



# CONNECTION & ACCEPTANCE:

A HEALTH RESOURCE FOR INTERNATIONAL STUDENTS



# GLOSSARY

## Definitions

**Gender Identity** - is a person's deeply felt internal and individual experience of gender,<sup>1</sup> which may or may not correspond with the sex assigned at birth. It includes the personal sense of the body, which may involve – if freely chosen – modification of bodily appearance or function by medical, surgical or other means. Gender identity exists on a spectrum, so it is not necessarily linked to a single gender. And it can be fluid, evolving over the course of a person's life.

**Homophobia**<sup>2</sup> - negative attitudes, feelings, or irrational aversion to, fear or hatred of gay, lesbian, or people and communities, or of behaviours stereotyped as "homosexual." It is used to signify a hostile psychological state leading to discrimination, harassment or violence against gay, lesbian or people.

**Racism**<sup>3</sup> - ideas or practices that establish, maintain or perpetuate the racial superiority or dominance of one group over another.

**Sexual and gender minorities** are individuals whose sexual orientation is not exclusively heterosexual and whose gender identity and/or gender expression is different than the sex assigned at birth. Sexual and gender minorities may or may not identify with a particular identity or term, such as LGBTIQ+.

**Sexual orientation** - is a person's physical, romantic, and/or sexual attraction (or lack of it) to other people. It includes three elements: sexual attraction, sexual behaviour, and sexual identity<sup>4,5</sup>. For some, sexual orientation is fluid and changes over time. For others, it is experienced as deeply innate and does not change over time. Sexual orientation and gender identity are distinct, and one cannot be inferred from the other.

**Transgender** - (often shortened to trans) and **gender-diverse** are umbrella terms for people whose gender identity, gender roles or gender expression do not conform to the norms and expectations traditionally associated with the sex assigned to them at birth. It includes people who are transsexual or otherwise gender-diverse. Transgender people may identify as transgender, female, male, trans woman or trans man, transsexual, or using other terms. **Gender-diverse** includes people who identify as gender-fluid or gender non-binary. Trans and gender-diverse people may express their genders in a variety of masculine, feminine and/or androgynous ways. This is irrespective of whether they have undergone gender transition, such as hormonal or surgical interventions, to align their physiology with their gender identity. While these terms are increasing in familiarity in many countries, in a number of cultures other terms may be used.<sup>6</sup>

**Transphobia**<sup>2</sup> - negative attitudes and feelings and the aversion to, fear or hatred or intolerance of trans people and communities. Like other prejudices, it is based on stereotypes and misconceptions that are used to justify discrimination, harassment and violence toward trans people, or those perceived to be trans.

## Abbreviations

- **ART** – antiretroviral therapy
- **LGBTQ+** – lesbian, gay, bisexual, transgender and queer
- **PrEP/PEP** – Pre-exposure prophylaxis/Post-exposure prophylaxis
- **OHIP** – Ontario Health Insurance Plan
- **TRS** – Transition Related Surgery
- **UHIP** – University Health Insurance Plan

<sup>1</sup> Gender refers to the socially constructed norms that impose and determine power, roles and relationships between women, men, boys, girls and trans and gender-diverse people, including people with non-binary gender identities. Gender norms, roles and relations vary from society to society and evolve over time. For more information, see WHO's **Q&A: Gender and Health**, at: <https://www.who.int/news-room/q-a-detail/gender-and-health>.

<sup>2</sup> <https://www.rainbowhealthontario.ca/news-publications/glossary/>

<sup>3</sup> OHTN Action Plan to Confront Anti-Black Racism - <https://www.ohfn.on.ca/action-plan-to-confront-anti-black-racism/>.

<sup>4</sup> Defining sexual health: report of a technical consultation on sexual health. Geneva: WHO; 2006 (<https://www.cesas.lu/perch/resources/whodefiningsexualhealth.pdf>, accessed 17 November 2022).

<sup>5</sup> Born free and equal: sexual orientation, gender identity and sex characteristics in international human rights law, 2nd ed. Geneva: Office of the High Commissioner of Human Rights; 2019 ([https://www.ohchr.org/Documents/Publications/Born\\_Free\\_and\\_Equal\\_WEB.pdf](https://www.ohchr.org/Documents/Publications/Born_Free_and_Equal_WEB.pdf), accessed 17 November 2022).

