

Submission to the Royal Commission into Victoria's Mental Health System

Service: Gateway Health Gender Service, Wodonga, VIC 3690

Submitted by the Gateway Health Gender Service Community Reference Group, a group comprising trans community members and parents of trans children who worked together with Gateway Health staff to advocate for, design, establish and now support the Gateway Health Gender Service.

Background

The Gateway Health Gender Service (GHGS) provides support, information and referral for Trans and Gender Diverse (TGD) children and young people under the age of 18, their families and service providers in Wodonga and surrounds. The service was established in May 2017 following a consultancy and development process commenced toward the end of 2013. The Gender Service:

- Is the first multidisciplinary gender service in regional Australia
- Was co-designed and co-created with TGD stakeholders – including a community reference group of local TGD advocates and parents of TGD young people
- Has provided services to 32 trans and gender diverse children and their families¹
- Has received over 290 enquiries for further information and support
- Provides pathways into wrap around care including counselling, parenting support and youth groups
- Has failed to attract recurrent funding despite its endorsement as an 'exemplar model' of service.

The Gateway Health Gender Service is presently specifically focussed on support, assessment and treatment coordination for young Transgender and Gender Diverse (TGD) children and young people, many of whom have socially transitioned as their affirmed gender, and who are in receipt of medically appropriate treatment related to their affirmed gender. The service is commonly approached by parents and carers as well as professionals and organisations working with children and young people, for instance, schools, mental health counselling services, and medical practitioners.

Mental health needs in the TGD population have been described across a range of reports and research inquiries in the recent past (e.g., Strauss et al., 2017; Australian Human Rights Commission, 2015; Hillier, et al., 2010; Hyde, et al., 2014; Riggs et al., 2015). Telethon Kids' Trans Pathways Report (Strauss et al., 2017) reports that:

- 4 out of 5 trans young people have ever self-harmed (79.7%);
- almost 1 in 2 trans young people have ever attempted suicide (48.1%);
- 3 in 4 trans young people have ever been diagnosed with depression (74.6%)
- 72.2% of trans young people have ever been diagnosed with anxiety
- 22.7% of trans young people had been diagnosed with an eating disorder
- 25.1% of trans young people had been diagnosed with post-traumatic stress disorder

An overwhelming conclusion is that the mental health outcomes for this population are strongly affected by the quality and approach to care provided (Telfer et al., 2018) and, where indicated, timely, individualised, gender affirming care (de Vries et al., 2014; Olson et al., 2016; Telfer et al.,

¹ As at September 2018; the Service is currently limited to children and young people under 17 but future plans are to expand into the adult population.

2018). In addition, the importance of supportive parental relationships has been shown to have a significant and lasting positive impact on harm reduction and risk of harm reduction for this vulnerable population (Travers et al., 2012).

Issues

The provision of quality, timely, individualised gender affirming care requires high levels of knowledge development for a range of individuals and institutions, as well as coordination across and between individuals and institutions working with a child or young person. In addition, significant support is usually needed to be provided to families if they are navigating a pathway through the process of a gender transition with a child.

Apart from knowledge development and family support, another key issue facing families who are raising gender nonconforming and transgender children is timely *access* to qualified advice and support. Victoria has arguably the most advanced clinic in Australia for the assessment and support of TGD children and young people. This facility, located at the Royal Children's Hospital in Melbourne, is the premier treatment facility for referrals across the state.

The RCH Gender Service is a premier facility with a national and international reputation, however there are significant barriers to families living in rural and regional areas being able to access the service. The RCH waiting list, for instance, is long and growing despite funding increases and expansion of that service. When compounded by the clear lack of knowledge of the existence of that metropolitan service, or the markers of gender non-conformity that might lead to an assessment for further treatment, many parents of TGD children and other TGD people are critically disadvantaged in accessing timely, well-informed, and accessible care.

With recent research indicating that about 0.5% of adults and up to 1.3% of adolescents in the general population identify as transgender (Kaltiala-Heino et al., 2018), gender nonconformity can be found in any population and is as present in Mildura or Warrnambool or Wodonga as it is in metropolitan Melbourne. However, for families wishing to support their child, return travel to a service located several hundred kilometres from their home where they live and work is a *significant* access barrier.

