Project Title: Whatever it Takes

Authors

Neil Bolton-Heaton, Help & Care, Dorset

Plain Language Summary

Aims
To ensure equal access to cancer services, regardless of background or personal characteristics. This requires a new approach to understanding the experiences of underserved groups and integrating these insights into service design, delivery, and culture.

Background
Trans+ people often face barriers in accessing healthcare and may be excluded from gendered cancer screenings e.g. individuals with both a prostate and breasts may have to choose between routine cancer checks. With 50% of people born after 1960 expected to develop cancer, addressing these challenges is critical. This project focused on understanding the barriers trans+ individuals face in accessing cancer care and their experiences of care they receive.

Methods
We recruited trans+ community researchers, supported by Bournemouth University and a cancer nurse specialist. Community researchers designed and delivered the study. Using arts-based activities with trans+ people with lived experience, the project co-created solutions to the challenges they encountered.

We also engaged cancer professionals to build a shared understanding of the inequalities trans+ people face, raise ambition to address these issues, and foster commitment to act on the solutions developed.

Findings
Trans+ people face significant barriers to healthcare and often have poorer experiences with services.

Dissemination, Outputs, and Impacts
We will share our findings with local, regional, and national stakeholders.

Outputs :

- Research report.
- Trans flag.
- NHS toolkit.
- Video.
- Zine.
- Art book.
- Co-authored research paper.
- NHS trans awareness training.
- NHS Breast screening project.

Patient and Public Involvement
The research was designed and delivered by trans+ community members with lived experience. Participants were recruited from venues, events, and services they already accessed.

Conclusions and Future Plans
Collaboration with hospital screening services to improve the experience of trans+ individuals. Further research to enhance trans+ people's access to primary and broader healthcare services. Trans+ is an umbrella term that includes trans, non-binary, and other gender-diverse people.

Summary of Research Findings

Background:

Trans+ people have a higher cancer risk than cisgender individuals, largely due to prolonged exposure to smoking, alcohol, and obesity as coping mechanisms for marginalization[1]. This risk is worsened by barriers to primary care, including discrimination, provider competence, inaccurate records, and socioeconomic challenges. Limited trans+ awareness among non-specialist healthcare professionals further restricts access to general healthcare[2–4].

Trans+ people often must educate healthcare providers about their specific health needs and basic etiquette, such as correct names and pronouns[5]. This stems from a lack of trans+ training in medical education and professional development[6].

Mistrust of healthcare professionals is common[7–9], driven by stigma, ignorance, prejudice, and power imbalances. While other marginalized groups face similar barriers, these are often more severe for trans+ individuals[10].

Challenges intensify for trans+ people of the global majority, those who are unhoused, in precarious housing, sex workers, or part of the traveling community.

The issues and barriers experienced are with the systems and some individual practitioners within healthcare settings, not the trans+ person themselves.

Negative experiences can lead many trans+ people to avoid cancer screening. Compared to cisgender peers, trans+ patients have lower screening rates for cervical (56% vs. 72%), breast (33% vs. 65%), and colorectal cancer (55% vs. 70%)[11]. Among 1,275 participants, prostate screening rates for trans women (22.2%) were also lower than for cisgender men (36.3%)[12].

Trans+ people have lower rates of cervical, breast/chest, colorectal, and prostate screenings compared to cisgender individuals[13] [14]. Limited practitioner knowledge, screening inaccessibility, and increased cancer risk contribute to worse outcomes in diagnosis and mortality[15]. Data on cancer risks and healthcare outcomes for non-binary people remains scarce.

The World Professional Association of Transgender Health (WPATH) recommends that care professionals follow local breast/chest cancer screening guidelines for cisgender women when treating trans+ individuals on estrogens or with breast tissue from natal puberty. Similarly, WPATH recommends that care professionals follow local ovarian and endometrial cancer screening guidelines for trans+ individuals who have or previously had a cervix[16].

While WPATH guidelines provide a foundation for cancer care, they lack emotional support and do not ensure accountability for missed screenings due to provider miscommunication.

Trans+ individuals also face systemic barriers, such as screenings tied to gender markers—e.g. forcing trans women to choose between prostate and breast screenings. Additionally, NHS systems often lack flexibility for non-binary and agender identities, as well as chosen names and pronouns not being respected, leading to inconsistent care.

Aims and Objectives:

Our aim was to eliminate barriers in cancer service access, ensuring trans+ individuals receive the same service experience and outcomes as cisgender people.

Objectives:

- Education to improve cancer service inclusivity for trans+ people. Project members agreed:

    - To include pronouns in introductions, profiles, email signatures, and data collection.
    - Language should be inclusive and topic-specific, avoiding gendered terms where possible (e.g., "people with prostates").
    - Deliver Trans Awareness training to NHS and VCSE professionals.
- Increased and shared learning around issues faced by trans+ people accessing cancer services.
- Solutions. Use shared learning to drive action on solutions, ensuring commitment across cancer service commissioners and providers.
- Through promotion and engagement, create a common purpose between trans+ communities and service providers to change the way they interact around cancer services.
- Build a model of interaction with trans+ people with lived experience and trans+ community researchers that:
    a) We can continue to develop.
    b) Can be shared around the country.
    c) Will form the basis for engaging with all underserved groups.
- **Partnership.** Build partnerships between the NHS, voluntary and community organisations, trans+ support groups, academics focused on health equity, and trans+ individuals to drive inclusive healthcare solutions.

Changes to Aims and Objectives:

The initial workshop revealed a notable barrier to engagement: participants often felt they had little to contribute when asked about cancer services, even after clarifications that this included the full continuum of care—from awareness and screening to treatment and bereavement support. This response was particularly evident among those who had avoided healthcare due to prior negative or discriminatory experiences, yet did not view these experiences as relevant to the discussion.

This disconnect highlights possible misalignment between institutional definitions of cancer services and how trans+ individuals understand or relate to them. In response, the research approach was adapted to focus more broadly on participants' general healthcare experiences. This shift fostered greater engagement and produced insights more reflective of the community's lived realities and more aligned with the research objectives.

Methods:

We adopted a Participatory Action Research (PAR) approach[17] to collaborate with trans+ communities affected by cancer care, co-creating knowledge through iterative cycles of reflection and action. As both a philosophy and a methodology, PAR emphasizes dialogue, shared power, and the generation of knowledge that leads to meaningful change[18] [19]. Rather than conducting research on participants, PAR involves working with those whose lives are the focus of inquiry, acknowledging and addressing power imbalances in the research process[20].

Our project, Trans Aware Cancer Care (TACC), positioned trans+ individuals as co-researchers, drawing on the Bournemouth University (BU) Public Involvement in Education and Research (PIER) Community Researcher model. By prioritizing experiential knowledge, informed decision-making,

and mutual respect. This approach stands in contrast to traditional consultation models, which often maintain control with academic or clinical researchers[21].

By utilising the BU PIER community researcher approach, we supported individuals with the relevant lived experience to take a leading role in the research process, offering not only a methodological approach but also a framework for social change. Central to this approach was a commitment to challenging power dynamics and centring trans+ voices. Trans+ individuals were embedded throughout the project, supported by BR, their community organisation, and the network of project partners.

Collaboration with community organisations was central to the project. Beyond Reflections, a trans support charity, was involved from the outset, helping to design and deliver the research. They created supportive spaces and recruited four community researchers from their membership, ensuring the work remained rooted in trans+ community priorities.

Supported by BU PIER academic staff and a clinical nurse specialist, the community researchers co-designed both the research framework and engagement methodology. Through collaborative discussion, the team determined that a qualitative, arts-based approach would best align with the project's aims and values.

Participants were invited to choose a pink, white, or blue fabric square and to express their experiences of cancer care using a range of art materials. Alongside their artwork, they were asked to complete a form with the following fields: Title, Description, and Story. The "Description" was intended to capture the visual and aesthetic elements of the square, while the "Story" provided the personal narrative behind the artwork. This creative method offered an empowering and accessible way for participants to share their experiences, resonating with the wider literature on arts-based participatory research[22].

The research team implemented multiple models of engagement across the programme, ensuring that venues were physically accessible and designed to be safer, welcoming spaces for trans+ individuals. In keeping with the project's inclusive ethos, participation was open not only to trans+ individuals but also to relatives, carers, and allies, fostering a non-restrictive and community-centred environment. To further increase participant accessibility, "TACC Chats" were offered to individuals via phone and digital.

The squares and any additional data would later be sewn into a large trans pride flag to form a main project output. The project team hosted two workshops for NHS professionals across Wessex involved in cancer care. The first introduced the Trans Aware Cancer Care project and included trans+ awareness training, initiating relationships between healthcare professionals and the trans+ community. The second workshop, in July 2024, presented initial findings and provided a reflective, safer space for discussion and a call to action.

Figure 1: Image of the Trans flag containing the individual squares and narative

Together, participants explored what was needed to make cancer services more inclusive for trans+ people. These sessions strengthened relationships, built networks, and have led to further collaborative opportunities.