<sup>6</sup> Specific indigenous terms include "hijra" (India), "meti" (Nepal), "skesana" (South Africa), "motsosalle" (Lesotho), "kuchu" (Uganda), "waria" (Indonesia), "kawein" (Malaysia), "muxé" (Mexico), "fa'afafine" (Samoa), "fakaleiti" (Tonga), "tarajens" (Iran) and "two-spirit" (some North American indigenous peoples).



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## I'M AN INTERNATIONAL STUDENT AND I MIGHT NOT BE STRAIGHT.

It can feel scary to be questioning your sexual or gender identity. You may have heard people describe themselves as gay, bisexual, queer, trans, non-binary or lesbian, and you may not be sure about whether these terms are right for you - and that's okay. Becoming aware that you may be different from most of your friends or family is a process that happens over time. As someone who is thinking about who you are regarding your gender identity or sexual orientation, you may fear what your friends or family back home would think. You may also be worried about what your future might hold if you pursue same-sex relationships or change your gender identity. These worries may impact your ability to focus academically or be accepted by new friends.

Many international students take their time away from home as an opportunity for self-exploration. This can sometimes be a lonely journey. This resource is a guide to help you on this journey and includes links to additional services and resources. This guide identifies common questions that international students often have about lesbian, gay, bisexual, transgender and queer (LGBTQ+) life, services and supports available in Ontario, Canada followed by answers we hope you find helpful.



## PART OF WHY I CAME TO STUDY IN CANADA WAS MY CURIOSITY ABOUT LGBTQ ACCEPTANCE HERE.

Canada has a good international reputation on LGBTQ+ issues. Same-sex marriage is available across the country, discrimination based on sexual orientation or gender identity is prohibited and, unlike many countries in the world, a number of political leaders have marched in LGBTQ+ Pride events. This gives many people the impression that Canada is very welcoming and is made up of a harmonious cultural mosaic. However, by now you may have realized that our culture and history are more complex. Canada has a long history of discrimination and violence against Indigenous peoples. Homophobia, transphobia and racism exist here.

It's also important to know that Canadian law prohibits discrimination based on sexual orientation, gender identity, health status (which includes being HIV-positive), race, nationality or ethnicity. If you think you have experienced discrimination, and talk to your university or college authorities

(if you feel comfortable and safe doing so) and consider seeking legal advice, and consider seeking legal advice, such as the free hotline at Ontario's Human Rights Legal Support Centre or the HIV/AIDS Legal Clinic of Ontario (if you experience discrimination based on HIV-positive status).<sup>7,8</sup> It is also against the law for any institution or organization to take action against you, such as ending your employment or your access to education, if you take measures to protect your rights.

There are many people here from diverse cultural backgrounds who are openly and confidently part of the LGBTQ+ community. But, you might ask, where are these people? I want to meet them! You may find that people remain in small friendship groups and don't always welcome new people right away, especially in larger cities. Creating a network of friends and a supportive community is possible, and it takes time. It might be easiest to begin connecting with community or campus groups that are designed for LGBTQ+ people from all walks of life.

<sup>7</sup> Human Rights Legal Support Centre (HRLSC). Open 9:00 – 17:00, Monday – Friday. Free hotline: 1 866-625-5179. Additional information on services is available at: <https://hrisc.on.ca/>.

<sup>8</sup> HIV/AIDS Legal Clinic of Ontario. Additional information available at: <https://www.halco.org/>.



