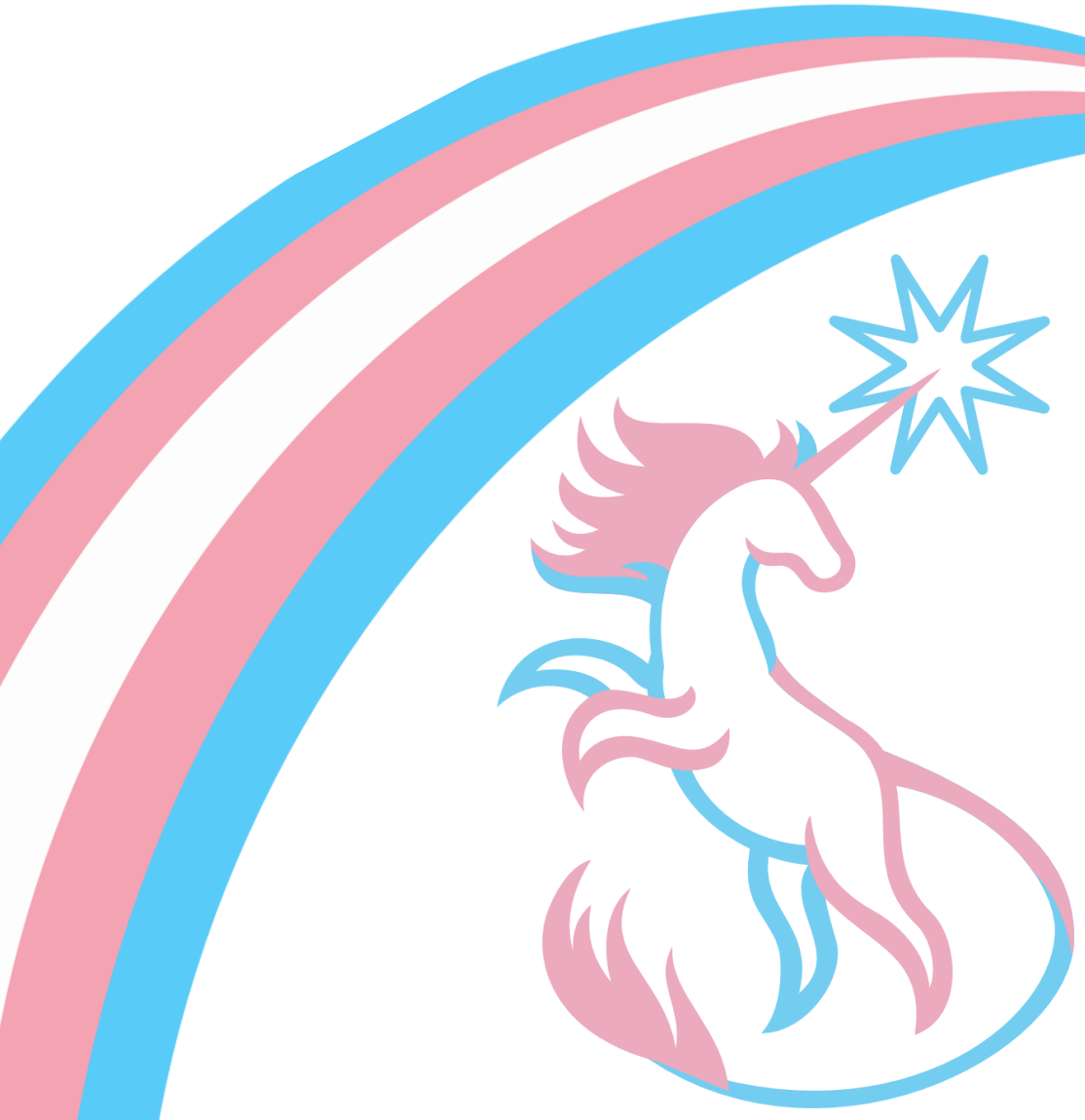
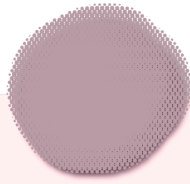


A GUIDE FOR ALLIES TO IMPROVE TRANS+ ACCESS TO HEALTHCARE

Created by the Trans Aware Cancer Care
community researchers





This zine features insights from our community work on cancer service experiences and from our own personal experiences as trans+ individuals.

This zine has been created with love.

Please read with an open mind and an open heart.



