Meeting the Health Care Needs of Transgender People

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Continuing Medical Education

Disclosure

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Learning objectives

- Define some key terms and concepts related to transgender people.
- Describe the major health and health care disparities facing transgender people.
- Share resources and strategies for creating a welcoming and gender-affirming environment for transgender patients and staff.
The Health of Lesbian, Gay, Bisexual, and Transgender People
Building a Foundation for Better Understanding
Learning objectives

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Audience Polling Question

Have you ever met a person who you knew was openly transgender?

- Yes
- No
- Unsure
Understanding the T in LGBT-Definitions

- **Sex** - biologic sex, comprised of person’s genetic make-up and its phenotypic expression. Often called “birth sex” or “assigned sex at birth”.

- **Gender** - the perception of a person’s sex on the part of society as male/man or female/woman.

- **Gender Identity** - a person’s internal sense of self as a man, woman, both, or neither. Usually develops by age three and remains relatively stable over the lifetime.

- **Gender Expression/ Role** - a person’s visible expression of social norms (i.e., mannerisms, dress, speech, behavior) conventionally regarded as masculine, feminine, both, or neither.

- **Gender Variance/Nonconformity** - variation in gender expression or gender role from conventional norms.
Definitions (continued)

- **Transgender** – describes individuals who have a gender identity not fully congruent with their assigned sex at birth
  - Many diverse identities and expressions – no one way to be trans
  - Many (but not all) seek some degree of medical or surgical intervention to align their minds and bodies
- **Gender Minority** – a person who identifies as transgender or gender nonconforming, and/or whose gender identity or expression differs from the conventional gender binary
- **Transgender woman** - Male-to-female (MTF), assigned male at birth, lives female/feminine/affirmed woman, transfeminine spectrum
- **Transgender man** - Female-to-male (FTM), assigned female at birth, lives male/masculine/affirmed man, transmasculine spectrum
Definitions (continued)

- **Transgender, cont’d**
  - **Genderqueer** - a relatively new term used by individuals who don’t identify as either male or female, or identify as both male and female, or fall along the gender spectrum in some other non-binary way
  - **Transsexual** - a medical term used to describe a subset of transgender individuals who have transitioned to the opposite sex, often including sexual reassignment surgery
  - **Gender Dysphoria** - subjective mood/affect disturbance experienced by some transgender people whose gender identity is opposite of their assigned sex at birth, or who feel clinically significant distress or impairment due to a noncongruence of their gender role and gender identity

- **Cisgender = non-transgender**
  - Identifying with or experiencing a gender the same as one's assigned sex at birth, e.g. both male-gendered & male-sexed
Gender transition/ gender affirmation – the process of coming to recognize, accept, and express one’s gender identity.

- Most often, refers to the period when a person makes changes that others can see (e.g., changes to appearance, changes to their name and gender presentation).
- Called gender affirmation, because it allows people to affirm their gender identity by making outward changes.
- Involves social, medical, legal components.
- Gender affirmation can greatly improve a person’s mental and general well-being.
- There is no one way to affirm one’s gender.
Diverse Bodies and Expressions

- 76% taking hormones whether monitored or not

- Surgical status and future desire to have surgery is diverse

Grant et al., 2010: http://transequality.org/PDFs/NTDSReportonHealth_final.pdf
Definitions (continued)

- **Words that are offensive to transgender people**
  - She-male
  - He-she
  - It
  - Trannie or tranny
  - “Real” woman or “real” man

- **Unhelpful questions or comments**
  - When did you decide to be a man/woman?
  - “You look so real. I never would have known.”
  - Have you had/ do you want THE surgery?
  - What is your *real* name?
  - You’re so attractive, why would you want to...?
Definitions (continued)

Sexual Orientation - How one identifies their physical and emotional attraction to others. 3 components: attraction, behavior, identity.

- Being transgender is not the same as being gay.
- Transgender people can be of any sexual orientation.

![Sexual Orientation of Respondents](chart.png)

Grant et al. (2010). Injustice at Every Turn: http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf
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Transgender Health

- HIV
- Mental health
- Suicidality and non-suicidal self-harm
- Substance use and abuse
- Tobacco use
- Violence and victimization
- Discrimination
- Delay seeking health care
- Health insurance non-coverage
- Lack of culturally competent care

Challenge: Lack of inclusion of transgender people in most national surveillance systems.
National Transgender Discrimination Survey: Lifetime Suicide Attempt

“Health disparity/inequality is a particular type of difference in health...It is a difference in which disadvantaged social groups—such as the poor, racial/ethnic minorities, women, or other groups who have persistently experienced social disadvantage or discrimination—systematically experience worse health or greater health risks than more advantaged social groups.”