Typically, for parents supporting a child in the North East of Victoria, a simple half hour check-up at the RCH would involve a *seven hour* return journey *plus* time spent at the hospital, loss of a day's work, childcare arrangements for siblings, fuel, city parking and meal costs, as well as interruption to children's education, and other family activities and parental responsibilities. When a family can't travel by their own transport, then additional hurdles and difficulties present themselves.

If the family need to stay overnight, accommodation costs and additional interruption to schedules at home will occur. While the Victorian Patient Transport Assistance Scheme (VPTAS) can provide some limited financial relief, this does not cover all costs and indeed may not cover anything but a small portion of real cost of such an appointment.

Overcoming the tyranny of distance

In a shared care arrangement with the RCH, the Gateway Health Gender Service (GHGS) provides accessible and expert healthcare and support for trans and gender diverse young people and their families in their local area.

The GHGS provides a local point of contact for a range of needs from telephone advice and institutional training through to appointments with our clinical nurse, a child and adolescent

psychiatrist, and access to our Multidisciplinary Clinic. Coordination of care plans and referral to other local professionals (e.g., specialist medical, allied health, and psychology services) trained in the care of Transgender clients is also part of our service. While complex cases are referred to the RCH initially, the aim with all cases is for treatment and care plans to be locally managed.

The GHGS has been cited as a preferred model of service delivery for this population (Hulme Chambers, 2018; DHHS, 2018). The recommendations in the DHHS Final Report clearly point to a new 'spoke and hub' model of service delivery – of which the GHGS is an exemplar regional 'hub'. Development and funding of this model could substantially improve the access and service quality needs of this population across Victoria (DHHS, 2018, Ch. 6 & 7, pp. 64-87). The working reality of the GHGS shows that this model is viable, practical, and effective in reducing the access issues faced by TGD people and their families.

Ongoing issues for the timely and ethical treatment of Transgender children

The greatest barrier to accessing appropriate and timely support for this population is ignorance. From the point at which a child may begin to evidence mental health issues associated with the appearance of their gender non-conformity² and adults around the child become concerned, there is almost no one a person can turn to for qualified and knowledgeable advice. This landscape of ignorance is the greatest threat to the mental health and well-being transgender children. Without access to qualified, well-educated professional advice, a child's mental health can decline rapidly as people around the child struggle to understand; apply methods of treatment that are ill-advised, unethical or illegal; or simply attempt to ignore a 'problem child', believing the 'school of hard knocks' or puberty will eventually 'sort them out'.

Nothing in the scientific literature or in any of the major clinics around the world dealing with this population would endorse that kind of thinking (de Vries et al., 2014; Durwood et al., 2017; Olson et al., 2016; Telfer et al., 2018). The modern approach to the care and treatment of Transgender children requires that children and their families be supported by qualified experts and that appropriate adjustments be made in their homes, communities, and places of play, education and work so that they can enjoy the advantages of a happy, well-adjusted, trauma-free childhood and adolescence. To achieve that outcome, however, requires a significant improvement in the current knowledge base of professionals, institutions, and others coming into contact with this population (DHHS, 2018; Riggs et al., 2015; Strauss et al., 2017).

What we need to improve the mental health outcomes and wellbeing of gender diverse and Transgender people in Victoria.

The Department of Health and Human Services' Final Report makes the following statements related to the healthcare needs and circumstances of Trans and gender diverse people:

- **Trans and gender diverse people are one of the most vulnerable and high needs groups in Victoria.** This community experiences high rates of mental health issues, stigma, discrimination, and disadvantage
- Encouraging the inclusion of trans and gender diverse people in our society 'is likely to be the most significant element of treating the mental health issues that trans people

² Our experience - and widely acknowledged in the peer-reviewed literature - shows this can be as early as 2 years old.

develop in an intolerant and still very ignorant society' (quote from *Key Directions Discussion Paper* respondent)

