

# Trans-specific Healthcare in Czechia

*Resistance to Change*

Petra Vrzackova  
Viktor Heumann



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- Hormone therapy and surgery available based on medical diagnosis
- Hormones from age of 15-16
- Surgeries from age of 18
- Sexologists and other specialists individually
- Hormones partly covered by insurance
- Surgeries (not cosmetic ones) fully covered by insurance



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# Old-school Approach

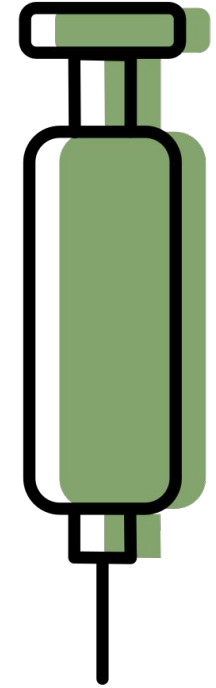
*Lack of respect and support*




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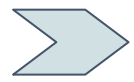
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- **Sexology** as key competence in providing trans-specific care
- Gate to legal gender recognition
- At its prime in Czechoslovakia in 1960s
- Rigid and resisting to change from 1990s in terms of depathologization

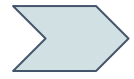


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- Body - oriented, lack of psychological and therapy support and care
  - Not affirmative, ROGD theory
  - Traumatizing
  - Gatekeeping of hormones and surgery
  - Binary and pushing to undergo surgery

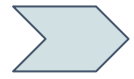




Stereotypical and standardizing, not respecting individuals



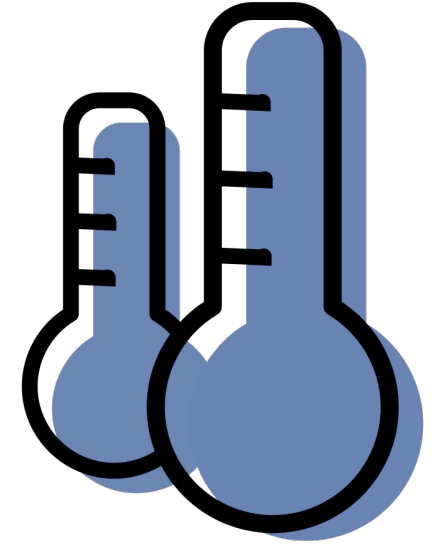
Not unified, no clear standards, very varied quality



Inhumane methods - plethysmography, bodily examinations and inappropriate inquiries



Stressful and pointless requirements - e.g. RLT before HRT, Committee, neutral name



