Documentation of discrimination in the field of health of trans* people in Hungary
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Transvanilla Transgender Association
Research report
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The published data and findings do not necessarily reflect the position or opinion of the ILGA-Europe Documentation and Advocacy Fund.

Photos: Alíz Tallér Graphics & Photography
www.talleraliz.hu
We are advocating for the interests of trans*, gender non-conform and intersex people in all walks of life. We are working for a Hungary where trans*, gender non-conform and intersex people are respected, accepted and visible in the society. Our aim is to achieve social, legal and medical change to improve the situation of trans*, gender non-conform and intersex people’s everyday life.
The aim of the project in 2014 was to better protect trans people in Hungary from discrimination in the field of both general and trans specific health care.

In the first phase of the project we collected data through online and offline questionnaires and personal interviews. We publish our findings in this report which we use to increase the public awareness on policy/decision makers responsibility to provide appropriate ad-hoc and long-term improvements to make needes health care services more accessible and to provide better quality health services to trans* people.

The empirical research project had two elements, carried out in different times. First we conducted a self-administered survey. Online mode of the survey was given due to the fact that trans* people are difficult to reach and they are in a special situation. This guaranteed full anonymity to respondents so they could answer more safely even on intimate and embarrassing topics.

Our survey contains 68 partially filled and 253 full questionnaires. In the evaluation process we only took into account the closed 253 responses.

As a second step we made 22 personal, semi-structured interviews. The interviewees were selected from among survey respondents experienced discrimination.
The questionnaire subjects were among Transvanilla Transgender Association’s community events participants, and visitors from websites addressing trans* people and social media users. 253 people took part in the questionnaire-based study, from that 28.8% woman, 10.7% mostly woman, 8.3% trans* woman, 25% man, 8.3% mostly man, 5.1% trans* man, 4.3% both, 2.4% neither, 2.8% does not want to decide, 1.9% does not know and 2.4% other (genderqueer, third gender, genderfluid, agender, transmasculin trans* male) identified person.
<table>
<thead>
<tr>
<th>Education Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No formal education</td>
<td>0.8%</td>
</tr>
<tr>
<td>Primary school</td>
<td>7.5%</td>
</tr>
<tr>
<td>Vocational education</td>
<td>14.2%</td>
</tr>
<tr>
<td>Secondary grammar education</td>
<td>21%</td>
</tr>
<tr>
<td>Secondary technical education</td>
<td>23.3%</td>
</tr>
<tr>
<td>Post-secondary education</td>
<td>9.5%</td>
</tr>
<tr>
<td>College, university</td>
<td>23.3%</td>
</tr>
<tr>
<td>Higher academic education</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

Based on highest level of education: no formal education 0.8%, primary school 7.5%, vocational education 14.2%, secondary grammar education 21%, secondary technical education 23.3%, post-secondary education 9.5%, college, university 23.3%, higher academic education 0.4%.

22 persons signed for interviews.
**KEY TERMS USED**

**GENDER IDENTITY**

Each person’s deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth, including the personal sense of the body (which may involve, if freely chosen, modification of bodily appearance or function by medical, surgical or other means) and other expressions of gender, including dress, speech and mannerisms.

**GENDER EXPRESSION**

Can be understood as the way in which a person expresses themselves through their external appearance and/or manifestations marked by behaviour, clothing, haircut, voice, body, language, and other external and physical characteristics.

**INTERSEX PEOPLE**

Intersex is a variation in sex characteristics including chromosomes, gonads, or genitals that are not typical nor for males nor for females. Intersex conditions are often congenital but they can occur at later stages of sexual development.

**TRANS* PEOPLE**

A term encompassing a diverse range of people who find their gender identity or gender expression does not fully correspond with the sex they were assigned at birth. This term can include, but is not limited to, people who identify using the following more specific terms: transsexual people, transgender people, transvestite/ cross-dressing people, non-binary, gender-variant people.

*** Wikipedia
We present the findings of our questionnaire in the following charts.:

Number of respondents: 253.
Age: min. 16, max. 73. Average: 30,35, dispersion: 10,53

The youngest respondent was 16 years old, and the oldest was 73 years old, however the balance shifted to the youngsters, 72,2% of the respondents was between 16 and 35 years old.
SEXES

Sex assigned at birth:
Female 99 persons 39.1%
Male 142 persons 56.1%
Female, but I am intersex 4 persons 1.6%
Male, but I am intersex 8 persons 3.2%

At birth 39.1% of the respondents was assigned as female, 56.1% as male, and 1.6% (4 persons) was assigned as female, but is intersex; 3.2% (8 persons) was assigned as male, but is intersex.

