

James Moriarty Interview from **Public Interest Group on Cancer Research**: Episode 10 "At the intersection of being trans and having gendered cancer " (Sevtap Savas interviews James Moriarty & Dr. Joanie Neveu)

## **Gender dysphoria**

Dysphoria can be a really really crippling thing to experience for a lot of trans people. And the fact that there are a lot of cancers that can develop in body parts that are often gendered it makes it very dysphoria-inducing to have to address those body parts sometimes. 21:40

You're going to be encountering a population that have a lot less comfort with those body parts as compared to a cisgender population.

The ramifications of experiencing dysphoria especially for people that experience it very deeply it can be something that can take days out of their life in order to come back to square one where they were before they started experiencing dysphoria. For some people it can be very difficult to look forward enough to say OK I have to get over this really really uncomfortable awful feeling because it might mean not having cancer in the future because not having cancer in the future is a very ephemeral idea you can't grasp that but what you can grasp is the deep discomfort you feel in your body when you know that a person is looking at you the wrong way or you're in a space that doesn't feel like it fits you.

## **James is asked what can be done differently?**

I think one of the things that important or was important for me when I was going through my diagnosis was having a support person with me, specifically having a support person with me who was of the "correct" gender to be receiving the types of screening that I was supposed to be receiving. And I know that's something that other people do in other facets of reproductive care so I think that definitely if a person doesn't already have a plan in place to help them with their dysphoria I think it's a good idea for a physician to talk to that person about what their plan is to help with their dysphoria to talk about the dysphoria they might experience and basically just make sure that you know this is something that's going to be uncomfortable for you it's not going to be the best day out of your week so let's make sure there's a plan in place to make sure that you can come out of it on the other side feeling at least OK or at least neutral or at least only a little bit bad as opposed to coming out of it feeling you know rapt with dysphoria and in pain, in emotional pain and physical pain. It's not going to be something that the same things are going to work for everybody but for sure I think it's worth it to have a conversation about "I know this is going to be uncomfortable for you and I want to make sure that you are doing everything that you can do and I am helping you do everything that you can do to make it an experience that going to be survivable for you" 28:42.

## **Dealing with a women's health clinic.**

I called to check what time the appointment time was, and the woman tried to argue with me black and blue that id phone the wrong place. She said "Sir! They only do ultrasounds here for women." James: I have an appointment, please check for my appointment. Here is my MCP number... "Sir. This is the Janeway ultrasound. We do ultrasounds for women. Yes, I understand. Here is my number. Please check for my appointment. Then finally she came back and said yes you have an appointment at this time, and I said thank you very much and hung up and did not have a very good day after that.

## **What would be the ideal situation in the clinic?**

I'm respected, I'm seen as who I am. For me my name wasn't an issue because it was legally changed but that's not the case for a lot of people because it involves paperwork and costs money and that can be a big barrier.

Something as simple as making sure that that staff knows you by your actual name without having to go to each individual staff member and go, "Hello, my name is James, my card says this but please call me James" to every single staff member. That's exhausting. You couldn't do it. You just live with them saying you the wrong name at a certain point because it's too much. So there needs to be communication with the healthcare team across the board from the people at reception who check you in to the person at the chemo desk who checks you in or for radiation to the secretaries and the physicians to even the PCAs, they should all know who you are as opposed to what it says on your card if those two things are different. That's just one small piece of it.

For some people it can be difficult to find a space where they feel comfortable to use the bathroom because they don't feel comfortable in a mens washroom or a women's washroom and having gender neutral washrooms is extremely important and that doesn't mean like the way the whole chemo floor did where they were like this is a men's washroom and this is a women's washroom but we use all the washrooms - that's not how that works. The cisgender people are going to hear that and it's going to fly over their head, the men are going to use the one with the little man on it and the women are going to use the one with the little woman on it. So, you need to create spaces that are specifically catered to the needs of transgender people and that means also creating spaces that are better catered to cisgender people. If you have a gender-neutral washroom that's a washroom that everybody can use. That doesn't mean you're taking a washroom away from anyone. It just means you have washrooms that are available to use for everybody.