

29 April 2016

C76663

Sophie Morgan
fyi-request-3701-61332412@requests.fyi.org.nz

Dear Ms Morgan

Thank you for your email dated 2 March 2016, requesting information about medical care for transgender prisoners. Your request has been considered under the Official Information Act 1982 (OIA).

The Department is very aware and sympathetic to the particular needs of transgender prisoners including the issues surrounding their placement and safety. While there are only a small number of prisoners in New Zealand who identify as transgender, I acknowledge that they are a vulnerable group with highly complex needs. Although it is widely recognised that the management of transgender prisoners is a complicated issue, Corrections has worked hard in recent years to ensure the safety and dignity of this group of people is protected while they are in prison.

The Department has a statutory obligation under the Corrections Act 2004, to provide a primary health service to prisoners that is reasonably equivalent to that found in the community. Prison health centres are staffed by over 170 full time equivalent registered nurses nationally, and is similar to that provided in the community in general practice. Specialised medical professionals such as medical officers (general practitioners) and dentists are contracted to provide services when necessary.

You have asked six questions in relation to the medical care transgender prisoners receive. My response to your questions follow.

1. *What are the current policies and guidelines regarding the transmission of hormone replacement therapy to transgender prisoners?*
2. *Can prisoners begin hormone replacement therapy while incarcerated?*

The Department has interpreted your reference to "*transmission*" to be how hormone therapy is delivered. Further, you have used the term "*hormone replacement therapy*". The Department has assumed that you mean *hormone therapy* as in the case of transgender patients, hormones are not being replaced; the medication delivers different hormones into the body.

All prisoners are assessed on the day they arrive at prison to determine whether they have any immediate health needs. This assessment includes obtaining information about the medications that are currently prescribed for the prisoner.

Following the assessment, the care and treatment of the prisoner is planned based on the prisoner's individual needs.

A prisoner who brings their own medication in to prison is able to continue with that medication until they are assessed by a medical officer or a specialist (for example a psychiatrist) if the following criteria are met:

- the prescription is still valid
- the pharmacy label is still intact (with all required information)
- the medication has been dispensed in the last three months
- the medication is in its original packaging
- the medication is not past the expiry date

If a prisoner does not bring in their own medication with them to prison, they must be assessed by the medical officer, or if required, a psychiatrist employed by the District Health Board (DHB). The assessment will be based on the prisoner's needs and any other investigations or information required, such as a review of the prisoner's prior medical records. The medical records are requested with the consent of the prisoner, from their current doctor. As part of that assessment the medical officer or psychiatrist will make a decision regarding the appropriate medication. This decision will be one of the following:

- to continue the medication prescribed in the community
- to provide an alternative medication
- to discontinue the medication prescribed in the community

3. *Do prisoners have to pay for their own hormone replacement therapy?*

4. *If prisoners do have to pay for their own hormone replacement therapy, how much does it cost? What is the specific, current policy regarding how much prisoners have to pay for this treatment?*

The Department pays the full cost of prisoners' prescribed medications while they are in prison.

5. *Are there medical professionals available at facilities to advise transgender prisoners as to the medical consequences of hormone replacement therapy, and other transgender-related healthcare needs?*

As mentioned above, the Department provides a primary health care service. Prisoners are referred to appropriate mental health professionals and specialists working in the health sector (in DHBs) for assessment and treatment before they transfer to primary care. Therefore, health services in prison rely on the specialist services to have provided advice to a transgender prisoner as to the "medical consequences of hormone replacement therapy".

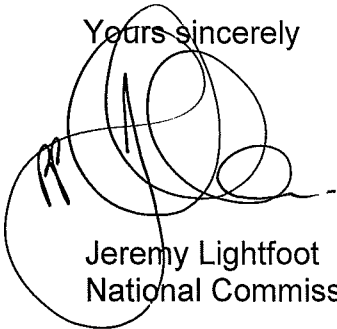
6. *Can prisoners undertake gender affirmation surgery (also known as genital reconstruction surgery) while incarcerated?*

Prisoners access specialist services such as gender reassignment surgery (the terminology used by the MOH) on the same basis as people in the community. Further information on this topic is available using this link:

<http://www.health.govt.nz/our-work/hospitals-and-specialist-care/high-cost-treatment-pool/gender-reassignment-surgery>.

I trust the information provided is of assistance. Should you have any concerns with this response, I would encourage you to raise these with the Department. Alternatively you are advised of your right to also raise any concerns with the Office of the Ombudsman. Contact details are: Office of the Ombudsman, PO Box 10152, Wellington 6143.

Yours sincerely

A handwritten signature in black ink, appearing to be 'J Lightfoot', written over a circular stamp or seal.

Jeremy Lightfoot
National Commissioner