CONTENTS

| | |
|--|----|
| Who are Trans Aware Cancer Care?..... | 4 |
| ‘I Didn’t Expect to Find Myself’..... | 7 |
| What this Zine is about..... | 8 |
| Outputs - Squares - People’s Stories | 10 |
| Allyship and Validation | 14 |
| Tips for Being an Ally..... | 16 |
| Sharing Personal Pronouns | 18 |
| If You Miss Us You Risk Us | 20 |
| Pronouns DOs and DONTs | 22 |
| Impact and Intent | 24 |
| Accountability..... | 26 |
| ‘Tolerance vs Allyship’..... | 29 |
| ‘Radical Tree of Transformation’ | 31 |
| Glossary of Terms..... | 32 |



Trans Aware Cancer Care

Trans Aware Cancer Care (TACC) started as a project aiming to document trans+ people's experiences of cancer services in the UK. It quickly broadened into research that explored trans+ access and experiences to healthcare in general.



We used arts-based, participatory research, to highlight systemic barriers and discrimination, while showing how affirming care can rebuild trust and improve cancer outcomes.

Ninety-two art contributions were gathered and assembled into a large trans pride flag, representing diverse experiences of healthcare, from affirming and compassionate care to significant harm, discrimination, and avoidance of cancer screening.





Who we are

TACC is led by a group of community researchers, who are all part of the trans+ community and have some form of lived experience.

Each of us has unique experiences in different areas, and we all brought something personal to this project, which expanded it into the beautiful thing it is today.



I didn't expect to find myself



Reflection from Katie (they/he), community researcher

The Trans Aware Cancer Care project brought me closer to the trans+ community. I feel like I really belong now. Not just part of me but the whole of me, queer, fat, neurodivergent, loud and swearsy. Masc and non-binary, both but neither.

I have felt so seen and held by the community over the past year. We had the most intense conversations about healthcare, oppression and illness. We also shared stories of trust, safety, love and family. I felt their love and acceptance throughout.

There was no shame, no judgement. I was finally able to be loud and proud.

I will be forever grateful for the stories, space and love shared with me throughout this project.

Thank you all.



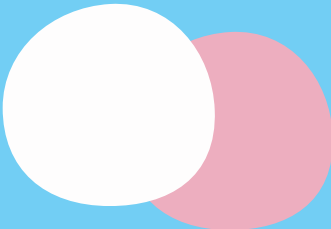
What is this zine about?

There's a need for change and a need to spread awareness on trans+ issues and what this means for us trying to access cancer services. The stories and information in these pages highlight why we need allyship now more than ever.

We created this zine to aid allies in ways to support trans+ people, and to illustrate a clearer idea of what allyship could mean.

Throughout we share artwork from Trans Aware Cancer Care, community based knowledge, and some of our personal experiences.





From the Gender Identity Census in England and Wales from 2021, statistics show that **0.5%** of the population in England and Wales do not identify with the gender assigned at their birth. **0.1%** of those are **trans men**, **0.1%** are **trans women**, **0.06% nonbinary**, and the rest either did not elaborate, or provided a different gender identity.

These numbers put trans+ people in a significant minority, meaning we are unable to represent or defend ourselves without allies. These allies must exist everywhere and it is really important they exist in healthcare.

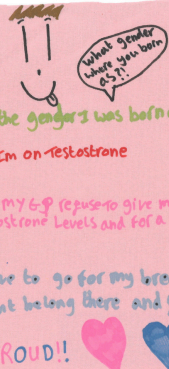
We know health professionals
are overburdened...

“I used to be able to sit and talk to my
patients.”

- healthcare professional

...every bit of support helps

I Avoid The Doctors:
WHY
They Always Ask for the gender I was born as
I HAVE To Tell Them Im on-testosterone
Because I go private my GP refuse to give me
a blood test for my testosterone Levels and for a full
health work up
I dread for when I have to go for my breast
Cancer check as I wont belong there and fear
I will be judged.
TRANS AND PROUD!!




People's Stories


"They always ask for the gender I was born as" (No01)

"In a referral to the GIC, the notes stated word for word, "She thinks she is a man". I don't think. I know."
(No03)

"I feel that I have been treated as female and have been too overwhelmed and tried to argue with professionals quite often."
(No09)

"I've had a lot of hospital admissions for self-harm and suicide attempts and never once has it even felt like an option to share my identity and gender preferences." (No10)


TRANS HEALTHCARE IS A RIGHT
X




I'M JUST SO TIRED

MEDICAL SPACES
ESPECIALLY FOR MENTAL HEALTH FIRST AID
MAKE ME FEEL
JUDGED, UNSAFE AND ASHAMED, AND TOO
AFRAID TO BE
MYSELF.

