# Filed and Attested by the DECLARATION OF AYDEN I. SCHEIM, OF Hop of Judicial Records 27 SEP 2021 09:45 am

- 1. My name is Ayden I. Scheim. I have been retained by the Petitioner as an expert in connection with the above-captioned case.
- 2. I am an epidemiologist and received my Ph.D. in Epidemiology and Biostatistics from The University of Western Ontario (Western University) in 2017. I completed postdoctoral training at the University of California, San Diego School of Medicine from 2017 to 2019.
- 3. Since September 2019, I have been an Assistant Professor of Epidemiology and Biostatistics in the Dornsife School of Public Health at Drexel University in Philadelphia, Pennsylvania. I hold affiliate faculty positions at the Li Ka Shing Knowledge Institute at St. Michael's Hospital in Toronto, Canada and in the Department of Epidemiology and Biostatistics in the Schulich School of Medicine and Dentistry at Western University in London, Canada. My professional experience and publications are detailed in my curriculum vitae, which is attached as Exhibit A to this declaration.
- 4. I have been asked by Petitioner's counsel to provide my expert opinion on the impact of name changes on the health, safety, and wellbeing of transgender adults who wish to change their name in official records and documents.
- 5. My opinion expressed herein is based on my experience conducting research on transgender health and wellbeing since 2005. I have held multiple federal

research grants on transgender health from the National Institutes of Health and the Canadian Institutes of Health Research and currently serve as Principal Investigator of transgender health studies funded by both agencies. My research draws on observational epidemiologic data (i.e., surveys) to identify social determinants of mental health, physical health, and access to healthcare among transgender persons.

- 6. As a professor of epidemiology, I also teach graduate-level courses in quantitative research methodology and survey design.
- 7. I have published 32 peer-reviewed research articles specifically on transgender health, in addition to over 20 commentaries, reports, or research briefs. *The Lancet* and the *Annual Review of Public Health*, two of the most-cited public health journals globally, have invited me to contribute review articles on transgender health as the lead author (forthcoming in 2022).
- 8. I have been invited to deliver scientific presentations on transgender health at local, national, and international meetings in the United States, Canada, Europe, Asia, Australia, South America, and Africa. I have served on clinical and research guideline committees for the World Professional Association for Transgender Health (Standards of Care), the National Institutes of Health, and the Williams Institute at the University of California, Los Angeles School of Law.

- 9. I testified as an expert witness on anti-transgender stigma in *Her Majesty* the Queen v. Cardle, 2020 ONSC 7878 (Ontario Superior Court of Justice, Canada). That is the only other case to date in which I have been retained as an expert.
  - 10. I am not charging a fee for my testimony in this case.

# **Summary of Opinions**

- 11. Gender affirmation, which is comprised of social, legal, medical, and psychological dimensions, is a critical determinant of health and well-being for transgender persons. Having one's affirmed name used consistently in social interactions, including in interactions that depend on identity documents, promotes positive mental health.
- 12. Conversely, official records or documents that display a transgender individual's given name, particularly if that name is perceived to conflict with their gender presentation, may cause the individual to experience gender non-affirmation (e.g., being addressed as the wrong gender), harassment or ridicule, accusations of fraud, denial of service, or even violence. These experiences, in turn, may contribute to worsened mental health and avoidance of settings in which official documents or records must be displayed.
  - 13. Official documents and records are required for myriad aspects of daily life, including but not limited to access to healthcare, education, social services, and financial services; entry to age-restricted or secured spaces (e.g., bars, government

buildings, schools, airplanes); making purchases (i.e., by credit card or check); and voting. Therefore, the potential impacts on health, safety, and wellbeing of not being able to change the name on one's documents are pervasive and may seriously curtail social and civic participation, as well as the ability to safely access basic services.

## **Opinions**

- 14. Gender identity refers to one's internal sense of self as a man, woman, or a different gender.
- 15. Assigned sex refers to whether one is identified as male or female at birth, as recorded on the birth certificate. This identification is generally made based on the appearance of the external genitalia alone, without taking into account other dimensions of sex (e.g., chromosomal, hormonal, or other anatomical traits).
- 16. <u>Transgender</u> persons are individuals for whom their gender identity is not aligned with their sex assigned at birth, whether wholly or in part. Herein I use the term "transgender" to include transgender men and women, as well as persons with non-binary gender identities who identify as neither (or both) men and women.
- 17. <u>Cisgender</u> individuals are those whose gender identity is concordant with their sex assigned at birth.
- 18. <u>Gender dysphoria</u> is a diagnosis in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-5). The same phrase is used non-diagnostically to describe associated symptoms. Gender dysphoria is

defined as clinically significant distress or impairment of functioning related to incongruence between gender identity and assigned sex. Importantly, gender dysphoria encompasses distress related not only to physical sex characteristics, but also related to how one is gendered by others (i.e., as a woman, man, or non-binary person).

- 19. Gender affirmation refers to an interpersonal and social process of recognizing and actualizing one's gender identity. Depending on individual needs, gender affirmation may include psychological, social (e.g., change in dress, pronouns, informal name change), medical (e.g., hormones, surgery), and administrative or legal (e.g., changing name or gender marker on documents and records) processes. For transgender people who experience gender dysphoria, gender affirmation is pursued with the goal of reducing or eliminating dysphoria and is the only medically-recognized treatment for gender dysphoria.
- 20. Transgender persons experience discrimination and poor treatment due specifically to identity documents and records that do not accurately reflect the name and gender they use in daily life. In the 2015 United States Transgender Survey ("U.S. Trans Survey"), the largest-ever survey of transgender adults in the United States (n=27,715), 32% of respondents who had presented an identity document that did not match their gender presentation had at least one negative experience, including verbal

<sup>&</sup>lt;sup>1</sup> James SE, Herman JL, Rankin S, et al. The Report of the 2015 U.S. Transgender Survey. National Center for Transgender Equality. 2016:1-302. doi:10.1016/S2468-2667(20)30032-3.

harassment (25%), denial of service (16%), being asked to leave a venue (9%), and assault (2%). Further, racial and ethnic minority respondents including Middle Eastern, American Indian, and Black individuals were more likely to report harassment or violence when presenting mis-matched identity documents.

21. In addition to directly experiencing the abovementioned discrimination, transgender individuals often anticipate stigma and discrimination in interpersonal and institutional interactions and may avoid such situations as a means of self-protection.<sup>2</sup> The vast majority – 84% – of respondents to a 2019 national transgender health survey that I conducted in Canada (n=2,873) reported that, in the past five years, they had avoided public spaces or situations (e.g., restrooms, schools, travel) due to fears of being harassed or "outed" (having their transgender status non-consensually disclosed).<sup>3</sup> In the U.S. Trans Survey, 22.8% of respondents aged 25-64 had avoided healthcare due to anticipated discrimination.<sup>4</sup> Although the study did not explicitly examine the role of identity documents, it found that respondents who described themselves as visually gender non-conforming were more likely to avoid healthcare. Similarly, identity documents that do not match one's gender expression create visible gender non-

<sup>&</sup>lt;sup>2</sup> White Hughto JM, Reisner SL, Pachankis JE. Transgender stigma and health: A critical review of stigma determinants, mechanisms, and interventions. Soc Sci Med. 2015 Nov 11;147:222-231. doi:10.1016/j.socscimed.2015.11.010.

<sup>&</sup>lt;sup>3</sup> The Trans PULSE Canada Team. Health and health care access for trans and non-binary people in Canada. 2020 March 10. Available from: https://transpulsecanada.ca/research-type/reports.

<sup>&</sup>lt;sup>4</sup> Kcomt L, Gorey KM, Barrett BJ, et al.. Healthcare avoidance due to anticipated discrimination among transgender people: A call to create trans-affirmative environments. *SSM - Population Health*. 2020 May 28;11:100608. doi:10.1016/j.ssmph.2020.100608.

conformity in healthcare encounters, even for individuals who might otherwise be perceived as cisgender.

