

Transgenders: The Neglected Group in Health care

Abstract

Transgenders have always caught my attention. Be it at the signal where they are seen begging or in a moving bus where everyone shuns away from sitting near to them. The initial fears about them turned to curiosity as to who they are. Are they normal? No one around me were able to give me any answer. It was apprehensive to talk to anyone too as it always told they may harm. But made it a point to attend meetings which transgenders attended, squeezed into talking to them and getting acquainted with the group and to surprise, it was found out they were such a welcoming group. And so, the need of the hour is that health care professionals should be trained on transgenders especially when statistics shows that there are around 5-7 lakhs* registered transgenders in India. The number is way more than this.

Keywords: Transgenders, curiosity, community, healthcare

INTRODUCTION:

Transgenderism in India is a widely known culture, yet mainstream population has no proper awareness about the transgender community. Transgender people are individuals whose gender identities do not pertain to their biological sex, and thus they differ from the stereotype of how men and women normally are. They constitute the marginalized section of the society in India and thus face legal, social as well as economic difficulties. They are mistreated and oppressed socially. Most of the time they are disowned by their own family since they are transgenders. They are having number of exasperating setbacks in a developing country like India.

The transgender community is experiencing astounding levels of discrimination resulting in the receipt of inadequate healthcare. Interestingly, consistent data reveal that providers, whether in nursing or medicine, are not providing competent care due to their lack of knowledge about transgender health and/or the difficulty in referring the individual to competent providers. Nurses work with diverse populations, but the nursing literature lacks research, theoretical frameworks, or practice guidelines regarding lesbian, gay, bisexual, and transgender (LGBT) health.

METHODOLOGY: A review analysis was done of published articles from indexed journals on transgenders and health care. Out of reviews scrutinized, seven were analyzed as follows:

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A qualitative descriptive design study was done by Allison, M K and etal to investigate Nurse Practitioners knowledge, attitudes, and beliefs when working with transsexuals and to illuminate about Practitioner Instruction needs. Focused semi structured interviews were conducted with eleven Nurse Practitioners in the Northeastern United States who had different long periods of encounters and experiences with transsexual patients. The meetings were expertly interpreted and analyzed independently and jointly by two investigators using conventional content analysis. Four principle themes and six subthemes rose out of the review. The principle themes incorporate individual and expert information gaps, fear, and vulnerability, caring with intention and pride and establishing a tolerant environment. Nurse Practioners in this review see flaws in their insight that undermine their capacity to convey quality patient focused consideration to transsexual patients, notwithstanding their best expectations. These discoveries have suggested for changes in nursing practice, training and research expected to address vital gaps in the health care of transgender people.

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Transgender and gender nonbinary individuals face lot of barriers to access health care due to discrimination in the United States. These experiences can lead to avoidance or delay in seeking healthcare. The emergency department clinicals and staff face these issues as transgender patients use the emergency department during crisis. A Qualitative exploratory study was done to assess the experience of trans individuals assessing health care in the emergency department and provide recommendations for improvement. The study involved semi structured qualitative interviews with nine trans individuals living in Arkansans and their experiences when visiting local Ed's. The study revealed four main themes: system and structural issues, interactions with staff influence care received, perceptions on clinical knowledge and education about trans and the impact on future health care and health care access. Participants recommended that education should be given for current and future Ed clinicians and staff to improve knowledge of best practices for transgenders health care. They also made recommendations to improve ED Policy for inclusive and affirming intake process, intake forms and electronic health record documentation including documentation and use of patients chosen name and pronouns.

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Amodified Cross-Cultural Care Survey (CCCS) questionnaire comprising of 50 questions using a Likert-type scale designed and six extra dichotomous questions to quantify the cultural competence of medical care providers in the domains of attitude, knowledge, and skill was conducted online by utilizing Qualtrics a solid web-based easy to use information assortment program that secures the character of its candidates by permitting respondents to answer anonymously. The purpose of the study was to find out if the