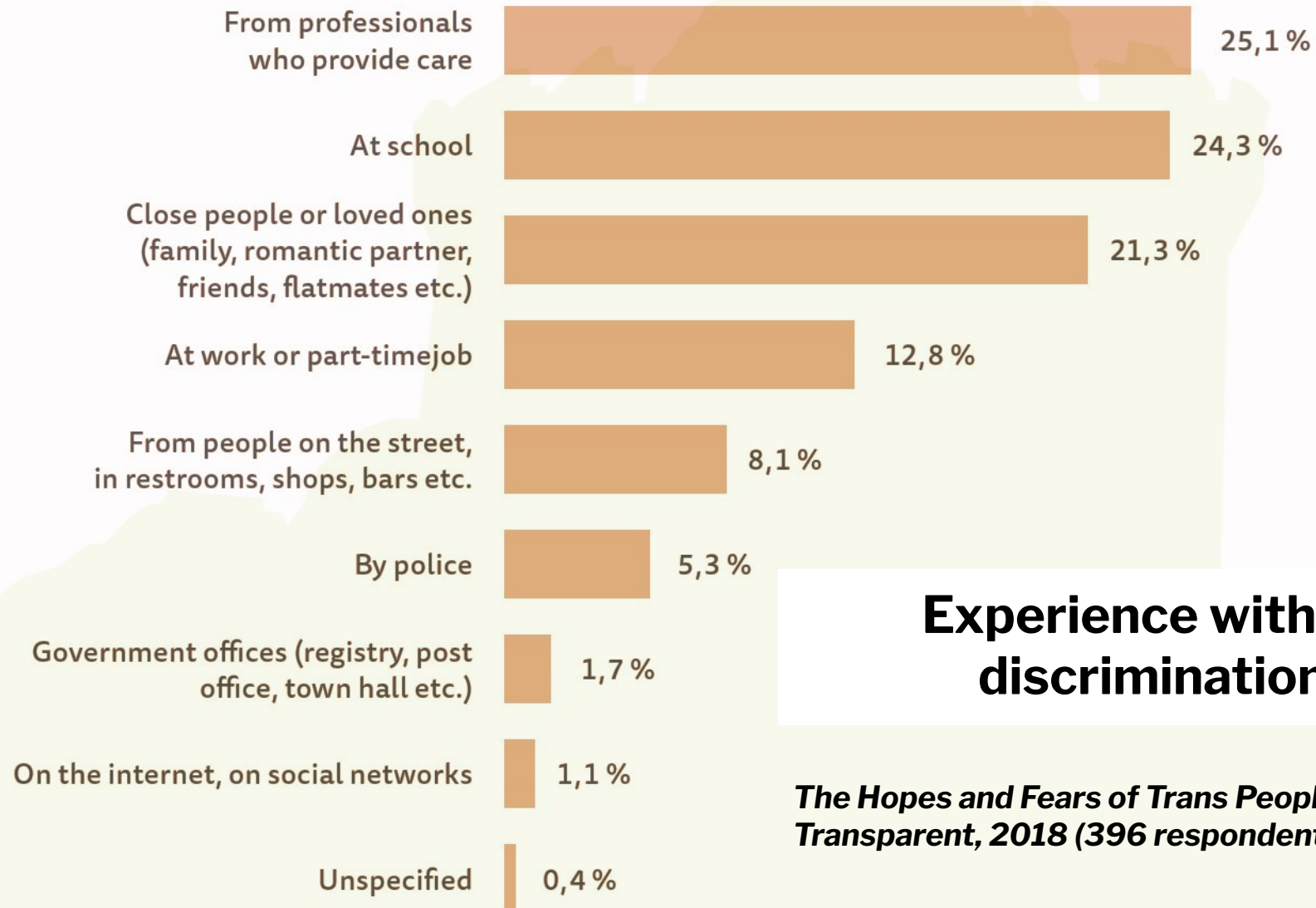
# Client Experience

*Research data 2018 & 2020*



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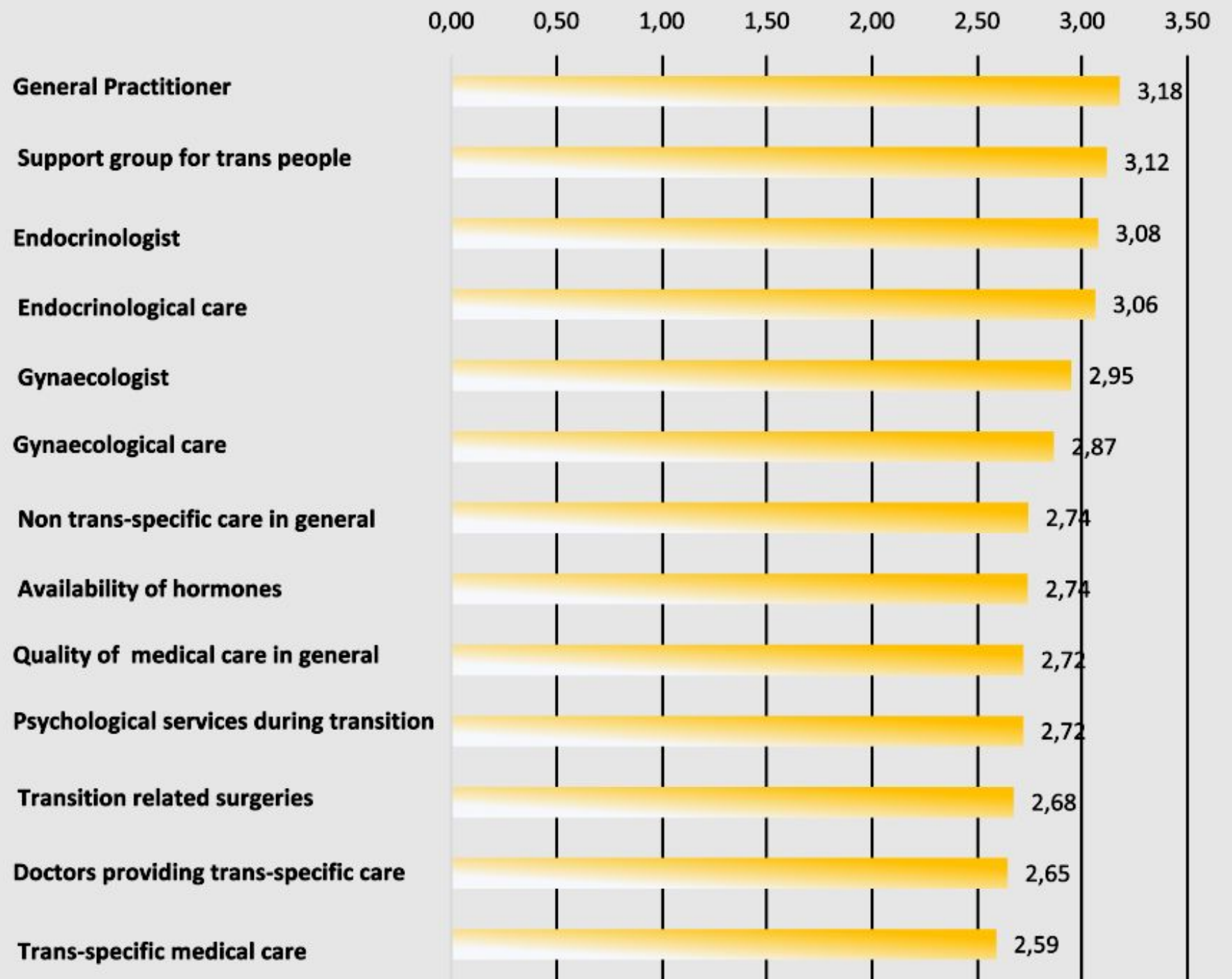