- 22. Conversely, access to a legal name change may lessen discrimination faced in healthcare, employment and housing. A survey of 65 primarily low-income transgender women of color compared those who had completed a legal name change at least nine months earlier to those who were preparing to initiate the process.<sup>5</sup> Those who had completed legal name changes were more likely to be employed, to report incomes above \$1000 per month, and to rent or own their own housing. In addition, they were less likely to report postponing needed medical care in the previous six months.
- 23. Due to stigma, discrimination, and violence, as well as unmet need for gender affirmation, transgender people in the United States face a disproportionate burden of poor mental health. For example, in Behavioral Risk Factor Surveillance System data from the Centers for Disease Control, 24.2% of transgender women, 31.1% of transgender men, and 38.2% of gender non-conforming transgender persons had been diagnosed with depression, as compared to 12.5% of cisgender men and 21.1% of cisgender women.<sup>6</sup> It is estimated that 40% of transgender adults have

<sup>&</sup>lt;sup>5</sup> Hill BJ, Crosby R, Bouris A, et al. Exploring transgender legal name change as a potential structural intervention for mitigating social determinants of health among transgender women of color. Sex Res & Social Policy. 2018 Mar 18;15(1):25-33. doi:10.1007/s13178-017-0289-6.

<sup>&</sup>lt;sup>6</sup> Downing JM, Przedworski JM. Health of transgender adults in the U.S., 2014-2016. *Am J Prev Med.* 2018;55(3):336-344. doi:10.1016/j.amepre.2018.04.045.

attempted suicide, approximately nine times the rate of the general population in the U.S.<sup>7</sup>

- 24. Research supports positive mental health impacts of social and legal gender affirmation. For example, a Canadian study that I co-authored found that among transgender persons possessing at least one legal identity document with a gender marker congruent with gender presentation were at reduced risk of past-year suicide ideation and attempts.<sup>8</sup> Another study, among transgender youth aged 15-21 in the U.S., found that use of one's chosen name by others was associated with reduced depression, suicidal ideation, and suicidal behavior, with the lowest levels of depression and suicidality when one's chosen name was used across home, school, work, and social contexts.<sup>9</sup>
- 25. Two studies have specifically examined the relationship between the name on one's legal identity documents and mental health outcomes. Both indicate protective mental health effects of access to legal name changes.
- **26.** First, drawing on data from the U.S. Trans Survey, I conducted an analysis of data from 22,286 respondents to assess the relationship between gender-concordant

<sup>&</sup>lt;sup>7</sup> James SE, Herman JL, Rankin S, et al. The Report of the 2015 U.S. Transgender Survey. National Center for Transgender Equality; 2016:1-302. doi:10.1016/S2468-2667(20)30032-3.

<sup>&</sup>lt;sup>8</sup> Bauer GR, Scheim AI, Pyne J, et al. Intervenable factors associated with suicide risk in transgender persons: a respondent driven sampling study in Ontario, Canada. *BMC Public Health*. 2015 June 2;15(1):525. doi:10.1186/s12889-015-1867-2.

<sup>&</sup>lt;sup>9</sup> Russell ST, Pollitt AM, Li G, et al. Chosen name use is linked to reduced depressive symptoms, suicidal ideation, and suicidal behavior among transgender youth. *J Adolesc Health*. 2018 Oct;63(4):503-505.

identity documents or records and mental health. <sup>10</sup> Specifically, adjusting for a range of potential confounders, I examined whether current psychological distress and past-year suicidal ideation, planning, and attempts varied based on whether all, some, or none of a respondent's documents reflected the name or gender marker they preferred to have listed on their documents.

- 27. I found that as compared to transgender individuals who had no identity documents reflecting the name they preferred, those who had the name they preferred on some or all documents were less likely to report psychological distress and suicidality.
- 28. Indicating the importance of consistently gender-concordant documents, the protective associations with mental health were notably larger for having the preferred name on all documents. Adjusting for confounders, respondents with their preferred name on all documents were 18% less likely to meet criteria for serious psychological distress (a validated proxy for clinically significant mental illness<sup>11</sup>), 11% less likely to have seriously considered suicide in the past year, and 18% less likely to have made a plan to die by suicide in the past year.
- 29. Second, in a 2019 study of 475 transgender adults in Massachusetts and Rhode Island who wanted to change the name on their drivers license and passport,

<sup>&</sup>lt;sup>10</sup> Scheim AI, Perez-Brumer AG, Bauer GR. Gender-concordant identity documents and mental health among transgender adults in the USA: a cross-sectional study. *The Lancet Public Health.* 2020 Mar 16;5(4):e196-e203. doi:10.1016/S2468-2667(20)30032-3.

<sup>&</sup>lt;sup>11</sup> Kessler RC, Barker PR, Colpe LJ, et al. Screening for serious mental illness in the general population. *Arch Gen Psychiatry.* 2003 Feb;60(2): 184–89. doi:10.1001/archpsyc.60.2.184.

adjusting for potential confounders, individuals who had changed their name on both documents had lower odds of clinically significant depression, anxiety, and overall psychological distress symptoms.<sup>12</sup>

30. In summary, legal name changes are a critical part of gender affirming treatment for transgender persons and are associated with substantial reductions in the mental health challenges they too often face. Legal name changes may also improve social, health, and economic conditions of transgender individuals by reducing their exposure to discrimination, harassment, and violence related to gender-incongruent identity documents.

## VERIFICATION

I, Ayden I. Scheim, hereby state that the facts above set forth are true and correct to the best of my knowledge, information, and belief. I understand that the statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

Executed this  $\frac{7}{2}$  day of  $\frac{9}{2021}$ .

Ayden I. Scheim, Ph.D

<sup>&</sup>lt;sup>12</sup> Restar A, Jin H, Breslow A, et al. Legal gender marker and name change is associated with lower negative emotional response to gender-based mistreatment and improve mental health outcomes among trans populations. *SSM - Popul Health*. 2020 Aug;11:100595. doi:10.1016/j.ssmph.2020.100595.

## Ayden I. Scheim

#### **CONTACT**

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#### **EDUCATION**

2017 Ph.D., Epidemiology and Biostatistics

Western University (The University of Western Ontario), London, Canada

Advisor: Dr. Greta Bauer

Dissertation: Discrimination and Health: Measurement and Impacts on Ontario's

Transgender Communities

2011 B.A. (Honors), Sociology

University of Toronto, Toronto, Canada

#### **ACADEMIC APPOINTMENTS**

2019 - **Assistant Professor**, Department of Epidemiology and Biostatistics, Dornsife School of Public Health, Drexel University, Philadelphia, USA.

2020 - **Adjunct Assistant Professor,** Department of Epidemiology and Biostatistics, Schulich School of Medicine and Dentistry, Western University, London, Canada.

2019 - **Affiliate Scientist,** Li Ka Shing Knowledge Institute, St. Michael's Hospital, Toronto, Canada.

2018-2019 **Associate Scientist,** Li Ka Shing Knowledge Institute, St. Michael's Hospital, Toronto, Canada.

2017-2019 **Postdoctoral Fellow,** Division of Infectious Diseases and Global Public Health, Department of Medicine, University of California San Diego.

## **EMPLOYMENT HISTORY**

2018-2019 **Consultant**, Development of a Global Fund-supported needle and syringe exchange program in Sierra Leone. *National HIV/AIDS Secretariat, Government of Sierra Leone*.

2018 **Consultant,** Preparation of application for an exemption to operate mobile supervised injection services. *Middlesex London Health Unit*, Canada.

2017-2019 **Consultant**, Monitoring and evaluation. Capacity-building intervention for transgender organizations in low- and middle-income countries. *IRGT: A Global Network of Trans Women and HIV, Global Forum on MSM and HIV*.

