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Statements like the one below are long overdue. People choose whether to transition, but one does not choose to be dysphoric about the sex they were born into. In this *Bill of Rights,* I refer specifically to people who are *transsexual,* rather than use the broader terms, such as *transgender* or *gender variant.* Although everyone has the right to respect in my view, I assembled these rights to pertain mostly to the process of transition (either male-to-female or female-to-male), which is a feature of transsexuality specifically. I hope other individuals and groups modify this *Bill* or suggest alternative ones, suitable for employers and legislators to adopt and enact.

— James Cantor, 22 June 2009

A Bill of Transsexual Rights

1. People who are transsexual have the right to respect.

As societies and institutions become increasingly aware of their transsexual members and participants, they become increasingly confronted by the needs to assimilate and accommodate what they used to ignore. Taking on these tasks from a position of basic respect will go a long way in establishing inclusive policies and healthy environments.

2. People considering transition have the right to be free from undue pressure to transition, to de-transition, or not to transition.

Some aspects of transition, such as medical interventions, affect only the person undergoing the process, and some aspects of transition directly affect other people in their lives. People considering and undergoing transition have the right to make their choices on the basis of these only, and not for any political, religious, or societal statement it might be perceived to be making.

3. People considering transition have the right to receive from their health care providers all information pertaining to their decision regarding whether, how, and when to transition.

This includes medical benefits and risks, cosmetic possibilities and limitations, plainlanguage description about rates of regret among those who transition, and any factors that might affect that risk.

4. Transsexual individuals have the right to be recognized in their new gender by their

employers and local and federal governments.

Some recognition occurs at medical transition, and some occurs at social transition. There are only very few instances wherein a person's physical gender is relevant to a government

or employer; there are very many instances where reference to gender is social convention. Transsexual individuals have the right to be recognized as their new sex in all situations except for those with a compelling need.

5. People in the process of transition have the right to health care that respects the gender in which they live, including to be addressed by pronouns and other language that acknowledges that gender.

Health care providers, including mental health care providers, serve an important role in the transition process, and those roles require specific consideration of a person's changing medical and social status. Only a portion of health care actually pertains to transition, however. Once a person begins to live in their new gender, they have the right to be recognized in that gender in all other aspects of health care.

6. Transsexual individuals have the right, during transition, to access sex-specific public facilities in which their contrary genital status would not be evident.

For example, for the great majority of instances, a presurgical male-to-female transsexual presenting as female can use a female-designated restroom unobtrusively. Only in few instances, such as public showers, would a mismatch between the sex-designation of the facility and person's preoperative status be an issue. In such instances, an alternative should be available, in the same spirit that public facilities are responsible for providing for the needs of individuals with mobility impairments.

- 7. People receiving mental health services as part of their transition have the right for their mental health care providers to have specialized training and competence in the assessment of the DSM-IV/ICD-10 Sexual Disorders as well as gender identity disorders.* In addition to its nonsexual aspects, transsexuality and its competent assessment involves many interrelated sexual issues, requiring a breadth of formal training. Relatedly, there are mental health aspects of homosexuality that are analogous to transsexuality, such as surviving histories of oppression or childhood ridicule. Training in GLB issues, however, is not by itself sufficient to establish competence for providing services regarding transsexuality.
- 8. Transsexual individuals have the right to be free from discrimination in child custody decisions.

In such situations, the needs of the child are paramount. As of this writing, there is no evidence that transsexuality *per se* has any effect on parenting ability.

9. Transsexual individuals have the right to decline to participate as subjects in research studies.

There is no aspect of transsexuality or transition that diminishes one's right to decline to participate in any research study. Any research conducted in a clinical setting must be done under the supervision of a recognized Research Ethics Board and with consideration of the disempowered status that individuals seeking approval for transition might perceive they have.

10. Medically qualified individuals have the right to surgical sex reassignment and for such surgery to be funded by public health care systems and health insurance companies.

The need for surgical sex reassignment is a medical need (one with substantial mental health consequences). No just society can opt out of providing for the medical needs of its citizens for no reason other than for its prejudices.

*Item 7 is adopted from the *Standards of Care* (6th ed.) of the World Professional Association for Transgender Health [link] [pdf]

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