HOW DO YOU DEFINE YOUR GENDER?

See the chart on page 6

28.8% of the respondents identifies as woman, 10.7% mostly woman, 8.3% trans* woman, 25% man, 8.3% mostly man, 5.1% trans* man, both 4.3%, neither 2.4%, does not want to decide 2.8%, does not know 1.9% and other 2.4% (genderqueer, third gender, genderfluid, agender-transmasculin trans* man).

Trans* woman

Assigned male at birth, but the individual’s deeply felt internal and individual experience of gender and/or gender expression does not correspond with that.

Trans* man

Assigned female at birth, but the individual’s deeply felt internal and individual experience of gender and/or gender expression does not correspond with that.

Interszex person

Intersex is a variation in sex characteristics including chromosomes, gonads, or genitals that are not typical nor for males nor for females. Intersex conditions are often congenital but they can occur at later stages of sexual development.
Migration from the place of birth points strongest towards the capital and abroad.

Highest level of education:
- No formal education: 2 pers (0.8%)
- Primary education: 19 pers (7.5%)
- Vocational education: 36 pers (14.2%)
- Secondary grammar education: 53 pers (21%)
- Secondary technical education: 59 pers (23.3%)
- Post-secondary education: 24 pers (9.5%)
- College / university: 59 pers (23.3%)
- Higher academic education: 1 pers (0.4%)
One of the biggest problems for trans* people is employment, it is shown in that 53% of the respondents do not work full-time.

**If not having a full-time job**

Among the respondents not having a full-time job 18.2% (26 persons) are unemployed and furthermore due to the relatively high presence of young people the number of full-time students is high as well (37.8%).
ECONOMIC ACTIVITY

- Full-time student: 54 pers, 37.8%
- Part-time employed: 16 pers, 11.2%
- Self-employed: 3 pers, 2%
- Unemployed: 26 pers, 18.2%
- On a long sick leave or disabled: 10 pers, 7%
- Retired: 4 pers, 2.8%
- Dependent, taking care of home: 11 pers, 7.7%
- No answer: 9 pers, 6.3%
- Other: 10 pers, 7%

Other: evening and part-time students, part-time working besides being a full-time student, freelancer, nursing benefit and public service work.
HEALTH

HOW WOULD YOU DESCRIBE YOUR STATE OF HEALTH?

- Very good: 52 pers (20.6%)
- Good: 117 pers (46.2%)
- Satisfactory: 65 pers (25.7%)
- Bad: 16 pers (6.3%)
- Very bad: 3 pers (1.2%)

HAVE YOU SEEN YOUR FAMILY DOCTOR IN THE PAST YEAR?

- Yes: 76.7%
- No: 23.3%

IF YES, HOW SATISFIED ARE YOU WITH YOUR FAMILY DOCTOR? (RATE 1 TO 5)

- Rate 1: 9 pers (4.6%)
- Rate 2: 17 pers (8.7%)
- Rate 3: 57 pers (29.3%)
- Rate 4: 58 pers (30%)
- Rate 5: 53 pers (27.4%)
Are you visiting regular examinations, check-ups? (e.g. gynecological, urologic, pulmonary etc.)

- Regularly: 43 persons (17%)
- Occasionally: 104 persons (41.1%)
- No: 106 persons (41.9%)

When were you last time checked for HIV?

A significant proportion of trans* people (67.2%) had never been screened for HIV.

- In the past 3 months: 13 persons (5.1%)
- In the past year: 26 persons (10.3%)
- Over a year ago: 44 persons (17.4%)
- Never: 170 persons (67.2%)
### Smoking

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Number of persons</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>150 pers</td>
<td>59.3%</td>
</tr>
<tr>
<td>Occasionally</td>
<td>27 pers</td>
<td>10.7%</td>
</tr>
<tr>
<td>Daily</td>
<td>76 pers</td>
<td>30%</td>
</tr>
</tbody>
</table>

### Alcohol

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Number of persons</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>66 pers</td>
<td>26.1%</td>
</tr>
<tr>
<td>Less, than every month</td>
<td>79 pers</td>
<td>31.2%</td>
</tr>
<tr>
<td>Monthly</td>
<td>38 pers</td>
<td>15%</td>
</tr>
<tr>
<td>Weekly</td>
<td>53 pers</td>
<td>21%</td>
</tr>
<tr>
<td>Daily or almost every day</td>
<td>17 pers</td>
<td>6.7%</td>
</tr>
</tbody>
</table>