## I AM FEELING SO MANY THINGS ALL AT ONCE. WHO SHOULD I TALK TO?

First, let's examine what is driving your difficult feelings. Here are some common experiences of newcomers to Canada,<sup>9</sup> particularly, LGBTQ+ international students:

- Being excluded from groups of your peers
- Feeling confusion or shame about your sexual orientation
- Wanting to explore your gender identity but not feeling safe
- Not being able to speak English as well as you'd like
- Not having the same supports you had back home
- Wanting to belong but feeling like you don't fit into straight or LGBTQ+ groups
- Being separated from family and friends
- Fear of rejection from family members
- Being involuntarily "outed" to people in your life through group affiliation or social media

- Experiencing post-traumatic stress because of something awful that happened in the past
- Experiencing poor treatment and hostile environments (i.e. discrimination) as a result of your culture, race, country of origin, language, or sexual/gender identity
- Not having enough money and/or losing your income

These feelings can make you hesitant to talk about stress and other feelings like shame, fear, loneliness, identity confusion and sadness. You may think that seeing a professional would be embarrassing or that those services are reserved for really unwell people. However, mental health professionals (i.e. social workers, counsellors, psychologists, and psychiatrists, among others) are the experts and sources of comfort to reach out to when you experience overwhelming emotions. And the truth is, everyone can benefit from talking to someone!

<sup>9</sup> Community Resource Connections of Toronto. (2007). Navigating Mental Health Services in Toronto: A guide for newcomer communities.





## **I THOUGHT CANADA WAS A CULTURAL MOSAIC. I DIDN'T EXPECT TO EXPERIENCE RACISM.**

While Canada is home to people of diverse cultures, many racialized people still experience racism, which can take the form of: someone responding unkindly to you, ignoring you, making you feel self-conscious about your accent, or making negative comments about you based on your ethnic or racial background or nationality.

Observing and experiencing these forms of exclusion can be difficult.

If you are from a country where you are part of the dominant ethnic or religious group, the experience of being a minority will likely be new and can be uncomfortable. Being made to feel unwelcome because of your culture, skin colour, accent or country of origin can be isolating. It's important that you know that this is not acceptable.

When it's safe to do so, speak up against racism. But more importantly, if you are comfortable doing so, talk to student services at your university or college to address this, and connect with people who make you feel good about yourself so that you can start building a community.

***"...connect with people who make you feel good about yourself so that you can start building a community."***



## CAN I ACCESS CAMPUS HEALTH SERVICES FOR MY SEXUAL HEALTH NEEDS?

Yes. If you are sexually active it is important to get tested regularly for sexually transmitted infections. The challenge for most students is talking to someone about the health services you need. This means disclosing who you're having sex with and the kind of sex you're having. This will determine the kind of testing and treatment you should receive. For example, a sore throat following oral sex requires a throat swab for testing, while genital discomfort such as pain when urinating will require a urine sample. Some people will prefer to go to a specialized sexual health clinic where they will be asked specific questions about their sexual history. Some students are more comfortable going to an anonymous drop-in sexual health clinic rather than their campus health services. Pick an option that feels comfortable for you.

An equally important question is financial coverage for sexual health services.

If you are attending a university in Ontario, the University Health Insurance Plan (UHIP) will cover all physician services listed in the current Ontario Health Insurance Plan (OHIP) Schedule of Benefits,<sup>10</sup> which includes testing for sexually transmitted infections and blood-borne infections. UHIP is not free but most students will have paid for coverage along with their school fees. UHIP does not cover the cost of prescription drugs – although some extended health care plans offered through student unions do, and students can purchase private drug plans. In addition, local HIV/AIDS service organizations may be able to help you access compassionate drug access or financial support programs.

<sup>10</sup> Community Resource Connections of Toronto. (2007). Navigating Mental Health Services in Toronto: A guide for newcomer communities.



***“If you are sexually active it is important to get tested regularly for sexually transmitted infections. The challenge for most students is talking to someone about the health services you need.”***

If you are attending a college in Ontario, your institution and the student union will have arranged a private health care plan for you that is likely included in your school fees. Colleges in Ontario do not have a single unified plan like UHIP, so coverage will vary. Some health plans will cover both physician/testing services and prescription medications, while others do not include medications. This will also be true for international students attending secondary and language schools.

To find out what your school-based health care plan covers, it may be best to go through your coverage plans online which should be available on your institution's website. Secondary school students in Toronto and Ottawa may especially benefit from free and confidential youth-friendly services offered by Planned Parenthood.

Locate confidential and free testing and treatment services regardless of what type of institution you study at. You can find a clinic near you by visiting <https://sexualhealthontario.ca/> and <https://hiv411.ca>.