## Experience with ill-treatment, discrimination or bullying

*The Hopes and Fears of Trans People, Transparent, 2018 (396 respondents)*



# Satisfaction with Trans Specific Services



*Experience with Healthcare and Therapy Services, Transparent, 2020 (223 respondents)*

## Main reasons for changing sexologist/provider of trans-specific care

	No. of respondents	%
Unsatisfactory attitude or behaviour (disinterest, arrogant behaviour, mockery, forcing into surgery, groping, etc.)	33	66,0
Uninformed care, misinformation	7	14,0



*“She **kicked me out of the support groups because** of my attitude towards my body (**I like my body** which was a problem), she pressed me to go through surgery. When told her my own views, my wishes, she laughed at me.”*



*“I didn’t like the other sexologist because she was transphobic (she compared transitioning to **an amputation of a healthy leg and told me I would always look like a girl**, and criticized my overall appearance).”*

# Affirming Approach

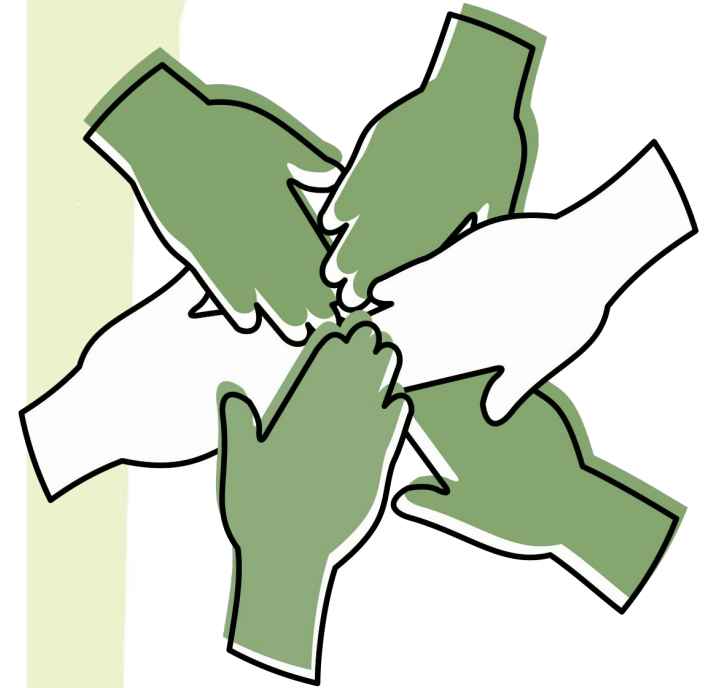
*Wellbeing and individual care*



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## Positive and respectful approach

