Twitter Thread by Ailbhe Rea



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On an almost daily basis I see journalism about (never by) trans people repeating and spreading inaccurate information or responding to a partially imagined reality. It goes without saying that any discussion about trans rights needs to begin with facts!

People talk about trans people accessing spaces based on their gender identity as a big scary dangerous change coming down the tracks. Trans people *already* live their lives and access spaces on the basis of self-ID. No one produces a birth certificate to go to the loo!

It's also the case that in the trickiest cases like domestic abuse refuges, there are exemptions in the Equality Act. (This looks like a piece about RLB but it's a GRA/EA explainer!) https://t.co/WpafmwxDrN

There have also been misunderstandings about new perinatal guidance at Brighton & Sussex hospital trust (ie the "chest-feeding" debate)

Phrases like "chest-feeding" are given in the guidance as an example of language that a trans man or non-binary person who is expecting a baby might prefer nurses to use. If you're a new mum in these hospitals it is *explicit* that the language used to address you won't change.

Trans people are a minority but they do exist and they do give birth, of course, and they have a legally-enshrined right to protection from discrimination when accessing healthcare.

The updated guidance is for staff to make sure they're providing care to the minority of pregnant people who aren't women in the respectful, dignified way to which they have a right under the Equality Act 2010.

The only real change that you might notice giving birth if you aren't trans would be the occasional reference to "women and birthing people" or the "woman or birthing person" in literature or signs, and staff checking how you and other patients would like to be referred to.

It's a slight change to more expansive, inclusive language, reflective of the range of people who use perinatal services: mostly women, but also some trans and non-binary people. That's it. That's all it is.

The guidance is about the complex needs that trans and non-binary people face when giving birth, eg how hormone treatments intersect with other perinatal care, specific obstetric requirements, how best to preserve patients' privacy in those circumstances, and so on.

Trans people are such a small minority, with complex healthcare needs, and best practice for providing them with care is something that staff do require guidance on.

Best practice in this area is especially important because the continued lack of familiarity that many healthcare staff have with trans issues means that lots of trans people will have had negative experiences accessing care in the past.

Discrimination and misunderstanding contribute to a lower uptake of cervical screening among trans men, and an expected higher risk of cervical cancer among trans men and non-binary people than among cis (ie not trans) women. https://t.co/77M1MWZpfy

It makes me so, so sad to see this discussion underpinned by such a shaky grounding in the facts, and over and above the heads of the people affected. Most of this is just about granting trans people their legal rights, but the public attitude towards that has not caught up.