TRANS HUB

HEALTH & GENDER AFFIRMATION IN NSW

HOW DO I START HORMONES?

A guide for trans & gender diverse people

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Hormones are chemical messengers that exist in most bodies, sending signals throughout the endocrine system and brain that tell different parts of the body how to function.

For many trans and gender diverse people, hormonal affirmation is an important part of how we see, care for, and envision ourselves.

Exactly what this means can vary from person to person, and there is no one correct path to hormonal affirmation. Using hormones doesn't make you the woman, man, or non-binary person you already are but most trans or gender diverse people using gender affirming hormones report high levels of satisfaction.

For people who experience dysphoria, hormones often alleviate this.

Masculinising/feminising

TransHub uses the terms ‘masculinising’ and ‘feminising’ hormones to describe the physical effects of hormonal affirmation, recognising that not everybody will use them with the intention of masculinising or feminising, and that bodies are not inherently masculine or feminine due to their hormonal makeup.

These terms are imperfect descriptors for categories of hormones and their effects, but do not intend to denote the specific genders.

“STANDING BY FOR
GENDER AFFIRMING HORMONES”

HORMONAL AFFIRMATION

Hormonal affirmation is relatively simple, can create a lot of change from a small amount of input, and our communities have been doing it for a long time, so we have a good understanding that it's effective and safe.

GPs are able to initiate and continue gender affirming hormonal therapy for people age 16 and above.

What hormone therapies are there?

The type of hormonal therapy you choose depends on what hormones your body is already producing, and what effects you hope to achieve.

You may want to start hormones and take them for the rest of your life, or go on and off them over time based how much you're seeking to feminise or masculinise. It's also possible to go on hormones for a while, see how you feel, and then change up your medication or dose, or stop altogether.

Hormone blockers

Hormone blockers (or puberty blockers) are medications that prevent the release of hormones in your body. This means estrogen or testosterone stops, or doesn't begin, having an effect on your body.

Masculinising hormones

Masculinising hormones are testosterones. They can affect fat redistribution, body and facial hair growth, and lowering the pitch of the voice.

Feminising hormones

Feminising hormones are estrogens, and progesterones. They can affect fat redistribution, softening and clearing of skin,and shifts in mood.

There are two main models for starting hormones

Informed Consent model

Informed consent simply means being given correct and adequate information about gender affirming hormones, risks, effects, combinations and how they might work with other medications or recreational drugs.

Your doctor will need to be confident that you understand:

- What gender affirming hormones are available
- Their effects
- The risks and benefits
- Your doctor's experience in providing this kind of care.

This is so you are able to make a decision (or consent) about your body, health and health care. Doctors need to ensure their patients can and are making informed decisions about their health every day.

The Informed Consent Model, developed by Callen Lorde Community Health Centre in New York, recognises that trans and gender diverse people are able to understand and consent to medical and surgical interventions ourselves, by understanding the risks and outcomes, and places self-determination at the center of our healthcare.

“REFERRALS IN ORBIT. REQUESTING MODULE FOR INFORMED CONSENT”

Approval Letter model

Some trans and gender diverse people want to see non-GP specialists for endorsement prior to starting hormones, and that’s ok. We are all about self-determination, and celebrate trans people making informed and autonomous choices about how we access gender affirming healthcare.

This model means you will see additional health professionals (such as Endocrinologsts, Psychologists, or Psychiatrists) who will then ‘sign off’ on your readiness to initiate hormones.

It's okay to want to choose one model over the other, the important thing is that the choice is not being made for you by your health professional.

Starting hormones in NSW

In NSW, you are able to start hormones with your GP or doctor using the informed consent model.

It's important to book the longest appointment possible for starting this. There are restrictions for accessing testosterone on the PBS and your GP will need to consult with an Endocrinologist, Sexual Health physician, or Urologist.

Genital examinations

At no point is a genital or chest/breast examination required for starting hormones.

Starting hormones for people under 18

For trans people under 18, hormones can be commenced once they reach 'Gillick Competence', both parents/carers consent, and their medical team agree that it's the right time.

For trans people under 18 whose parents/carers are in dispute about them starting hormones, the Family Court must be involved.

"INITIATING GENDER AFFIRMING HORMONE BOOSTER"

Illustrations by Samuel Luke Art

TransHub is ACON's digital information and resource platform for all trans and gender diverse people in NSW, their loved ones, allies and health providers.

For more information and resources, visit:
www.transhub.org.au

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