Ayden Scheim, PhD – Curriculum Vitae, May 2021 Case ID: 210901990

2017-2018	<b>Research Manager</b> , Centre on Drug Policy Evaluation, Centre for Urban Health Solutions, Li Ka Shing Knowledge Institute, <i>St. Michael's Hospital</i> , Toronto, Canada.
2015-2017	Consultant, Health care provider transgender education. Rainbow Health Ontario.
2015-2016	<b>Consultant</b> , Research and writing of technical brief on transgender HIV data collection. IRGT: A Global Network of Trans Women and HIV, Global Forum on MSM and HIV.
2013-2014	<b>Research Assistant</b> , Linking Molecular and Social Cluster Analyses in HIV Transmission, <i>University of Windsor</i> (PI: Barry Adam).
2013	Consultant, Trans-inclusive policy and practice. Public Service Alliance of Canada Local 610.
2012-2013	Research Assistant, Trans PULSE Project, Western University (PI: Greta Bauer).
2011	Counselor, AIDS & Sexual Health Info Line. Toronto Public Health.
2011	<b>Research Assistant</b> , Health Systems and Health Equity Research Group, Centre for Addiction and Mental Health (PI: Lori Ross), Toronto, Canada.
2009-2010	<b>Project Manager</b> , Trans Men's Pap Testing Campaign. <i>Sherbourne Health Centre</i> , Toronto, Canada.
2008-2011	Shelter and Housing Worker, Fred Victor Centre, Toronto, Canada.
2006-2009	<b>Research Assistant</b> , Bisexual Mental Health Study, Sherbourne Health Centre and Centre for Addiction and Mental Health (PI: Lori Ross), Toronto, Canada.
2005-2007	Trans Youth Program Coordinator, Supporting Our Youth. Sherbourne Health Centre, Toronto, Canada.
2005-2006	Research Assistant, Queer Youth Speak Project, Shout Clinic and Centre for Addiction and Mental Health, Toronto, Canada.
2003-2006	HIV/AIDS Educator, Griffin Centre, Toronto, Canada.

## **ADDITIONAL TRAINING**

## **Competitive Workshops**

2017 Health Disparities, Health Inequities, and Vulnerable Populations Workshop Inter-University Consortium for Social and Political Research Summer Program, University of Michigan – Ann Arbor, USA

2015 Summer Institute in LGBT Population Health Fenway Institute, Boston, USA

## **HONORS & AWARDS**

Amounts in CDN

2018 Canadian Association for HIV Research New Investigator Award, Key Populations (\$1,000)

Ayden Scheim, PhD – Curriculum Vitae, May 2021

Case ID: 210901990

2017-2020	Canadian Institutes of Health Research Postdoctoral Fellowship (\$150,000)
2017	World Professional Association for Transgender Health Outstanding Contribution (\$500)
2017	Best Oral Presentation, Canadian Society for Epidemiology and Biostatistics (\$250)
2014-2017	Pierre Elliott Trudeau Foundation Scholarship (\$233,000; partially declined)
2014-2017	Canadian Institutes of Health Research (CIHR) Vanier Scholarship (\$150,000)
2014	Western University Vice President of Research Support Grant (\$10,000)
2014-2015	Ontario Graduate Scholarship (\$15,000; declined)
2014	CIHR Institute of Gender and Health Travel Award (\$2,500)
2013-2017	Schulich Dean's MSc-PhD Transfer Award (\$20,000; partially declined)
2012	Dr. Carol Buck Graduate Scholarship in Epidemiology (\$1,000)
2011-2013	CIHR HIV/AIDS Community-Based Research Master's Award (\$35,000)
2011-2012	Ontario Graduate Scholarship (\$15,000; declined)
2011-2012	Universities Without Walls, CIHR National HIV Training Fellowship (\$17,000)
2011-2016	Western Graduate Research Scholarship (\$40,000)

#### **PUBLICATIONS**

\*Student/Mentee

#### **Peer-reviewed Articles**

- 51. Chakrapani V, <u>Scheim AI</u>, Newman PA, Shunmugam M, Rawat S, Baruah D, Bhatter A, Nelson R, Jaya A, Kaur M. Affirming and negotiating gender in family and social spaces: Stigma, mental health and resilience among transmasculine people in India. Culture, Health & Sexuality. 2021 [Epub ahead of print].
- 50. Roth AM, Mitchell AK, Mukherjee R, Scheim AI, Ward KM, Lankenau SE. Prevalence and correlates of syringe disposal box use in a Philadelphia neighborhood with high levels of public drug injection. Substance Use & Misuse. 2021 [Epub ahead of print].
- 49. Meyers SA\*, Rafful C, Mittal ML, Tirado-Muñoz J, Smith LR, Jain S, Sun X, Garfein R, Strathdee S, DeBeck K, Hayashi K, McNeil R, Milloy M-J, Olding M, Guise A, Werb D, Scheim AI. Examining the gender composition of drug injecting initiation events: A mixed methods investigation of three North American contexts. International Journal of Drug Policy 2021; 90: 103056.
- 48. <u>Scheim AI</u>, Bouck Z, Tookey P, Hopkins S, Sniderman R, McLean E, Garber G, Baral S, Rourke SB, Werb D. Supervised consumption service use and recent non-fatal overdose among people who inject drugs in Toronto, Canada. International Journal of Drug Policy 2021; 87:102993.
- 47. Rich A, <u>Scheim AI</u>, Koehoorn M, Poteat T. Non-HIV chronic disease burden among transgender populations globally: A systematic review and narrative synthesis. Preventive Medicine Reports 2020: 20:101259.
- 46. <u>Scheim AI</u>, Kacholia V\*, Logie CH, Chakrapani V, Ranade K, Gupta S. Health of transgender men in low- and middle-income countries: A scoping review. BMJ Global Health 2020; 5:e003471.
- 45. Lacombe-Duncan A, Kia H, Logie CH, Todd KP, Persad Y, Leblanc G, Nation K, <u>Scheim AI</u>, Lyons T, Horemans C, Loutfy M. A qualitative exploration of barriers to HIV prevention, treatment, and support: Perspectives of transgender women and service providers. Health and Social Care in the Community 2020 [Epub ahead of print].

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- 44. Zlotorzynska M, Sanchez T, <u>Scheim AI</u>, Lyons C, Maksut J, Wiginton JM, Baral S. Transgender Women's Internet Survey and Testing (TWIST): Protocol and key indicators report. Transgender Health 2020 [Epub ahead of print].
- 43. Gicquelais RE, Werb D, Marks C, Ziegler C, Mehta SH, Genberg BL, <u>Scheim AI</u>. Prevalence and correlates of providing and receiving assistance with the transition to injection drug use. Epidemiologic Reviews 2020 [Epub ahead of print].
- 42. <u>Scheim AI</u>, Maghsoudi N, Marshall Z, Churchill C, Ziegler C, Werb D. Impact evaluations of drug decriminalisation and legal regulation on drug use, health and social harms: A systematic review. BMJ Open 2020; 10:e035148.
- 41. Maksut JL, Sanchez TH, Wiginton JM, <u>Scheim AI</u>, Logie CH, Zlotorzynska M, Lyons CE, Baral SD. Gender identity and sexual behavior stigmas, severe psychological distress, and suicidality in an online sample of transgender women in the United States. Annals of Epidemiology 2020; 52:15-22.
- 40. Ferlatte O, Panwala V, Rich AJ, <u>Scheim AI</u>, Blackwell E, Scott K, Salway T, Knight R. Identifying health differences between transgender and cisgender gay, bisexual and other men who have sex with men using a community-based approach. The Journal of Sex Research 2020; 57(8):1005-1013.
- 39. Lacombe-Duncan A, Logie CH, Persad Y, Leblanc G, Nation K, Kia H, <u>Scheim AI</u>, Lyons T, Loutfy M. Transgender Education for Affirmative and Competent HIV and Healthcare (TEACHH): Protocol of community-based participatory intervention development and a non-randomized multi-site pilot study with pre- post-test design in Canada. BMJ Open 2020; 10: e034144.
- 38. <u>Scheim AI</u>, Perez-Brumer AG, Bauer GR. Gender-concordant identity documents and mental health among transgender adults in the United States: A cross-sectional survey. The Lancet Public Health 2020; 5(4): E196-E203.
- 37. Maghsoudi N, McDonald K, Stefan C, Beriault D, Mason K, Barnaby L, Altenberg J, MacDonald R D, Caldwell J, Nisenbaum R, Leece P, Watson T M, Tupper K W, Kufner L, Scheim AI, Werb D. Evaluating networked drug checking services in Toronto, Ontario: Study protocol and rationale. Harm Reduction Journal 2020; 17:9.
- 36. Moran A, Scheim AI, Lyons C, Liestman B, Drame F, Ketende S, Diouf D, Ba I, Ezouatchi R, Bamba A, Kouame A, Baral S. Characterizing social cohesion and gender identity as risk determinants of HIV among cisgender men who have sex with men and transgender women in Côte d'Ivoire. Annals of Epidemiology 2020; 42: 25-32.
- 35. Bardwell G, Strike C, Mitra S, <u>Scheim AI</u>, Barnaby L, Altenberg J, Kerr T. "That's a double-edged sword": Exploring the integration of supervised consumption services within community health centres in Toronto, Canada. Health and Place 2020; 102245.
- 34. <u>Scheim AI</u>, Knight R, Shulha H, Nosova E, Hayashi K, Milloy M-J, Kerr T, DeBeck K. Characterizing men who have sex with men and use injection drugs in Vancouver, Canada. AIDS & Behavior 2019; 23(12):3324-3330.
- 33. Dharma C, <u>Scheim AI</u>, Bauer GR. Exploratory factor analysis of two sexual health scales for transgender people: Trans-specific condom/barrier negotiation self-efficacy (T-Barrier) and transspecific sexual body image worries (T-Worries). Archives of Sexual Behavior 2019; 48(5):1563-1572.