- Trans and gender diverse people can find the process of questioning, defining, and affirming their gender identity to families, schoolmates, workmates and teammates to be difficult, overwhelming and distressing. This process can also be difficult for people around them such as partners, parents, siblings and friends. Access to timely, affordable counselling and support is needed, as is family counselling, workplace training and leadership development
- The level of family support and acceptance can have a critical impact on the health and wellbeing of trans and gender diverse people.
- **There are few places to obtain care in Victoria** where trans and gender diverse people feel safe and secure, with such services largely being provided by a small number of specialist general practice, community health and hospital services that are concentrated in Melbourne.
- **People in the trans and gender diverse community need more doctors, counsellors, health workers and front-line staff who understand them** and their health and support needs.
- **Increasing access to mental health, counselling and support services is a priority.**
- Quality education and training for health professionals, as well as the development of clinical guidelines and referral pathways, are a key component to expanding the delivery of community-based services
- The costs of accessing services, especially medical gender affirmation services, play a major part in limiting service access. In some cases, **these services can be regarded as life-saving healthcare** because of the associated risks of depression, self-harm, and suicide that trans and gender diverse people can face.

(Development of Trans and Gender Diverse Services, Victoria: Final Report, 2018, p.7-8)

The action required to address those needs is clear:

- We argue that an urgent and self-evident early step be that the Gateway Health Gender Service be provided with recurrent funding in line with its present and proposed expansion to adult services and that it be used as a model for Community Health settings across Victoria in line with the recommendations of the DHHS *Final Report* (2018).
- Adopt recommendation of the DHHS Report (2018) for the new 'spoke and hub' model expansion including dedicated capital and recurrent expenditure necessary to sustain such a development which will include provision for case intake and management systems, psychiatric assessment, education and training, family support, and advocacy.
- Urgently develop GP training and awareness of this population, including but not limited to:
 - identification and assessment training
 - increasing understanding of qualified service referral options
 - patient management training
 - education around best practice protocols
- Urgently and proactively develop psychiatry and clinical psychology professional training around awareness, identification, assessment, management, referral related to TGD clients.

- Building the capacity, and numbers of 'frontline' Community Health staff: counsellors, social workers, Headspace workers who are specialised in the needs of TGD people.

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2019 Submission - Royal Commission into Victoria's Mental Health System

Organisation Name

N/A

Name

Ms Sophie Rhys

What are your suggestions to improve the Victorian community's understanding of mental illness and reduce stigma and discrimination?

N/A

What is already working well and what can be done better to prevent mental illness and to support people to get early treatment and support?

"With regard to Trans and Gender Diverse People: - promote widespread education for health professionals, service providers, schools and the general population - Gateway Health Gender Service is an example of a local, accessible, wraparound service for trans and gender diverse young people and their families that is making a significant impact to the mental health and well being of the young people and their families. -Ongoing funding for the service to ensure its continuity is necessary, and to enable it to expand service to the adult population. - The service should be used as a model to be rolled out in other regional areas."

What is already working well and what can be done better to prevent suicide?

"With regard to Trans and Gender Diverse People: - promote widespread education for health professionals, service providers, schools and the general population, and reduce stigma. - Gateway Health Gender Service is an example of a local, accessible, wraparound service for trans and gender diverse young people and their families that is making a significant impact to the mental health and well being of the young people and their families. -Ongoing funding for the service to ensure its continuity is necessary, and to enable it to expand service to the adult population. - The service should be used as a model to be rolled out in other regional areas."

What makes it hard for people to experience good mental health and what can be done to improve this? This may include how people find, access and experience mental health treatment and support and how services link with each other.

Please see attached report.

What are the drivers behind some communities in Victoria experiencing poorer mental health outcomes and what needs to be done to address this?

Please see attached report.

What are the needs of family members and carers and what can be done better to support them?

Please see attached report.

What can be done to attract, retain and better support the mental health workforce, including peer support workers?

'- longer-term or ongoing funding would ensure longer-term contracts for staff which would help

attract workers; job insecurity affects many aspects of workers' lives.

What are the opportunities in the Victorian community for people living with mental illness to improve their social and economic participation, and what needs to be done to realise these opportunities?

N/A

Thinking about what Victorias mental health system should ideally look like, tell us what areas and reform ideas you would like the Royal Commission to prioritise for change?

Please see attached report.

What can be done now to prepare for changes to Victorias mental health system and support improvements to last?

N/A

Is there anything else you would like to share with the Royal Commission?

"Please see attached report - the Gateway Health Gender Service is doing amazing work - we need ongoing funding to continue this, but also this model is transferable to other rural and regional areas. Thank you!"