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mentalities, information, and abilities of Nurse Practitioners (NPs) make a barrier in transsexual health care. Completed responses were obtained from 30 out of 38 NPs (78.9%). Knowledge was positively connected with Skills (Pearson's $r = .688$, $p < .001$); negatively correlated with Negative Attitude (Pearson's $r = -.458$, $p = .011$) and positively correlated with Positive Attitude (Pearson's $r = .371$, $p = .043$). Skills was positively correlated with Positive attitude (Pearson's $r = .646$, $p < .001$); in any case, the negative relationship among Skills and Negative Attitude was not measurably critical at the .05 level (Pearson's $r = -.345$, $p = .062$). There was a negative connection between Negative Attitude and Positive Attitude, but this correlation was only marginally not significant at the .05 level (Pearson's $r = -.358$, $p = .052$). The results indicated that the balance between skills and negative attitudes may have created a barrier to care in transgender patients. Nursing Practitioners do not perceive care for transsexual patients to be of exceptionally high significance, indicating a need for awareness. There was an absence of information and training among nurses regarding the adequate care for transsexual patients just as an absence of continuous assessment of their capacities of patient consideration. The results also indicated that, on average, the respondents had a moderate level of training. The results of the correlation analysis indicated a strong balance between knowledge skills and positive attitudes among the Nurse Practitioners, yet their negative attitudes did not seem to be so closely balanced with their knowledge, skills, and positive attitudes, which indicated that the balance between skills and negative attitudes may have created a barrier to care in transgender patients.

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A pilot descriptive study was conducted to investigate nurse practitioner knowledge, attitudes, and self-efficacy in caring for transsexual people. Utilizing a sample of nurse practitioners ($n=416$) questionnaires were delivered electronically which were intended to quantify knowledge, attitude, and self-efficacy for giving transsexual medical care. Twenty-six completed surveys were returned. The outcomes demonstrated that respondents state, full regard, and acknowledgment towards transsexual patients while likewise revealing low self-efficacy for providing care. All respondents reported no transsexual content during their nurse practitioner education. Knowledge was composed of two items attitude was composed of 47 items and self-efficacy was composed of 1 item. Attitudes towards transsexual people was explored utilizing the Attitude Towards Transgender Survey ($=0.98$) (ATS) by Swanstrom and the Health Care Provider Survey (HCPS) ($=0.67$) by Burch (HCPS) (2005). The ATS questions were totaled to create an attitude dimension with 47-items. The 47 items were coded as 1 addressing negative attitude, 2 representing a neutral attitude and 3 signifying a positive attitude. Results indicated that 74.1% ($n=20$) chose "3" signifying a positive attitude. Inspection of the information revealed that individuals were less confident ($n=9$; 32.1% at 0% confident and $n=6$; 53.6% at 20% confidence) that their NP educational background prepared them to provide health care to transgender person. Findings revealed that the respondents believed

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themselves to have an average knowledge level based on two questions which assessed knowledge level towards transgender health care needs and knowledge of transgender lifestyle. An inverse relationship was found between attitude and self-efficacy; as attitude positively increased, self-efficacy decreased ($r=-.605$, $p=.001$). The same findings were true for attitude and knowledge; an inverse relationship whereas knowledge increased, attitude decreased ($r= -.429$, $p=.026$). There was no relationship found between knowledge and self-efficacy. The outcomes from this study recommend an overall acceptance towards transgender patients by the nurse practitioner respondents however infer a low self-efficacy or confidence for providing transgender health care by nurse practitioners.

One hundred and twenty-two students comprising of baccalaureate, generic master's, and RN-to-baccalaureate nursing programs participated in a study conducted by Carabez, R and etal . Majority of students completed the preinterview and post interview surveys (n = 112), for a response rate of 92% at post interview survey. About 40% of them felt inadequate to give nursing care to LGBT patients. Knowledge about sexual orientation and gender identity from preinterview to postinterview improved with most students reporting that they were more knowledgeable after completing the assignment. Different teaching strategies included readings, a two-hour presentation on LGBT health issues, and an assignment. Students completed an online LGBT awareness preinterview survey, completed interviews, and completed a post interview survey. Students showed a significant increase in knowledge about sexual orientation and gender identity and research and interview methods from pretest to posttest. The different teaching strategies involved in the assignment improved student knowledge, attitudes, and skills related to LGBT health care needs.

Transexuals face significant health incompatibilities within the society. A study was conducted by Rowan, S. P and etal to review and evaluate existing attitudes and knowledge of resident and faculty physician medical professionals within the state of West Virginia about treating transsexual individuals within a rural tertiary care center. The Attitudes of Medical Practitioner towards Transgender Patients (MP-ATTS) survey and their beliefs and Knowledge about treating Transgender Patients (MP-BKTTP) survey were distributed to all faculty and resident physicians. Demographics included data about gender, rurality of hometown, race, and description of medical practitioner status (i.e., years out of residency, residency status). In general, there were positive attitudes and reception of the survey among residents and faculty physicians. 76.455% of providers believed that their patients were not transgender. Over 40% of respondents accepted that they would need further education about transgender patients to provide appropriate health care. Male health care providers had significantly higher negative perceptions of the transgender community ($N=85$, $M=4.46$, standard deviation $[SD]=0.55$, $p<0.0001$) and perceived fewer barriers due to personnel. A clear need exists

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for expanded training in transgender health care among doctors dealing with transsexuals. A gender divide exists among health care providers within West Virginia over attitudes regarding the transgender community. Further studies are needed to fully understand the health care needs and barriers of the transgender population.