- 32. <u>Scheim AI, Lyons C, Ezouatchi R, Liestman B, Drame F, Diouf D, Ba I, Bamba A, Kouame A, Baral S. Sexual behavior stigma and depression among transgender women and cisgender men who have sex with men in Côte d'Ivoire. Annals of Epidemiology 2019; 33: 79-83.</u>
- 31. <u>Scheim AI</u>, Bauer GR. The Intersectional Discrimination Index: Development and validation of measures of self-reported enacted and anticipated discrimination for intercategorical analysis. Social Science & Medicine 2019; 226: 225-235.
- 30. Bauer GR, <u>Scheim AI.</u> Methods for analytic intercategorical intersectionality in quantitative research: Discrimination as a mediator of health inequalities. Social Science & Medicine 2019; 226: 236-245.
- 29. Leonardi M, Frecker H, <u>Scheim AI</u>, Kives S. Reproductive health considerations in sexual and/or gender minority adolescents. Journal of Pediatric and Adolescent Gynecology 2019; 32(1):15-20.
- 28. <u>Scheim AI</u>, Bauer GR. Sexual inactivity among transfeminine persons: A Canadian respondent-driven sampling survey. The Journal of Sex Research 2019; 56(2): 264-271.
- 27. <u>Scheim AI</u>, Adam BD, Marshall Z. Gay, bisexual, and queer trans men navigating sexual fields. Sexualities 2019; 22(4): 566-586.
- 26. Meyers SA\*, <u>Scheim A</u>, Jain S, Sun X, Milloy MJ, DeBeck K, Hayashi K, Garfein R, Werb D. Gender differences in the provision of injection initiation assistance: A comparison of three North American settings. Harm Reduction Journal 20198 15:59.
- 25. <u>Scheim AI</u>, Nosova E, Knight R, Hayashi K, Kerr T. HIV incidence among men who have sex with men and inject drugs in a Canadian setting. AIDS & Behavior 2018; 22(12): 3957-3961.
- 24. <u>Scheim AI</u>, Bardwell G, Rachlis B, Mitra S, Kerr T. Syringe sharing among people who inject drugs in London, Canada. Canadian Journal of Public Health 2018; 109: 174-182.
- 23. Kennedy MC, <u>Scheim AI</u>, Rachlis B, Mitra S, Bardwell G, Rourke S, Kerr T. Willingness to use drug checking within supervised injection services in a mid-sized Canadian city. Drug and Alcohol Dependence 2018; 185: 248-252.
- 22. Poteat T, Malik M, Scheim A, Elliot A. HIV prevention among transgender populations: Knowledge gaps and evidence for action. Current HIV/AIDS Reports 2017; 14(4): 141-152.
- 21. <u>Scheim AI</u>, Zong X, Giblon R, Bauer GR. Disparities in access to family physicians among transgender people in Ontario, Canada. International Journal of Transgenderism 2017; 3: 343-352.
- 20. Mitra S, Rachlis B, <u>Scheim A</u>, Bardwell G, Rourke S, Kerr T. Acceptability and design preferences of supervised injection services among people who inject drugs in a mid-sized Canadian city. Harm Reduction Journal 2017; 14:46.
- 19. Bardwell G, <u>Scheim AI</u>, Mitra S, Kerr T. Assessing support for supervised injection services among community stakeholders in London, Canada. International Journal of Drug Policy 2017; 48: 27-33.

- 18. Bauer GR, Braimoh J, <u>Scheim AI</u>, Dharma C. Transgender-inclusive measures of sex/gender for population surveys: Mixed-methods evaluation and recommendations. PLoS ONE 2017; 12(5): e0178043.
- 17. <u>Scheim AI</u>, Bauer GR, Shokoohi M. Drug use among transgender people in Ontario, Canada: Disparities and associations with social exclusion. Addictive Behaviors 2017; 72: 151-158.
- 16. <u>Scheim AI</u>, Rachlis B, Bardwell G, Mitra S, Kerr T. Public drug injecting in London, Ontario: A cross-sectional survey. Canadian Medical Association Journal Open 2017; 5: e290-e294.
- 15. <u>Scheim AI</u>, Bauer GR, Travers R. HIV-related sexual risk among transgender men who are gay, bisexual, or have sex with men. Journal of Acquired Immune Deficiency Syndromes 2017; 74: e89-e96.
- 14. <u>Scheim AI</u>, Travers R. Barriers and facilitators to HIV and sexually transmitted infections testing for gay, bisexual, and other transgender men who have sex with men. AIDS Care 2017; 8: 990-995.
- 13. <u>Scheim AI</u>, Bauer GR, Shokoohi M. Heavy episodic drinking among transgender persons: Disparities and predictors. Drug and Alcohol Dependence 2016; 167:156-162.
- 12. Poteat T, Scheim AI, Xavier J, Reisner SL, Baral S. Global epidemiology of HIV infection and related syndemics affecting transgender people. Journal of Acquired Immune Deficiency Syndromes 2016; 73 (Suppl 3):S210-219.
- 11. <u>Scheim AI</u>, Santos G-M, Arreola S, Makofane K, Do TD, Hebert P, Thomann M, Ayala G. Inequities in access to HIV prevention services for transgender men: Results of a global survey of men who have sex with men. Journal of the International AIDS Society 2016; 19 (Suppl 2): 20779.
- 10. Souleymanov R, Kuzmanović D, Marshall Z, <u>Scheim AI</u>, Mikiki M, Worthington C, Millson MP. The ethics of community-based research with people who use drugs: Results of a scoping review. BMC Medical Ethics 2016; 17:25.
- 9. <u>Scheim AI</u>, Bauer GR, Coleman T. Socio-demographic differences by survey mode in a respondent-driven sampling study of transgender people in Ontario, Canada. LGBT Health 2016; 3(5): 391-395.
- 8. Bauer GR, Zong X, <u>Scheim AI</u>, Hammond R, Thind A. Factors impacting transgender patients' discomfort with their family physicians: A respondent-driven sampling survey. PLoS ONE 2015; 10(12): e0145046-16.
- 7. Bauer GR, <u>Scheim AI</u>, Pyne J, Travers R, Hammond R. Intervenable factors associated with suicide risk in transgender persons: A respondent-driven sampling study in Ontario, Canada. BMC Public Health 2015; 15:525.
- 6. <u>Scheim AI</u>, Bauer GR. Sex and gender diversity among transgender people in Ontario, Canada: Results from a respondent-driven sampling survey. Journal of Sex Research 2015; 52(1):1-14.
- 5. Bauer GR, Scheim AI, Deutsch M, Massarella C. Reported emergency department avoidance, utilization and experiences of transgender persons in Ontario, Canada: Results from a respondent-driven sampling survey. Annals of Emergency Medicine 2014; 63(6): 713-720.

