lesbian, gay, bisexual, transgender, queer or questioning, intersex, and asexual or allied.

MVPFAFF: An acronym for Pasifika identities - Mahu (Hawai'i and Tahiti), Vaka sa lewa lewa (Fiji), Palopa (Papua New Guinea) Fa'afafine (Samoa) Akava'ine (Rarotonga), Fakaleiti (Tonga), Fakafifine (Niue).

Rainbow Community: A name for the LGBTQIA+ community that strives to include everyone, even if your particular letter has yet to be added.

Takatāpui: A Māori person who identifies within the LGBTQIA+ community.

Ally: Someone who supports and advocates with and for a group other than their own.



Heteronormativity: The belief or assumption that people fall into distinct genders and gender roles in life and that all people are heterosexual.

Gender Binary: The acknowledgement of only two genders (men and women) - and nothing else.

Gender Spectrum: A range of gender identities between and outside of male and female.



Gender Identity:

Your personal sense of your own gender. Gender identity can correlate with your presumed sex at birth, or can differ from it.

Gender Expression:

The ways you demonstrate gender through your appearance, actions, and interactions.

Sex:

The physical parts of your body that we think of as either male or female, that you were presumed to be at birth.

Sexuality:

The way people experience and express sexual attraction.

let's discuss

sex #
gender identity #
gender expression #
sexuality



Cis, Cisgender: your gender is the same as the sex that you were presumed to be at birth.

Trans, Transgender: your gender is different from the sex that you were presumed to be at birth.

Personal pronoun: The pronoun a person uses to identify their gender. eg: She/Her, He/Him, They/Them.



language & gendered care

Everyone is different, with their own preferences, approach, comfort and terms they use for their body.

Check in and ask!

"What terms do you like to use for your body? It's important that we're clear what we're talking about, but that you're comfortable, too."

Transparency and clarity is the golden tool.



language & PMS

Medical IT isn't the best at keeping up to date! Sometimes our systems don't have fields for gender, pronouns, or gender beyond M/F/Unknown.

Give options!

Sometimes we need to switch a gender marker to access a referral - explain why, and let someone know so we can fix it!

Offer to update PMS and NHI, but explain that some systems might not update. Ring ahead for referrals if need be.



medtech 32

③ Patient Register □ □ ×				
MOUSE Mickey (W12345) Last Confirmed:				
Name 1 Enrolment-Funding 2 Account 3 More 4 Next of Kin/Employer 5 Care Plus 6 Notes 7 NHI Data 8 Audit 9 Name And Address Details				
Surname:			Patient: A/c Holder:	NHI @
First Names:	MICKEY	Title: MX	Date of Birth: 21 Sep 1954 V	HII
Middle Names:			GMS: Adult (A)	
Preferred Name:			Gender: Female (F)	
Street:	401 Madras Street	? 0	Registered: Casual (C)	
Suburb:	Christchurch Central	Post Code:	Provider: Dr Dave Richards (DF	R) 🔻
City:	Christchurch	8013	Ac Group: Casual Patient (CAS)	
Country:		_	Chart No: W12345	- Extn: 1
Work/Home Ph:	n:		Ethnicity: Ukrainian (12942)	
Mobile Ph:	? No SMS P		HPI Identifier:	
Res/Building:				
WINZ No:	Res Status: Eligible Non NZ 🔻			
Community Service Card 🙆 🗐				
Card Type: Non Csc Ho (3) ▼ No: Start: ▼ Exp: ▼				
Entitlement Status: Last retrieved on:				
High User Health Card HU Card: Not High U (N) ▼ Start: ▼ Exp: ▼				
Inactive 「 Add OK Cancel Close Help				