Grant et al. (2011). Injustice at Every Turn: http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf
Gender Minority Stress

Gender Identity

Adversity
- Social disadvantage
- Discrimination
- Stigma

Health

Hendricks & Testa, 2012
Reisner et al., in prep
National Transgender Discrimination Survey: Adversity Related to Gender Identity

- 57% family rejection
- 53% verbally harassed or disrespected in a place of public accommodation (e.g., hotel, restaurant, bus, etc)
- 40% harassed when presenting ID
- 26% lost a job
- 19% refused a home or apartment
- Income: 4x more likely to live on < $10,000 annually compared to average American
- Unemployment: 2x the rate of unemployment compared to U.S. rate

Grant et al. (2011). Injustice at Every Turn: http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf
Lack of health insurance
- 19% uninsured

Lack of provider knowledge
- 50% reported teaching their medical providers about transgender care

Negative experiences in health care
- 19% refused care due to transgender or gender non-conforming status
- 28% postponed necessary medical care when sick or injured....*due to discrimination by health care providers*
- 33% delayed or did not try to get preventive healthcare....*due to discrimination by health care providers*

Grant et al., 2010: http://transequality.org/PDFs/NTDSReportonHealth_final.pdf
Grant et al., 2011: http://www.thetaskforce.org/downloads/reports/reports/ntds_full.pdf
Discrimination and avoiding health care (n=94)

- Ages 18-65
- Mean age 33
- 24.5% racial/ethnic minority
- 14.9% unemployed
- 14.9% no health insurance
- Mostly trans masculine (> 70%)

Primary reason for avoiding or delaying healthcare in the past 12 months (N=46) %

1. Provider and healthcare barriers 30.4
2. Cost and finances 26.1
3. Fear and discomfort 21.7
4. No health insurance 13.0
5. Other 8.7
Association between discrimination and avoiding health care (n=94)

- Experiencing lifetime discrimination in healthcare was associated with a nearly 3-fold increased odds of delaying healthcare in the past 12 months.

*Adjusted Odds Ratio = 2.96 (95% CI=1.24, 7.09), p=0.015

*Multivariable logistic regression model adjusted for: age, gender identity, race/ethnicity, and health insurance.
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Audience Polling Question

A transgender client comes to your health center presenting for care. You are unsure what pronoun to use with the client (e.g., “he” or “she”). Which of the following is the LEAST preferred strategy to use with your transgender client in this situation?

- Politely ask them what pronoun they prefer
- Avoid using a pronoun at all
- Use “it” as a neutral pronoun
- Use “they” as a neutral pronoun
Creating Change at Home: Affirmative, Inclusive Environments for Caring, Learning, and Working
A setting of respect and trust

“Patients [need] a setting of respect and trust. This requires referring to the transgender patient by their preferred name and pronoun, reassuring the patient about confidentiality, educating clinic staff and colleagues regarding transgender issues, and respecting the patient’s wishes regarding potentially sensitive physical exams and tests...Familiarity with commonly used terms and the diversity of identities (including fluid, non-binary identification) within the transgender community is essential.”

What can you do in your work?

- Be non-judgmental, open, professional. Provide client-centered care (e.g., meet the person “where they are”)

- Be an ally. Educate yourself so you are trans-friendly in your field of expertise. Working with colleagues: “See something, say something.”

http://www.wpath.org/publications_standards.cfm
Gathering Patient Data

- Patient intake forms
  - Assigned sex at birth
  - Current gender identity
  - EMR flags indicating trans patients

- Providers can ask during visit
  - “Because many people are affected by gender issues, I ask patients if they have any relevant concerns. Anything you say will be kept confidential. If this topic isn’t relevant to you, tell me and I will move on.”

Current practice at Fenway Health: Gender, sex, and transgender identity

What is your gender?
☐ Female
☐ Male
☐ Genderqueer or not exclusively male or female

What was your sex at birth?
☐ Female
☐ Male

Do you identify as transgender or transsexual?
☐ Yes
☐ No
☐ Don’t know
A. PATIENT INFORMATION

1. Name: Test Patient
2. Preferred: Test
3. Address: 1 Autumn Street
4. City, State: Boston, MA 02215
5. Alt Address: ____________________________
6. Alt City, State: ____________________________
7. Phone: (617) 111-6666 [X] Home [ ] Work [ ] Other
8. Phone: ____________________________ [ ] Home [ ] Work [X] Other

9. Do you think of yourself as: [ ] African American/Black
   [ ] Asian
   [ ] Caucasian/White
   [ ] Native American/Alaskan Native/Inuik
   [ ] Pacific Islander
   [ ] Other ____________________________
10. What is your ethnicity? [ ] Hispanic/Latino(a)
    [ ] Non-Hispanic/Non-Latino(a)
11. What is your annual income? ____________________________
12. What is your family size (including yourself)? ___________

B. GUARANTOR
[X] Same as Patient

Name: Test Patient
Address: 1 Autumn Street

C. EMPLOYMENT

Employer: ____________________________
Phone: (617) 111-6666
Collecting Sex and Gender Identity Demographics in Cohort Surveillance Systems (Example)

What sex were you assigned at birth, on your original birth certificate?  
*Check one.*
- [ ] Female
- [ ] Male

How do you describe yourself?  *Check one.*
- [ ] Female
- [ ] Male
- [ ] Transgender
- [ ] Do Not Identify as Female, Male, or Transgender

Reisner et al., in prep  
Source: The Growing Up Today Study
Creating a transgender-friendly office/center environment for patients and staff