- Easy to contact the specialist (via email, ..)
- Sensitive approach from the first session (no mandatory answers)
- Respect to the client, space for the family members and partners
- If long distance - possibility of online sessions

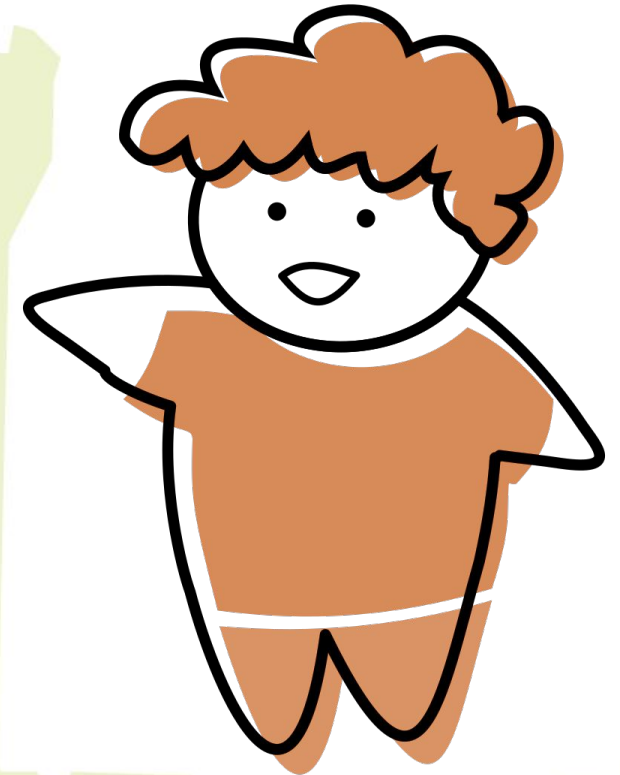


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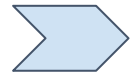
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## Tailored therapy

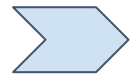
- Multidisciplinary
- Psychotherapy  
(individual/group/family/couple)
- Psychiatric, internal and  
endocrinological support if needed
- No rush on transition
- No slowing down if not necessary



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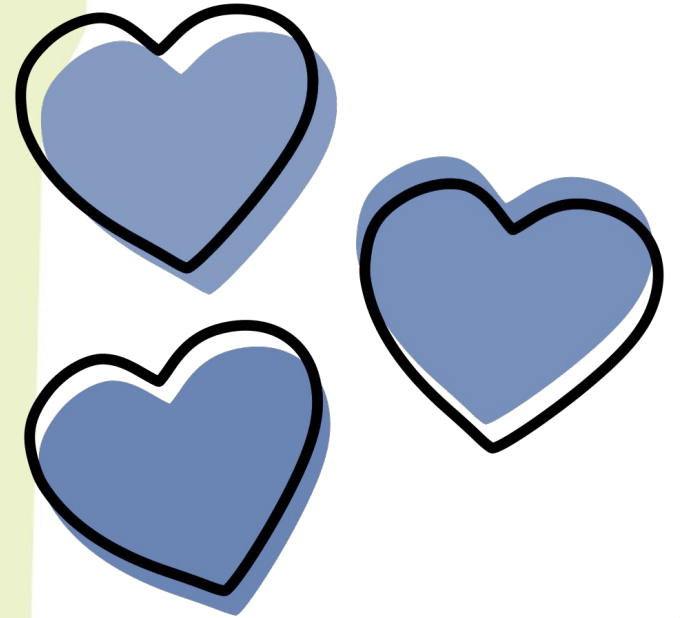
**Legal system changes** - activities in last days and months



Cancellation of mandatory sterilization



Cancellation of mandatory neutral name requirement



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**THANK YOU FOR YOUR ATTENTION!**

**Petra Vrzackova MD PhD. FECSM**

[petra.vrzackova@email.cz](mailto:petra.vrzackova@email.cz)

**Viktor Heumann MA**

[viktor.heumann@transparentprague.cz](mailto:viktor.heumann@transparentprague.cz)

[www.jsmetransparent.cz](http://www.jsmetransparent.cz)



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