### Drugs

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Number of persons</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>214 pers</td>
<td>84.6%</td>
</tr>
<tr>
<td>Less, than every month</td>
<td>28 pers</td>
<td>11%</td>
</tr>
<tr>
<td>Monthly</td>
<td>3 pers</td>
<td>1.2%</td>
</tr>
<tr>
<td>Weekly</td>
<td>3 pers</td>
<td>1.2%</td>
</tr>
<tr>
<td>Daily or almost every day</td>
<td>5 pers</td>
<td>2%</td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-----</td>
<td>-----</td>
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<tr>
<td>Has had psychiatric treatment:</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>Seriously considered committing suicide:</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>Tried to commit suicide:</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>Yes 78 pers 30.8%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No 175 pers 69.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes 136 pers 53.7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No 117 pers 46.3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes, once 18 p 11.9%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than once 49 p 32.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No 69 p 45.7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No answer 15 p 9.9%</td>
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</tbody>
</table>
Did that ever happened to you that you should have gone to see your family doctor or a specialist but you did not?

Yes - 147 pers - 58.1%
No - 106 pers - 41.9%

What was/were the reason(s) for that?

- Afraid of being discriminated because of their GI or GE 49 pers 19.4%
- Afraid of losing their job 9 pers 3.6%
- Not aware of a good specialist 19 pers 7.5%
- Waiting for the problem to be gone 74 pers 29.2%
- Afraid of the doctor/clinic/examination/treatment 55 pers 21.7%
- Afraid of the doctor/clinic/examination/treatment 55 pers 21.7%
- Other 6 pers 2.4%
- Had no time 41 pers 16.2%
- No prescription 14 pers 5.5%
- Could not afford 23 pers 9.1%
- Other: distrust in doctors and/or conventional treatment or doctor refused 19
<table>
<thead>
<tr>
<th>Situation</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had to change practitioners or other specialists because of their negative reactions</td>
<td>19%</td>
</tr>
<tr>
<td>Specific needs ignored (not taken into account)</td>
<td>34.8%</td>
</tr>
<tr>
<td>Unnecessarily segregated</td>
<td>11%</td>
</tr>
<tr>
<td>Treatment was denied</td>
<td>19.4%</td>
</tr>
<tr>
<td>Medical staff visibly better took care of hygiene</td>
<td>13%</td>
</tr>
<tr>
<td>Inappropriate curiosity from medical staff</td>
<td>30.8%</td>
</tr>
<tr>
<td>Situation</td>
<td>Percentage</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Blamed because of the illness</td>
<td>26.9%</td>
</tr>
<tr>
<td>Harrassed, humiliated</td>
<td>20.6%</td>
</tr>
<tr>
<td>Physical assault</td>
<td>3.2%</td>
</tr>
<tr>
<td>Forgoing treatment for fear of discrimination or intolerant reactions</td>
<td>32.8%</td>
</tr>
<tr>
<td>Pressure of being forced to undergo any medical or psychological test</td>
<td>21.3%</td>
</tr>
</tbody>
</table>
### HAVE YOU EVER FELT DISCRIMINATED IN HEALTH CARE FACILITIES OR DURING MEDICAL EXAMINATIONS BECAUSE OF YOUR GENDER IDENTITY OR GENDER EXPRESSION?

<table>
<thead>
<tr>
<th>Yes</th>
<th>66 Pers</th>
<th>26.1%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>187 Pers</td>
<td>73.9%</td>
</tr>
</tbody>
</table>

### DID YOU REPORT IT?

<table>
<thead>
<tr>
<th>Yes</th>
<th>4 Pers</th>
<th>6.1%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>62 Pers</td>
<td>93.9%</td>
</tr>
</tbody>
</table>

### WHERE DID YOU REPORT IT? (MORE ANSWERS)

- **Head of the institution**: 2
- **Patients’ Rights Advocate**: 1
- **Equal Treatment Authority**: 1
- **Ombudsman**: 0
- **Court**: 1
- **Other Governmental Institution**: 1
- **NGOs, Human Rights Defenders**: 2
What was the outcome?

No dealing with it 2
Investigation started, nothing happened 2

Why was it not reported? (More answers)

Shame, embarrassment 14
Did not know it was punishable 10
Did not know how or where to report 13
Fear of getting into a worse situation 29
Fear of being humiliated or hurt 22
No trust in authorities’ work 19
Did not think they could do anything 26
Too minor / not serious enough 20
Other: common acceptable situation, was not affected that much, sought solution at other doctors 23
DO YOU AVOID CERTAIN PLACES OR LOCATIONS FOR FEAR OF BEING ASSAULTED, THREATENED OR HARASSED BECAUSE OF YOUR GENDER IDENTITY OR GENDER EXPRESSION?