- Signs and health-related materials
  - Display photos/ads reflecting gender diversity
  - LGBTQ newspapers, magazines, etc.
- Single occupancy or gender neutral bathroom
- Call people by preferred name/pronoun
- Post non-discrimination policy
  - Include ‘gender identity and expression’
- Ensure safety in lobby and parking areas
- Human Resources forms
# Front Line Staff – Customer Service

<table>
<thead>
<tr>
<th>Best Practices</th>
<th>Examples</th>
<th>Customer service Principle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avoid specific gender markers</td>
<td>“How may I help you today?”</td>
<td>RESPONSIVENESS</td>
</tr>
<tr>
<td>Politely ask if you are unsure about a patient’s</td>
<td>“I would like be respectful—how would you like to be addressed?” or</td>
<td>OPEN-MINDEDNESS</td>
</tr>
<tr>
<td>preferred name or pronoun</td>
<td>“What name and pronoun would you like me to use?”</td>
<td></td>
</tr>
<tr>
<td>Ask respectfully about names</td>
<td>“Could your chart be under another name?” Avoid: “What is your legal</td>
<td>COMMUNICATION</td>
</tr>
<tr>
<td></td>
<td>name? What is your real name?”</td>
<td></td>
</tr>
<tr>
<td>Did you goof? Politely apologize</td>
<td>“I apologize for using the wrong pronoun. I did not mean to disrespect</td>
<td>ACCOUNTABILITY</td>
</tr>
<tr>
<td></td>
<td>you.”</td>
<td></td>
</tr>
<tr>
<td>Gender neutral language</td>
<td>Use “they” instead of “he” or “she”.</td>
<td>RELIABILITY</td>
</tr>
<tr>
<td>Only ask information that is required</td>
<td>Ask yourself: What do I want to know? What do I need to know? How can</td>
<td>RESPECT</td>
</tr>
<tr>
<td></td>
<td>I ask in a sensitive way?</td>
<td></td>
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</tbody>
</table>

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NATIONAL LGBT HEALTH EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE
Organizational support of front-line staff

- Create and follow a protocol for noting preferred names, pronouns, mail, voice message instructions

- Have clear lines of referral for questions
  - Appoint a staff person responsible for providing guidance, assisting with procedures, offering referrals, fielding complaints

- Ongoing training and retraining of staff
  - Annual transgender competency trainings and boundary trainings (e.g., know what/what not to ask about)
  - Train new staff on protocols within one month of hire
  - Accountability for transphobic responses
  - Advanced trainings for staff involved in direct care with expectations of continuing education on transgender issues
Basic primary care principles

- Honor the patient’s gender identity, use their preferred name/pronoun

- If you have it, check it
  - Affirmed woman will still have a prostate gland
  - Does an affirmed man still have his uterus and ovaries?

- When guidelines conflict in regard to gender or anatomy, use the more conservative guideline

10 things transgender people should discuss with their provider

- Gay & Lesbian Medical Association (GLMA)
  1. Access to healthcare
  2. Health history
  3. **Hormones**
  4. Cardiovascular health
  5. Cancer
  6. HIV, STDs, and safer sex
  7. Alcohol and tobacco
  8. Depression/anxiety
  9. **Injectable silicone**
  10. Fitness (diet & exercise)

[link to GLMA resource](http://www.glma.org/_data/n_0001/resources/live/Top%20Ten%20Trans.pdf)
Clinical Guidelines

- World Professional Association for Transgender Health. Standards of Care (SOC) for the Health of Transsexual, Transgender, and Gender Nonconforming People, 7th version: http://www.wpath.org/publications_standards.cfm

- Center of Excellence for Transgender Health, UCSF. Primary Care Protocol for Transgender Patient Care: http://transhealth.ucsf.edu/trans?page=protocol-00-00


Thank you!
“Enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being”

World Health Organization
Learning Module
www.lgbthealtheducation.org/training/learning-modules/

Understanding the T in LGBT: A Role for Clinicians

Module 7 familiarizes clinicians with the basic health needs of transgender individuals. Included are explanations of the various meanings of the term “transgender”; descriptions of some of the clinical issues found in transgender populations; and tips for improving the clinical environment for transgender patients.

Presentation
Download the presentation for the module: PDF or PowerPoint

Handouts (PDF format)
Handout 7-A Readings and Resources
Handout 7-B References
Handout 7-C Glossary of Gender and Transgender Terms

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Sign up for email updates
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http://www.lgbthealtheducation.org/training/learning-modules/
Resources: Trans Health Program @ Fenway Health

Trans Health Program @ Fenway Health:
http://www.fenwayhealth.org/site/PageServer?pagename=FCHC_srv_services_trans
Resources & Readings

- Center of Excellence for Transgender Health: [http://transhealth.ucsf.edu/](http://transhealth.ucsf.edu/)


- Additional links and resources available at Fenway Health’s Trans Health Program: [http://www.fenwayhealth.org/site/PageServer?pagename=FCHC_srv_services_trans](http://www.fenwayhealth.org/site/PageServer?pagename=FCHC_srv_services_trans)