Findings/ Discussion: See appendix 1 and 2

Ninety-two squares were completed by research participants. Of the 92 squares, just over half (47) of them fell into the negative or extra negative categories when reporting their experiences of cancer care/ healthcare.

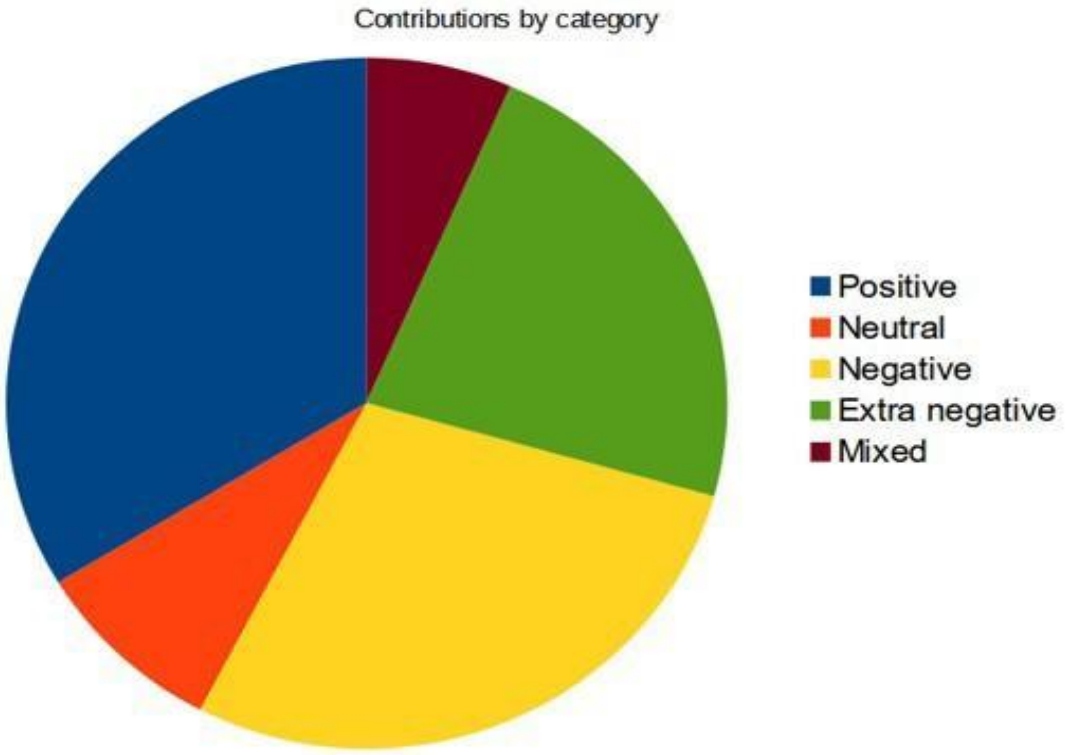

Figure 2 - participant contributions by category

The results can be further broken down by gender identity, which can be trans+, cis ally, or ambiguous. This shows that nearly two thirds of contributions came from the trans+ community.

Category	Total	Trans+	Allies	Ambiguous
Positive[5]	31	7	16	8
Neutral[6]	8	5	2	1
Negative[7]	26	21	4	1
Extra negative	21	21	0	0
Mixed	6	6	0	0
Total	92	60	22	10

5 Ps# for trans+: 06, 07, 23, 25, 26, 29, 30; for allies: 01-05, 08-12, 17, 20-22, 24, 31; for ambiguous: 13, 14, 15, 16, 18, 19, 27, 28.
6 Nu# for trans+: 01, 02, 04, 05, 08, for allies: 05, 06; for ambiguous: 03.
7 Ng# for trans+: 01-04, 06-08, 10, 11, 13, 15-20, 22-26; for allies: 09, 12, 14, 21; for ambiguous: 05.

Table 1 - *gender identity of participants*

The spread of gender identity within categories can be visualised as follows:

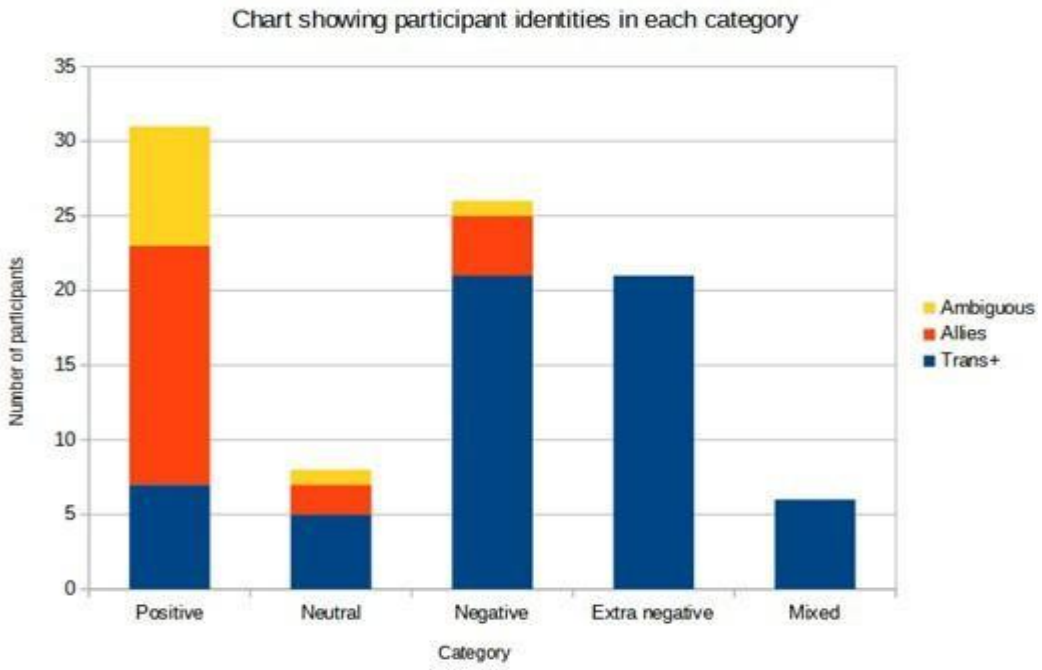

Figure 3 - spread of participant gender identities.

This graph demonstrates that trans+ contributors were not only more likely to take part, but also more likely to have negative things to say.

The only category that was not majority trans+ contributors was Positive. Of these 31 squares, the majority were from allies (16) or ambiguous (8), with just under a quarter (7) explicitly from trans+ participants. This may be due to various factors:

- We did not ask for the gender identities of participants, meaning all 8 ambiguous participants may be trans+, bringing the split up to nearly 50%. The positive squares tend to be praising trans+ people rather than focusing on problems.
- The squares with no descriptions/etc. tended to be in this category, so the art may have been intended to carry a negative message that has been missed.
- Experiences of transphobia would have moved the square to a more negative category, and trans+ people are more likely to have experiences of transphobia they want to share.

Of the 8 Neutral squares, 2 are from allies, both demanding support for trans+ people. The 6 by trans+ participants are varied, but are more likely to raise intersectionality, e.g. epilepsy, anxiety, or various other qualities of themselves.

The 26 (not-extra) Negative squares tend to focus on bad experiences, apprehension, or both. 7 mention deadnaming or misgendering/pronouns specifically, but dysphoria is repeatedly implied by the lack of recognition for or acceptance of their gender identity:

"I want to be respected and taken seriously for who I am. Understand doing something to a part of my body I don’t relate to makes a smear even more uncomfortable than it already is." (Ng11)

These themes continue into the Extra Negative squares: 5 mention deadnaming and misgendering/pronouns specifically, but more focus on the lack of acceptance/recognition:

"I will never get a cervical screening because my doctors are transphobic and don't respect my personage. I could get cervical cancer at any point and may never know until it's too late. This fact is more bearable to me than receiving care being treated as a woman." (No16)

"Doctors will try to remove my binder, they don't know what it is. They have no idea what to do with me. I have to do my own ECGs." (No18)

As well as No16's quote (above), No18 also specifies that they will not attend cervical smears due to their history of negative experiences:

"So many times, my healthcare experiences have been poor. There is confusion between my preferred name and my NHS number. When I go to A&E they tell me I don't exist, that I don't have a medical file. They tried to turn me away from urgent care once when I was having a seizure. My partner had to advocate for me and eventually they found me in an "un-named file". Another time in A&E with rib pain and recurrent chest infection (because of binding) I was accused of drug seeking – I was shaking from anxiety and being so unwell. Doctors try and remove my binding without consent. They don't understand what a binder is and how to do an ECG with one in place."

The Mixed squares contain experiences both explicitly positive and negative. There are only 6, but 4 of those focus and/or end on the positive, even when the negative experience is strikingly bad. For example, Mx01's shares two experiences on the square:

"You can't have the morning-after pill unless you prove to me you're capable of getting pregnant." - pharmacist

"Here is some information about pelvic screening. I've checked it has gender-neutral language and I'm here to talk you through it if that helps. Just tell me what you need." - Practice nurse aka legend

In this example, the positive experience is given more weight by being the last section and by the nurse being described as a legend.