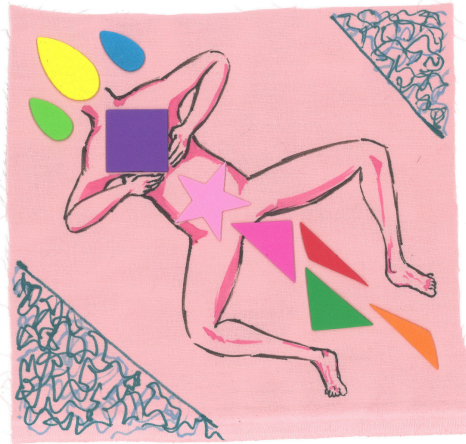


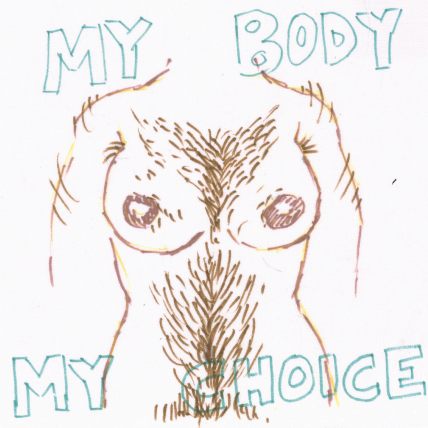
"I have had multiple bad experiences of cervical screening where I have been misgendered & bullied by nurses for finding the experience traumatic. It took me 3 years to have a 'successful' screening after multiple attempts!"

(No11)

"This is a visual of some of my exhaustion before I have even entered the healthcare setting – I am chronically ill, queer and a parent and have experienced a lot of shame and prejudice from all the ways I have been treated and how I have been perceived."

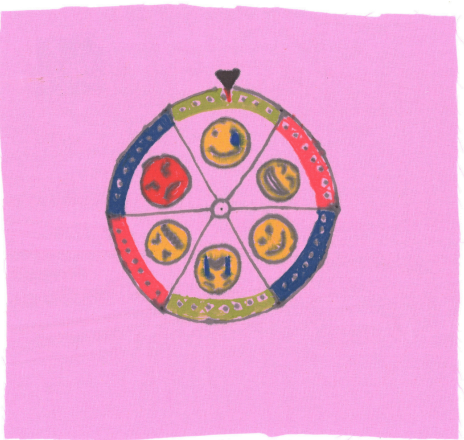
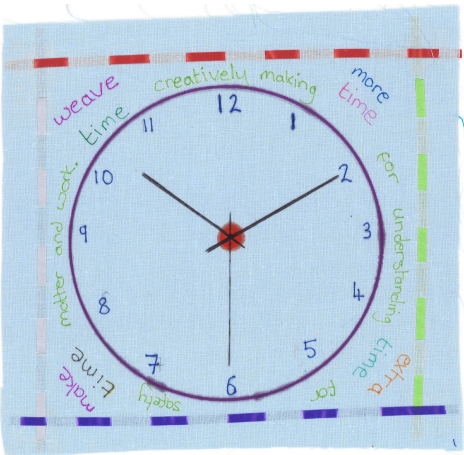
(No14)





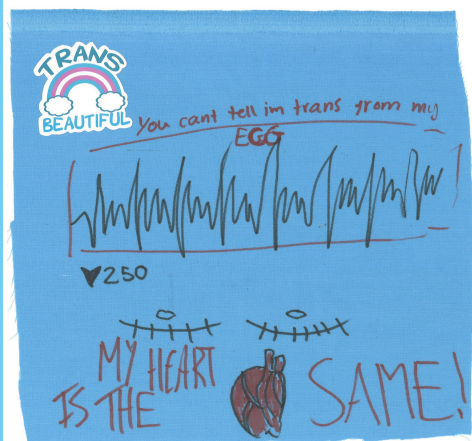
"I will never get a cervical screening because my doctors are transphobic and don't respect my personage. I could get cervical cancer at any point and may never know until it's too late. This fact is more bearable to me than receiving care being treated as a woman." (No16)

