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Transgender and Gender Nonconforming Adults Face Barriers to Health Care—From Discrimination to Lack of Awareness on the Part of Health Care Providers

New York, New York, December 11, 2017—Very little population-based research has examined health and access to care among transgender populations. In a new [study](#) in the December 2017 issue of *The Milbank Quarterly*, researchers who compared barriers to care between cisgender, transgender, and gender nonconforming adults found that transgender and gender nonconforming adults experience barriers to health care for a variety of reasons, including discrimination and lack of awareness among health care providers on transgender-related health issues.

While previous research was limited to relatively small samples, this study used data from one of the first federally sponsored health surveys to collect information on transgender status. Gilbert Gonzales of the Vanderbilt University School of Medicine and Carrie Henning-Smith of the University of Minnesota School of Public Health compared four barriers to care by specific gender identify—cisgender women, cisgender men, transgender women, transgender men, and gender nonconforming (GNC) adults.

Findings

Using data from the 2014-2015 Behavioral Risk Factor Surveillance System, conducted annually by the Centers for Disease Control and Prevention, the authors estimated the prevalence of having no health insurance, unmet medical care needs, no routine checkup, and no usual source of care for 183,370 cisgender women, 131,080 cisgender men, 724 transgender women, 449 transgender men, and 270 GNC adults. They found that:

- Transgender and GNC adults were more likely to be non-white, sexual minority, and socioeconomically disadvantaged compared to cisgender adults.
- Transgender women were more likely to have no health insurance compared to cisgender women.
- Transgender men were more likely to have no health insurance and no usual source of care.
- GNC adults were more likely to have unmet medical care needs due to cost and no routine checkup in the prior year.

Conclusion

The authors note that “these results should raise concerns that transgender and GNC individuals lack equitable access to health care. Given the unique health care needs of the transgender and GNC populations, the findings from the study should serve as a call to improve access to care for transgender and GNC adults.” This may include addressing insurance-based and financial barriers to care, creating welcoming environments and training providers on issues related to gender identity.

“Our findings are consistent with a recent poll conducted by NPR and the Robert Wood Johnson Foundation, showing that a third of transgender Americans lack regular access to health care,” says Professor Gonzales. “More research needs to identify best practices for achieving health equity for all patients, including transgender and GNC people. This work will require that more health surveys add sexual orientation and gender identity questions to demographic questionnaires.”

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