Almost identically, Mx05 shares two experiences in their Story section:

"I have been made to feel uncomfortable at routine cancer screening by a well-meaning nurse who attempted to put me at ease by appealing to our shared femininity in her greeting to me. Once the assumption has been made it is so much harder to correct people especially in a vulnerable situation like that one…"

"I have since had another experience after moving to a much more trans aware GP practice where the nurse was affirming of my gender and checked my preferred name when I entered. The second experience was a long time after the first, but knowing that I will feel safe attending my new GP will mean I do not ignore screening reminders next time."

This is the only participant to explicitly mention becoming more comfortable with attending cervical cancer screenings, and it's from someone who did have a negative experience first.

Conclusions:

The squares convey that trans+ people often approach healthcare with valid concerns based on past experiences of discrimination, dismissal, or exclusion. These are not isolated incidents—they reflect broader patterns within healthcare systems. Over time, the cumulative impact can cause deep harm. Some respond with mistrust or anxiety; others disengage entirely, avoiding even life-saving services like cancer screenings.

However, the Mixed squares offer hope. They show that even one respectful, affirming interaction with a provider can restore trust and ease anxiety. Such moments are powerful—turning points that

rebuild confidence. This underscores how care, delivered with respect and compassion, can be both healing and empowering.

Engagement with healthcare practitioners revealed a willingness to change. Many acknowledged systemic shortcomings and expressed a desire to improve. Crucially, both providers and trans+ community members emphasized that many needed changes are not technically difficult—they're about attitude, behavior, and approach. Still, creating meaningful cultural change will require sustained effort and commitment.

Recommendations:

1. **Recognise trans+ concerns** as valid and grounded in lived experience. Seemingly small actions—like misusing names or pronouns—can reflect a deeper lack of respect.
2. **Educate healthcare staff.** Training helps reduce negative encounters and increases the chance of positive ones. It also eases the burden on trans+ individuals to constantly self-advocate.
3. **Prioritise general healthcare.** Though TACC focused on cancer services, a major barrier is poor past experiences with GPs, which discourages future engagement.
4. **Decouple cancer screening from gender markers.** Screenings are currently tied to the system's gender designation, leading to issues such as trans women being forced to choose between breast or prostate screenings. Instead, screenings should be linked to anatomy, allowing all relevant screenings and avoiding inappropriate ones.

   Curb Cut Effect: Others benefit too—for instance, a cis woman with a hysterectomy can opt out of cervical screenings.
5. **Include preferred names and pronouns in patient records.** These should be standard and easily updated.

   Curb Cut Effects:

   - Alzheimer's patients can be addressed by names they recognize.
   - Patients can indicate their preferred level of formality.
   - Misgendering during treatment due to temporary facial swelling, for example, can be avoided.
6. **Create space in consent processes** for patients to mention anything they want providers to know about areas of their body that will be seen during procedures—especially genitals. There is currently no clear method to communicate this in advance.

   Curb Cut Effect: All patients, not just trans+ ones, can flag things like scars, birthmarks, or infections— preventing awkward or uncomfortable situations.

Patient and Public Involvement

Aim

From the outset, the *Trans Aware Cancer Care* project was committed to centring lived experience as an essential form of expertise. Our aim was to adopt a "flipping the power" approach, where traditional hierarchies in research are challenged and power is shared with those most affected by the issues being studied. In doing so, we placed community voices—specifically those of trans+ individuals—at the heart of the research design and delivery.

This approach was rooted in participatory action research methodology and underpinned by an asset-based model. Rather than focusing solely on needs or deficits, an asset-based approach recognises and builds upon the existing strengths, knowledge, networks, and skills of the community. It acknowledges that communities are best placed to identify the barriers they face and to propose meaningful, practical solutions.

Our core principle was that people with lived experience of being trans+ and accessing cancer services must lead the process—not just be involved. As such, community researchers played a leading role at every stage of the project, from planning and outreach to co-facilitating workshops and public engagement. This ensured that our research not only reflected the community's reality but was co-produced with them in a way that valued and respected their insights.

Methods

Community researchers were recruited directly from the trans+ community, bringing lived experience of accessing or navigating cancer treatment and care services. Recruitment was supported by Beyond Reflections, a charity committed to supporting trans+ individuals across the UK. Their existing relationships, reputation, and trust within the community were vital to successful engagement.

In addition to the community researchers, a co-applicant with lived experience from the trans+ community served as a member of the project steering group, ensuring representation in governance and strategic decision-making.

Support was provided through the BU PIER (Public Involvement in Education and Research) Partnership, which has a strong track record in embedding lived experience into research and education. PIER offered guidance, structure, and mentoring to community researchers, ensuring that their voices remained central to every aspect of the work.

Community researchers were involved in designing and delivering all elements of the engagement process. They co- created public involvement opportunities through arts-based workshops, facilitated discussions, and outreach activities. Events were held in spaces identified by community partners as safer and welcoming to trans+ individuals and allies. These venues were chosen deliberately to promote inclusivity and encourage broad participation.

To date, over 90 participants have engaged with the project, many of whom contributed to a community art piece by designing a unique “square” representing their experience or message. These contributions formed a collective artwork (trans flag) that gave visibility to individual voices while symbolising shared experience.

Examples of PPI Integration

Public and patient involvement was central to the research process. Key examples of successful integration include:

- Active participation of community researchers in research planning meetings, ensuring the trans+ voice remained central.
- Community researchers chairing operational meetings, demonstrating leadership and ownership of the work.
- Co-design and co-facilitation of workshops and digital engagement opportunities.
- Co-presentation at local, regional, and national events to share project methodology, findings, and reflections
- Co-production of creative and digital communications including:
    - Project artwork visually representing lived experiences.
    - Dedicated project website, featuring regular blog updates and news articles.
    - Collaborative social media campaigns across partner platforms.

- Webinars and podcasts featuring conversations between trans+ individuals and healthcare professionals
- Representation and visibility at conferences and public events.
- Dissemination through partner communication channels, including NHS Trusts, voluntary sector bulletins, and academic networks

Challenges and Learning

A significant challenge we encountered was building trust with members of the trans+ community. Due to historical and ongoing experiences of transphobia—both societal and institutional—many individuals were understandably hesitant to engage with a project linked to healthcare or research. Some had experienced discrimination within healthcare settings, while others had never been asked about their health needs in a safer and affirming space.

Building trust required time, consistency, and a commitment to transparency. Community researchers, with their shared experiences and trusted presence, were instrumental in this process. Their leadership helped reassure participants that the project was genuinely inclusive and committed to change. The involvement of Beyond Reflections as a partner organisation played a critical role in establishing credibility and addressing concerns as they arose.

It became clear that, for some participants, this project was the first time they had been asked about their cancer experiences or felt comfortable discussing their health needs. Creating these safer spaces, where people could express themselves authentically, was not just a method of engagement—it was itself a significant outcome of the work.

Data sharing statement:

See link - https://www.nihr.ac.uk/documents/nihr-position-on-the-sharing-of-research-data/12253 for the NIHR position of the sharing of research data. The NIHR strongly supports the sharing of data in the most appropriate way, to help deliver research that maximises benefits to patients and the wider public, the health and care system and which contributes to economic growth in the UK. All requests for data should be directed to the award holder and managed by the award holder.

Disclaimer

This project is funded by the National Institute for Health and Care Research (NIHR) under its Programme Development Grant Programme (Grant Reference Number NIHR205183). The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.

This project was carried out between June 2023 and March 2025. This final report has not been peer-reviewed. The report was examined by the Programme at the time of submission to assess completeness against the stated aims. These reports do not undergo a peer review process.

References:

1. Leone A, Simpson R, Whelan J. Addressing cancer disparities in transgender populations. *J Oncol Pract*. 2024;20(1):45–53.
2. Berner AM, Hughes LJ, White CP. Health disparities in transgender individuals: systemic barriers and opportunities. *BMJ Open*. 2020;10(5):e034674.
3. Leone A, Kumar P, Singh V. Navigating primary care for transgender patients: An educational gap. *Fam Pract*. 2023;40(3):123–30.
4. Pearce R. Understanding trans health: Discourse, power and possibility. *Policy Press*; 2018.
5. Mikulak M, Green M, Hall T. Trans experiences in primary care: "I had to educate them". *J Gay Lesbian Soc Serv*. 2021;33(2):130–48.
6. Women and Equalities Committee. *Reform of the Gender Recognition Act: Government Response to the Committee's First Report*. UK Parliament; 2024.
7. Davy Z. The social construction of transgender health disparities. *Health Sociol Rev*. 2015;24(3):256–68.
8. Ellis SJ, Bailey L, McNeil J. Trans people's experiences of discrimination in health care. *Int J Transgend*. 2015;16(1):1–20.
9. Sanger T. Trans people's experiences of healthcare in the UK. *Unpublished manuscript*; n.d.
10. Safer JD, Coleman E, Feldman J, et al. Barriers to healthcare for transgender individuals. *Curr Opin Endocrinol Diabetes Obes*. 2016;23(2):168–71.
11. Kiran T, Lam T, Pinto AD, et al. Cancer screening rates among transgender individuals. *Ann Fam Med*. 2019;17(4):302–8.
12. Kalavacherla SR, Shaw L, Whitaker J, et al. Prostate cancer screening disparities in transgender women. *JAMA Oncol*. 2024;10(2):189–97.
13. Chan TK, Bessell K, Jordan T. Gaps in preventive screening for transgender individuals. *BMJ*. 2024;384:g1032.
14. Tabaac AR, Sutter ME, Wall CSJ. Gender identity disparities in cancer screening and diagnosis. *Cancer Causes Control*. 2018;29(4-5):349–56.
15. Jackson A, O'Leary C, Chen C. Outcomes of cancer diagnosis and care in trans populations: a systematic review. *Lancet Oncol*. 2021;22(8):e326–38.
16. Coleman E, Radix AE, Bouman WP, et al. Standards of Care for the Health of Transgender and Gender Diverse People, Version 8. *Int J Transgend Health*. 2022;23(S1):S1–S259.
17. Reason P, Bradbury H, editors. *The SAGE Handbook of Action Research: Participative Inquiry and Practice*. 2nd ed. Sage; 2008.
18. Teram E, Schachter CL, Stalker CA. The case for integrating grounded theory and participatory action research. *Qual Health Res*. 2005;15(10):1392–410.
19. Danley K, Ellison ML. A handbook for participatory action researchers. *Center for Psychiatric Rehabilitation, Boston University*; 1999.

