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## Transgender Health Issues: Children of a Lesser God

### ABSTRACT

The transgender community is a distinct population, with its unique health care needs, wishes and preferences. This calls for an enhanced focus on transgender health issues, as an integral part of the health care system, and also through specialized multidisciplinary centers of excellence. The authors call for sensitization of the health care profession, and request for sensitivity while managing transgender and gender diverse individuals. If this is accomplished, transgender health issues will become normalized as part of the wider spectrum of health care, just as being a transgender person is normal.

**Keywords:** Gender-affirmative therapy, inclusive care, person-centered care, patient-centered care, transgender health care

The transgender community is a well-recognized minority in India, and across the globe. Along with other members of the LGBTQAI+ (Lesbian, Gay, Bisexual, Transgender, Queer, Asexual, Intersex, The plus sign denoting all other identities) spectrum, transgender individuals are gradually acknowledging and appreciating their rights, as well as responsibilities.<sup>1</sup> Major successes in legal and political acceptance have meant that transgender persons are now allowed to choose “other” non-binary gender in legal documents in some countries, and fight (and win) elections in others.

Within the health care system as well on social front, however, transgender persons still face challenges and concerns.<sup>2</sup> Current medical and nursing curricula do not address the needs of transgender and gender diverse people.<sup>3</sup> Neither do they make any attempt to sensitize health care professionals regarding how to use gender friendly language and behavior. This, coupled with a heavy burden on existing health services, leads to a situation where health care providers feel inadequately prepared to handle transgender patients, and transgender persons remain dissatisfied with the quality of care they receive. There are committed health care professionals who do provide gender friendly support as well as advice but their number is very few, and are woefully

inadequate for the huge number of transgender and gender diverse individuals in our society. Besides a poor referral system and lack of awareness in primary health care provider further aggravates the management of transgender and gender diverse individuals.

Being gender incongruent is not a disease, but transgender persons do face more than their fair share of health challenges.<sup>4</sup> Some of these issues are listed in Table 1. This list conveys an idea of the various health care services needed by members of the transgender community. It is not always necessary that each individual will require help or assistance for all the domains enumerated. It is also not always possible to have all services under one roof. At the same time, transgender persons should not always have to seek specialist advice for routine medical and metabolic issues. Primary health needs should be resolved at the primary care level, while ensuring that the health care providers are sensitive to the needs, wishes and preferences of transgender individuals.<sup>5</sup>

Secondary and tertiary care needs may need to be handled by specialists. A multimodal approach should be followed, in which all relevant specialties, such as mental health,<sup>1</sup> endocrinology/metabolism<sup>6,7</sup> internal medicine/pediatrics, surgery and urology/gynecology,

**Table 1.** Some Domains of Transgender Health

## The health care ecosystem

- Trans\*-sensitive communication
- Trans\*-friendly infrastructure
- Trans\*-facilitatory medicolegal rules and regulations

## Pediatrics and adolescent health

- Early supportive care
- Puberty suppression till final affirmative care
- Support and affirmative intervention before, during and after puberty
- Social support, including within family, at school

## Endocrine health

- Gender affirmative interventions
- Metabolic support, e.g., for bone health

## Mental health

- Psychological counseling
- Psychiatric intervention, if needed

## Medical health

- Prevention of commonly encountered infections, e.g., STDs, blood-borne infections
- Mitigation of medical concerns noted with endocrine/surgical intervention
- Facial feminization/masculinization interventions

## Surgical aspects

- Top surgery, if required
- Bottom surgery, if required

## Fertility medicine

- Preservation of ova/sperms
- Pregnancy/fatherhood, if required

## Non-medical gender-affirmative interventions

- Tucking and binding practices and related issues
- Skin, hair, nail health
- Voice and communication

\*Person/Individual

should integrate transgender health into their academics and practice. Concurrently, multidisciplinary centers of excellence should be created to offer state-of-the-art transgender health services under one roof. This will help transgender health emerge as a distinct discipline, serving a particular segment of population, akin to pediatrics, geriatrics, gynecology or urology. It will also facilitate the nesting and growth of transgender health issues within relevant specialties, like psychology, psychiatry, surgery and fertility management.

Multiple activities are taking place towards achieving this goal of comprehensive transgender care. The

IPATH (Indian Professional Association for Transgender Health), supported by WPATH (World Professional Association for Transgender Health), is working to share and spread knowledge about transgender health care amongst doctors, nurses and other health care professionals.<sup>8,9</sup> The Government of India plans to set up a Centre of Excellence for Transgender Health at the All India Institute of Medical Sciences (AIIMS), New Delhi. State governments do not lag behind, and the government of Tamil Nadu has also created two centers of excellence [personal communication, Dr S Sridhar, Madurai]. Yeoman service is being provided at various other public and private hospitals across the country.

What is required, perhaps, is an extra push to sensitize all health care professionals, and all members of the public, to the requirements and rights of the transgender community. All that we request is “listen to the community such that they love to speak to you. Speak with the community such that they love to listen to you”.

If we are able to accomplish this, collectively, as a fraternity, as a nation, the title of this editorial will automatically become redundant. Transgender health issues will become a matter of normalcy, just as being a transgender person is normal.

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