TRANSGENDER HEALTH: YOUNG ADULTS





When you're born, you are given a gender based on your physical appearance. This gender is also listed on your birth certificate as a legal sex classification.

Some people grow up feeling that their given gender (male or female) doesn't match their gender identity - who they truly are on the inside. If you feel you were assigned a gender that isn't true to who you are, you are not alone.

There are many people who feel the same way. And, there are resources to help you explore what it means to be gender diverse (or transgender). You can start with the 'supports' section of this handout.

Why do I feel different?

Feeling different is not easy, but there is nothing 'wrong' with you. About 1 in 150 people are gender diverse. Being gender diverse is a natural part of human diversity. You may feel like the 'opposite' gender, between genders or experience gender in a way that is unique to you. And, just like everyone else, you may be attracted to women, men, gender non-binary people, all or none of these.

What matters is that you remain true to how you feel and continue to ask for help; especially if you feel distressed by the gender you were given or feel that you can't express your true gender. This distress or unease is sometimes called gender dysphoria and can be experienced from being misgendered and/or when someone's gender identity and body personally don't feel connected or congruent.

Gender dysphoria does not equal being trans or gender diverse, many trans and gender diverse people do not experience gender dysphoria and if they do, it may cease with access to gender affirming healthcare (if medical transition is desired). The gender diverse (and transgender) experience is not a mental illness.

What will my GP do now?

Your GP is your first point of call for your healthcare. Everything that is said between you and your doctor is confidential; this means they cannot share it with anyone else unless you have given them permission.

Your GP will talk to you about your health, how you're feeling and if you want support to take whatever steps you decide are right for you in order to live as your true gender and be recognised by society.

Your GP may start hormone therapy with you, or give you a referral to see an endocrinologist (a hormone specialist) or sexual health consultant. Your GP doctor will ask you about how well family and friends support you, and how you are feeling. You may feel certain of your gender identity, happy in yourself, and that you are well supported by your friends, family and community.

You may feel anxious or depressed because you have not been able to tell people about your gender identity, or you have been treated badly because of your gender identity or gender expression. In this case, your GP can refer you to a counsellor, psychologist or psychiatrist. These professionals will allow you to explore your feelings and provide extra support. You may choose to continue to see these professionals for ongoing support.

Your GP should talk to you about your health openly and honestly. The only time your GP would share information is if someone is hurting you or you are going to hurt yourself; if this happens you and your GP would talk about how to share the information to keep you safe. If you feel like your GP doesn't understand what you're going through, it's okay to change GP. Contact the support groups to find a trans-friendly GP.



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What are my options now?

Some people who are transgender need to change the way they look to reflect how they feel inside, this process of change is called transition or gender affirmation. If you decide that this is something you want to do, then your options include:

Hormones

Hormones are medications that can help you develop features that may be typically associated with the gender you identify with.

Taking hormones can help you change your outside appearance to become the person you truly feel you are inside. Medically transitioning is the right step for some people and this is a personal decision. Not medically transitioning doesn't make you less of the man, woman or non-binary person you've always been. Your GP will help you find out about your options.

If you take testosterone, you will start to grow facial hair and your voice will get deeper. If you take estrogen, you will start to develop breasts; you usually need to take a testosterone blocker (spironolactone or cyproterone acetate) at the same time.

Some changes take a few months, while others can take several years. Some of the effects are permanent and do not go away if you stop taking hormones. To keep all the body changes, you need to take hormones for the rest of your life.

How long do hormones take to have an effect?

The following tables show you the approximate timings for hormones to take effect once the levels in your body start to increase.

Effect of testosterone	Start	Maximum
Skin oiliness	1-6 months	1-2 years
Body fat being redistributed	1-6 months	2-5 years
Periods stopping	2-6 months	-
Erectile tissue (clitoris) becoming enlarged	3-6 months	1-2 years
Deepening of voice	6-12 months	1-2 years
Increased muscle mass and strength	6-12 months	2-5 years
Facial and body hair growth	6-12 months	4-5 years

Effect of estrogen	Start	Maximum
Libido reducing	1-3 months	3-6 months
Spontaneous erections reducing	1-3 months	3-6 months
Softening of skin and decreased oiliness	3-6 months	-
Decrease in muscle mass and strength	3-6 months	1-2 years
Body fat being redistributed	3-6 months	2-3 years
Breasts growing	3-6 months	2-3 years
Testicular volume decreasing	3-6 months	2-3 years
Reduced facial and body hair growth	6-12 months	>3 years
Sperm production decreasing	-	>3 years
Baldness	No regrowth	-
Voice changes	None	-

Where can I get help in an emergency?

Phone triple 0 (000) if you or someone you know is at immediate risk of self-harm.

If you every feel unsafe at home or work, contact headspace (1800 650 890 or eheadspace.org.au) or QLife (1800 184 527 or alife.org.au).

Hormones change how you look, but you may notice emotional changes, too. You may feel different while you are taking hormones. You can talk to a counsellor or psychologist if you feel like you need some extra support – ask your GP for a referral or see the 'supports' section of this handout. Taking hormones is a decision you may need to think about. Talk to your GP, endocrinologist or sexual health consultant about your options.

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Fertility

Hormone therapy can affect fertility. If you think you might like to keep your options open about having your own biological children in the future, talk to your GP, endocrinologist or sexual health consultant about your fertility choices before you start taking hormones.

Hormones and risks

As with any medication, there are some potential risks associated with taking hormones. This is why you will be asked about any other medical problems at the time you start hormones.

Taking estrogen is linked with an increased (but still low) risk of thromboembolism - a disease in which a blood clot forms in a blood vessel in one area of the body, breaks off then travels through the bloodstream to another area of the body. This risk is higher with the combined oral contraceptive pill as it contains a synthetic type of estrogen and progesterone.