20. Bergold J, Thomas S. Participatory research methods: A methodological approach in motion. *Forum Qual Soc Res*. 2012;13(1):30.

21. Hughes M, Duffy C. Public involvement in research: real or imagined. *J Mental Health Train Educ Pract*. 2018;13(1):31–8.

22. Fenge L-A. Empowering research through creative methods: Participatory arts with marginalised communities. *Qual Res J*. 2021;21(2):134–48.

Appendix 1: Table of participant contributions

These are tables of the participant contributions: their code number (for referring to specific squares), a description of the square looks and a transcription of any further details they gave. For the visual descriptions, apparent spelling errors have been left as is.

As mentioned in the report anlysis, these categories were based on the emotional content of the squares and forms. They were not named by the participants themselves and so this is based only on the researchers' impressions.

There are 5 categories:

- Positive (code Ps): Contributions that carry no negative message
- Neutral (code Nu): Contributions with no negative nor positive messages
- Negative (code Ng): Contributions that have negative messages
- Extra negative (code No): Contributions mentioning death, hopelessness, et cetera
- Mixed (code Mx): Contributions with a mix of negative and positive messages

1. Positive

Code	Visual description	Participant form
Ps01	"BE AN ALLY" in big letters with a prominent shining red heart on a white square. It is decorated with swirly buttons, hearts and stars, plus some ribbon.	**Title:** Be an ally **Description:** Words Be an ally Heart – top right Hearts across the bottom **Story:** We are allies. And then some.
Ps02	Three green frogs with a trans pride umbrella and some trans and gay pride decorations, on a white square.	**Title:** **Description:** **Story:**
Ps03	An upside-down V-shape of colour with black on the outside: the colours start at red before going through the rainbow to purple, then finish with blue, pink, and white (trans pride colours) around the centre. On a white square.	**Title:** Listen to me **Description:** All voices coming together to be heard and be light in the dark for those who have felt unseen and unheard. **Story:** As an ally and an occupational therapist working with young people in SEMH, having all voices heard, taken seriously and identities at the core of services <3
Ps04	"Allies are groovy!" in colourful text with stars on a white square.	**Title:** Groovy! **Description:** Funky writing in square "Allies are groovy!" **Story:** Supporting my partner and my best pal!
Ps05	A green frog with a small trans pride flag on a white square.	**Title:** Felicity the frog **Description:** A frog **Story:** Trans people shouldn't have to fight for their right to be healthy.

Ps06	A trans pride flag with text on a pink square, decorated with stickers, buttons, and ribbons. The text reads: "We are just people who want to be loved + RESPECTED"	**Title:** Loud + Proud **Description:** It is to get the word out and give us a voice. Explaining we are all human + should be equal! **Story:** We are just people
Ps07	A green and black heart on a blue square with several sections of text. The text above the heart (on a floral card) reads: "Bart's Hospital. London, Thank you" The text on the black section of the heart reads: "Mammograms are super SCARY and dysphoria inducing..." The text below that reads: "but you make it SO MUCH EASIER when you RESPECT MY PRONOUNS"	**Title:** Respect my pronouns **Description:** A blue square with a turquoise felt heart in the centre. There is a small card saying 'Bart's Hospital London, thank you'. Image of mammogram below and text. **Story:** I found a lump in my chest (not a fan of the B-word!) and was referred to Bart's Hospital screening service by my GP. I was very nervous and dysphoric and as I still hadn't had a first appointment at the GIC after four year's wait there was a part of me hoping it would be cancer (a very small and non-metastatic one!) so I could get top surgery sooner. Everyone at the clinic was very friendly and respected my pronouns, which made all the difference. I got the all clear and a couple of months later I finally got my pre-surgery letter from Nuffield Hospital in Brighton. I was very happy to get my discharge letter from Bart's referring to me as a 'pleasant gentleman' and gendering me correctly. All in all it was a very positive experience at a very stressful time and I'm incredibly grateful to the team at Bart's and to whoever trained them to be trans affirming.
Ps08	Some stick figures walking up stairs that go from black to colour, with a heart in the highest steps. There is text in the background that goes from negative phrases (e.g. weird, stop, no) to positive ones (kindness, amazing, friends). On a blue square.	**Title:** Rejecting the negativity – growth **Description:** Person walking up the stairs, from dark to light, negative comments to more positivity **Story:** I grew up hearing lots of negative opinions + language around people being trans. I grew up to do my own research and become friends with the most AMAZING trans+ people + reject those opinions.
Ps09	"LONG LIVE TRANS PEOPLE" written on a blue square with a "Trans Rebellion" lighter sticker.	**Title:** LONG LIVE TRANS PEOPLE **Description:** LONG LIVE TRANS PEOPLE!!! **Story:**
Ps10	"TRANS ALLY" with trans pride decorations (e.g. stickers, flower shapes, ribbons) on a blue square.	**Title:** Trans ally **Description:** Planet with ribbon. Love is love. **Story:** None. Just married to my trans husband.

Ps11	A big eye in a mouth with "I Love u!" written around it, decorated with swirls, flowers, and more. On a pink square.	**Title:** I love u **Description:** Eye in mouth I Love u! **Story:** I feel a lot of eyes can be on trans people and I can imagine they can be put under lots of pressure so I feel it's important to say I love u to everyone! :)
Ps12	A big red felt heart on a blue square with trans pride stickers and text reading: "Allies Aligned at Heart"	**Title:** "Trans Hearts Matter" **Description:** Square to illustrate that allies want to be aligned + it is an emotional connection at the heart of trans aware cancer care. **Story:**
Ps13	3 trans pride flag stickers on a blue square.	**Title:** **Description:** **Story:**
Ps14	A red-haired person in a "Trans Rights!" top with a trans pride flag. Text above them reads "Trans Rights are Human Righs" and there is a cat face sticker in trans pride colours. On a pink square.	**Title:** **Description:** **Story:**
Ps15	A yellow post-it that reads: God and Love is for <u>Everyone!</u> On a white square.	**Title:** **Description:** **Story:**
Ps16	Colourful text decorated with trans pride stickers and on a white square. The text reads: Together we can Transform healthcare	**Title:** **Description:** **Story:**
Ps17	Two people standing next to each other underneath a cat holding a trans pride flag. Text underneath them reads: T4T wins [heart] I [heart] my enby gf It is decorated with stickers and on a white square.	**Title:** **Description:** **Story:**
Ps18	A trans pride flag sticker continued to make a betta fish by some plants. On a white square.	**Title:** **Description:** **Story:**
Ps19	A clock face on a blue square surrounded by text and decorated with woven ribbons.	**Title:** Time matters **Description:** Clock with weaving surround