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- 4. <u>Scheim AI</u>, Jackson R, James E, Dopler S, Pyne J, Bauer GR. Barriers to well-being for Aboriginal gender-diverse people: Results from the Trans PULSE Project in Ontario, Canada. Journal of Ethnicity and Inequalities in Health and Social Care 2013; 6(4): 108-120.
- 3. Marcellin RL, Bauer GR, Scheim AI. Intersecting impacts of transphobia and racism on HIV risk among trans persons of colour in Ontario, Canada. Journal of Ethnicity and Inequalities in Health and Social Care 2013; 6(4): 97-107.
- 2. Bauer GR, Redman N, Bradley K, <u>Scheim AI</u>. Sexual health of trans men who are gay, bisexual, or who have sex with men: Results from Ontario, Canada. International Journal of Transgenderism 2013; 14(2): 66-74.
- 1. Li T, Dobinson C, <u>Scheim AI</u>, Ross LE. Unique issues bisexual people face in intimate relationships: A descriptive exploration of lived experience. Journal of Gay and Lesbian Mental Health 2013; 17(1): 21-39.

#### **Commentaries and Letters**

- 6. Rich AJ, Salway T, Scheim A, Poteat T. Sexual minority stress theory: Remembering and honoring the work of Virginia Brooks. LGBT Health 2020; 7(3): 124-127.
- 5. <u>Scheim AI</u>, Appenroth MN, Beckham SW, Goldstein Z, Grinspan Cabral M, Keatley JG, Radix A. Transgender HIV research: nothing about us without us. The Lancet HIV 2019; 6(9): e566-e567.
- 4. Bauer GR, <u>Scheim AI.</u> Advancing quantitative intersectionality research methods: Intracategorical and intercategorical approaches to shared and differential constructs. Social Science & Medicine 2019; 226: 260-262.
- 3. <u>Scheim AI, Werb D. Integrating supervised consumption into a continuum of care for people who use drugs: The next generation of research. Canadian Medical Association Journal 2018; 190(31): e921-e922.</u>
- 2. Gilbert M, Swenson L, Unger D, <u>Scheim A</u>, Grace D. Need for robust and inclusive public health ethics review of the monitoring of HIV phylogenetic clusters for HIV prevention. The Lancet HIV 2016; 3(10): e641.
- 1. Bauer GR, <u>Scheim AI</u>. Sampling bias and transgender HIV studies. The Lancet Infectious Diseases 2013; 13: 832.

#### **Book Chapters**

- 7. <u>Scheim AI.</u> Epidemiology. In Goldberg A, Beemyn G, eds., SAGE Encyclopedia of Trans Studies; 2021.
- 6. Scheim AI. HIV/STIs. In Goldberg A, Beemyn G, eds., SAGE Encyclopedia of Trans Studies; 2021.
- 5. <u>Scheim AI.</u> Measuring Intersectional Stigma. In Stall R, Dodge B, Bauermeister JA, Poteat T, Beyrer C, eds. *LGBTQ Health Research: Theory, Methods, Practice*. Johns Hopkins University Press; 2020.
- 4. Bauer GR, Braimoh J, <u>Scheim AI</u>, Dharma C. New Multidimensional Sex/Gender Measure. In Milhausen R, Fisher T, Davis C, Yarber B, Sakaluk J, eds., *Handbook of Sexuality-Related Measures*, 4<sup>th</sup> ed. Taylor and Francis; 2015: 351-353.

- 3. Dharma C, <u>Scheim AI</u>, Bauer GR. Trans-Specific Sexual Body Image Worries Scale. In Milhausen R, Fisher T, Davis C, Yarber B, Sakaluk J, eds., *Handbook of Sexuality-Related Measures*, 4<sup>th</sup> ed. Taylor and Francis; 2015: 155-156.
- 2. <u>Scheim AI</u>, Winters L, Marshall Z, Jefferies D, Baral S. The prevalence of HIV among transwomen sex workers. In Nuttbrock L, ed., *Transgender Sex Work and Society*. New York: Harrington Park Press; 2015: 118-145.
- 1. <u>Scheim AI</u>, Ware SM, Redman N, Marshall Z, Giambrone B. Sexual health on our own terms: The Gay/Bi/Queer Trans Men's Working Group. In Irving D, Raj R, eds., *Trans Activism in Canada: A Reader.* Toronto: Canadian Scholars' Press; 2014: 247-258.

## Research Reports

- 14. Maghsoudi N, Rammohan I, Bowra A, Sniderman R, Tanguay J, Bouck Z, <u>Scheim A</u>, Dan Werb, Owusu-Bempah A. *How diverse is Canada's legal cannabis industry? Examining race and gender of its executives and directors.* October 2020. Available from: <a href="https://bit.ly/3dHrKVP">https://bit.ly/3dHrKVP</a>
- 13. The Trans PULSE Canada Team. *Health and health care access for trans and non-binary people in Canada.* March 2020. Available from: <a href="https://bit.ly/3c4gXTu">https://bit.ly/3c4gXTu</a>
- 12. Kerr T, Scheim AI, Bardwell G, Mitra S, Rachlis B, Bacon J, Murray K, Rourke S. Ontario Integrated Supervised Injection Services Feasibility Study: London report. Toronto: Ontario HIV Treatment Network; 2017. <a href="http://bit.ly/2kIU1Q2">http://bit.ly/2kIU1Q2</a>
- 11. <u>Scheim AI</u>, for the IRGT: A Global Network of Trans Women and HIV. *Counting trans people in:*Advancing global data collection on transgender communities and HIV. Oakland, CA: Global Forum on MSM and HIV; 2017. <a href="http://tinyurl.com/hejj8vf">http://tinyurl.com/hejj8vf</a>
- 10. Bauer GR, Scheim AI, for the Trans PULSE Team. Transgender people in Ontario, Canada: Statistics from the Trans PULSE Project to inform human rights policy. London, Ontario; 2015. http://tinyurl.com/zzb266w
- 9. Bauer G, Bowleg L, Rouhani S, <u>Scheim A</u>, Blot S. *Harnessing the power of intersectionality: Guidelines for quantitative intersectionality health inequities research*. London, Canada; 2014. <a href="https://tinyurl.com/yymhrghc">https://tinyurl.com/yymhrghc</a>
- 8. <u>Scheim A</u>, Bauer G, Pyne J. *Avoidance of public spaces by trans Ontarians*. Trans PULSE Project; 2013. http://tinyurl.com/hb3dqsp
- 7. <u>Scheim A</u>, Bauer G. Cervical and breast cancer screening among trans people in Ontario: A report prepared for the Canadian Cancer Society. Trans PULSE Project; 2013. <u>http://tinyurl.com/zu8yhpo</u>
- 6. <u>Scheim A</u>, Cherian M, Bauer G, Zong X. *Joint effort: Prison experiences of Trans PULSE participants and recommendations for change.* Trans PULSE Project; 2013. <a href="http://tinyurl.com/hbmso7e">http://tinyurl.com/hbmso7e</a>
- 5. Marcellin RL, <u>Scheim A</u>, Bauer G, Redman N. *Experiences of racism and ethnicity-related discrimination among trans people in Ontario*. Trans PULSE Project; 2013. <a href="http://tinyurl.com/zchip9n">http://tinyurl.com/zchip9n</a>
- 4. Marcellin RL, <u>Scheim A</u>, Bauer G, Redman N. *Experiences of transphobia among trans Ontarians*. Trans PULSE Project; 2013. <a href="http://tinyurl.com/gmazvm4">http://tinyurl.com/gmazvm4</a>

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- 3. Marshall Z, Ware S, Scheim A. The development, challenges and successes of the Gay/Bi/Queer Trans Men's Working Group. In K. Baker (Ed.), Global Case Study Project: Rights-Based Approaches to Health and Health Care for Transgender People. NY: Open Society Foundations; 2013. <a href="http://tinyurl.com/zegy45y">http://tinyurl.com/zegy45y</a>
- 2. <u>Scheim A</u>, Robinson M, Anderson S. Reproductive options for trans people: Rainbow Health Ontario; 2012. http://tinyurl.com/oyvyj49
- 1. Sevelius J, <u>Scheim A</u>, Giambrone B. *What are transgender men's HIV prevention needs?* Center for AIDS Prevention Studies, University of California San Francisco; 2010. <a href="https://tinyurl.com/yxdr3p49">https://tinyurl.com/yxdr3p49</a>

## **Popular Press**

1. Peirce J, Stoicescu C, Thumath M, <u>Scheim A</u>, Forrest J. How to heal the scars of Canada's war on drugs (Opinion). *Ottawa Citizen*, 1 September 2017. <a href="http://bit.ly/2gmx5EB">http://bit.ly/2gmx5EB</a>

#### RESEARCH FUNDING

\*Direct costs only. Note: Canadian grants do not include investigator salaries.