"Doctors will try to remove my binder, they don't know what it is. They have no idea what to do with me. I have to do my own ECGs." (No18)



"Referred to Steps 2 Well being for anxiety and depression unrelated to my struggles, I mentioned in passing that I was trans so that I could ask them to call me by my chosen name but made sure to stress that it was separate to the issues I was calling about. When they called me back, they refused to see me because they are not specialised in gender related health care."
(No20)

"I was told waiting times would be longer because I was trans and they needed someone who was "comfortable" with assessing me. I was in A&E resus with a heart condition."
(No21)





Allyship and Validation



A lot of trans+ folk go into healthcare appointments braced for a negative experience, so if they're met with validation instead of dismissal, it can really stand out!

Validating statements coupled with a simple question of "How can I help make this better?" can take you a step further into improving the care journey for your trans+ client.

Through our research we found that healthcare concerns were often confirmed by repeated bad experiences. Enough to make people explicitly refuse to attend cancer screenings and generally avoid healthcare.

"However, the Mixed squares show that just one good experience can be empowering enough to change a person's perspective and restore much of that trust. "

-Excerpt from the TACC Report



“

VALIDATION
OF YOUR
GENDER JOURNEY
IS KEY TO YOUR
RECOVERY AND
A SOURCE OF STRENGTH

Title Validation is strength

Desc A quote from my doctor during my diagnosis of depression. This made me feel valid and that I was working with someone who understood my experiences and needs.

Story Recently i was diagnosed with depression and prescribed a course of medication. When I informed my G.P. (registered at Shirley health Partnership) that I was genderfluid, they were very supportive and respectful. They even asked how well I felt supported by my wide with my transition. They offered extra support and suggested that I use that positive relationship to validate my experience further to improve my mental health. Very kind and positive.

Being rude by mistake isn't the end of allyship!

The trick is to keep trying until we consistently get things right.

To help this process practitioners can:

- Have humility around getting things wrong;
- Try not to take it personally when trans+ people challenge or correct;
- Build rapport so patients trust enough to share what does and doesn't work for them;
- Be aware of the power dynamics as a practitioner.

Meeting a trans+ person and don't know what to do?

Recognise your own assumptions and biases.

We all have biases; better to face them than to deny them!

Mistakes are normal, just keep trying!

If you think you've been rude: remain calm! Just apologise, correct and carry on.

Remember: people are individuals and they are the best placed to know what does and does not work for them.

Getting corrected isn't a problem!

TL;DR: respect them as a person just like yourself!

**But I'm cis and conform to the
standard views of my gender.
There's no need for me to specify
my pronouns.
Why should I?**

Here's an example of the importance of making terms mainstream: in the past, gay/lesbian people would use subtle terms to refer to their significant others, to keep themselves safe.

Nowadays, this has been adopted by a lot of heterosexual couples as well. If it weren't, it would be pretty easy to single out a gay/lesbian person, potentially putting them in danger.



My partner and I...

A piece of light green, lined paper with a torn edge, featuring a signature in a dark, handwritten-style font.

Sincerely,
John Smith
(he/him/his)

If both cis and trans+ people announce their preferred pronouns, it would be more difficult to tell who is trans and who isn't. By making "preferred pronouns" more mainstream, like putting them on name tags and email signatures, as an ally, you make sure to create the space for a trans person to do the same without fearing being outed or singled out.

You can be the person who insists things get better!

If you miss
us
you risk
us
Trans+ people
get cancer too

Story Prefer not to share.

Trans+ people face exclusion from healthcare on multiple levels. Even something as simple as changing gender markers can mean choosing which cancer screenings to miss out on!

We find ourselves fighting against a system that wants to deny our existence.



- You can't change your title with us yet

- Why?
- Oh, because of the cancer screenings for women, of course
- Oh
- Is that alright?

I look at my friend, at the other tables

No, I think

- Yeah, sure! I say



Pronouns DOs and DON'Ts

- DO** Share your pronouns first
- DO** Correct yourself and others once, and move on
- DO** Try to encourage the usage of pronouns in signatures at your workplace

Assumptions will always happen, no matter what, because we are people. The best way to fight those assumptions is by checking, and asking questions.

- DON'T** Pick and choose who to ask for preferred pronouns
- DON'T** Make a big deal of apologising when you make a mistake
- DON'T** Make assumptions, especially in a professional environment



"You can't have the morning-after pill unless you **prove to me** you're capable of getting pregnant."

