

3 November 2023

MSAC Secretariat
MDP 960
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Sent by email: commentsMSAC@health.gov.au

Dear MSAC Secretariat

Re: MSAC Application 1754 Consultation

We are writing in support of **MSAC Application 1754** to provide patient consultations and surgical procedures for gender affirmation in trans and gender diverse adults.

ACON is Australia's largest health organisation specialising in community health, inclusion and HIV responses for people of diverse sexualities and genders. Established in 1985, ACON works to create opportunities for people in our communities to live their healthiest lives. ACON provides a range of services to trans and gender diverse people and has been building a rapidly growing suite of programs to improve the health and wellbeing of trans and gender diverse people.

ACON is committed to improving health outcomes for people in our communities. Increasing access to necessary and life-saving gender affirming care is critical to improving the health and wellbeing of trans and gender diverse people, who currently face poorer health outcomes in a range of areas, including mental distress and suicidality, and who experience barriers accessing and receiving healthcare at disproportionate rates due to stigma and discrimination.^{1,2}

We are supportive of any intervention that seeks to increase affordable access to gender affirming medical interventions, including surgeries. Surgery can be a fundamental aspect of how many trans people affirm their gender and maintain wellbeing, with access often significantly improving quality of life.³

Surgery is not the goal for all trans people, and many may never desire to undergo surgery related to their gender at all. However, while trans and gender diverse people are far more than their physical appearance, those who wish to pursue gender affirming surgery and can access these interventions have been shown to experience clear and significant psychosocial benefits.^{4,5}

For trans women, interventions such as breast augmentation and vaginoplasty have been shown to increase quality of life,^{6,7,8} and similar outcomes have been shown with trans men who have undergone chest surgery and phalloplasty.^{9,10} While less is known about the benefits of surgical interventions on non-binary people, many do seek out surgery as part of their gender affirmation.^{11,12}

The MSAC application itself notes that making universal access to gender affirming medical interventions available will reduce the risk of trans and gender diverse people experiencing psychological distress or having suicidal ideation/attempts, improving mental health and overall health-related quality of life. This indicates, from our perspective, a clear and demonstrable need to make MBS items for gender affirmation available, as there are currently very limited publicly funded options for these medical interventions in NSW and indeed across Australia.

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Trans and gender diverse people also experience worse economic outcomes, and this exacerbates the difficulty they face accessing gender affirming care. Transgender adults are twice as likely as cisgender adults to be unemployed, and those who are employed make 32 percent less money a year than cisgender employees (even with similar or higher education levels).¹³ Research has also shown that trans people are much more likely to be in entry-level positions than cisgender people, regardless of time in the workforce.¹⁴ These factors can lead to economic stressors and additional financial barriers to accessing gender affirming care for trans people. MBS items must be considerate of the financial insecurity that disproportionately impacts the people accessing this kind of care.

In the last five years, ACON has provided over 16,400 occasions of service to 827 trans and gender diverse clients. These services include counselling, care-coordination, substance support, suicide prevention and aftercare, and home-based care. Since 2022, we have also introduced a trans mental health and wellbeing service; this service has seen 101 unique clients and provided 1239 occasions of service.

Through our work with trans and gender diverse people, we have identified the urgent need for universally available, publicly funded and affordable medical gender affirmation. The following case studies provided by ACON's client services staff for this submission highlight the importance of gender affirmative medical interventions and the impact of barriers to accessing these interventions have on individuals' mental and physical health.