In addition, anonymous HIV tests are free in Ontario. You do not need an Ontario Health Insurance Plan (OHIP) card or number to get an anonymous HIV test. To find an anonymous testing clinic in Ontario, you can contact the free, confidential Ontario AIDS & Sexual Health Infoline (you do not have to give your name or information):

**English and a number of other languages: 416-392-2437**  
**or toll-free in Ontario 1-800-668-2437**

**French: toll-free in Ontario 1-800-267-7432**

**website: <https://www.toronto.ca/community-people/health-wellness-care/sexual-health-infoline-ontario/>**

Get some quick sexual health information NOW:

- [For trans guys](#)
- [For trans women](#)
- [For women into women](#)
- [For guys into guys](#)
- [HQ Sexual and Mental Health Clinic](#)
- [PrEP Online](#)





## I THOUGHT SEX AND DATING WOULD BE FUN AND UNCOMPLICATED. BUT IT'S STRESSFUL!

You would think that in a world where everyone is looking for connection, meeting someone would be easy. You may want to explore relationships through student LGBTQ groups – some universities have LGBTQ groups associated with specific areas of study, such as law or medicine. Larger cities also have a range of LGBTQ community groups and organizations. For others, dating and hookups can often begin online, and the platforms have their own subculture of lingo and rules—especially for guys into guys. **If you are a gay or bisexual guy**, here are a few things to keep in mind when you're seeking connection on the apps:

- You may or may not be comfortable sharing a face picture. Some app users will express frustration if you have a blank profile and don't send a photo with your initial message.
- Gay men can be very direct about stating their sexual positions online; be ready to put yourself in a preference category: top, bottom, versatile, vers top, vers bottom. There are also guys who are interested in oral sex rather than anal sex. Don't feel pressured to put anything in your profile or do anything that makes you uncomfortable.
- Empty profiles make connecting harder. If you're looking to connect with others fill out aspects of your profile that speak to more than demographic information (height, position) and sexual likes/dislikes, such as stating your interests and activities.
- Profiles in dating apps can be confusing. For example, they might say they are only looking for friends while displaying a bare chest as their profile photo. If they list their interests as seeking *friends*, *chats*, *dates*, *relationships*, and *right now* you may not know where your conversation will lead.

- You may meet people who make assumptions about your sexual preferences and the type of lover you are based on your cultural background or skin colour, or be rejected as a sexual or romantic partner for the same reasons. This is called sexual racism. You can challenge it, ignore it, and/or invest only in guys who respect you.
- Sometimes the choices we make related to sexual risk and/or drug use are influenced by our desire to reduce isolation and avoid rejection. Think about this carefully: it can mean trading physical connection now for anxiety later. Talk to someone you trust.
- When you're meeting people online and pursuing relationships, you'll quickly notice many gay men prefer "open" relationships (i.e., sexual relationships with more than one partner during the same time period). Three things to keep in mind are
  1. assuming that monogamy is the default relationship model can lead to sexual risks and/or hurt feelings;
  2. a person's desire to be in an open relationship does not mean that they don't care about you; and
  3. just because a person wants an open relationship doesn't mean they are an expert at doing it well – they may still be developing both their emotional and their communication skills
- Finally, it's important to note that there's a culture of sexualized drug use (pairing drugs with sex) that you may not be familiar with before arriving in Canada. This is referred to as chemsex or PnP, which stands for party n' play. Just like alcohol use, recreational drug use can serve many functions. It can be used to enhance pleasure, reduce anxiety, mitigate shame, or feel closer to others. It may also result in feelings of sadness or anxiety in the following days.
- If you're curious about pairing sex and drugs, read the next section so that you can understand the risks and make informed decisions.





## HELP ME UNDERSTAND THE CULTURE OF SEX AND RECREATIONAL DRUGS.

If you're new to the LGBTQ scene in Canada, you will quickly notice people talk about recreational drugs using letters like E (ecstasy), K (ketamine), G or GHB (Gamma Hydroxy-Butyrate), and Tina, Crystal or 'T' (methamphetamine). You'll also observe that drug use (or "partying") is often paired with sex, particularly among some gay men. People report many positive and pleasurable outcomes of drug use when in altered states of being. But as a general rule: what goes up, must come down.