	The text reads (starting from 11, with brackets to show emphasis): [weave time] creatively making [more time] for understanding [extra time] for safety [make time] matter and work.	**Story:** Being part of this workshop today and using time creatively and considerately meant that participants felt safe. For some, safer than before they arrived.
Ps20	A person made of felt and string on a pink square. Decorated with notes and hearts and with text that reads: CHRISIE EDKINS BE TRUE TO YOURSELF	**Title:** Be nice to yourself **Description:** Picture of Chrisie **Story:** In memory of Chrisie for being an inspiration and advocate for the trans community. I have donated the original of this square to the Museum of Transology.
Ps21	A rectangle of colourful lines on a pink square, decorated with trans ally flags and a "PRIDE NF" sticker.	**Title:** In the light **Description:** Emerging from the dark and coming into the light. Light = freedom, information and respect **Story:** Taking space in the world, we can respect what is needed when we hear how best to do this. TACC can show us the way...
Ps22	A person in a black dress with long yellow hair, playing with ribbons on pink square.	**Title:** Jo's Joy **Description:** A young trans girl playing with a ribbon streamer after her first pride. From a photo taken by me, a very proud 'auntie' **Story:** My hope that Jo will be listened to when accessing services, and her joy will not be diminished.
Ps23	A black square with colourful shapes coming out from under it. An "unapologetically ME" sticker surrounded by buttons. On a white square.	**Title:** **Description:** **Story:**
Ps24	Colourful text decorated with three foam shapes on a pink square. The text spread about reads: Sharing Stories / listening / Being Seen / Thought About / Support. / love / Caring / Being heard / Being Understood / Given the Chance	**Title:** An ally **Description:** Phrases and words that are a result of being an ally. How supporting transgender individuals makes individuals feel. **Story:** Doing university research about transgender experiences. I've been extremely lucky to chat with individuals and hear their stories. I hope to be able to share these stories to aid understanding and support for all trans+ individuals.
Ps25	Large quote on a blue square. It reads: "VALIDATION OF YOUR NHS GENDER JOURNEY IS KEY TO	**Title:** Validation is strength **Description:** A quote from my doctor during my diagnosis of depression. This made me feel valid

	YOUR RECOVERY AND A SOURCE OF STRENGTH!"	and that I was working with someone who understood my experiences and needs. **Story:** Recently i was diagnosed with depression and prescribed a course of medication. When I informed my G.P. (registered at Shirley health Partnership) that I was genderfluid, they were very supportive and respectful. They even asked how well I felt supported by my wide with my transition. They offered extra support and suggested that I use that positive relationship to validate my experience further to improve my mental health. Very kind and positive.
Ps26	A circle with "BRAIN" in on a pink square. There are little hearts above it, some rainbow lines below it, and speech bubbles that read: "They Them" and "we support you" The corner reads: I am LOVED!	**Title:** "You are loved" **Description:** **Story:** Coming out at university and experiencing the outpour of love and support allowed me to access more support around my mental health
Ps27	A big heart in trans pride colours decorated with stickers on a white square. Text below it reads: I [heart] Trans Who doesn't?!	**Title:** I <3 trans **Description:** Coloured drawing on fabric **Story:**
Ps28	A bisexual pride flag above the words: LOVE PRIDE DAY It is decorated with owls and elephants and on a pink square.	**Title:** **Description:** **Story:**
Ps29	Plushie sharks "swimming" through the colours of a trans pride flag	**Title:** All hail mighty Blåhaj! **Description:** Some IKEA shark plushies swimming across a trans flag **Story:** There are several explanations for why the IKEA shark plushie Blåhaj (often just called "Blahaj") has become a mascot of the trans+ community, but whatever the truth of the origins may be, the shark brings comfort to many trans+ people. Several trans-flag-coloured shark plushies were handed out at the Pride workshops to those whose days were improved by them.
Ps30	One of the TACC chat images: a square speech bubble on a pink square. It depicts one figure saying "I think I might be trans..." and another replying with "Here's a trans support group to help you figure it out!"	When she brought up thinking that she might be trans, her GP pointed her towards Beyond Reflections (a local trans+ support group) to help her process those feelings.

Ps31	Rainbow text and a line on a white square. The text reads: Chiropractors love all backs (and everybody!!) The first "o" of "chiropractors" is a heart that a big, wavy, rainbow line comes down from.	**Title:** CHIROPRACTORS LOVE EVERYONE **Description:** Stylised "spine" **Story:** As chiropractors we strongly believe that everyone should feel comfortable and welcome within our clinics so they are able to get the care they need in the musculoskeletal sector.

1. Neutral

Code	Visual description	Participant form
Nu01	Four hearts inside the text on a white square. The text reads: Trans rights in epilepsy	**Title:** Epilepsy **Description:** Yes. **Story:** I got diagnosed epileptic 2 weeks after coming out.
Nu02	A plain white square.	**Title:** Blank **Description:** Blank **Story:** Blank due to my anxieties of interacting with other people.
Nu03	Several patches of felt sewn onto a white square. Three of them have buttonholes (two with buttons in), and some have beads. There is one button by itself and some beads are behind a line.	**Title:** Buttonholed **Description:** Buttons and buttonholes **Story:** HCP. Personalised care is the way forward. One size or type of care <u>does not</u> fit all. We need to know more to respect individual wishes and give care to meet needs and wishes.
Nu04	The text "THERE ARE MANY PARTS OF ME" and then numerous buttons paired with text on a white square. The text reads: RESILIENT / AUTISTIC / MUMMY / CREATIVE / HAPPY / QUEER / KIND / TRAUMA / COURAGE / ADVOCATE / WRITER / WIFE / FRIEND / SURVIVOR. / TRANS+	**Title:** You need to see all of me **Description:** **Story:** I come to the doctors as many things, not just as a person who needs help, but as a friend, mother, as a queer Autistic writer and creative, as a survivor of complex and consistent trauma. I wish I didn't have to be so courageous, brave and resilient all the time. I wish going to the doctors felt as good as going for coffee with a friend.
Nu05	Text on a white square that reads: IF WE CAN SUPPORT THEM Why can't you!	**Title:** **Description:** **Story:**
Nu06	Text on a pink square that reads:	**Title:** The fight for rights

	From the perspective of an ally and friend of trans people, the inequality within the system is disgusting and inappropriate. Help the fight for their rights.	**Description:** Written on square **Story:**
Nu07	One of the TACC chat images: a square speech bubble on a pink square. It depicts two figures: one holding a red cross away from the other, who is speaking about two figures holding the cross together.	**Title:** In partnership **Description:** I want to work in partnership with you and all health care providers; I don't want to be unwell; I want to get better **Story:** Health inequality happens because of outside social prejudices, limitations, pressures and expectations – compounded by negative experiences with NHS but it is not NHS' 'fault'. It is difficult for frontline practitioners who are dealing with trans patients for the first time as there is an immense responsibility (and at all levels of healthcare), but we need to help the clinicians relax and be human centred.
Nu08	One of the TACC chat images: a square speech bubble on a blue square. It depicts a figure of a person, a greater-than symbol, and a book.	**Title:** Treat the person not the condition **Description:** I want to say...I know my body better than you know the book about my body. **Story:** GPs do not know your history like family GPs used to, it's problematic as I present as outside the norm and it creates a problem. I want what is best for me right now. My medical record only has F for gender, nothing says previously M (should this be the case?) – We need to be open, or we may not be given the best treatment. I don't want to be treated as female where I need to be treated as male, but if you meet me outside of medical setting, treat me only as female.

1. Negative

Code	Visual description	Participant form
Ng01	3 characters on a white square: a woman with orange hair, black lipstick and a choker. To her left, a brown unicorn with a mane in trans flag colours. To the right/above the woman, an IKEA shark in trans flag colours. The woman has a speech bubble that reads: "I am lost in my doubts and feeling, I am about to pair close. ha they accept... me... I want to just feel myself and be treated as anyone else. I am just asking for understanding and to be able to stand in my shoes"	**Title:** **Description:** Stress before the session. Docs and questions and met only before sessions but when meeting with new people how they will react. **Story:** Never been and using these services. I am on the beginning of my journey. I would like to be prepared and see how I can process if this happens to me.

		I am lost in my doubts and feelings. I am about to panic. How they accept me…I want just to feel myself and be treated as anyone else. I am just asking for understanding and to be able to stand in my shoes.
Ng02	A poem written over a picture of a rainbow going behind mountains next to a river. The poem is "Wonder Woman" by Ada Limon.	**Title:** Wonder Woman **Description:** This is a poem I liked, with a background of mountains with a rainbow. The poem is Wonder woman by Ada Limon, which describes a cis woman's experiences of healthcare for her chronic pain, but I see a lot of gender feelings in it. **Story:** This isn't a poem that says, 'everything is going to be okay', but reminds us that we will challenge everything they know. As a trans woman, I have to do everything myself, (with the help of every community and loved charities). I dressed up as a girl as a little kid just like the made woman in the poem. I wonder if I ever made anyone feel the way the poet did when dressed up. I'm sure I did.
Ng03	A yellow post-it note on a blue square. The note reads: Dear Project I have always been hesitant to enquire in mainstream NHS GP services..... What were the chances of contracting some kind of throat or tongue cancer!!! Because a) of oral sex + b) one of my lesbian friend had cancer of the tongue. I've never plucked up the courage to ask + so from 18-65 – I could have but avoided asking. [name] xxx	**Title:** **Description:** **Story:**
Ng04	A selection of hanging trans+ pride flags plus the disabled pride flag, the neurodiverse pride symbol and the autistic pride symbol (all labelled) on a white square. The section under them has text that reads: Trans People Deserve HEALTHCARE!!! Speak out! we hear you [smily face] Disabled Trans people Exist! Autistic Trans people Exist!	**Title:** Disabled Trans Healthcare Unity **Description:** Seeing many different trans flags and nonbinary flags, because we are such a big spectrum. Expressing the family you make and community love you share. **Story:** I worry about not being supported within the healthcare system. I often hide my enby self to get the medical care I deserve. I want the disabled community to