Preferred name in left-hand column

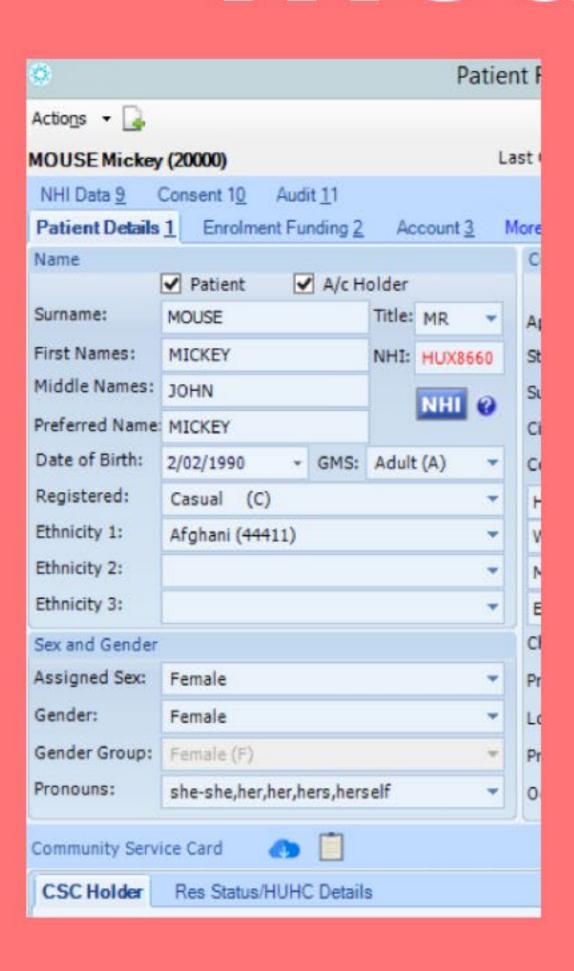
'Gender' can be male, female, unknown

Utilise flags to alert for pronouns & preferred name

Utilise notes for complexities and details to keep in mind



medtechevo



Separate fields for gender and sex

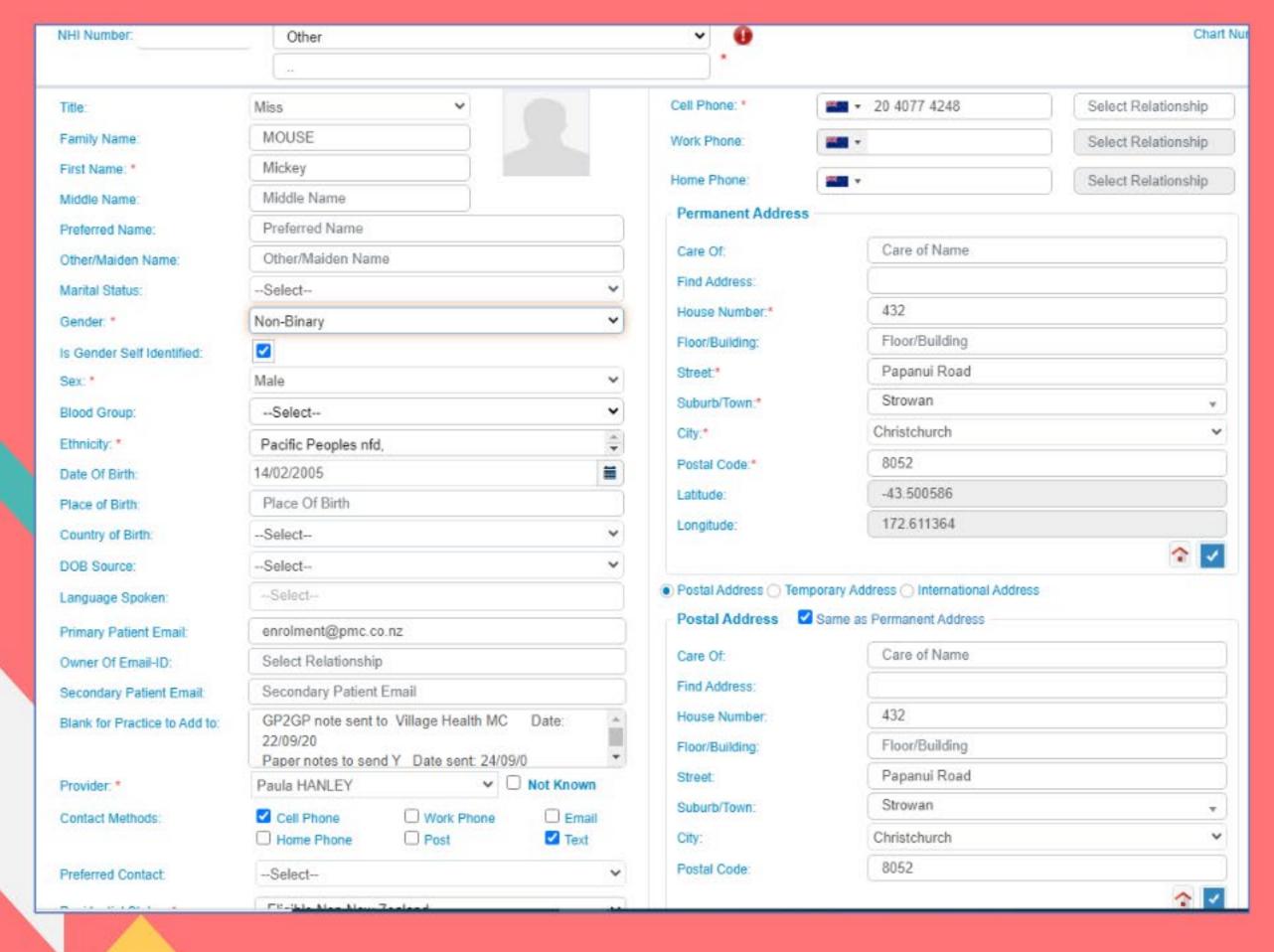
Sex is a clinical field - gender is used for everything else