The after-effects (or "hangover") of most drugs will include low mood, anxiety, fatigue, dehydration and scattered focus for the following day(s). Substances that last longer are generally stronger, which means the after-effects will be more pronounced. Don't forget that all of these drugs are illegal to possess in Canada and can be mixed with unknown substances to increase their effects. Be mindful of what you buy and carry with you.

There are two key challenges often reported by gay men who have engaged in sexualized drug use (also known as 'chemsex' or 'PnP'). They often say that:

1. Their initial introduction to drug use during a sexual encounter wasn't accompanied by a lot of information about the desired effects and risks of the particular substance.
2. It can become difficult to engage in sober sex if your mind and physical body begin to associate sex with "being high".
3. The risk of developing a substance use problem that has negative effects on your physical and mental health increases with frequent and prolonged use.

**Advice:** Be especially cautious about methamphetamine (or "Tina"). For many people, this drug has been really difficult to quit and has more intense side effects than other recreational drugs. You may hear people talk about "harm reduction". This is about using strategic efforts to minimize negative outcomes from drug use (such as taking PrEP if considering sex without condoms, shooting up with a friend or at a supervised consumption site, carrying a take-home naloxone kits, and other strategies). Be informed about what you put in your body and try to create a space for yourself where you can feel safe if you are using any substance. [You can find more information here.](#)





## ARE STIS AND HIV TALKED ABOUT OPENLY WHEN GUYS MEET UP FOR DATES OR SEX?

Sometimes guys will have their HIV status (or preference regarding sex with HIV-positive or HIV-negative men) as part of their dating/hookup profile. But many guys don't talk openly about HIV or other STIs, and this can result in incorrect assumptions about sexual health and increase the risk of STIs and HIV.

People have different perspectives on how relevant it is to talk about sexually transmitted infections/STIs when meeting other guys. There's the collective perspective and the individual perspective.

**Collective:** If you get tested regularly and you ask about your partners' last routine test, you will gain a sense of reassurance that you're each invested in your own and the other person's sexual health. It also opens the lines of communication if one of you becomes symptomatic after the sexual encounter and you need to inform the other person(s).

**Individual:** If you are personally on top of your own sexual health (i.e. routine testing every 6 months or sooner if there are symptoms; or every 3 months if on PrEP or if sexually active with different partners), you may not see the value in asking other people about their practices. In addition, you may assume that people aren't going to have sex with you while they are actively symptomatic or you've accepted that passing on an STI is always a possibility in a sexual encounter.

HIV differs from other STIs because there is no cure – although HIV can now be managed well with medication – and it comes with a higher degree of stigma. Some guys hesitate to disclose their HIV status because they don't want to get rejected, especially if they are on treatment medication and don't pose a risk for HIV transmission. Regardless of HIV status, some guys prefer to avoid conversations about HIV testing and status because they fear it will interfere with the flow and mood of their sexual encounter.

## AM I AT RISK FOR HIV?

Your risk of HIV will depend on your sexual and drug use practices.

If you're a guy into other guys, it's important to know that this community has a higher number of people living with HIV than other communities in Ontario. HIV is transmitted through contact with specific bodily fluids, such as blood, semen, vaginal fluids and anal fluids. The most likely way to contract HIV is by having condomless penetrative sex (vaginal or anal) with someone who is HIV-positive, but not on antiretroviral treatment or virally suppressed.

If your partner is HIV-positive, on treatment and has an undetectable viral load, they cannot transmit the virus to you. But you'd have to ask to know and often that is not a comfortable conversation. In terms of prevention, condoms are still the most economical way to prevent HIV transmission. PrEP (pre-exposure prophylaxis) is also highly effective if taken as prescribed.



# CAN I GET HIV PREVENTION MEDICATION (PREP) AS AN INTERNATIONAL STUDENT?

Pre-Exposure prophylaxis (PrEP) comes in pill form and is most often taken daily as a way to prevent HIV. As an international student, it may be harder to access PrEP. You may have to use your school insurance or private coverage to cover the cost of your clinic visit and the medication. If you have a valid student visa, you are also able to order PrEP online from outside the country at a much lower cost than is available in Canada.