- pharmacist



"Here is some information about pelvic screening. I've checked it has gender-neutral language and I'm here to talk you through it if that helps. **Just tell me what you need.**"

aka legend → - Practice nurse

Impact is more important than intent

If we accidentally say something hurtful, it's easy to distance ourselves from the impact by pointing to our intent, by saying "I didn't mean it that way". Often, this does not change the impact that has already happened.

When focusing on intent, we tend to shift the focus to ourselves, and away from the affected party. A way to tackle this is by practising accountability and self-reflection.

Focusing on the harm caused allows us to mindfully approach our future actions and learn from our mistakes. This way, we make room for compassion in our lives for ourselves and those around us, instead of focusing our energy on guilt and shame.



“When societies experience big and rapid change, a frequent response is for people to narrowly define who qualifies as a full member of society”

-John A Powell, The Guardian

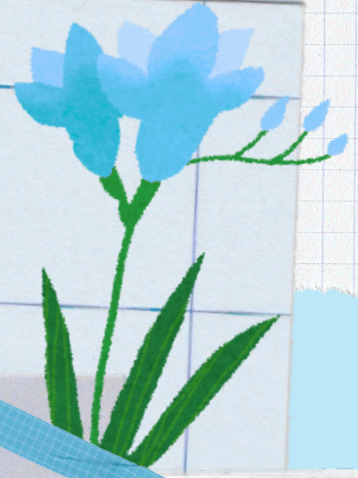


The attacks on trans+ people are frequently repeated, but most are easily debunked. Usually this can be done by merely asking what the evidence that there's actually a problem (the vast majority of the claims are based on pure speculation). The only reason these attacks work is because they're rooted in scare tactics, and scared people are easily motivated to turn on others.

Recognise your fear, however deep within you it is buried. Acknowledge it. All of us are influenced by media, and by all the messages that surround our day-to-day lives. It is not your fault for being part of society, but it is your responsibility to be aware of your thoughts and actions.

Accountability

Whose job is it to be an ally for trans+ people?



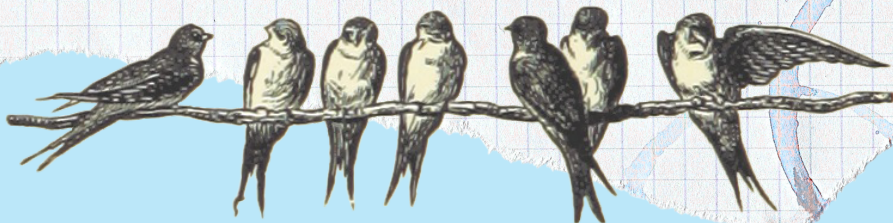
The answer is: if we want any real change to be made, this needs to be a joint venture across professionals, not just those sitting at the EDI desk.

If one healthcare professional is an ally, whereas the majority of their colleagues remain uninformed and continuously make mistakes, the damage done to an individual in their care could be significant.

If the staff is full of allies, but the systems in place lack the appropriate inclusive measures, you get similarly bad results.

This begs another question - who is in charge of the systems, and with such a broad subject as a "system", how do we ensure accountability is held by the appropriate people?

Demand more of your employers!