#### **Active Grants**

Advancing intersectional discrimination measures for health disparities research (PI: Scheim AI). NIH/NIMHD R21 MD016177-01: \$275,000 USD, 2021-2023.

Gendered situated vulnerabilities and mental health among transgender men in India (PI: <u>Scheim AI</u>). NIH/NIMH R21 MH125263-01: \$275,000 USD, 2021-2023.

Preventing Injecting and Overdose by Disrupting Injection Drug Use Transitions: The PRIMER II Study (PI: Werb D). Canadian Institutes of Health Research: \$761,175 CDN, 2021-2026.

Canadian Research Initiative in Substance Misuse Implementation Science Program on Opioid Interventions and Services – Prairies (PI: Wild C). Canadian Institutes of Health Research: \$1,875,000 CDN, 2018-2022.

CIHR HIV/AIDS Community-Based Research Collaborative (PI: Rourke S). Canadian Institutes of Health Research: \$1,500,000 CDN, 2017-2022.

Rapidly assessing the impact of the COVID-19 pandemic and response on clinical and social outcomes, service utilization, and the unregulated drug supply experienced by people who use drugs in Toronto (PI: Werb D). Canadian Institutes of Health Research: \$206,760 CDN, 2020-2021.

Comparing treatment outcomes opioid use disorder before and after the COVID-19 outbreak in Philadelphia: A natural experiment (PI: Roth A). Fordham University HIV and Drug Abuse Prevention Research Ethics Training Institute: \$30,000 USD, 2020-2021.

A cross-sectional survey of PrEP awareness, barriers and facilitators for PrEP uptake, and the impact of dosing mechanisms on willingness to take PrEP among MSM indicated for PrEP use in Philadelphia (PI: Wells S). Merck: 2020-2021.

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Securing safe supply during COVID-19 and beyond: Scoping review and knowledge mobilization (PI: Herder M). Canadian Institutes of Health Research: \$49,952 CDN, 2020.

The Ontario Integrated Supervised Injection Services Research Program: Examining uptake and impacts in different community settings and models of care (MPIs: Rourke S, <u>Scheim AI</u>, Leonard L, Baral S, Garber G). Canadian Institutes of Health Research: \$646,424 CDN, 2017-2020.

## **Completed Grants**

A community-based cohort study of HIV pre-exposure prophylaxis in Ontario (PI: Tan D). Canadian Institutes of Health Research: \$450,000 CDN, 2017-2020.

Developing a community-based study of transgender men's health and human rights in India (PI: <u>Scheim AI</u>). Canadian Institutes of Health Research Planning and Dissemination Grant: \$19,130 CDN, 2018-2019.

Adaptation of a theoretically based mobile app to increase PrEP uptake among MSM (Consultant; PI: Sullivan P). NIH R01DA045612-02S1: 2018-2019.

Leveraging psychometric strategies and biovalidation to characterize optimal metrics of stigma for transgender women (Consultant; PI: Baral S). NIH R01MH110358-02S1: 2018-2019.

Transgender women removing healthcare barriers to engagement in the HIV prevention and care cascades (PI: Logie C). Canadian Institutes of Health Research: \$40,000 CDN, 2018-2019.

HIV prevention for gay and bisexual men: A multisite study and development of new HIV prevention interventions (PI: Hart T). Canadian Institutes of Health Research: \$1,500,000 CDN, 2014-2019.

Health and social experiences of transgender men in India (PI: <u>Scheim AI</u>). UC San Diego Global Health Institute Faculty/Postdoc Research Grant: \$1,500 USD, 2017.

Ontario Integrated Supervised Injection Site Feasibility Study (MPIs: Kerr T, Scheim AI, Marshall Z, Rourke S). Canadian Institutes of Health Research Centre for REACH in HIV/AIDS: \$89,150 CDN, 2015-2017.

Trans Priorities: Cross-country trans women and HIV research priority setting (PI: Marshall Z). Canadian Institutes of Health Research Centre for REACH in HIV/AIDS: \$69,821 CDN, 2015-2017.

Planning Trans PULSE Canada: A national survey of transgender health (MPIs: Bauer G, Scheim AI, Hammond R, Travers R). Canadian Institutes of Health Research Planning and Dissemination Grant: \$9,972 CDN, 2015-2016.

Improving quantitative research methods in gender, sex and population health: Theory, evidence and applications for multi-dimensionality and intersectionality (PI: Bauer G). Canadian Institutes of Health Research: \$296,749 CDN, 2013-2018.

Community-based research and research ethics: Creating community products to promote ethical research practices with people who use drugs (PI: Milson P). Canadian Institutes of Health Research Social Research Centre in HIV Prevention: \$24,000 CDN, 2013-2015.

Trans Men Who Have Sex with Men Sexual Health Study (MPIs: Adam B, <u>Scheim AI</u>, Marshall Z, Travers R, Ware S). Canadian Institutes of Health Research: \$99,552 CDN, 2012-2015.

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#### **PRESENTATIONS**

## Presentations at Scientific Meetings

Scheim AI, Bouck Z, Tookey P, Hopkins S, Sniderman R, Garber G, Baral S, Kerr T, Rourke S, Werb D. Supervised consumption service use and non-fatal overdose among people who inject drugs in Toronto, Canada [Poster]. Society for Epidemiologic Research Annual Meeting. December 16-18, 2020. Online.

Scheim AI, Kamara HT, Mansary K, Thumath M. Sierra Leone's first needle and syringe program: Lessons learned [Poster]. *International AIDS Conference: Virtual.* July 6-10, 2020.

Scheim AI, Perez-Brumer A, Bauer G. Legal gender recognition, psychological distress, and suicide risk among trans adults in the United States [Oral]. *U.S. Professional Association for Transgender Health Conference*, Washington, D.C. September 6, 2019.

Scheim AI, Twahirwa Rwema JO, Liestman B, Nyombayire J, Ketende S, Mazzei A, Mbayiha A, Malamba S, Lyons CE, Olawore O, Mugwaneza P, Kagaba A, Sullivan P, Allen S, Karita E, Baral S. Characterizing the HIV treatment cascade among transgender women in Kigali, Rwanda [Poster]. *International AIDS Society Meeting*, Mexico City. July 22, 2019.

Scheim AI, Maghsoudi N, Churchill S, Ghaderi G, Marshall Z, Werb D. What matters and what has been measured? A systematic review of research on the impacts of implementing drug decriminalization or regulation [Oral]. *International Society for the Study of Drug Policy Conference*, Paris, France. May 22, 2019.

Scheim AI, Maghsoudi N, Churchhill C, Marshall Z, Werb D. Health and social impacts of implementing drug decriminalization or regulation: A systematic review [Poster]. *Harm Reduction International Conference*, Porto, Portugal. April 29, 2019.

Scheim AI, Bauer GR. Gender-affirming genital surgery associated with reduced HIV sexual risk among transgender women: A respondent driven-sampling survey [Poster]. *International AIDS Conference*, Amsterdam, NL. July 24, 2018.

Scheim AI, Knight R, Shulha H, Nosova E, Hayashi K, Milloy M-J, Kerr T, DeBeck K. Men who have sex with men and inject drugs in a Canadian setting [Poster]. *The College on Problems of Drug Dependence Annual Meeting*, San Diego, CA. June 10, 2018.

Scheim AI, Nosova E, Knight R, Hayashi K, Kerr T. HIV incidence among men who have sex with men and inject drugs in Vancouver, Canada [Oral]. *Canadian Association for HIV/AIDS Research Conference*. Vancouver, Canada. April 28, 2018.