	ADHD Trans people exist!	know Fuck off ableists and transphobes. We aren't going anywhere.
Ng05	Text on a blue square that reads: NHS WAITING LIST ARE FAR TOO LONG. BUT THE WAIT FOR TRANSGENDER PAITANCE IS JUST CRUEL AND SHOULD NOT BE ALLOWED.	**Title:** Waiting **Description:** Statement of a long wait **Story:** Five years of waiting just to be seen and denied services of any kind until you are seen should be made criminal.
Ng06	Text on blue square decorated with foam shapes at two corners. The text reads: 7 YEARS of waiting and I still haven't had my first GIC appointment	**Title:** 7 years **Description:** Blue square w/ stickers Text that says "7 years of waiting and I still haven't had my first GIC appointment" **Story:** I was referred to Tavistock when I was 11. I still haven't had my first appointment + get letters from the GIC w/ my deadname.
Ng07	Blue and red text on a blue square. The text reads: My notes tell you my name & My Gender. DON'T add MISS to my name I AM HE/HIM	**Title:** Read my notes **Description:** Don't misgender me because you didn't even read my notes. **Story:** Misgendered Misnamed Tactless Non-sensitive. Doctors have been dicks. Nurses are brilliant.
Ng08	A picture of a unicorn on white paper attached to a white square, decorated with ribbon. The unicorn is deer-like is watching water run into a black puddle. Text above reads: I worry about what's left to save...	**Title:** I worry **Description:** A deer-like unicorn looking at a tiny stream flowing into a tarry puddle. Text above reads, "I worry about what's left to save..." **Story:** I'm concerned about the state of the NHS and know what it's like to wait for confirmation of your cancer's stage.
Ng09	A felt depiction of the Earth wearing headphones while a small figure shouts from besides it. On a white square. The figure is shouting: TRANS LIVES MATTER!!! PRONOUNS MATTER!!! EQUAL ACCESS FOR TRANS PEOPLE!!!	**Title:** Is anyone listening? **Description:** - **Story:** Sometimes as an ally, it feels as though it doesn't matter how much work you do to try to improve the world for trans+ people nothing changes. Like no one is listening. I want to live in a world where all people are able to live authentically as themselves and try to do all I can to help make that a reality. But is anyone listening?

Ng10	Branching chains of colourful paperclips safety-pinned to a blue square. Text along the paths reads: WTAF!? / SHARE EVERYTHING AGAIN / ROUND IN A CIRCLE / ARE WE GETTING THERE? / HERE WE GO / NOT SURE WHAT HAPPENED HERE... Text at the end of the paths reads: NOT HERE / TRY AGAIN / EH? / NO. / NOPE! / END?	**Title:** The ellipsis of care **Description:** Rainbow paperclips used as chains to show the complexity of getting anywhere in healthcare. Passed from one professional to the next. **Story:** Mine was a reflection on chronic illness healthcare – being pushed from person to person and no one wants to take responsibility for my care or diagnosis.
Ng11	A pink skirt made of felt attached to a blue square with several notes on white paper around/under it, some of which hide the notes. 2 trans pride stickers are used as decoration. The top note reads: I want to be respected and taken seriously for who I am. Understand doing something to a part of my body I don't relate to makes a smear even more uncomfortable than it already is. The left note reads: on GP's smear top tips Don't tell me to [skirt] a skirt The right note reads: Suggest something comfortable would be more helpful The fourth note is covered by the skirt.	**Title:** Wear a skirt **Description:** A felt skirt attached to the square, with writing surrounding it: “I want to be respected and taken seriously for who I am. Understand doing something to a part of my body I don’t relate to makes a smear even more uncomfortable than it already is.”, “Helpful: Suggest something comfortable, would be more helpful”, “Not helpful: on GP’s smear top tips: Don’t tell me to wear a skirt.”, and “Don’t deadname me mid-smear. I am vulnerable. You have all the power.” **Story:**
Ng12	A felt brick wall across a blue square. It has staples as barbed wire, and on one side there are felt shapes, a TACC sticker, and a felt sign saying: Every Contact Counts Together we can make a difference On the other side of the wall, there is a pile of bricks (by a "Build it up" note) and a pickaxe (by a "Break it down" note), with text in the middle that reads: We each have a choice	**Title:** Barriers **Description:** Wall with wire More bricks / pick axe 1. choice: build it up or knock it down **Story:** As an ally I am ashamed to be part of a system (I am thinking socialised government, which influences healthcare) that seems to want to retain/build barriers for trans people
Ng13	Several crossing lines of stitching with text on a white square. The first section reads: If you miss us you risk us The text at the bottom reads: Trans+ people get cancer too	**Title:** If you miss us you risk us **Description:** White fabric square with blue, pink, white, grey, and black short downward stitches. With black writing at top "If you miss us, you risk us" and at bottom in purple writing "Trans+ people get cancer too" **Story:** Prefer not to share.
Ng14	Text on a blue square with some illustrations.	**Title:** Supporting my daughter

	The top reads: As a parent you feel helpless and disimpowered by the disjointed and under resourced system There is a picture of figures in a house saying "Help us!" and a barbed wire barrier ("Access denied") between them and the "Help here" side, which has papers (documents and/or checklists). The last section reads: Media stories are so harmful and everyday new spin on hate = Not welcome here	**Description:** Supporting and loving my trans daughter is a lovely journey. As a family we try to create a safe home but feel the disjointed services and extreme long wait (years!) for help **Story:** Rather hopeless and makes you feel that your daughter's life is not important to the world and that is extremely distressing as a parent to see.
Ng15	A picture of a roulette wheel on a pink square. The six sections of the wheel have faces with different expressions (e.g. grinning, crying, angry)	**Title:** GP lottery **Description:** Roulette wheel of outcomes from approaching GP for trans healthcare. **Story:** Accessing healthcare feels like a lottery. There's no consistency from one GP to the next.
Ng16	A picture of two people sitting opposite each other on a white square. The person with their back to us has a blue aura surrounding them, while the person we can see is looking to the side with their arms crossed	**Title:** isolation **Description:** Doctor sat in chair opposite boy **Story:** Talking to doctors feels isolating as a trans person because all they hear is the high voice, all they see is the binder. It's hard to discuss health outside of being transgender, because health issues are always blamed on being queer.
Ng17	Two stick figures on a pink square. One figure has a speech bubble full of lines while the other, wearing a nurse's hat, is smiling and covering their ears. Text underneath reads: NOBODY WANTS TO LISTEN!	**Title:** Nobody wants to listen **Description:** I deal with chronic pain and whenever I go to seek medical help I get brushed off and told it's just part of being a woman and my pain is dismissed because of this. As well as using the wrong pronouns – things need to be better for trans and disabled people **Story:**
Ng18	A picture of a snake eating its tail on a pink square.	**Title:** No title **Description:** A snake eating itself as a metaphor for dealing with my mental health **Story:** I deal with PTSD as well as some undiagnosed disorder and trying to deal with mental health professionals always loops back around and no progress is

		made. They are also terrible for misgendering and deadnaming.
Ng19	A yellow post-it note on a blue square. The note reads: I Don't trust NHS System allows ignorant managers to pass off trans people as lifestyle choices	**Title:** Bleeding obvious **Description:** Showing people that NHS services for transgender people are poor, not caring and hurtful. **Story:**
Ng20	A question mark on a pink square.	**Title:** Confusion **Description:** A question mark representing my confusion about why some life threatening conditions are taken seriously while others ....aren't. **Story:** When I came to my GP with a mysterious lump, I was still in the middle of fighting then for a referral to the gender service. Unlike that, which took over a year, unlike with that, they practically leapt into action – I had an in-person appointment within a few days, and my first specialist appointment within a month. It's now been almost 2 years since that day – the tumours are benign (but weird). And while they may cause me issues down the line, it'll be decades before that happens. I'm still on the waiting lit for the GIC – apparently the NHS only moves fast when it wants to.
Ng21	Text on a pink square. The central text reads "Trans Women need to know..." and text around reads: ● they need to have regular mamagrams ● Bone Health implications? ● To get their Triple A test ● They can still get prostate cancer	**Title:** Trans women need to know **Description:** Trans women need to know **Story:** From my peers I know that many trans women do not access the healthcare they need to keep them well in later life.
Ng22	Some figures at a table next to the Nando's icon on a pink square. One of the figures is smiling, the other is sad. There is a picture of a phone next to a note that reads: I was having lunch at Nando's with my friend, when the GP called to let me know I have to choose between my identity and healthcare. There is a picture of some chips in a basket, and below that a folded-up note. Unfolded it reads: - You can't change your title with us yet - Why?	**Title:** **Description:** **Story:**

