

# Barriers to Accessing Primary Care Services in the Transgender Population: A Systematic Review

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## Background

- ❑ Transgender people face considerable discrimination in society, including within the healthcare system, leading to unique health disparities.
  - ❑ 30% reported harassment in medical settings, 28% postponed care (2015 US Transgender Survey )
  - ❑ Not just from medical providers, but clinical and administrative staff
  - ❑ May cause hesitation in revealing gender identity, creating barrier to quality care
- ❑ The transgender population suffers unique and magnified health disparities compared to cisgender population
  - ❑ HIV/AIDS rate: 21.7%, and estimated 25% in Black/Afr. Am. transgender women [1, 2]
  - ❑ Disproportionately burdened by alcohol, drug and cigarette addiction, cardiovascular disease, obesity, some cancers [1]
  - ❑ Mental health problems extremely high rate: 82% had suicidal thoughts, 40% attempted suicide (9x general U.S. population) [2] → associated with societal discrimination and victimization
- ❑ Understanding barriers to primary care is critical to addressing the health needs of the transgender population.
  - ❑ Only 27.2% report regularly using primary care services [3]

**Purpose:** To highlight the healthcare and social challenges that modify a transgender person's ability to access quality primary care in the U.S. through review of current literature.

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## Methods

- Final MeSH search terms for PubMed search: transgender; health care quality, access, and evaluation; primary care; family medicine; internal medicine; and pediatrics.
- 607 items were identified between 2015-2020, and 22 studies fit all inclusion/exclusion criteria.
  - Inclusion/Exclusion Criteria:
    - Human studies
    - Primary research
    - Conducted within the US
    - Findings specific to the transgender population
    - Directly assessed barriers and/or access to healthcare
    - Primary care setting
- Extracted results were placed in 6 categories based on findings specific to common barriers:
  - Difficulty accessing the healthcare system
  - Transphobia, discrimination, and fear within the healthcare system
  - Embodied disruption
  - Lack of knowledgeable/experienced/willing providers
  - Lack of social/familial support
  - Provider-identified barrier

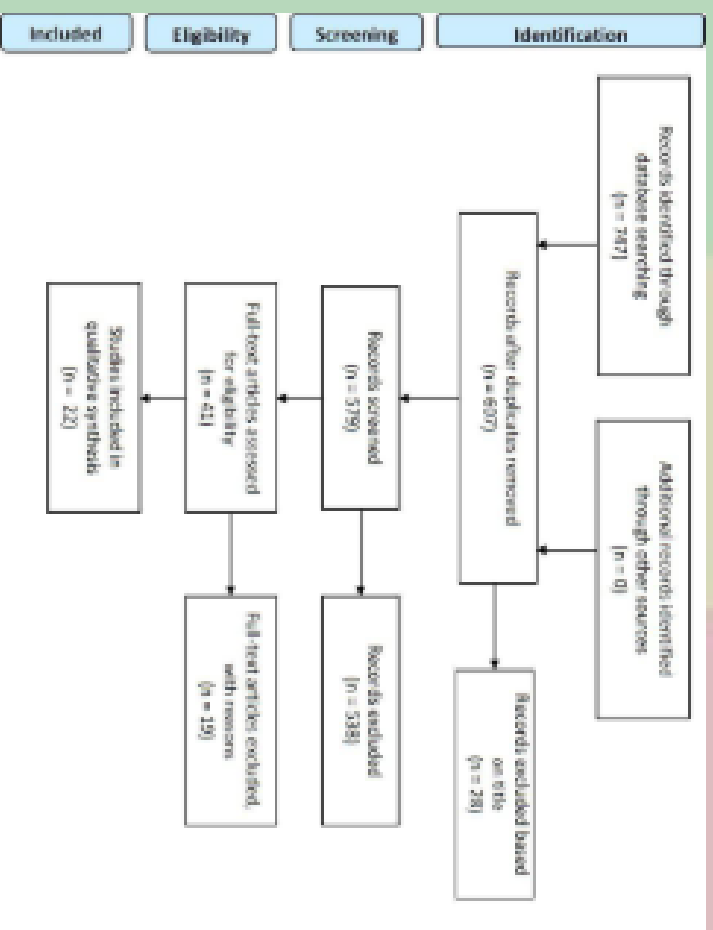


Fig. 1: Prisma flow chart for search strategy

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## Results

Barriers identified by the 22 studies:

- **10 identified transphobia, discrimination, fear of stigma, fear of not being accepted, and/or fear of being outed**
  - Transmasculine patients 2x as likely to delay care due to discrimination than transfeminine individuals [4]
  - Similar findings in transyouth: 25% did not speak to provider about gender/sexual preference due to fear of disclosure to the parents [5]
- **10 identified lack of knowledgeable/experienced/willing providers of transgender healthcare**
  - Refusal to initiate and continue hormone therapy was common [6]
- **6 identified difficulty accessing healthcare**
  - In a small New Jersey study, 50% of respondents reported being refused services outright [3]
- **6 identified barriers from the provider perspective**
- **5 identified embodied disruption**
  - Occurs when a provider does not acknowledge or incorrectly assumes the identity of a non-conforming LGBT individual
  - Misgendering through incorrect names/pronouns [7, 8]
  - Transgender men more affected: less able to return to masculine normity after being incorrectly identified [9]
- **4 identified lack of social/family support**



Figure 2. Number of studies identifying each barrier.

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## Discussion

- ❑ Most common obstacles to quality care found in the 22 studies: Transphobia, discrimination, and fear, as well as lack of knowledgeable/experienced/willing providers
  - ❑ Lack of knowledgeable/experienced/willing providers
    - ❑ Providers are not familiar with commonly used terms in the transgender community and/or unable to speak sensitively and appropriately to LGBT patients [8] ----> Tangible resolution is provider education
  - ❑ Generalized fear of discrimination, maltreatment, and physical abuse, within both healthcare and society, lead to avoidance of healthcare
- ❑ Lack of insurance and financial resources
- ❑ Transyouth unique barriers
  - ❑ Lack of family approval: Must go through parent/caregiver's insurance
  - ❑ Fear of being outed to parent/caregiver: Withholding gender identity from provider and avoiding healthcare
- ❑ Potential solutions
  - ❑ Provider education: Transgender patients have complex medical needs which benefit from specific provider knowledge/education.
  - ❑ Student education: Incorporate into medical curriculum
  - ❑ Policy reform and community advocacy: Address transphobia and socioeconomic barriers

## Conclusion

We must pair discussions with the community, medical professionals and educators, and legislators, and offer tangible solutions for the transgender population in order to move towards an all-inclusive healthcare system and a more equitable society.

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