PrEP is free for individuals with a valid OHIP card who are either under 24 years of age with no private insurance, are or over 65 years of age or are on some form of social assistance. Here are the steps international student can take to obtain PrEP:

## 1. CALCULATE YOUR RISK

Identify if you would be a good candidate for PrEP based on your sexual activity by using a [risk calculator](#)

## 2. THE PrEP START PROGRAM

This program was created to give individuals access to PrEP while they **figure out which private or public drug program is best for them.**

## 3. REVIEW YOUR COVERAGE

PrEP currently costs between \$250 and \$280 per month in Ontario depending on your pharmacy. This is the amount that you will pay for PrEP if you do not have any insurance coverage.

Look into your health benefits package offered by your schools and student unions to see how much coverage you can get for the generic medications. Sometimes this can be done online, but often requires a phone call to the insurer. The drug name you are enquiring about is called *Tenofovir-Emtricitabine (TDF/FTC)* or *Emtricitabine-Tenofovir alafenamide (FTC/TAF)*.

## 4. ONGOING HEALTH CARE

If you have full or partial drug coverage, you then need to have a conversation with a doctor about getting a prescription and refills. All patients on PrEP should be screened every three months for STIs, HIV and creatinine (to measure how well your kidneys are performing their job of filtering waste from your blood). This regular combination of screenings will also include throat and rectal swabs for STIs. Prescriptions for PrEP are refilled every three months upon completion of the required screening.

Consider these online and in-person clinics in your search for knowledgeable PrEP prescribers:

- [HQ Sexual and Mental Health Clinic](#) (Greater Toronto and Hamilton Area)
- [Ontario Clinic finder](#)
- [The PrEP Clinic](#)
- [Ottawa Public Health Clinic](#)
- [Community Health Centers](#)

## 5. IF COST IS STILL A BARRIER

- a. The [Blue Door Clinic](#) specifically helps international students and newcomers. Connect with them to see if they can help!
- b. According to Health Canada and Canada Border Services Agency, visitors to Canada may import prescription medications directly to their home address in Canada, to not interrupt a course of treatment initiated in their country of origin. Read this guide for visitors to Canada via the [Davie Buyers Club](#).
- c. To learn how to order PrEP online visit [The Sex You Want](#), or [PreP Online](#).

## 6. OTHER WAYS TO PREVENT HIV TRANSMISSION

- a. Remember that you can reduce your risk for HIV by
  - i. using condoms; and
  - ii. having conversations with your partners about whether or not they are consistently taking their PrEP medication (if they are HIV-) or treatment medication (if they are HIV-positive).
- b. If you think you have had a high-risk exposure to HIV (e.g. anal sex with someone who is HIV-positive and not on effective ART or someone of unknown HIV status and you did not use a condom and were not on PrEP; sharing needles when injecting drugs), you may be able to access a 28-day course of post-exposure prophylaxis (PEP).

PEP should be taken as soon as possible after exposure, preferably within 24 – 48 hours, although it can be provided up to 72 hours following exposure. PEP is available at hospital emergency departments, where health care providers will first evaluate your risk of acquiring HIV before determining if you are eligible. PEP can be paid for through a private health insurance plan or out-of-pocket. It's usually only offered for free in the case of exposure through a sexual assault.





## CAN I GET COVERAGE FOR HIV CARE AND TREATMENT IF I TEST POSITIVE?

### PAYING FOR HIV MEDICATION

Similar to PrEP, look into your health benefits coverage through your school as HIV treatment medication may be fully or partially covered. If you've completed your studies and are planning to remain in Canada, you will need to purchase independent health insurance, pay out-of-pocket, or find employment with adequate drug benefits to cover or subsidize your medication and routine blood work costs.

Compassionate access to HIV medications (also called expanded access) may also be an option for some students. However, each drug company has its own compassionate access program. You can obtain the most up-to-date information through physicians or sexual health clinics that provide testing. The Blue Door Clinic and the HQ Sexual and Mental Health Clinic are two clinics that offer support to international students who test positive for HIV.