	- Oh, because of the cancer screenings for women, of course - Oh - Is that alright? I look at my friend, at the other tables No, I think - Yeah, sure! I say	
Ng23	One of the TACC chat images: a square speech bubble on a pink square. It depicts a figure with an exclamation point above their head, looking at their phone. The phone's speech bubble reads: Hope this talk helped your mental health. (BTW, we outed you to your GP)	After taking part in an online talk session for her mental health, she saw the letter sent to her GP and realised it outed her as trans! (She had given general consent at the start, but that hadn't been on her mind during the session and so she hadn't realised at the time.) Her GP never brought it up and it's unclear why.
Ng24	One of the TACC chat images: a square speech bubble on a blue square. It depicts two figures holding hands, an adult and a child. The child is asking (in a speech bubble with non-binary pride colours): Why does the GP get my pronouns wrong?	A non-binary child asking why the doctor kept misgendering them. Their parent (also non-binary) didn't see it as malicious: they thought it was due to how rarely you see the same GP often enough to build up a connection.
Ng25	One of the TACC chat images: a square speech bubble on a white square. It depicts a figure surrounded by orbs, all of which have outlines. All of the outlines are pale blue, apart from that of one orb and the figure, which are red. The text underneath reads: One misgender can negate a hundred affirmations	**Title:** One misgender can negate a hundred affirmations **Description:** One misgender can negate a hundred affirmations **Story:** The fact you don’t understand is no reflection on me. I know people considering detransition because of abuse received. It comes from the top and should be role modelled for people to have compassion for all patients and clients. It needs to begin with CEOs and Practice Managers and GPs. “We don’t need to know” was the GP’s response to my offer of talking/offering training about trans issues in healthcare, and ‘I’m too old to change now’ – was a response from a surgeon when challenged to consider the trans perspective.
Ng26	A depiction of the famous photo of Marilyn Monroe's over the subway grating on a blue background (and a blue square). Monroe's dress has been coloured blue and she's been given white boots. She is partially obscuring text.	**Title:** Don't tell me to wear a skirt **Description:** Marilyn Monroe saying not to wear a skirt

	The text reads: DON'T TELL ME TO WEAR A FU[Monroe]NG SKIRT	**Story:** When looking at what is best to do before a smear test they suggest to wear a skirt or a long jumper and as someone that and as a person who isn't comfortable in a skirt I was lost as to what would be best to wear and I was happy taking off.

1. Extra negative

Code	Visual description	Participant form
No01	Colourful text on a pink square. There is an upright smily face and a text bubble that reads: What gender where you born as?! The main text reads: I avoid the doctors: WHY ● They always ask for the gender I was born as ● I have to tell them I'm on testostrone ● Because I go private my GP refuse to give me a blood test for my testostrone levels and for a full health work up ● I dred for when I have to go for my breast cancer cheak as I won't belong there and fear I will be judged. Underneath is "Trans and proud!!" with two hearts.	**Title:** I avoid the doctors **Description:** My art is about why I don't like going to the doctors and how I struggle to get blood tests because I go private. **Story:** I don't have any personal experience with cancer.
No02	A picture of a torso above text on a white square. The torso has top surgery scars and a red button heart, and the text reads: "Well, there's a waiting list."	**Title:** “I wish GICs didn’t exist” **Description:** A self portrait of a fat trans man’s chest following a double mastectomy with the following text below it: “Well, there’s a waiting list.” **Story:** During an appointment with a GIC psychologist, prescribing me HRT, I asked to be on the waitlist for top surgery. He told me I would need to be on T for 6 months but that our next appointment would be in 18 months’ time. When I began to cry and asked why, he began to explain what a waitlist was, with no emotion or compassion in his tone.
No03	Text on a pink square decorated with trans pride stickers and hearts. The text reads: TRANS HEALTHCARE IS A RIGHT	**Title:** Healthcare **Description:** Trans rights are human rights Trans healthcare is healthcare **Story:** Going to the Drs is always a hassle. I constantly get misgendered and was regularly deadnamed. In a referral to

		the GIC, the notes stated word for word, “She thinks she is a man”. I don’t think. I know.
No04	Text in trans pride colours around an image on a white square. The image has a trans pride planet sticker and two stick figures skating over top surgery scars that are dripping with trans pride colours. The text reads: TRANS HEALTH CARE SAVES LIVES	**Title:** Trans proud skaters **Description:** Top surgery scars bleeding the trans colours with skaters using scars as ramps. It says “trans healthcare saves lives” **Story:** My nan died of cancer not too long ago and she was the only person in my family that listened and accepted me for who I am.
No05	A brain-like shape made from letters inside a circle on a pink square. The letters are squished together but can read: ALONE HELP!	**Title:** Mental health **Description:** The picture is a brain with Alone & help spelled out on it trapped in a bubble. **Story:** I’ve not needed access to cancer support. But for me healthcare started with mental health care and bad experiences with it leads me to mistrust and fear accessing healthcare, meaning I feel isolated and struggle to help to live better.
No06	Text on a pale pink square. The text reads: LGBTQ+ (+trans especially) RIGHTS Should be Human rights WITHOUT Question	**Title:** Rights should be normalised for us **Description:** Pastel coloured fabric with the words LGBTQ rights should be human rights **Story:** I had a cancer/stroke scare when I was younger and was made fun of how I felt about this, i.e. ‘deluded’
No07	Text on a pale pink square with a picture of an ear. The text reads: Really Listening [picture of an ear] to what is being said. When people don't listen to me they miss things. Don't pass me off.	**Title:** Listening ear **Description:** N/A **Story:** On out. My friend died of cancer because they were passed off.
No08	Colourful text on a blue square. There is a speech bubble ("Your not a boy it's just a phase!) and several sections of text. The text reads: AVOID Public BATHROOMS: ● Get called a girl saying I don't belong here ● "Just because your on testosterone doesn't make you a man" ● "you should be dead"	**Title:** Avoid public bathrooms / doctors **Description:** Why I am uncomfortable in public bathrooms and doctors. **Story:**

	WHY because I'm trans I have to wait for a stall to be free. WHY I Avoid doctors: Call me by my dead name they use she/her pronouns even after I have said. People always say it's just a phase. "you'll out grow up"	
No09	Felt images and speech bubbles on a blue square. The top image has a smiling face with a pink speech bubble ("!") that is surrounded by black scribbles. There is a white rectangle with a line attaching it to what could be an arm. There is a knife by a skin-coloured rectangle with a line on it. There are two partially unfolded pink paper clips that have been crossed out with red felt. The speech bubble at the bottom reads: IM JUST SO TIRED	**Title:** I'm just so tired **Description:** Collage using mixed materials depicting the effects of my cancer treatment **Story:** I feel that I have been treated as female and have been too overwhelmed and tired to argue with professionals quite often.
No10	Text on a blue square decorated with a trans pride star and some felt hearts. The text is in varying fonts in trans pride colours and reads: MEDiCAL SPACES especially for mental health first aid MAKE ME FEEL judged, unsafe and ashamed, and too AFRAID TO BE MYSELF	**Title:** Mental Health First Aid **Description:** Blue fabric square with drawn lettering ‘Medical spaces make me afraid to be myself’ and stickers **Story:** I’ve had a lot of hospital admissions for self-harm and suicide attempts and never once has it even felt like an option to share my identity and gender preferences.
No11	A picture of a letter and text on a blue square. The letter has "MR" on the envelope and "Miss" and "Her" on the letter. The text reads: DON'T GET MY HOPES UP! Your letters <u>HURT</u>	**Title:** Choices **Description:** Envelope with Mr. Letters with Her/Miss. **Story:** Letters are addressed with my right name & pronouns, but letters will always misgender me & sound insensitive. Don't put the right things on the envelope, but the wrong things in the letter.
No12	A spiral with text on a white square. The spiral is sewn on and is more chaotic in the middle of the	**Title:** I deserve care & safety

	square. The text that follows it out from the middle reads: I DESERVE CARE & SAFETY	**Description:** A connected spiral of thread representing my feelings towards screening as a trans person. **Story:** I don't have any experience, but I find the idea of screening stressful and inaccessible.
No13	A picture of a person lying down, partially obscured by felt shapes on a pink square. The head is replaced by a line of three teardrops, the chest is covered by a square, there is a star over the belly, then a line of triangles coming out from the groin. Two corners of the square are scribbled out so that the person appears to be lying on a rectangle.	**Title:** - **Description:** A pink square with a reddening, splayed figure in ink. The figure is shaded with magenta. The corners have blue squiggles in light & dark. The figure is covered by sponge shapes, teardrops for a face/shapes all down their body. **Story:** I have had multiple bad experiences of cervical screening where I have been misgendered & bullied by nurses for finding the experience traumatic. It took me 3 years to have a 'successful' screening after multiple attempts! As well, I have a bowel illness & the screening process of that is haunting me given a history of bowel cancer in my family.
No14	Text on a pink square decorated with butterflies and flowers. The text is several phrases that read: ● "But our doctors don't do that" ● You can't guarantee a 'Safe Space' ● WHERE DOES THE £ GO? ● WHAT ARE MY BOUNDARIES!? ● HORMONES CHANGE EVERYTHING ● [Next to a picture of a safety pin] QUEER HEALING ● ADMIN IS A FULL-TIME JOB. ● Radical Imagination = [ribbon made of felt] ● TRANS RIGHTS ARE HUMAN RIGHTS ARE HEALTHCARE RIGHTS	**Title:** Exhaustion **Description:** **Story:** This is a visual of some of my exhaustion before I have even entered the healthcare setting – I am chronically ill, queer and a parent and have experienced a lot of shame and prejudice from all the ways I have been treated and how I have been perceived. I carry this baggage with me everywhere and a bad day at the doctors could be the frosting on the trauma cake.
No15	Text on a blue square decorated with trans pride stickers ("LOVE IS LOVE" and a cat face). The text reads: WE SHOULD <u>NOT</u> HAVE TO FIGHT TO GET PROPER CARE	**Title:** Wake up call **Description:** Message to encourage a positive outcome. "WE SHOULD NOT HAVE TO FIGHT FOR PROPER CARE" **Story:** My mother died on my 16th bday to breast cancer. It was a mess up on the NHS in the end.