Gender can be male, female, or nonbinary

Preferred name and pronoun fields



indici



Separate fields for gender and sex

Sex is a clinical field - gender is used for everything else

Gender can be male, female, or nonbinary

Preferred name option in left hand column

Use flags for pronouns



pharmacy pms

Pharmacy PMS only has M & F available, but this isn't a required field.

Pharmacy PMS has a notes function which can be used for additional information, like preferred names and titles, to ensure a patient's prescription label has the correct information.

Pharmacy teams don't have access to prescriber notes - so please include preferred names and titles on your prescriptions, or send an electronic note with this information.

what if I make a mistake?



Apologise, correct yourself, and move on.



Primary Care Gender Affirming Hormone Therapy Initiation Guidelines

Aotearoa New Zealand guidelines for commencing GAHT for adults in primary care.

Informed consent: for hormone replacement therapy for patients 20+



Available in Canterbury for all patients 20+, removing the need for endocrinology and specialist mental health services

The informed consent model of care views treatment as a collaborative effort between the patient and provider. Receiving gender affirming care from a provider who often knows the patient well, at a place close to where they live, can reduce the barriers to accessing this care, and patients benefit from the established relationship that they have with their primary care provider.

Six stage process over a number of appointments:

Stage one: Introduction to service & information gathering

Stage two: Initial medical review

Stage three: Hormone counselling and education session

Stage four: Hormone initiation

Stage five: Monitoring and review

Stage six: Maintenance

Referrals to 'champion' prescribing GPs available at no extra cost to the patient





Be visible.

Let your actions speak for you.

Make no assumptions.

Use inclusive language.

Respond to anti-LGBT+ behaviour.