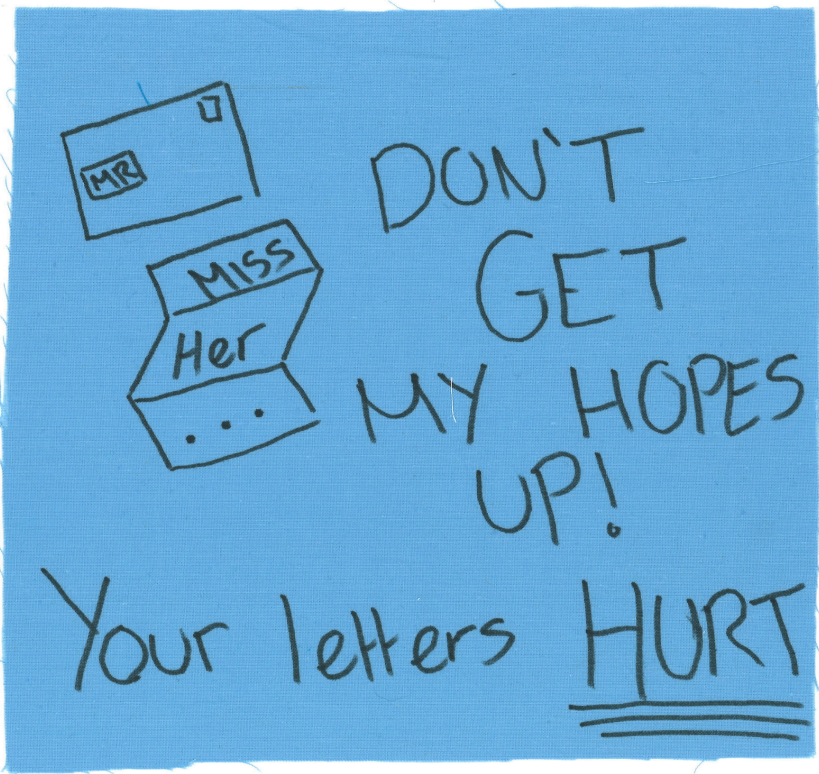


It should not be your sole responsibility to change your environment. There should be educational material available for yourself and your colleagues to understand trans+ issues and needs and to better work with them.

If there isn't any - demand it! Ask about it, follow up on it. Knowledge is power, and it is no small feat to be able to obtain that knowledge in your workplace.

Most acts of allyship aren't grandiose changes that make the news. They are small, necessary steps that will eventually lead to a change that you may observe in real time.

Overwhelm is a leading cause of compassion fatigue. Do not put the world on your shoulders. Sometimes all you really need to do is ask a question.



Title Choices

Desc Envelope with Mr.
Letters with Her/Miss.

Story Letters are addressed with my right name & pronouns, but letters will always misgender me & sound insensitive.

Don't put the right things on the envelope, but the wrong things in the letter.



TOLERANCE VS ALLYSHIP

Drago (he/him),
community researcher

In my experience as a minority across a number of different communities (immigrant, queer, trans), I have found my voice carries very little weight in arguments. Without allies, my words will almost always fall flat. One cis person speaking up has led to changes I myself have tried to implement for months or years. This is the unfortunate truth we need to acknowledge, and use for our own benefit.

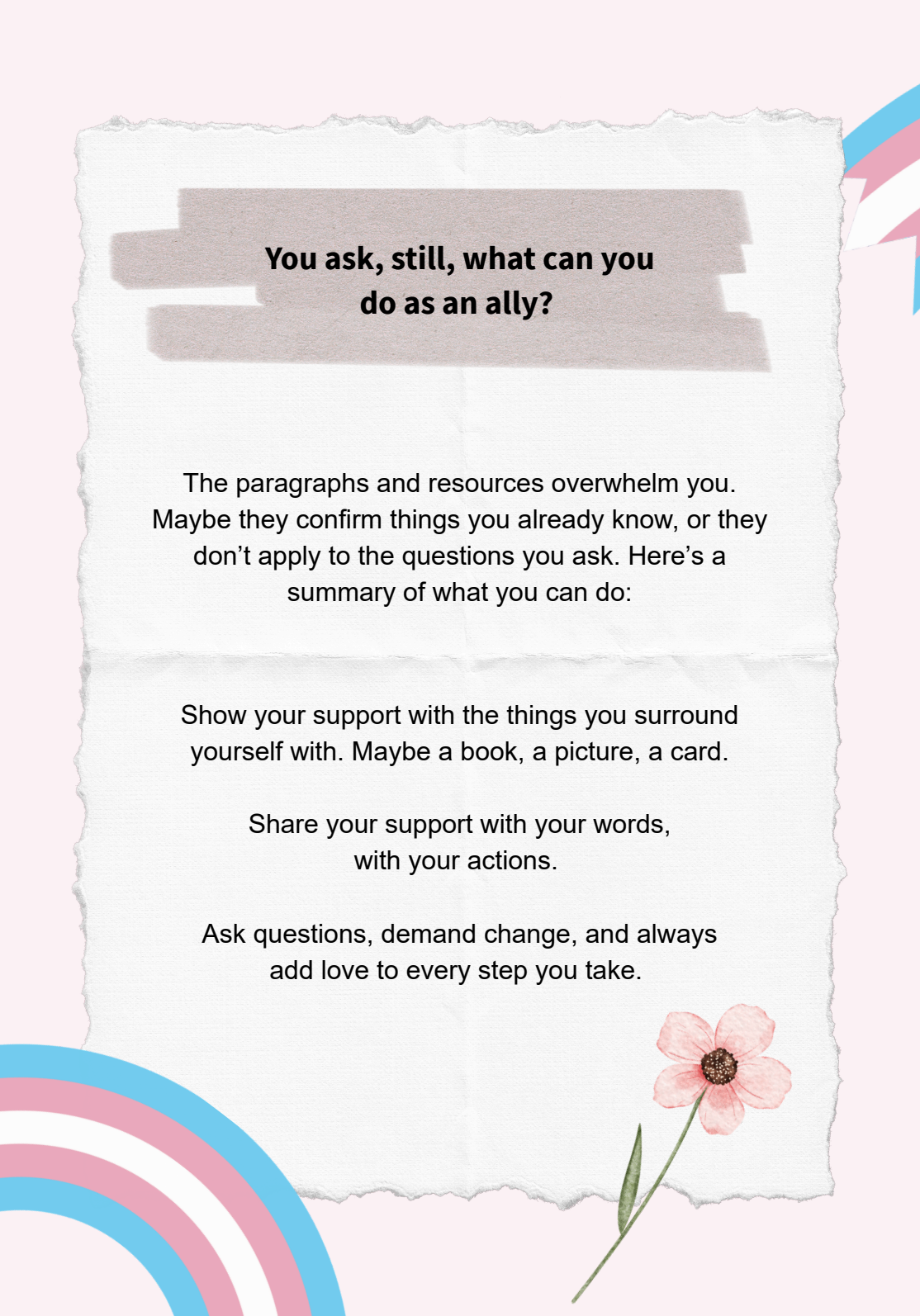
Tolerance is not allyship. Tolerance only requires you to be quiet.

