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The Reality



Transsexuality is not widely known or understood in mainstream society, and should not be confused with other aspects of the larger transgender (an umbrella term) culture.

Although society often sensationalizes and condemns things like medical coverage of Gender Reassignment Surgery, the clinical reality shows a clear need. When the Province of Alberta first listed coverage, it did so by seeing clear evidence of the cumulative expense of treatments for depression, anxiety, addictions, self-destructive behaviour, suicide and/or attempted suicide and other co-morbidities, versus the relative inexpense of covering a condition at the root of all those things for transsexual people.



Links for more information:

American Medical Association declaration of the necessity of GRS: <http://www.ama-assn.org/ama1/pub/upload/mm/471/122.doc>

Alberta Trans Peer Support Network (Province-wide mailing list): <http://groups.yahoo.com/group/AlbertaTransPeerSupportNetwork/>

AlbertaTrans.org information website: <http://www.albertatrans.org/>

EgaleCanada Transgender Resource: <http://trans.egale.ca/>

Transsexual Womens' Success Stories: <http://ai.eecs.umich.edu/people/conway/TSSuccesses/TSSuccesses.html>

Successful Transmen: <http://ai.eecs.umich.edu/people/conway/TSSuccesses/TransMen.html>

Transsexual Roadmap: <http://www.tsroadmap.com/>

Hudson's FTM Resource Guide: <http://www.ftmguide.org/index.html>

Organization Intersex International: <http://www.intersexualite.org/>

Resources for Families of Transsexuals: <http://www.transfamily.org/>
<http://www.pflag.org/>

Resources for Parents of Trans Youth: <http://www.imatyfa.org/>

Guide for Admirers of Transwomen: <http://www.reneereyes.com/Webdocs/mtintro.html>



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Popular opinion has it that Gender Reassignment Surgery is merely a cosmetic issue and motivated by a simple "want" to be female or male. However, extensive medical research into transsexuality has demonstrated otherwise. Medical best practices / standards of care have included GRS as a necessary procedure for decades.



Why "Sex Change Surgery" is Medically Necessary



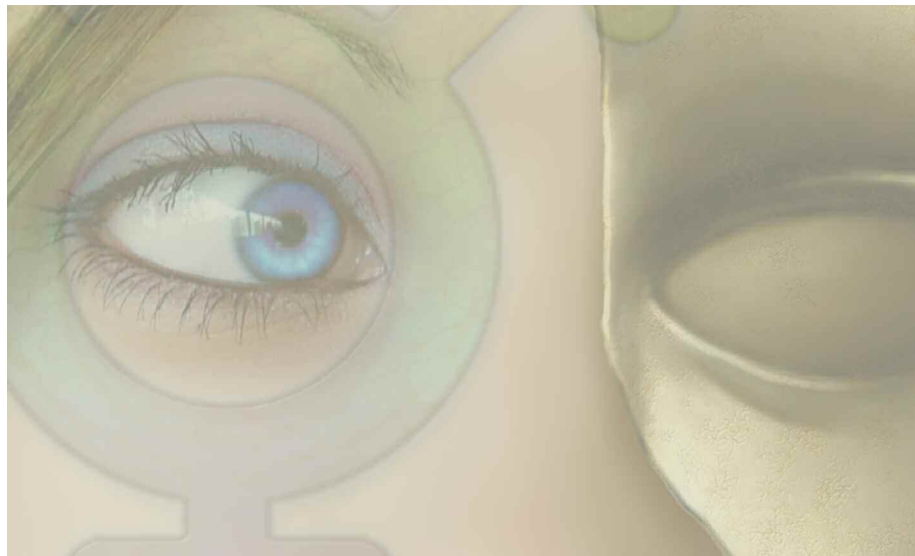
The Experience of Gender Dysphoria

The experience of being transsexual involves one's entire identity. Transsexuals attempt to hide who they are, living a lie that feels unnatural to live up to others' expectations, the hiding driven by a spiralling sense of shame and self-loathing, until it becomes an experience many liken to suffocating, or vents itself in an explosion of frustration. Transsexuals are unable to explain why they feel that their gender should be something different than their birth sex. They sometimes spend years attempting to mask themselves, to "pass" as the gender that society expects them to be. Passing restricts their ability to function socially, emotionally, psychically, spiritually, economically – it's hard to be productive while constantly feeling out of one's element and/or "backwards" – maybe sexually, and leaves them often suicidal as a result. If this continues into later adulthood, often a crisis point is reached in which the person suffers a complete emotional collapse.

"Gender Dysphoria" is the name for this condition, and treatment follows the standards of care established by the World Professional Association of Transgender Health (WPATH, formerly HBGDA), which includes Gender Reassignment Surgery.

The **American Medical Association**, the **American Psychiatric Association** and their Canadian counterparts support GRS as a medically necessary part of treatment. Partly for this reason, a 2008 Human Rights Commission ruling led to the Province of Ontario restoring coverage of the procedure.

Treatment of Gender Dysphoria incorporates surgical and endocrine intervention. Aversion therapies have historically proven damaging. As much as mainstream society would like to believe that electroshock therapy, anti-psychotic drugs or conversion ("ex-gay") therapy would help transsexuals "just get over it," modern medicine has realized that this approach simply does not work, as these methods usually results in suppression, suicide or extreme anti-social behaviour. Aligning body to mind, however, enables transsexuals to become valued and successful people in society. A few transsexuals feel that they can live without having GRS but they are the exception and not the rule.



Gender Dysphoria (sometimes called "Gender Identity Disorder," or GID) is currently listed as a mental health issue, but ongoing study of both genetic "brain sex" and endocrine disrupting chemicals (EDCs) show the possibility of some biological causal factor. In a study released in October 2003, UCLA researchers identified 54 genes in male and female mouse brains that led to measurable differences by gender, a conclusion that has indicated the possibility of a brain being gendered differently to one's physical sex. Studies of EDCs show another, possibly concurrent potential that exposure to chemicals that simulate hormone characteristics — particularly between the third and eighth week of pregnancy — can affect the signals sent out to determine psychological gender and biological sex, which appear to develop at different times during gestation. As of yet, nothing is conclusively proven, and research is limited compared to other more common conditions. However, the anecdotal and observational data from EDC and brain studies of human and animal populations would tend to support an innate origin or component of transsexuality, coinciding with transsexuals' convictions that they "just knew" that they were female (in the case of male-to-female transsexuals) or male (in the case of female-to-males).

Why GRS is NOT Merely "Cosmetic"

Current Albertan & Canadian legislation asserts that most forms of identification and legal documentation can only be changed to reflect one's new gender after surgery has been verified. This and other realities mean that until GRS is obtained, patients' lives are adversely affected in many ways.

Without GRS, many pre-operative transsexuals experience:

- Limitations on employment,
- Travel limitations outside Canada,
- Exposure to adverse reactions when showing ID,
- Some limitations in spas, gyms, or even washrooms,
- Uncertain human rights protections,
- Gender segregation in hospitals,
- Housing by physical sex in prisons,
- Gender subject to being challenged in social situations,
- Risk of violence from accidental discovery, and
- Relationships complicated or impossible.

No other supposedly "cosmetic" issue so completely affects a person's rights, citizenship and safety.

