

Misadventures with the Healthcare System

About me

I am a pansexual transgender male. Pansexual means I have the capacity to feel attracted to a person regardless of their biological sex or gender identity.

Growing up, identifying as transgender, I definitely had to think a lot about my body. Part of that includes not only thinking about how to get it to be how I want it but also thinking about how to keep it healthy, which means going for regular physical examinations and getting tested regularly for HIV and other STDs.

I dub thee a boy!

Early in high school I decided that I needed to take action. I knew I was guy and I knew I needed a doctor's help to get me there. So one day I googled "trans doctor" and found the doctor who I am with today. Before officially making an appointment with her, the first thing I literally asked the receptionists who worked there was, "How do I get on testosterone?" They looked at me like I was crazy! They explained that there was a process before getting on testosterone – or "T" - and then gave me a red card that said the name of the doctor to call, who later became my primary care physician. When I met with her she more or less gave me a to-do list giving me the names of places to go for therapy as well as the requirements I would need to fulfill. She then said, "come see me in six months and good luck."

So off I went to see the therapist. During our first meeting he tried to scare me out of my decision to change my body. Among other things he was very clear with me that Testosterone can cause cancer as well as a list of other complications! I felt resentful at first because I had worked really hard to get to that point and was very certain about who I was and what I needed to get there. The second time I went in he explained why he took that approach – he had seen a lot of folks who hadn't really thought the process through. This approach made sense after the fact, although it had still made me mad.

On my third visit he was ready to give me my letter or recommendation stating, "I hereby dub thee a boy!" Okay, it didn't actually say that. But he confirmed that I had 'Gender Identity Disorder' (a medical diagnosis which states that a person is discontent with the biological sex or gender they were assigned at birth) and that I was in fact a male-identified person. I wasn't particularly excited about being diagnosed with a "disorder" in order to get on T, but that's the way the system was. Without the diagnosis my doctor wouldn't have prescribed hormones and my insurance wouldn't have covered them.

There are many different methods for taking hormones - patches, creams, pills, and shots. I give myself shots. The first time I gave myself a shot I had to be completely alone. I wasn't sure if it would hurt, so I numbed up the area. Finally I pushed the needle in. Afterwards I felt all choked up. I was saying goodbye to the person I was. "There's no going back," I thought. I was also unsure of the person I would become over time. I didn't

know my biological family and didn't know what changes to expect from taking hormones. I thought, "Okay, Dad better NOT be bald."

My STI screening and pelvic exam

I've always been a bit reluctant about physical exams. I mean, come on: They aren't exactly fun! The best thing to note about them, though, is that they're an excellent way to help keep you aware of what's going on with your body. And who doesn't like knowing that they are completely fine?

One time I scheduled a physical exam because I started experiencing pain after sex. I had just started taking T and didn't know if that had anything to do with it. I just called my regular clinic and asked to come in for a check-up. Because my doctor is one of the only people who works specifically with trans people in my neck of the woods I had to wait a month and a half to see her.

By the time I finally got in to see my doctor the situation had cleared itself up, but I still went in. She said the T could definitely have caused the pain. It can make the vaginal walls thinner, which can cause bleeding and sometimes pain. I had never read or heard about this possible side effect – it wasn't ever expressed in any YouTube videos I watched or anything. So it was cool to know that.

Even though that was cleared up we decided to go ahead and test for some common STIs (sexually transmitted infections). First she had me pee in a cup. Simple!

Next came the pelvic exam. It was actually my second pelvic exam – the first one happened after a sexual assault. To be honest, having the exam was hard because it reminded me of the assault. Fortunately my doctor made sure I was comfortable throughout the entire process. From making sure the position I was in was comfortable to warming up the speculum, she made sure I was doing okay.

Before she started I was thinking, "Man, this is awkward." I had developed facial hair really quickly, which made me forget about what was going on down between my legs. Even though I have personally chosen not to pursue bottom surgery, I felt a little shame for having to remind myself that I wasn't quite where I wanted to be physically.

So it was great when she said just before starting the exam, "You're not the only trans guy I've ever done this to." What she saw in that room would not only stay there but also wasn't anything weird or something I should feel self-conscious about. This really made me feel less self-conscious and more comfortable and more relaxed.

The exam itself was still very cold, despite her warming up the speculum. It wasn't painful when she inserted it but there was definitely some pressure – you have an object going in you and you haven't exactly prepared "in that way" for it to go in. She slowly opened up the speculum and did a quick swab of my cervix with a long Q-tip and then slowly removed the speculum. During the entire procedure she kept saying, "Okay, I'm here right now. Is that okay?" She did a really good job at making sure I felt comfortable. Afterwards she again checked to make sure I was still okay.