In the context of our current world and politics, tolerance is not enough to change how things are. Real changes come with action, and that action is in your hands.

Use your voice. Voice your concerns, challenge biases, your own and other people's. This is how you can be an active ally.

Above all, extend kindness to yourself. Only then can you really begin to extend it to others. Do not blame yourself for your privilege, but do use it.





You ask, still, what can you do as an ally?

The paragraphs and resources overwhelm you. Maybe they confirm things you already know, or they don't apply to the questions you ask. Here's a summary of what you can do:

Show your support with the things you surround yourself with. Maybe a book, a picture, a card.

Share your support with your words,
with your actions.

Ask questions, demand change, and always
add love to every step you take.



Radical Tree of Transformation

Elliott (they/he), community researcher

In the radical tree of transformation,
Things start at the roots,
In the soil,

We can observe the leaves,
The branches,
We can see how they fall,
Their form,

How they move in the winds of society.
But we will not change this tree,
Rid it of its infections,

Unless we come to the soil it was planted in,
Until we look at the roots,

How the infections have interlaced themselves
throughout the bark,
and in the rings
Then we must wonder,

How will we know a healthy tree if we've never
seen one?
How much of our work then has to be tending
to the soil

So we can know what a tree of care
Would actually look like

Glossary of terms

Binder - tight clothing/compression garment used to flatten one's chest for gender affirming purposes.

DEI - Diversity, Equity and Inclusion

GIC - Gender Identity Clinic

Masc - derived from masculine. An umbrella term used for gender expression that aligns with masculine roles.

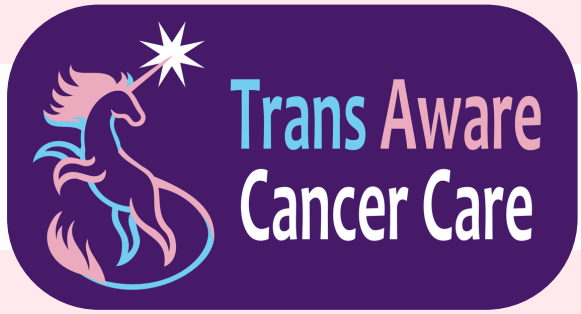
Misgender - refer to someone using terms (title/pronouns) that do not align with their gender identity.

Trans+ - umbrella term used for all and any individuals that do not fully identify with the gender assigned at their birth

Mermaids UK Glossary

<https://mermaidsuk.org.uk/glossary/>

**Find out
more about**



Video!