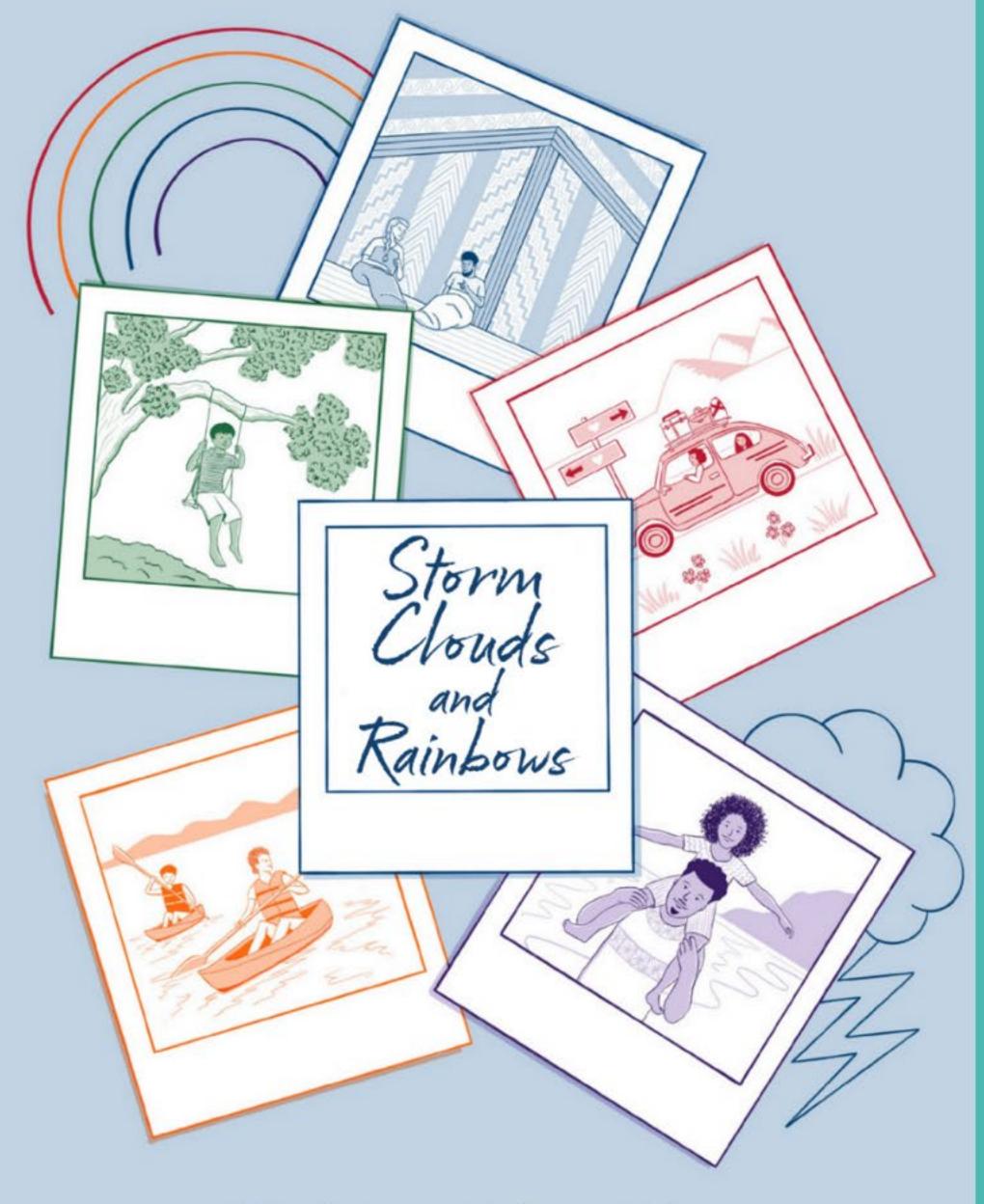
Be curious about your own discomfort.

Broaden the opinions you listen to.

Accept that you're going to make mistakes. Correct yourself and apologise when you do.

Remember: Ally is a verb.





The journey of parenting a transgender child



BE-THERE.NZ





























■ To find out more about supporting rainbow people, visit rainbowmentalhealth.nz





To find out more about supporting rainbow people, visit rainbowmentalhealth.nz



let's make a plan

Ask yourself:

How would someone coming to your service know that it is safe? What could we do better?

What can I do to support the LGBTQIA+ community?

What can I do to educate those around me?

What can I do to advocate for changes within my sphere of influence?

What further resources, information, or help do I need?



LGBTQ&A

primarycare@qtopia.org.nz