No16	A picture of a hairy torso with breasts on a pale pink square. The text around it reads: MY BODY MY CHOICE	**Title:** My body / My choice **Description:** People should be able to share their bodies in any way they want without doctors gatekeeping certain procedures from certain people **Story:** I will never get a cervical screening because my doctors are transphobic and don't respect my personage. I could get cervical cancer at any point and may never know until it's too late. This fact is more bearable to me than receiving care being treated as a woman.
No17	Text and a crying stick figure on a pink square. The stick figure is wearing a skirt and the tears are raining down towards a blue line that goes along the bottom of the square. The text is a list that reads: ● Abuse ● Deadnaming ● Misgendering ● doxxing ● The long wait ● getting disowned ● Media ● People thinking they know better than us ● not understanding	**Title:** Tears from the long wait **Description:** My bad experiences waiting for healthcare. My families' actions and reactions **Story:** On 111 I have no problems, unlike in person.
No18	A bullet-pointed list on a blue square. The bullet-points are stars. The text reads: ● A&E never has my updated medical files or name. They will turn me away + accuse me of false identity. No matter how ill I am. ● Doctors will try to remove my binder, they don't know what it is. They have no idea what to do with me. I have to do my own ECGs. ● My nhs GIC appointments are full of anger that I access hrt privately. They threaten that my clinic will be shutdown + I will have nowhere to turn. ● I am a guinea pig at my local surgery, I I am told I am the only trans patient they've ever had. I have to walk them through basic trans healthcare. ● I won't get cancer screenings, how can I trust I will receive healthcare with dignity after my experiences? ● I hope more is taught about our healthcare!	**Title:** My stories **Description:** Written summaries of my experiences **Story:** So many times, my healthcare experiences have been poor. There is confusion between my preferred name and my NHS number. When I go to A&E they tell me I don't exist, that I don't have a medical file. They tried to turn me away from urgent care once when I was having a seizure. My partner had to advocate for me and eventually they found me in an "un-named file". Another time in A&E with rib pain and recurrent chest infection (because of binding) I was accused of drug seeking – I was shaking from anxiety and being so unwell. Doctors try and remove my binding without consent. They don't understand what a binder is and how to do an ECG with one in place.

		I am 27 and have been told I can choose to have a smear but why would I, my experiences are so awful I avoid healthcare. My chest infection was nearly sepsis as I didn't seek treatment and ended up in A&E. My GP practise has never had a trans person before and never had to change anyone's details before – I feel like a guinea pig. My files have been changed but my historical medical records are now missing from my file. Because of this I get accused of covering up issues or making things up.
No19	A picture of a lower torso with text on a pale pink square. The text has a line pointing to the groin and reads: tumour. less the [blurry] no [blurry] just [blurry] I wait [blurry] prevents [blur] going secondary	**Title:** Early treatment saves lives **Description:** Early treatment saves lives **Story:** I have very early stage prostate cancer identified 3 years ago, I have had no treatment. Treatment exists Cryosurgery – but I have not been offered it – Why? Is it my age 68?
No20	Text on a pink square decorated with two trans pride stickers (star and "TRANS RIGHTS ARE HUMAN RIGHTS"). The text is in several sections and reads: ● You are valid ● Just keep swimming ● Things will get better ● You are loved, <u>always</u> ● One day we won't have to fight	**Title:** Things will get better **Description:** A trans star in the top left corner, trans rights are human rights in the bottom left and plenty of affirmations in blue pen on a pink square. **Story:** Referred to Steps 2 Wellbeing for anxiety and depression unrelated to my struggles, I mentioned in passing that I was trans so that I could ask them to call me by my chosen name but made sure to stress that it was separate to the issues I was calling about. When they called me back, they refused to see me because they are not specialised in gender related health care.
No21	A picture of a heart monitor display with text on a blue square, with a trans pride sticker. The text above the display reads: You cant tell im trans from my ECG The display has a very jagged line and [heart] 250 underneath. Below that, there are top surgery scars and a (realistic) heart with text that reads: MY HEART IS THE SAME!	**Title:** Waiting times **Description:** Drawing with ECG **Story:** I was told waiting times would be longer because I was trans and they needed someone who was "comfortable" with assessing me. I was in A&E resus with a heart condition.

1. Mixed

Code	Visual description	Participant form
Mx01	Two columns of text on a white square. The left is under a red X and reads (bold to show emphasis): "You can't have the morning-after pill unless you **prove to me** you're capable of getting pregnant." - pharmacist The right is under a green tick and reads (bold to show emphasis): "Here is some information about pelvic screening. I've checked it has gender-neutral language and I'm here to talk you through it if that helps. **Just tell me what you need.**" - Practice nurse aka legend	**Title:** **Description:** **Story:**
Mx02	Text decorated with butterflies and blue felt shapes on a pink square. The text reads: TRANS is Beautiful	**Title:** Butterflies **Description:** "Trans is beautiful" with butterflies and shapes **Story:** 2 years before I was born my auntie wasn't able to get access to trans healthcare because of the time. I want to live a life she couldn't.
Mx03	Trans pride stickers on a white square. The stickers are a whale, a cat face, and a cannabis leaf, and (also in trans pride colours) a heart has been drawn and wavy lines along the bottom.	**Title:** Gender clinic changes **Description:** Story of my experience with gender clinics. **Story:** When I was 16, I waited a year and a half for an appointment. My clinic was amazing & saved my life. 8 years later, I get no responses at all after 2 years of constant contacting. It is so sad how much gender clinics have gotten worse. I wish current trans youth had my experience. Dr Rashid is the best NHS GRC Surgeon! Couldn't recommend her more.
Mx04	A vortex of short lines around some buttons on a pink square. The corners are scribbled out black to make the image circular, and the lines in the vortex are trans pride colours plus some black. In the centre there are some buttons: a butterfly, some flowers, a circle and heart.	**Title:** Spiral **Description:** Transitioning brought joy + happiness but it's messy and contrasted with darkness and fears you never expected. **Story:** I was recently misgendered during a prostate exam making an already uncomfortable check even worse. In general, I'm always fearful

		seeing new doctors, those who are informed + supportive make a huge difference, but unfortunately most have been ignorant.
Mx05	A quote on a pale pink square underneath a trans pride flag. The first word ("Joy") is large and sewn while the rest is in pen and each line alternates between being blocky and blue or pink handwriting. The text reads: Joy is not unfettered delight driven by external circumstances; rather it is something that we create in spite of what's going on in the world around us - Imara Jones	**Title:** - **Description:** Quote by Imara Jones on 'Joy' **Story:** I have been made to feel uncomfortable at routine cancer screening by a well meaning nurse who attempted to put me at east by appealing to our shared femininity in her greeting to me. Once the assumption has been made it is so much harder to correct people especially in a vulnerable situation like that one… I have since had another experience after moving to a much more trans aware GP practice where the nurse was affirming of my gender and checked my preferred name when I entered. The second experience was a long time after the first, but knowing that I will feel safe attending my new GP will mean I do not ignore screening reminders next time.
Mx06	An image with four differing quarters on a blue square. The top left is just text and reads: If you miss us, you risk us. Trans+ people get cancer too. The top right is a yellow post-it note on a red square. The note reads: Healthcare professionals' chufty badge [arrow to button] Well done, you wear a rainbow! The bottom left is a post-it note stuck on with a butterfly sticker. There are beads, some sewing, and felt star about the note. The note reads: "I'm trying soooo hard to respect you! It's so hard for me!" The bottom right is a colourful square patterned with leaves. There are some plain scraps of paper stabled on that read: Wait, I have a GENDER?	**This square was lovingly donated to the Museum of Transology** **Katie:** My portion of the square reflects on rainbow performativity – it is not enough that staff just wear rainbows, they in themselves mean nothing. You can't just tell me you are a safe person, you have to do the work to become one, consistently. Becoming a safe person or ally is active lifelong work, it is not a chufty badge you get to parade around with whilst queer people's lives are at stake. **Zak:** My portion reflects the part of my trans journey where I realised gender was real: that other people didn't avoid conforming to gendered stereotypes because they actually liked being seen as their gender, and that I could also enjoy that if I figured out what mine was.

Appendix 2: Examples of the squares and flag

Jo's Joy (Ps22)

Community Researcher Contribution

The trans flag containing the participant artwork.

A flier for one of the workshops