

Needs and priorities for gender affirming medical intervention for trans and nonbinary people

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INTRO

Context

Studies have shown the **benefits of gender affirming care** (GAMC) for trans and nonbinary people (TNB). Notably, access to GAMC are associated with **better mental health** outcomes and **quality of life** (1-2).

Some studies have observed the needs for GAMC of TNB people (3-5). However, studies often focus on reimbursed intervention and neglects ones considered as 'esthetic'.

Aim of the study

The aim of the study is to examine the needs and priorities for GAMC for TNB people in Quebec.

Methods

Online survey (41 questions)

- multiple/single choice
- ranking
- AB open questions

Inclusion criteria

- 14+
- Quebec
- TNB people
- Desire or experience of GAMC

Quantitative analysis

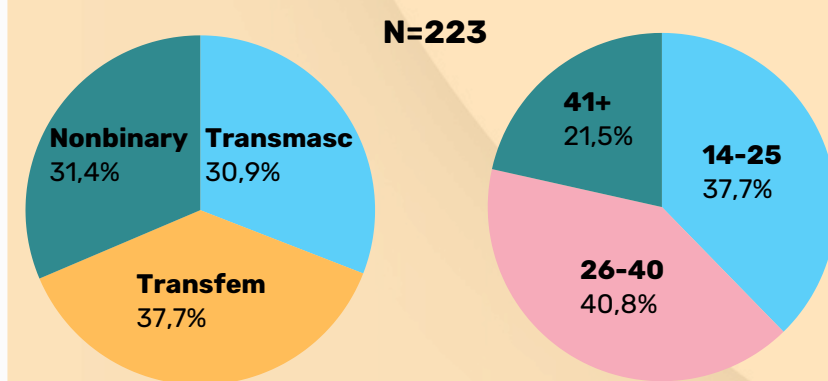


Thematic analysis



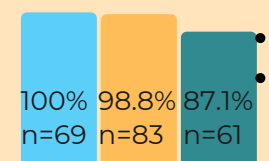
RESULTS

The sample



The nonbinary category includes every person who selected "nonbinary", "questioning" or multiple categories.

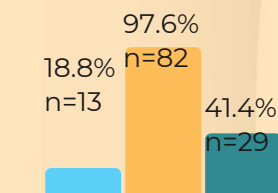
Hormones & blockers



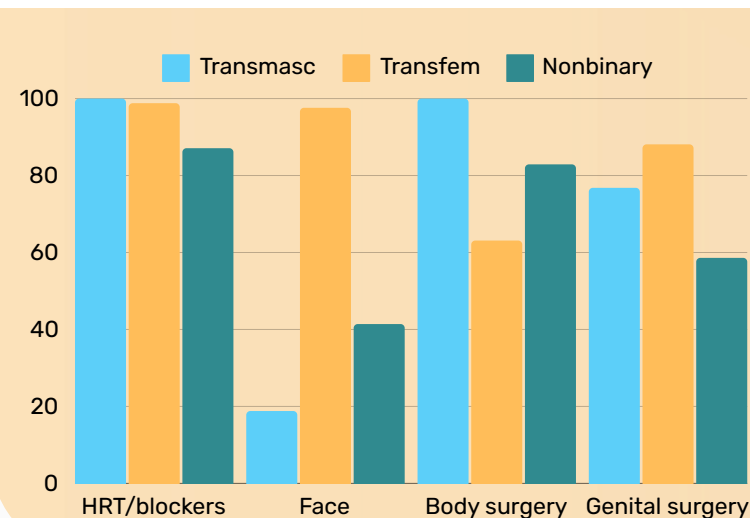
Hormones and blockers are the **most desired/completed** intervention for all genders.
 A little less desired by **nonbinary** people.
 Motivated by **self-image** (dysphoria, well-being, desired gender characteristics) and **projected image**.

- Important disparities regarding **face interventions** interventions mostly desired by **transfem** people.
- The most desired one is definitive hair removal (**92.9%** vs **4.4%** vs **30%**).
- Motivated by self image, social aspects (« passing », social comfort, **security**)

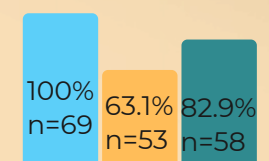
Facial interventions



Desired or completed interventions

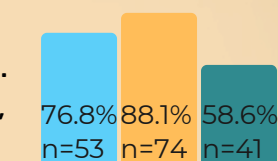


Body interventions



- Body interventions** are more desired by **transmasc** people.
- Most desired interventions are **mastectomies (97.1%** vs **72.9%)** & breast augmentation (**56%**). Nonbinary people also desire breast reduction (**14.3%**)
- Genital interventions** are more desired by **transfem** people.
- Vaginoplasty (**75%**) and hysterectomy (**60,9%** vs **41,4%**) are the most desired.
- Motivated by self-image, sexual health, fertility control, stopping hormone production and periods in case they stop HRT.

Genital interventions



CONCLUSION

Discussion

- GAMC needs vary greatly according to gender.
- Transfeminine people tend to have **more needs toward interventions considered as 'esthetic'** which are often **not covered** by insurances.
- Facial interventions can be motivated by social and **security** reasons as facial feature could reveal that the person is trans, exposing her to potential violence.
- Non-binary people seem to have specific needs and to be more interested in interventions reducing gender features.
- Some people want genital interventions to stop producing hormones and **stop hormonal treatments**, which is not recommended.

Implications for practice

- '**Esthetic**' interventions **should be made more accessible**.
- The security issues highlights the importance of guaranteeing access to GAMC.
- It is important to offer **flexible options** to meet individual and diverse needs, especially for **nonbinary people**.
- There is a need for **better education** regarding the effects and impacts of genital interventions.

Contact

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