YES
156 pers
61.7%

NO
97 pers
38.3%
IN THE LAST 12 MONTHS HAVE YOU BEEN: PHYSICALLY/SEXUALLY ATTACKED OR THREATENED WITH VIOLENCE AT HOME OR ELSEWHERE (STREET, ON PUBLIC TRANSPORT, AT YOUR WORKPLACE, ETC.) FOR ANY REASON?

- Physical Violence / Attack: 22
- Sexual Violence / Attack: 5
- Threat of Physical Violence: 48
- Threat of Sexual Violence: 17
- None of the Above: 188

DO YOU CONSIDER YOURSELF TO BE PART OF ANY OF THE FOLLOWING GROUPS?

- An Ethnic Minority (including of migrant background): 11
- A Religious Minority: 16
- A Sexual Minority: 128
- A Minority in terms of Disability: 17
- Other Minority Group: 34
- None of the Above: 97
Various forms of discrimination against trans* persons in the health care system emerged during the research:

1. Impairment of the right to access health care and the right to equal access
   - missed examinations, medical care and/or denial of surgery
   - failure of providing high-quality treatment, understating (or minimising) complaints

2. Patients experience humiliation, inconvenience because of their gender identity or gender expression
   - no proper examinations (inconvenient, painful exams)
   - separate placement (e.g. disabled locker rooms)
   - mocking, humiliation, inappropriate and intimate curiosity from medical staff
“At the gynecologist. Papers handed in, waiting for the examination. After a while the nurse came out and started shouting in front of everyone how disgusting this is. I was rejected in front of the others like this..”

“I had some conflicts with the gynaecologist when trying to get the gynaecological opinion for changing my gender. He could not accept my situation. Extremely condescending, brought me in an awkward situation in front of the assistant. He said I will never become a full man and I should think about what type of woman will want me that way. I tried to convince him with arguments, that I am not here to predict whether there will be someone accepting me like this. After all, he would not know in advance, nor do I. But what I do know is that I am accompanied by my partner and I don’t want her to wait too long for me. I explained to him that I have been struggling a lot for who I want to be and this is my right even if he has his doubts. I also mentioned I might seek for another professional who is not challenged by my decision, which is actually supported by two psychiatrist after long months of investigations as well. I said that it is unfortunate to underestimate the work of two of his colleagues in this regard. Finally, but reluctantly, he gave me his opinion but he made the test as unpleasant as possible. This is my worst and most painful experience of the whole process, although they were not accidentally giving painkillers after the surgeries. I guess it was not my body which was hurt most..”
"Well, sometimes, even when I was at the clinic or whatever formal office, I was called on my birth name, mane Z... (I did not change my name yet, and had many inconveniences because of that). Their attitude was different to me then to other people. I could feel to be a kind of monster or do not even know what I am. For example, a dentist, I have asked for Lidocain, and did not get, they said they don’t have... so I had to bear the drilling and carving without that..."

"My local dentist, where I went for emergency care, have noticed that in their computer system my previous last name was present and almost shouted and asked indiscreet questions about my gender and indicated that he will not treat me because that would be very unpleasant for him. Refused my treatment and sent me away. Meanwhile, in every possible way he made me feel that I should be ashamed of my trans status. It happened several occasions that when my trans status was out doctors asked me indiscreet questions about my genitals, my transition and gender affirmative surgeries."

"At the dentist I was carefully checked and watched because of different name and appereance, they were laughing spectacularly. They provided a minimized health service in my case and they were not ready or willing to compromise regarding my problem. They were joking like: “Sir, haha sorry madam.”"

"Once my local gynaecologist (man) after I told him about my trans status, said that I can not be his patient anymore and he no longer prescribes me medicine, because he is not an “expert” of trans people’s health problems and he does not want to deal with it. He also said that I should have told him before, because for example he would have felt very unpleasant if he would have examined me.”
“I had to choose another family doctor because he claimed that transsexualism is not a real disease.”

“I wanted a referral date to the clinical psychologist and to the psychiatrist when a professional in spite of my request “wanted to be sure of” who I am. He kept asking me, questioned, suspected and wanted me to talk about myself etc. This thing happened at a public room, not in a separated area with other patients in the room. Finally, I did not get an appointment. I asked in vain that I just want an appointment to specialist X. Finally, I did not go back at the given date for the personal meeting.”

“I went to my local psychiatrist for the necessary expert opinion for the gender change because it was supposed to be free there but refused to help saying: “I would not even do it for money”.”

“I was sent to the locker room for handicapped persons upon going to lung screening.”