- *An ACON client presented with gender dysphoria exacerbated by the perception that others saw her as living in a body that does not conform to her sense of identity. The client had been on two different HRT medications and desperately wanted to access gender affirming surgery, specifically vaginal construction surgery. She had survived two attempts to end her own life and had been hospitalised with serious physical injuries after those attempts. The client spoke of suicide every session and constantly stated their intention to end their own life if they did not access gender affirming surgery within a specific time frame. The client received medical attention on multiple occasions for serious self-inflicted injuries as a result of the client cutting her genitals because they "disgusted" her. The scarring from these cutting incidents were so severe that her treating doctor advised that they might prevent her from achieving successful vaginal construction in the future.*
- *An ACON client living in the Northern Rivers of NSW lost his housing in the February 2022 floods. It wasn't practical or financially possible for him to access top surgery through private health systems, so he was on a public waitlist for one surgeon in one LHD, far from home. When he and his mother lost their housing, they were in emergency accommodation for several months. They were offered housing in Queensland, but due to being on the waitlist, they were not able to accept more stable housing in Queensland in the interests of accessing surgery. Throughout this time, the ACON client also accessed ACON's P4T peer support program. The individual was experiencing daily suicidal ideation connected with gender dysphoria, and the social affirmation of P4T and support to access queer community was essential to his mental health in the time prior to surgery.*
- *A non-binary ACON client who uses a wheelchair was able to access top surgery free of charge because a surgeon offered surgery pro bono, enabling them to affirm their gender and feel more safe/comfortable accessing disability support. This client had significant difficulty putting on a bra or chest binder and required support from support workers daily to dress. Receiving top surgery enabled them to dress each day without feeling shame around their body. The client had experienced family violence and was not able to ask their family for financial assistance with their surgery. Being able to access this surgery free of charge enabled them to live more independently as well as able to affirm their gender.*

- *An ACON client was experiencing high suicidal ideation in relation to gender identity and dysphoria. The client had expressed that the one thing giving them hope was the prospect of gender affirming surgery. ACON staff worked to try and connect the client to a surgeon for gender affirmation surgery; however, we were unable to locate any surgeons in Australia that offered appropriate surgery, had open waitlists and was affordable for the client. ACON staff worked with this client around realistic expectations for surgery and shifted focus to other ways to find hope and affirm gender. If the client was able to access timely and affordable gender affirmation surgery, they may not have experienced such strong suicidal ideation.*
- *ACON worked with a male client who was assigned female at birth and who had received invasive surgery at birth because they are intersex. This client had arrived in Australia from Iran as a refugee. He had been discriminated against by employers due to perceived incongruence between his legal name and more masculine appearance. ACON worked with the client to investigate surgery options and found that the only available surgeons who would offer phalloplasty were outside of NSW. The client found a surgeon in Brisbane who offered to do the surgery for \$80,000 which did not include cost of hospital fees. The cost was prohibitive for this client. The client often expressed suicidal ideation and hopelessness when discussing the possibility of not having surgery. This impacted his wellbeing and community participation and exacerbated his depression symptoms.*

The stories we have provided in this submission have told us that there is urgent need for reform to ensure that gender affirming care is as accessible as possible. These case studies highlight the complexity of navigating health systems while dealing with complex health needs related to gender, mental health and other factors.

The public healthcare system requires a significant refocus on gender affirmation and trans-affirming practice more broadly to address the urgent unmet health needs of trans people living in Australia. While some trans people have been able to access gender affirming surgical interventions, many remain unable to access even the most basic procedures, which has significant and alarming negative effects on those people's wellbeing. All trans and gender diverse people in Australia should have universal and equitable access to medical gender affirmation, including surgical interventions.

Ultimately, trans people in Australia currently have highly limited choices when it comes to gender affirming surgeries; these choices are shaped by federal, state and territory government policies and funding, as well as the socioeconomic difficulties that trans people continue to experience in Australia.¹⁵

We are hopeful that the application to include MBS item numbers for gender affirmation services and procedures is successful. We welcome any further opportunities to work with the Medical Services Advisory Committee to achieve this. We have also included ACON's *Gender Affirming Care: An Evidence Brief* to assist with better understanding the urgent need for this reform.

If you require more information about our submission, please do not hesitate to contact Nicolas Parkhill AM, CEO, at nparkhill@acon.org.au or on 02 9206 2122.

Kind regards



Nicolas Parkhill AM
Chief Executive Officer

References

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