

# 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 patients 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

# 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

6. Be aware of the issues Trans people face
7. Familiarize yourself with Queer and Trans culture through Tiktok and Instagram

## WOMEN / FEMME GENDER SUPPORT

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