How I wish health providers treated me



CHRONIC PAIN SUPPORT

- 1. Ask if I would like to record or take notes
- 2. Ask if I have a symptoms list and read it with care
- 3. Ask if I would like to have a person on the phone or in the room to support me
- 4. Do not re-enforce your helpfulness or intentions, prove them with your empathy and action
- 5. Acknowledge personal limitations in knowledge
- 6. If you notice my demeanour is distressed, acknowledge it, offer water, snacks, verbal emotional support

EXAMPLES OF VERBAL SUPPORT

- 1. "I can see your distressed, chronic pain is no joke"
- 2. "It makes sense you have these feelings, I would too in your position, and other patients have them also"
- 3. "Take your time explaining, I'm listening"
- 4. "It must be so frustrating not having answers"

ANTI-OPPRESSIVE INFORMED

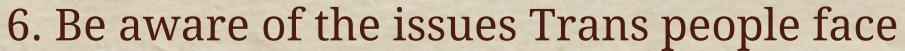
- 1. Acknowledge the failures and limitations of our current medical system
- 2. Acknowledge that patience suffer because of it, not because they are bad patients
- 3. Be aware of the way oppression contributes to realities of chronic pain and stay up to date
- 4. Take action politically, academically, and professionally in solidarity with patient rights

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Patient Support - Gender

QUEER / TRANS GENDER SUPPORT

- 1. Ask me my pronouns
- 2. Share your pronouns
- 3. Don't assume the pronouns of others I mention, especially partners
- 4. Ask if I'm using any kind of gender supportive care including hormones when accessing medical care
- 5. Do not make assessments of health based on biological sex
- 6. Don't dead-name me



7. Familiarize yourself with Queer and Trans culture through Tiktok and Instagram



- 1. Do not assume anxiety as the cause for pain
- 2. Do not make comments about weight-loss as treatment
- 3. Do not make comments about reducing stress as treatment without any tangible programs as referrals for support
- 4. Do not refer to therapists who are not chronic pain survivors themselves
- 5. Read Dr. Gabor Matte's "When the Body Says No"
- 6. Research how women carry the brunt of chronic pain, immune illnesses, and other suppression based illnesses
- 7. Don't make "hysteria" adjacent commentary on calmness, sanity, rationality, composure, agreeableness, cooperativeness
- 8. If you notice yourself getting overwhelmed, take a break, deep breath, and return to patient support

Patient Support - Race

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DECONSTRUCTING WHITE SUPREMACY

- 1.Be aware of personality traits whiteness considers rational, irrational, dangerous, difficult, non-compliant and their origins in establishing deviant races
- 2. Notice yourself having these subliminal reactivity, and resist acting on them, choose compassion every time
- 3. Pay attention if markers of race (skin colour, clothing, accents, volume) challenge your ideas of the patient's credibility



HISTORY

- 1. Read about the origins of Western Medicine as a tool for domination, colonization, genocide a. Jasbir Puar's "Right to Maim" to start
- 2. Read into the legitimacy of global non-white health practises academically and in grey literature

PERSONAL HOPES

- 1. If you comment on my race, it better be informed academically, not personally about the other brown people you know (friends, family, TV characters)
- 2. Don't ask my race if it's not relevant to treatment, it's not fun to be asked "where are you from"
- 3. If you are racialized, don't assume you're not racist, continue to prove solidarity through action and knowledge that supports anti-racist praxis
- 4. Refer me to other professionals who are of my same race, and gender, with knowledge of queer and trans issues, fight to get me into their wait-lists