## YOU DON'T HAVE TO DO IT ALL ALONE

If you are HIV-positive and have come to Ontario as an international student (whether you're enrolled or recently graduated), you can connect with the following services to get advice and additional resources:

- **An HIV/AIDS service organization nearest to you**
- Your current doctor or the sexual health clinic where you tested positive
- **The Blue Door Clinic (GTA)**
- **HIV/AIDS Legal Clinic of Ontario**
- Consult this **guide** for visitors to Canada via the Davie Buyers Club
- **HQ Sexual and Mental Health Clinic**



## WHAT IF I'M HIV+ AND WANT TO STAY IN CANADA AFTER MY STUDIES?

Many LGBTQ+ international students contemplate staying in Canada beyond their studies for many reasons - ranging from job opportunities, to maintaining their friendships, to needing distance from their families of origin. The desire to remain in Canada often increases when people test positive for HIV during their stay.

**MOST PEOPLE** who apply to become permanent residents of Canada must undergo an immigration medical examination, which includes an HIV test. However, the medical exam rarely poses problems for most HIV+ applicants. If an applicant's annual health care costs, including the cost of their HIV medication, do not exceed CAD \$24,057 (as of January 2022), the person will not be found medically inadmissible to Canada on the basis of "excessive demand". It is worth noting that "excessive demand" does not impact medical inadmissibility determinations for refugee claimants, protected persons, and some people under the family member class for sponsorships.

Refugee claimants living with HIV can also access medication without being evaluated for "excessive demand". You may also qualify for refugee status in Canada if you are able to demonstrate that you would be subject to persecution based on sexual orientation, gender identity and/or extreme HIV-related stigma in your country of origin. Additional information on the application process is available at: **The Law Foundation of Ontario**.

There may also be other pathways to permanent residence available to you depending on your individual circumstances. The best way to determine if you may be eligible under one of these pathways is to speak with an immigration lawyer. You may be able to receive free legal advice at your local **community legal clinic**.







## I WANT TO EXPLORE THE POSSIBILITY OF GENDER TRANSITIONING. WHERE CAN I GET MORE INFORMATION?

Questioning or considering changing your gender identity can be both exciting and scary. Social support groups such as Gender Journeys along with other youth groups (for example, [Supporting Our Youth](#)) are available in various forms across the province.

Gender identity changes can include both social transitioning and medical transitioning. Social transitioning may include changes in gender expression, such as how you dress, chest binding, wearing makeup, and changing your name or pronouns. [The Trans ID Clinic](#) provides free legal assistance to trans, two-spirit and non-binary individuals for ID applications, name changes, gender marker changes, and other related needs. Medical transitioning involves



hormone therapy and surgical interventions. Many surgical procedures are covered by OHIP and by extension, would be covered by UHIP and other health care plans. UHIP is more likely than other plans to cover hormone therapy (i.e. testosterone, estrogen and anti-androgen prescriptions); however, it is harder to get coverage for transition-related surgery (TRS).

Medical transitioning often requires consultations with various health care providers that may include nurse practitioners, physicians, psychologists or psychiatrists, and surgical teams. If this is of interest to you, begin your journey by reviewing some of these resources:

- [Women's College Hospital](#)
- [Rainbow Health Ontario](#)
- [OHIP on Sex Reassignment Surgery](#)
- [Sherbourne Health](#)

If you have more questions about TRS, check out these links:

- [Transition-related surgery: frequently asked questions for persons in Ontario considering surgery and the people supporting them by CAMH](#)
- [TRS Assessment and Referral Process for Ministry Approval for OHIP Funding by Rainbow Health Ontario](#)
- [TRS Post-Surgical Care by Rainbow Health Ontario](#)

Not all health care providers in Ontario are knowledgeable about trans health care, despite having the credentials to make referrals for surgery and prescribe hormones. Sometimes it's the patient who provides information to health care providers, such as the [Trans Health Guide](#).





This resource was developed through a collaboration among a broad range of community representatives, organizations and networks dedicated to the sexual and mental health needs of international students in Ontario.