“When I went for lung screening the nurse asked loudly in front of everybody: “Was this your former name?” and said my old name. One endocrinologist said he does not want to treat this kind of people. Once at the medical examination for a job application the doctor told me she is going to talk to my boss about my situation.”

“There were many cases. I was on HRT and I looked entirely as a woman and lived as a woman. However I needed many medical papers for changing my name and gender, so I had to go to hospitals with my male name. It happened the nurses called me “boy-girl” in front of everybody (other patients and other nurses). Finally they threw my medical records on the floor saying “take that”.”
“I was donating blood for years, because it is important to me, but when I started my testosterone therapy I realised there is a field in the questionnaire about hormon therapy. I have marked it and turned out that means refusal. I was drawn aside, and the doctor asked questions, was curious and made me feel like I was only a second-rate, shoddy person. This case and that I can not donate blood anymore made me very sad.”

“At the beginning of my hormon replacement therapy my family doctor (male) thinking that I already left (but I was hearing) joked on me with his assistant: “Did you see? It was a transvestite!” I replied loudly: “No, but transsexual.” After this I have choosen another family doctor. Years later, I was post-everything. My family doctor (female) due to being ‘uninformed’ filled out an examination request putting my old name to the line reserved for women for their birth name. It is true, she did it in good faith and being ‘uninformed’ and I immediatelly asked her to rewrite the document, what she did.”

“Actually it was the endocrinologist who humiliated me and sent me to hell plus called me scrap and cripple. I was even happy to get there before because my family doctor razzed at me and said he is only willing to refer me if I never go to him again and I choose another family doctor.”

“I was pre-registered at a rural hospital for genital reconstruction surgery. My surgeon prescribed me some requests for medical tests to my family doctor in order to have them in my town. My family doctor refused sending me to the labs and he said: “surgeries for transgender people are cosmetic surgeries and tests can only be carried out on full price” and did not gave me referrals for the tests. I had to go to the hospital two days in advance so the labs and tests were carried out there for free, because my family doctor was totally uncooperative and refused the request.”
"I was consulting in Budapest at the Gynaeology Clinic about genital reconstruction surgery and asked to take off my clothes because they did not see a woman with penis before. Then they called in some 4-5 medical students and they surveyed my naked body."

"In the beginning I was not taken seriously, they refused my treatment. They were not familiar with my disease so they did not want to treat me. They humiliated me in the hospital, I was examined in front of several doctors and nurses like some alien creature. At the psychiatric ward they smacked me because I did not say my documented birth name. During the operation they joked about AIDS and said be careful where the patient’s blood sprinkles. I was not treated properly based on what was in the opinion even after the MSC’s (Medical Scientific Committee) approved my case."

"Urgent, life-saving treatment was refused because the director of the department did not understand why somebody has to undergo reconstruction surgeries. They are not dealing with these kind of patients. They said: “Go back to your surgeon!”"

"At the city hospital the gynaeologists said they do not remove organs from patients like me, they don’t do it for transsexuals. Previously the local psychiatrist was not giving me an expert opinion because she did not become a psychiatrist for this kind of people, she is dealing with sick people."

"I visited Sz. doctor to start hormon therapy. Asked for sterilization, not willing to start my therapy without. I told her I want to give birth in the future so I don’t want that surgery. She was totally disgusted and refused to treat me. Another argument was that this surgery costs money and I do not have it. As far as I know they can not force me to undergo sterilization in order to receive such treatment."
“I went to a famous plastic surgeon for breast cosmetic consultation. Strictly stated, he is not performing surgeries this kind of people. What is this, if not discrimination? I would pay as other patients and still he is not even considering my case.”

“I was in Szeged at a certain doctor, who threw me out from his office ignominiously. Actually, did not even listen to me and in a couple of minutes he decided that I will never become a woman. Refused to perform my surgery and besides talked to me like to a criminal and disgust was on his face. I left crying desperate and humiliated his office.”

“I went to the urology clinic in Szeged to P. professor to undertake surgery. I was very disappointed at the consultation and after I came out I burst out crying in the hallway. I could not understand what happened. Did not want to perform my surgery because I was married before and I have a child.”
[RECOMMENDATIONS TO DEVELOPE GOOD PRACTICES]

- Develop a program aimed to increase visibility and acceptance of trans* people in society.

- Increase trans* people’s awareness on patients’ rights, and how to validate those and presentation of remedies.

- Address information about trans* people in the education and training processes for doctors and other medical professionals in order to implement measures to eliminate prejudice.

- Sensitise medical professionals and staff in order to develop trans* positive care and practices.