Scheim AI, Bauer GR. The intersectional discrimination index: Validity and reliability of a new measure for population health research [Oral]. *Canadian Society for Epidemiology and Biostatistics Conference*. Banff, Canada. May 31, 2017.

Scheim AI, Bardwell G, Mitra S, Rachlis B, Kerr T. Public injecting in London, Canada: A role for supervised injection services? [Poster] *International Harm Reduction Conference*, Montreal, Canada. May 16, 2017.

Scheim AI, Bardwell G, Rachlis B, Mitra S, Kerr T. Syringe sharing among people who inject drugs in London, Ontario [Poster]. *Canadian Association for HIV/AIDS Research Conference*, Montreal, Canada. April 6-9, 2017.

Scheim AI, Bauer GR, Shokoohi M. Impacts of social exclusion on problematic substance use among transgender people: A respondent-driven sampling survey in Canada's most populous province [Oral]. *Annual Meeting of the American Public Health Association.* Denver, USA. October 31, 2016.

<u>Scheim AI</u>, Adam B, Marshall Z, Murray J. Accounting for high vulnerability and low risk for HIV among transgender men: a sexual fields analysis [Poster]. *International AIDS Conference*. Durban, South Africa. July 20, 2016.

Scheim AI, Santos G-M, Arreola S, Makofane K, Do TD, Hebert P, Thomann M, Ayala G. Transgender men who have sex with men report lower access to basic HIV prevention services than their non-transgender counterparts [Oral]. *Action* + *Access: The Rights and Demands of Gay and Bisexual Men in the Global Response to HIV.* Durban, South Africa. July 16, 2016.

Scheim AI, Bauer GR, Hammond R, Shokoohi M. Substance use among transgender people in Canada's most populous province: A respondent-driven sampling survey [Oral]. World Professional Association for Transgender Health Symposium, Amsterdam, Netherlands. June 20, 2016.

Scheim AI, Bauer GR, Travers R. HIV/STI sexual risk among transgender men who are gay, bisexual, or have sex with men: Trans PULSE Project [Oral]. *Canadian Association for HIV/AIDS Research Conference*, Winnipeg, Canada. May 13, 2016.

Scheim AI, Souleymanov R, Kuzmanovic D, Marshall Z, Worthington C, Mikiki, Millson P. Ethics in community-based research with people who use drugs [Poster]. *International Harm Reduction Conference*, Kuala Lumpur, Malaysia. October 21, 2015.

Scheim AI, Adam BD, Marshall Z. Gay, bi, and queer trans men navigating sexual fields [Oral]. *Annual Meeting of the American Sociological Association*, Chicago, USA. August 25, 2015.

Scheim AI, Bauer GR, Travers R, Redman N. Factors associated with HIV risk in Ontario's broad transferminine population [Poster]. *Canadian Association for HIV/AIDS Research Conference*, Toronto, Canada. May 1-4, 2015.

Scheim AI, Souleymanov R, Kuzmanovic D, Marshall Z, Worthington C, Mikiki, Millson P. Ethics in community-based research with people who use drugs: A scoping review and community resource [Poster]. *Canadian Association for HIV/AIDS Research Conference*, Toronto, Canada. May 1-4, 2015.

Scheim AI, Bauer GR, Zong X, Hammond R. Discomfort discussing trans issues with family physicians: Correlates and implications for clinical practice [Poster]. *European Professional Association for Transgender Health*, Ghent, Belgium. March 12-14, 2015.

Scheim AI, Adam BD, Nault C, Marshall Z. "I didn't get the feeling that they knew what they were doing": HIV/STI testing experiences of trans men who have sex with men in Ontario [Poster]. Canadian Association for HIV/AIDS Research Conference, St. John's, Canada. May 1, 2014.

Scheim AI, Bauer GR. Practice and policy implications of sex and gender diversity within trans communities [Oral]. World Professional Association for Transgender Health Symposium, Bangkok, Thailand. February 17, 2014.

Scheim AI, Jackson R, James E, Dopler TS, Pyne J, Bauer GR. Well-being of Aboriginal gender-diverse people in Ontario, Canada [Oral]. World Professional Association for Transgender Health Symposium, Bangkok, Thailand. February 17, 2014.

Scheim AI, Adam BD, Marshall Z, Travers R, Ware SM. Safer sex decision-making and negotiation among trans men who have sex with men: Results from a qualitative study in Ontario, Canada [Oral]. World Professional Association for Transgender Health Symposium, Bangkok, Thailand. February 16, 2014.

Scheim AI, Cherian M, Bauer GR, Zong X. Characteristics and experiences of trans people in Ontario, Canada who have been in prison [Oral]. *World Professional Association for Transgender Health Symposium*, Bangkok, Thailand. February 14, 2014.

<u>Scheim AI</u>. A third checkbox is not enough: Implications of sex and gender diversity among trans Ontarians [Oral]. *London Health Research Day*, London, Canada. March 19, 2013.

<u>Scheim A.</u> Promoting and providing Pap tests for trans men [Oral]. *National Transgender Health Summit*, University of California San Francisco, USA. April 9, 2011.

#### **Invited Conference or Academic Presentations**

Keynote: Epidemiology of HIV among transgender populations globally. *International Workshop on HIV and Transgender People*. Mexico City. July 20, 2019.

How transgender people experience Canada's health care system. Canadian Health Coalition Research Roundtable, *Talking Across Silos in Canada's Health Movements*. Ottawa, Canada. December 1, 2018.

Approaches to measuring intersectional stigma. Johns Hopkins University and Population Council Satellite Session on Intersectional Stigma, *International AIDS Conference*. Amsterdam, Netherlands. July 25, 2018.

Barriers to care and strategies to overcome for trans men. TRANS action: Building Bridges to Safety, Pre-Conference to the *International AIDS Conference*. Amsterdam, Netherlands. July 21, 2018.

Keynote: Transgender health and HIV. Israeli LGBT Centre and Israel AIDS Task Force. Tel Aviv, Israel. May 10, 2018.

HIV vulnerabilities among transgender women in sex work. *Johns Hopkins University Center for Public Health and Human Rights Symposium*. April 13, 2018.

Keynote: Transgender health and HIV: The view from Canada. *Australasian HIV & AIDS Conference*. Canberra, Australia. November 6, 2017.

Keynote: From washrooms to classrooms and beyond: Transgender rights and social inclusion. *University of Waterloo*, Canada. October 20, 2016.

Trans health and workplace inclusion. *Bluewater Health* [hospital]. Sarnia, Canada. September-December, 2016.

Understanding health care and transition for Ontario's transgender population. London Health Sciences Centre Endocrinology Grand Rounds. April 6, 2016.

Improving LGTB health data: assessing survey measures of sex, gender and sexual orientation. Rainbow Health Ontario Conference. London, Canada. March 10, 2016.

Plenary presentation: Trans men and stigma: A research snapshot. *British Columbia Gay Men's Health Summit.* Vancouver, Canada. November 6, 2015.

Plenary presentation: Access to health care for transgender men. 8<sup>th</sup> International AIDS Society Conference on HIV Pathogenesis, Treatment, & Prevention. Vancouver, Canada. July 20, 2015.

Plenary presentation: Improving access to HIV/STI testing for trans communities: Learning from the experiences of trans MSM in Ontario. *Ontario AIDS Bureau HIV Testing Conference*. Toronto, Canada. March 25, 2015.

Community-led participatory research with trans communities: Case studies from Ontario, Canada. *Global Forum on MSM and HIV Pre-Conference to the International AIDS Conference*. Melbourne, Australia. July 20, 2014.

Is it time for HIV home testing? Presentation at the *Ontario HIV Treatment Network Research Conference*, Toronto, Canada. November 12, 2012.

The flipside of democratization in global Taiwan: Global civil society, the Taiwanese state, and challenges to gay rights and sexual freedom. Invited oral presentation: *Ministry of Foreign Affairs*, Republic of China (Taiwan), Taipei, Taiwan. December 9, 2010.

Check It Out: Women who have sex with women, trans men, and Pap tests. *Guelph Sexuality Conference*, University of Guelph. June 23, 2010.

