

# Study finds three main barriers to transgender adults receiving primary healthcare in a supportive environment

March 7 2022

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Transgender individuals are less likely to have had a primary care visit in the last year than cisgender individuals, despite having more chronic conditions. A study from Regenstrief Institute, Indiana University School of Medicine and Eskenazi Health explores the healthcare experiences of transgender patients and has uncovered three major barriers this group faces in accessing healthcare.

A cisgender person is someone whose sense of personal identity and gender corresponds with their sex assigned at birth.

To better understand the challenges, perceptions and feelings of [transgender](#) patients seeking care, the research team interviewed 21 [adult patients](#) in the Gender Health Program at Eskenazi Health in Indianapolis, a comprehensive healthcare clinic for transgender and gender-diverse adults. The interviews revealed transgender patients in Indiana face barriers related to:

- A lack of willing or knowledgeable providers
- Geography
- Long wait times for appointments

"When we spoke to these patients, many described difficulties in being able to find a provider that could or would treat them. Some traveled for hours just so they could be seen in an affirming setting with providers knowledgeable about transgender [health](#)," said first author Joy L. Lee, Ph.D., M.S., research scientist at Regenstrief Institute and assistant professor of medicine at IU School of Medicine. "These interviews speak to the need for more primary care providers who can treat transgender patients and highlight the need to create healthcare spaces that feel safe for transgender individuals."

## **Transgender patient experiences**

One patient told the research team, "[The transgender clinic physician] is more than willing to be my primary care doctor. His only concern is that he's a hundred miles away, quite literally. ...I'm a little worried as to where I'm going to find primary care."

Other patients reported being uncomfortable in care settings outside of the transgender clinic. "It didn't feel safe—not that anybody was mean or

anything. It's just that you get in there and you're all nervous because now you have to explain who you are to somebody. I know they're professionals and I'm [probably] not the first trans person they ever saw. But you never know. Sometimes it's hard."

Many reported that providers actually looked to the patient for guidance on transgender-specific care. "All I've ever done is had to educate them," one patient said. "Educate doctors. Educate pharmacists."

Overall, patients reported very positive experiences in the transgender clinic. One shared the experience, "[My doctor] doesn't make me feel like I'm a man coming into the transgender clinic. He makes me feel like I'm wanted. He talks to me as if I'm a woman.... It just feels like a regular doctor's appointment [where] I'm going to go get checked up."

However, travel and wait times for transgender care clinic appointments can be prohibitive for patients.

"A supportive care environment, whether it is a specialty clinic or a primary care office, is so crucial for these individuals who have many unique needs," said Janine M. Fogel, M.D., a study author, the medical director of the Gender Health Program at Eskenazi Health and assistant professor of clinical family medicine and clinical medicine at IU School of Medicine. "This study is noteworthy because it gives us insight into the experiences of transgender patients in the Midwest, highlighting experiences of rural patients."

"Our research indicates that transgender patients are having their needs partially met by the comprehensive care model, but there is a long way to go to make quality care accessible to everyone," said senior author Marianne Matthias, Ph.D., Regenstrief research scientist and associate research professor of [medicine](#) at IU School of Medicine. "These findings set the stage to develop future interventions aimed at expanding

the capacity of [providers](#) and health systems to address the healthcare needs of transgender patients."

In addition to Drs. Lee, Matthias and Fogel, the other authors are Monica Huffman, B.S., of Regenstrief, Nicholas A. Rattray, Ph.D., of Regenstrief, IU School of Medicine, and the VA Health Services Research and Development Center for Health Information and Communication (VA HSR&D CHIC); Jennifer L. Carnahan, M.D., MPH, of Regenstrief and IU School of Medicine; Dennis Fortenberry, M.D., M.S., of IU School of Medicine and Michael Weiner, M.D., MPH, of Regenstrief, IU School of Medicine and VA HSR&D CHIC.

**More information:** Joy L. Lee et al, "I Don't Want to Spend the Rest of my Life Only Going to a Gender Wellness Clinic": Healthcare Experiences of Patients of a Comprehensive Transgender Clinic, *Journal of General Internal Medicine* (2022). [DOI: 10.1007/s11606-022-07408-5](https://doi.org/10.1007/s11606-022-07408-5)

Provided by Regenstrief Institute

Citation: Study finds three main barriers to transgender adults receiving primary healthcare in a supportive environment (2022, March 7) retrieved 30 January 2024 from <https://medicalxpress.com/news/2022-03-main-barriers-transgender-adults-primary.html>

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