Taking testosterone is linked with an increased risk of acne and polycythaemia - a type of blood disorder. You will have your blood tests checked for polycythaemia; if there is a concern you can change the amount of testosterone you are taking.

Your GP, endocrinologist or sexual health consultant will look at your individual risk and recommend the safest options. Your health and wellbeing will be checked out three or four times over your first year of hormone therapy.

Tucking and binding

Tucking and binding are simple ways to express yourself as the gender you identify with if you have already experienced the changes of puberty. Tucking is used to create a flat front when wearing pants or tight fitting clothes.

Binding is compressing the chest to make it appear flatter, though this can affect your health if you bind all the time. It is not safe to bind with bandages or duct tape as you can damage your skin and rib cage, which can restrict your breathing. Ensure you find a binder that fits you and is the correct size. For more information visit minus 18.org.au

Voice

Taking testosterone can make your voice deeper. But, if your voice has lowered, taking estrogen won't make your voice a higher pitch. A speech pathologist or voice trainer can help train your voice to sound higher or deeper.

Hair removal

Hormonal treatment that blocks testosterone will reduce facial and body hair. If excess facial hair remains a concern, there are options available to help. Electrolysis will remove unwanted hair and laser hair treatment can further reduce hair growth.

Surgery

Surgery is performed to permanently change your appearance. There are various options for surgery, including:

- Chest surgery you can choose to have a mastectomy, or a breast augmentation. A breast surgeon or plastic surgeon can perform these surgeries. Some surgeons have a special interest in transgender health.
- **Genital surgery** surgery can change the appearance of the genitals. Surgery can also be performed to remove your internal sex organs (womb and ovaries). This is major surgery that should always be performed by an expert in transgender health.
- **Facial surgery** plastic surgery can be used to reduce the appearance of the Adam's apple and change the facial features that change in puberty

Some people need surgery to relieve distress, others because it is the right decision for them. All surgery has risks and you should talk about these risks with your doctors before making any decision. Some people socially and medically transition for at least one year before considering surgery, some people plan chest surgery sooner than this. Genital surgery can permanently alter your fertility and sexual function. If you'd like to know more about surgery, talk to your GP, endocrinologist or sexual health consultant.



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Changing your name

Many gender diverse people change their names and legal sex classification on their identity documents to reflect their true identity. Click on the links below to learn more about:

- Changing your name
- Changing your gender marker with Medicare
- Changing your gender marker with RMS
- Changing your gender on your passport

Many gender diverse people change their names and legal sex classification on their identity documents to reflect their true identity. Click on the links below to learn more about:

For safety reasons it is recommended that you travel with a passport that matches the gender you are perceived as, and remember that some countries will not allow you to enter if your gender is recorded as X (indeterminate / unspecified). For more information see smartraveller.gov.au

Where can I get help in an emergency?

Phone triple 0 (000) if you or someone you know is at immediate risk of self-harm.

If you every feel unsafe at home or work, contact headspace (1800 650 890 or eheadspace.org.au) or QLife (1800 184 527 or qlife.org.au).

How do I talk to family and friends?

Talking to your friends and family about being gender diverse or transgender isn't easy. Speaking to a counsellor can give you some ideas and strategies for starting a discussion. You can also see the 'supports' section for more help.

If you would like your parents or family to know, there are resources to help them understand better. Your feelings may come as a surprise to them and getting their own support will help them to support you.

If you feel like your workplace, college or university is not supporting you, speak to your GP or counsellor. Remember – you are not alone, and there is support available.

If people are bullying you because you are gender diverse, tell your GP or counsellor. You can also contact Kids Helpline (1800 55 1800), headspace (1800 650 890 or eheadspace.org.au) or QLife (1800 184 527 or qlife.org.au). Ask for help before the situation gets worse.

What will my GP do in future?

Your GP will see you regularly to check your ongoing general health and wellbeing. Your GP will also be involved in your care if you are taking medications or thinking about transitioning to match your gender identity.

What questions should I ask my GP?

Here's a list of questions you may wish to ask:



- What are my next steps?
- Does anything need to change about my care?
- Can you tell me which specialists I need to be referred to?
- Can you tell me about hormone therapy?
- Can you tell me about surgery?

- How can I find other transgender people to connect with?
- Where can I go for support groups?
- What can I do if I don't feel safe at home or at work?
- Could you check the information and resources on HNE Healthpathways?

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What supports are available?

Support groups

- Newcastle Headspace LGBTQI and social support groups 12+ years: phone (02) 4929 4201
- Maitland Headspace LGBTQI and social support groups 12+ years: phone (02) 4931 1000
- Lake Haven Headspace LGBTQI and social support groups 12+ years: phone (02) 4394 9100
- Gender Help for Parents Support group for parents and caregivers: visit genderhelpforparents.com.au or facebook.com/genderhelpforparents
- ACON: phone (02) 4962 7700
- The Queer Collective is a group for queer identifying or questioning students at University of Newcastle: contact queer@nusa.org.au or facebook.com/NUSAQueerCollective

Public specialists

Ask your GP for a referral if you would like to see a public specialist with experience in transgender health.

Private specialists

Ask your GP for a referral if you would like to see a private specialist with experience in transgender health. Counsellors, psychologists and psychiatrists that see young people mainly work in the private sector.

Telehealth

Ask your GP if you can access care using Telehealth.

Mental health services

Contact the Mental Health Contact Centre: phone 1800 011 511

Legal matters

- Hunter Community Legal Centre: phone (02) 4040 9120 or 1800 650 073 (toll free)
- Julie Hughes, solicitor/clinical teacher, University of Newcastle Legal Centre: phone (02) 4921 8666
- Inner City Legal Centre in Sydney: phone 1800 244 481