Getting Primed: Informing HIV prevention with gay, bi, queer trans men. Europride Pride House, Stockholm, Sweden. July 30, 2008.

Sexual health and trans communities. Toronto Public Health Sexual Health Unit. September 18, 2007.

Trans generation: Developments in transgender youth activism, services, and culture. Invited faculty, *National Gay and Lesbian Taskforce Creating Change Conference*, Kansas City, MS. November 8, 2006.

#### **TEACHING**

#### Instructor

Winter 2021	Epidemiology EPI550: Applied Survey Research in Epidemiology, Drexel University
Fall 2018	Health, Aging, and Society 3R03: Health Inequalities (undergraduate), McMaster University

## Teaching Assistant (Western University)

2015-2016	Epidemiology 9551A/3200A: Foundations of Epidemiology (graduate/undergraduate) Epidemiology 9547B: Survey Research Methods (graduate) Epidemiology 3315B: Epidemiology of Major Diseases (undergraduate)
2014-2015	Epidemiology 9547B: Survey Research Methods (graduate) Epidemiology 3315B: Epidemiology of Major Diseases (undergraduate)
2013-2014	Epidemiology 9001A: Principles of Epidemiology (MPH)

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#### Biostatistics 9002A: Statistical Methods in Health (MPH)

#### **Guest Lectures**

- 2019 Transgender Health. LGBT Health, Johns Hopkins University.
- 2019 Sex and Gender. Social Epidemiology, Drexel University.
- 2017 Discrimination & Transgender Health Disparities. HIV and Substance Use Seminar, UC San Diego.
- 2017 Transgender Mental Health. Transgender Studies, Smith College School of Social Work.
- 2016, 2018, 2019 Drug Use and Policy. Public Health, Western University.
- 2016 Transgender Health. Endocrinology, Medicine Year 2, Western University.
- 2015-2017 Epidemiology of HIV. Epidemiology of Major Diseases, Western University.
- 2015, 2016 Sex and Gender in Survey Research. Survey Research Methods, Western University.
- 2015 Gender and Health. Social Determinants of Health, University of Waterloo.

#### **MENTORSHIP**

## **Supervisory Committee Memberships**

- 2020 Sara Todorovic, MSc Candidate, Epidemiology and Biostatistics, Western University
  Thesis: Impact of delays to gender-affirming medical care during COVID-19 on anxiety and
  depression among trans and non-binary people
- 2020 Tanner Nassau, PhD Candidate, Epidemiology, Drexel University
  Thesis: Supervised injection sites and infectious disease risk among people who inject drugs
- 2020 Gioi Tran Minh, PhD Candidate, Social Dimensions of Health, University of Victoria Thesis: Substance use among transgender people in Canada
- 2019 Leo Rutherford, PhD Candidate, Social Dimensions of Health, University of Victoria
  Thesis: A Community-based survey of trans men's sexual health and wellness after
  metoidioplasty or phalloplasty
- 2017-2019 Emily Nunez, MSc Candidate, Epidemiology and Biostatistics, Western University Thesis: Impacts of identity versus targetability on the relationship between discrimination and health

#### **SERVICE**

#### Clinical and Research Guideline Development

- 2020 Invited participant, HIV-Related Intersectional Stigma Research Advances and Opportunities Workshop. NIH Office of AIDS Research and NIMH.
- 2019 Expert participant [nominated by the Government of Canada], 2<sup>nd</sup> Expert Working Group on improving drug statistics and strengthening the Annual Report Questionnaire (ARQ). *United Nations Office on Drugs and Crime.* Vienna.
- 2018 Leadership Group, Supervised Consumption Services, *Canadian Research Initiative in Substance Misuse*.
- 2018 Revision Committee, World Professional Association for Transgender Health Standards of Care Version 8 (Chapter 8: Sexual Health Across the Lifespan).

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2018	Invited participant, Methods and Measurement in Sexual and Gender Minority (SGM) Health Research workshop, <i>National Institutes of Health</i> .
2018, 2016	Invited meeting participant, Exploring International Priorities and Best Practices for the Collection of Data About Gender Minorities, <i>The Williams Institute</i> . (Buenos Aires, Argentina and Amsterdam, Netherlands)
2014	Writing Group member, Implementation Tool on Men who have Sex with Men and Transgender People in Low- and Middle-Income Countries, <i>United Nations Population Fund.</i>

## **Journal Review Activities**

2020 -	Guest editorial committee, The Lancet: Transgender Health Series
2020 - 2021	Guest Editor, PLOS ONE: Health and Health Care in Gender Diverse Communities
2020 -	Guest Editor, International Journal of Behavioral Medicine: Sexual & Gender Minorities
2018 -	Associate Editor, BMC Infectious Diseases
2019 -	Editorial Board Member, International Journal of Transgender Health
2017 -	Editorial Board Member, Psychology & Sexuality

Ad Hoc Review: Addictive Behaviors, AIDS & Behavior, American Journal of Epidemiology, American Journal of Public Health, BMC Infectious Diseases, BMC International Health and Human Rights, Canadian Journal of Public Health, Canadian Medical Association Journal, Culture, Health, and Sexuality, Harm Reduction Journal, HIV Medicine, International Journal of Drug Policy, International Journal of STDs and AIDS, Journal of Acquired Immune Deficiency Syndromes, Journal of Homosexuality, Journal of Sex Research, LGBT Health, PLOS ONE, Sexually Transmitted Infections, Social Psychology and Psychiatric Epidemiology, Social Science & Medicine, The Lancet HIV, Transgender Health

#### **Ad-Hoc Peer Review**

2021	Track C (Prevention Science) Scientific Committee, IAS Conference on HIV Science
2020-2022	ViiV Positive Action Technical Review Committee
2020	Canada Research Coordinating Committee - New Frontiers in Research Fund
2020	Canadian Institutes of Health Research - COVID-19 Mental Health & Substance Use
2019-2020	Track C (Epidemiology and Prevention) Scientific Committee, AIDS 2020
2019	Scientific Committee, U.S. Professional Association for Transgender Health Conference
2019	UC San Diego Center for AIDS Research - International Pilot Grants
2019	National LGBTQ Health Conference (Emory University)
2018	Annual Meeting of the Society for Epidemiologic Research
2017	Canadian Institutes of Health Research - Global Health Planning and Dissemination Grants
2015-2018	Canadian Conference on HIV/AIDS Research

## **Conference or Symposium Activities**

2019 -	Organizing Committee, International Workshop on HIV and Transgender People.
2019	Organizing Committee, Community-Based Research Centre (CBRC) for Gay Men's Health Summit. Vancouver, Canada.
2018	Invited Rapporteur, 22nd International AIDS Conference (Epidemiology and Prevention)
2017	Organizing Committee, Canada's Drug Futures Forum. Ottawa, Canada.

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2016 Invited moderator, *The White House Office of National AIDS Policy*: Briefing on HIV indicator for transgender persons. Hollywood, FL.

Organizing Committee, Transgender Pre-Conference, 2016 International AIDS Conference. Durban, South Africa.

Organizer, World Professional Association for Transgender Health Symposium: Improving methods for transgender population health and epidemiologic research. Amsterdam, Netherlands

## **Expert Witness**

2020 Expert witness on anti-transgender stigma. Superior Court of Justice (Ontario, Canada).

## **Committees**

2019 -	International Working Group on Trans Men and HIV, Global Action for Trans Equality
2016-2019	Co-chair, Trans Working Group, Canadian HIV Trials Network
2015-2019	Advisory Committee, Ontario HIV Epidemiology and Surveillance Initiative
2013-2016	Research Group, Global Forum on MSM and HIV
2007-2015	Provincial Advisory Body, Ontario Gay Men's Sexual Health Alliance
2007-2011	Co-Chair, Board of Directors, LGBT Youth Line (Ontario)
2006-2016	Chair, Trans Men's Working Group, Ontario Gay Men's Sexual Health Alliance
2006-2009	Trans Men's HIV Prevention Needs Assessment Steering Committee, AIDS Bureau, Ontario Ministry of Health and Long-Term Care