

Half of transgender youth avoid disclosing gender identity to a health care provider

20 February 2020

Researchers at UPMC Children's Hospital of Pittsburgh and the University of Pittsburgh surveyed patients in a local clinic providing gender-affirming care to transgender youth and found that a surprisingly high number of them intentionally avoided disclosing their gender identity to doctors outside the clinic.

The paper was published today in the *Journal of Adolescent Health*.

"The provider-patient power dynamic is a real one," said lead author Gina Sequeira, M.D., M.S., adolescent medicine fellow at UPMC Children's Hospital. "It's important for us as providers to open the door and ask [young people](#) in a respectful and open way if they would like to talk about their identity."

When providers know that a young patient is transgender, they're in a better position to ensure access to services, from medical transition to [mental health](#), Sequeira said.

During the summer and fall of 2018, she analyzed survey responses from 153 [transgender youth](#) ages 12-26 years old. Two-thirds identified as male, one-fifth as female and another fifth as nonbinary.

While 78% of the participants reported disclosing their gender identity to a [health care provider](#) outside the clinic at least once, 47% reported intentionally avoiding disclosure, even in situations where they thought it might be important for their health.

The most common reasons cited for withholding gender identity were feeling uncomfortable and not knowing how to bring it up, with only 25% saying they preferred to be the ones to broach the topic.

Instead, participants suggested multiple ways clinics can create spaces to help [young patients](#)

feel more comfortable disclosing their gender identities, including transgender-friendly materials in the [waiting room](#), forms that include a checkbox for [gender identity](#) and educating staff about using a patient's preferred name and pronouns.

It's important to note that the gender clinic where participants were recruited requires parent or guardian consent for treatment of minors—a group that makes up half of the total study sample—meaning these youth are "out" at home and often have at least one supportive caregiver in their lives.

Given that sampling bias, Sequeira was surprised to see so many participants avoiding disclosure.

"I suspect if we looked in a non-clinical sample, that number would be much higher," Sequeira said. "Our patients have already overcome many barriers."

Sequeira is expanding the study to sample a larger, more general population of transgender youth through social media.

Provided by University of Pittsburgh

APA citation: Half of transgender youth avoid disclosing gender identity to a health care provider (2020, February 20) retrieved 30 May 2022 from <https://medicalxpress.com/news/2020-02-transgender-youth-disclosing-gender-identity.html>

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