A qualitative exploratory study was conducted by Haire, B. G and etal using semi structured interviews with open ended questions which aimed to explore the experiences of healthcare access in a diverse sample of trans and gender diverse individuals with complex needs. Participants were asked about their first experience seeing a doctor during their transition as well as their experiences of both a good and a bad healthcare interaction. They were then asked if there was anything that they would like to say now to the healthcare provider involved in the good or bad experience. All interviews were audio recorded and transcribed verbatim by a transcriber who had signed a confidentiality agreement. All transcripts were read and re-read, with notes taken about thematic areas identified in each interview. At the end of this processes, a list of key themes was compiled. All transcripts were then coded both descriptively and conceptually. A series of four overarching themes were then identified. Four major themes in the interviews: complexity of care, economic hardship, parameters of competent care, and community connection with other TGD people. Participants listed a range of behaviours from healthcare services that would signal that they were not suitable or competent to provide an acceptable level of service. This included disrespectful attitudes, misgendering, 'deadnaming' (calling the person by their previous name), displaying an excessive interest in aspects of the participants' life that were irrelevant to the consultation, and displaying ignorance of trans services such that the participants felt an obligation to educate them. In addition, participants noted how stereotyped ideas of trans people could result in inaccurate assumptions about their healthcare needs.

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ANALYSIS, INTERPRETATION AND DISCUSSION:

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All the studies have brought out certain facts:

- Nurses have gaps in their knowledge that threaten their ability to deliver quality care to transgenders. In the study by Paradiso C and Lally R , it was found that regardless of how current their education, all the Nurse Practitioners in the study expressed that transgender care had not been part of their graduate curriculum. The

absence of education in transgender care was seen as a flaw. Nurse who had years of experience too mentioned their discomfort and lack of knowledge to provide quality care to the transgenders. They further identified the need for efforts to provide continuing education for Nurse Practitioners.

- In the study by M K Allison and team transgenders expressed their concerns over improper documentation of patients name and gender and at times their privacy which was compromised. There was inappropriate questions and comments by clinicians, misgendering and delay in care, refusal of care and poor care. The transgenders also expressed their concern that clinicians need to be educated about trans health and health care. The participants also felt that their bad experiences affected their next healthcare visit. The study concluded with recommendations by the transgenders to improve hospital policy regarding health care for transgenders.
- Self-efficacy is not given importance in most nursing curriculum. As per the study done by Levesque P J the study results imply that low self-efficacy and knowledge may be linked to lack of transgender health care content in nurse practitioner curricula as well as a lack of transgender health content in continuing education offerings. Educating new providers who can deliver culturally safe health care may require curriculum enhancements
- The study conducted on Nursing students' perceptions of their knowledge of lesbian, gay, bisexual, and transgender issues and effectiveness of a multi-purpose assignment in a public health nursing class indicated that awareness programs had increased their knowledge and attitudes and skills in catering for TG needs. Knowledge about sexual orientation and gender identity from preinterview to post interview shifted, with majority of students reporting that they were more knowledgeable after completing the assignment. Change in knowledge was more pronounced for gender identity ($t = 19.3$, $p 0.0001$) than for sexual orientation ($t = 4.14$, $p 0.005$)
- A study aimed to explore the experiences of healthcare access in a diverse sample of trans and gender diverse individuals with complex needs using qualitative methods by Haire BG, et al recruited 12 transgenders. Interviews were analyzed thematically. Many of the participants in this study had a range of relatively complex health needs to manage, including ongoing access to gender-affirming hormones, mental health care and sexual health care. Some also had chronic diseases including HIV, asthma, diabetes and drug and alcohol issues. Having to navigate a range of different health care providers was deemed quite

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burdensome to participants, as this involved the logistics of locating a suitable provider (not straightforward), getting a referral, scheduling an appointment (which could take considerable time), having the means to pay, if necessary, then travelling to the appointment.

CONCLUSION:

All the above studies throw light on the need for training health care professionals in taking care of transgenders. Nurses are the backbone of the health care system, and they should be equipped with knowledge, the right attitude and skill in care of the third gender.

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