SCAN ME

**Art
book!**

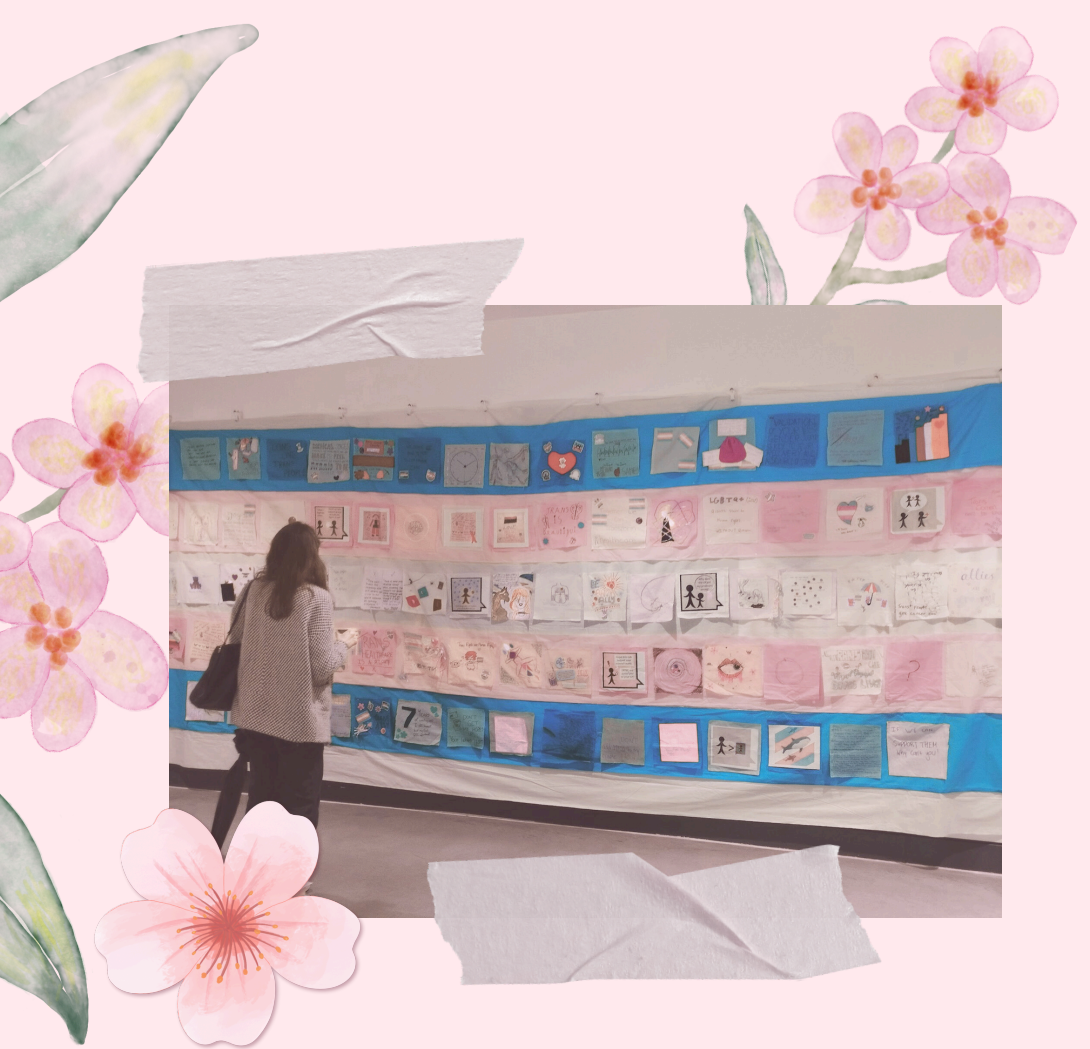


**And
more!**

<https://involvingpeople.org/project/tacc/>

A watercolor illustration of a plant with green leaves and a pink flower. A blue scalloped-edged box is overlaid on the image, containing the text. The background is a light pinkish-white.

In a world that is so
desperate to erase us,
thank you for trying to
make a difference.



Rest assured, we aren't going anywhere.

Resources for trans+ issues and LGBTQIA+ cancer



OUTpatients

The UK's LGBTQIA+ Cancer Charity

OUTpatients – The UK's LGBTQIA+ Cancer Charity



Macmillan – LGBTQIA+ people
and cancer

Beyond Reflections – Trans+
Charity based in the UK



TransActual – Resources for
healthcare practitioners and
trans patients