

# Canadian Blood Ban

## History

The Canadian Blood Services is a non-profit charitable organization that is independent of the Canadian government. It is funded mainly through the provincial and territorial governments. The Canadian Blood Services has a multi-tiered system to measure the safety of its blood supply. Before donating, donors are first screened for their health. The screening process for prospective donors includes;

1. Making sure the donor is healthy by asking if they have the flu, sore throat, fever or infection
2. What medications the donor is taking
3. If they have had a vaccination within the last three months
4. Questions about their medical history
5. Questions about their travel history
6. Questions about their lifestyle

Once the blood is donated, it must then go through testing for infectious diseases, including but not limited to HIV and hepatitis. The blood is also surveyed to monitor transmittable diseases in blood donors, investigated for possible transfusion-transmitted infections in blood recipients, and scanned for potential emerging pathogens that may pose a risk in the present or future. All these safety measures are done to protect blood recipients.

## Men Who Have Sex With Men

The policies that banned gay men from donating blood and tissues were first introduced around the world in the mid-1980s. These policies were introduced after the emergence of several reported cases of severe immune deficiency (HIV/AIDS) among gay men in the United States at the end of 1981. This led many to believe that the cause of the immune deficiency was linked to the sexual transmission of infections agents. Furthermore, because many thought that the immune deficiency was only prevalent among gay men, the disease was initially called Gay-Related Immune Deficiency (or GRID). Hence, in the mid-1980s, the predecessor of the Canadian Blood Services—the Canadian Red Cross Blood Transfusion Service—introduced a blood donor restriction on men who have had sex with men (MSM) on the grounds of protecting the blood supply from HIV infection.

In 2006, Canadian Blood Services began conducting a thorough review of the blood donor restrictions on MSM; however, in 2007, the board of directors concluded

that the restrictions were to be maintained because the MSM policy was not discriminatory as it was based on health and safety considerations. May 2013, Canadian Blood Services announced that the deferral period as prescribed and enforced by Health Canada for MSM would be decreased from a ban for "even once since 1977" to "five years from last MSM [sexual] activity". In June 2016, Canadian Blood Services announced that Health Canada had approved its request to shorten the MSM ban from five years to one year, with this policy change to take effect in August 2016. In 2019, Canadian Blood Services amended their policy again, after Health Canada had approved their request to reduce the waiting period for MSM donors from one year to three months. Canadian Blood Services aims to keep its policies as minimally restrictive while also keeping their blood supply safe. Data from HIV in Canada-Surveillance Report in 2017 stated that MSM adults are the largest portion of new HIV infection in Canada at 46.4%. Eligibility is determined by the most current evidence-based research available. Canadian Blood Services states that the 3-month waiting period exists because HIV is not detectable shortly after infection with their current testing technologies

### **Critiques of MSM**

Many critics say that Canadian Blood Services should be using a screening model that evaluates risky behaviour that may result in HIV, not based on an individual's sexuality. If a gay man is having unprotected anal sex in a committed monogamous relationship, they are less likely to be HIV positive than a man with secondary sex partners regardless of gender. All donations go through HIV testing and the approximate nine-day window where HIV goes undetected is the same for a gay man and heterosexual man.

### **Transgender Donors**

In the past, there was ambiguity regarding the screening process for transgender donors before the national criteria were implemented. In August 2016, Canadian Blood Services' new eligibility criteria for transgender people came into effect according to these criteria:

1. Donors who have had lower gender-affirming surgery will be deferred from donating blood for three months after their surgery. They will then be screened in their affirmed gender after three months.
  - a. For example, trans women will be asked if they have had sex with a man in the last 12 months. If the response is yes, they will be deferred for one year after their last sexual contact with a man.

2. Donors who have not had lower gender-affirming surgery will be asked questions based on their sex assigned at birth and will be eligible to donate or be deferred based on these criteria.
  - a. For example, if a transman has had sex with a man in the last 3 months, they will be screened not as an MSM but as a woman

Canadian Blood Services' two main risk factors for trans donors include:

1. Risk of Transfusion-related acute lung injury (TRALI), particularly from trans men.
  - a. It is more likely for donors who have had pregnancies in the past to have antibodies present in their blood plasma that can cause TRALI in a recipient, which is rare but potentially fatal. In order to reduce this risk, instead of transfusing plasma protein from donors at risk for TRALI directly to patients, their plasma is used to produce plasma protein products.
2. Trans individuals in Canada are not included in a separate risk category in the HIV and AIDS annual reports by the Public Health Agency of Canada. Therefore, trans women donors who have not had lower gender-affirming surgery are placed in a higher-risk category if they have had a male sexual partner.

### **Critiques of Transgender Policies**

Transgender folks are screened with questions based on their sex assigned at birth. This then reinforces that transgender folks are not the gender they are. A trans woman or man is intimate with a female, that person will not have to wait before they donate blood, but they will still be screened by the sex they were assigned at birth. This can be rather stigmatizing or gender dysphoria inducing. There are requests that the CBS need to have more medically pertinent questions that are based on actual fact and not just general bias due to it focusing on whether or not a trans person has undergone gender-confirming surgery and not about their lifestyle. There is also no medical proof that any bottom surgeries will directly affect the safety of a transgender person's blood. There is also no data that suggests that the sexual anatomy of a person who is trans would have an impact on their HIV, syphilis or their hepatitis status. It reduces people to a surgical procedure, which is not accessible to everyone and not everyone wants it and that understanding is really outdated. There are also critiques that state that screening trans people by their sex assigned at birth will discourage them from donating blood.

### **How to Protest These Policies!**

1. Ask someone to donate on your behalf — or donate to honour those who can't.
2. Volunteer at a blood drive — while also spreading awareness of the ban.
3. Know who has the ability to change the policy.

- a. It is funded by our governments. Ask your representatives to push for these changes!
- 4. Support organizations working to change the blood ban.
  - a. HIV Edmonton
  - b. Edmonton Men's Health Collective
  - c. Pushing Academics to research the risks
    - i. See CBS's research
  - d. Contacting CBS and give them feedback on their policies and request that they look into it more.
- 5. Contact our Health Minister - Patty Hajdu - [Patty.Hajdu@parl.gc.ca](mailto:Patty.Hajdu@parl.gc.ca)