She explained that it would take a week for me to get my results back. And sure enough, she called me about a week later to give me my results. So I survived that!

Misadventures in preferred gender pronouns and perceived gender

At one point some of my major concerns with any of my health care providers was never really knowing if my preferred gender pronouns (PGPs) would be respected. By that I mean I wanted people to use “he/him/his” when talking to and about me, not “she/her/hers”. I knew that having that foundation laid out and understood would allow me to feel safer and therefore more open to being proactive when it came to talking about more personal topics such as my sex life or my boundaries and thoughts about exams.

So I decided to bring it up at my clinic. First I asked if it was possible to change my name on file. It wasn’t, because it hadn’t been legally changed. But they DID put a note in my file saying that I use “he”. They also made a note of my preferred name. Of course, that didn’t mean things were perfect. For the most part people used my preferred name and pronouns but sometimes they didn’t notice the note. One time I was coming out of the men’s bathroom. Apparently the nurse had been in the waiting room calling out my given name – which is definitely a female sounding name. I walked out, heard it, and thought, “Oh, that’s me.” I had to do the walk of shame across the whole waiting room.

Another time – before I was with the doctor I see now and on T – I was at the clinic for a regular check up. At the time I was binding my breasts with an ACE wrap to make my chest appear flatter and more male looking. (I should point out that while they are cheap ACE bandages are not a very safe way to bind your breasts. They don’t move with your body, can restrict breathing, and can cause serious damage.) I wish she would have taken that as a cue that I was trying to not be (or appear) female. The doctor at the clinic didn’t ask, “Oh, I notice that you’re wearing a binder. Do you want to tell me more about that?” She based everything on my given name on my records and the pitch of my voice, which was higher at the time. She also made assumptions about pronouns. During the exam she didn’t ask if I was okay with her touching my various body parts. One thing she said was, “Every girl has to go through this.”

I know she said that to try to be helpful and comforting, but instead I was like, “Get me out of here!” It was kind of humiliating in general, plus it was humiliating to not know whether or not I could come out to her, which I really wanted to do so that I could stop hearing her use my given name and wrong pronouns. At that point I didn’t say anything, though. I was too scared and didn’t know what to say.

What this made clear was that not all providers know enough to ask about the possible differences that can come with working with a trans-identified person – or to even ask about how you identify. So, like it or not, you have to be ready to be clear about who you are and your comfort levels. Obviously it’s not easy, but it’s important to try.

Parting advice

The best advice about physical exams I can think of giving any trans-identified youth would be that, regardless of what gender you are - male, female, both, or neither - your health should really take precedence. This sometimes unfortunately means swallowing your pride a bit and being a little uncomfortable. Especially to those who struggle with body dysphoria (*dysphoria* is a sense of discomfort some transgender people feel in relation to some of their body parts; not all transgender people experience dysphoria with their bodies).

Yes, it sucks to be called by the wrong name and wrong pronouns if you haven’t already changed them, but ultimately you have a responsibility that you owe to yourself to take care of your body even if you feel it doesn’t physically match who you are (yet).

Luckily I'm privileged enough to have a current health care provider who has many years of experience working with trans and gender variant patients. Despite that I also learned along the way that especially as a transgender man, I really needed to learn how to be my own best advocate.

Your body is really your responsibility not only to you, but to others. So if something doesn't feel right before, during, or after testing or an exam don't hesitate to speak up because it could be completely fixable.

Discussion Questions

1. What surprised you or what was something new you learned from this article?
2. In his story Gavin recommended that you need to be an advocate for yourself. Does this advice only apply to transgender people? What are some things youth might not feel comfortable talking about with their doctor or health care provider? What are some specific things you could do or say to express your discomfort or concern?
3. Gavin mentioned that he was fortunate to have a doctor who was familiar with transgender patients. How would you know if a doctor has this experience? What could a person do if there weren't any knowledgeable doctors in their area?
4. What are some of the costs involved with transitioning? What would you say to a friend who wanted to transition but couldn't afford or have insurance that covered the cost of it?
5. Gavin said that he wasn't excited to be diagnosed with "Gender Identity Disorder." Why do you think he said that?
6. How could you use this article to encourage friends to get tested for STIs or get a physical exam? What are the pros and cons of each approach?