

Trans people accessing acute mental health care more likely to experience marginalization

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Transgender individuals who access acute mental health care are more likely to experience marginalization, present with mood disorders and are twice more likely to be diagnosed with personality disorders than the general population accessing these services.

This according to a Centre for Addiction and Mental Health-led study, "Characteristics of Transgender Individuals Accessing Emergency

Department Visits and Hospitalizations for Mental Health," newly published in the journal *Psychiatric Services*. The study is the first to use administrative [health](#) data to explore how [transgender patients](#) access mental healthcare services.

"It's been theorized that [trans people](#) experience a disproportionately higher rate of mental illnesses, [substance use disorders](#) and suicidality, not because of their identity, but rather as a result of their experiences with discrimination, oppression and marginalization," said lead author Dr. June Lam, a Staff Psychiatrist at CAMH. "This study provides further data to support this theory by looking at the experiences of trans individuals who required a mental health-related Emergency Department visit or hospitalization. Ultimately, the findings show an association between trans people who accessed acute mental health care and their experience with socioeconomic marginalization."

The data collected for this study came from 728 [transgender](#) individuals who visited the Emergency Department and 454 transgender individuals hospitalized for [mental health](#)-related reasons, and who were aged 16 and above. The data originated from four outpatient health clinics in three cities (Thunder Bay, Ottawa and Toronto) across Ontario. All four clinics have expertise in working with transgender individuals and regularly collect data on self-defined gender identity. Researchers used Health administrative data held at ICES, an independent, non-profit research institute, to conduct this study. For each transgender sample, the researchers created two comparison groups to understand the ways in which the transgender population differs from the general population of those who access acute care in Ontario.

One limitation to the study, according to the authors, was that transgender individuals identified were from clinics in larger cities in Ontario, which may not be representative of the experiences of individuals living in smaller cities and rural areas.

Study co-author Dr. Alex Abramovich, an Independent Scientist with the Institute for Mental Health Policy Research (IMHPR), said: "Typically, when viewing administrative health data, patients are only classified as male or female. This makes transgender people virtually invisible in the healthcare system. We were only able to identify transgender individuals through looking at data where physicians or a health clinic asked their patients how they identify. This research makes a strong case for the need to identify transgender people in the healthcare system. By creating more transgender-inclusive systems and data collection practices, we can integrate inclusive response options to better understand the experience and health of transgender individuals."

"For a transgender patient, having to teach care providers about the importance of using the correct name and pronouns can be a very disheartening and invalidating experience. While we want to learn from our clients, it's not their responsibility to teach us—especially when they're already in crisis. That's why work like this is so important, as it will allow us to identify and address the service gaps that exist for trans people seeking care," said Dr. Juveria Zaheer, a Clinician Scientist with IMHPR and Medical Head of the Gerald Sheff and Shanitha Kachan Emergency Department at CAMH. She also emphasized that the best way to provide gender-affirming care is to not only engage with trans and gender-diverse people, but to ensure intersectional diversity in representation from those in the community.

This study concludes that care providers can greatly improve the healthcare services that transgender people receive through examining the unique needs and challenges of this population, ensuring the representation of trans people through inclusive intake response options, and closing the gaps that exist for trans people who access care. It also calls for additional research into experiences of transgender individuals presenting for acute mental healthcare, particularly around the role that marginalization and discrimination may play.

"We can't collect accurate data if we're not asking inclusive questions. That's why I've been advocating for a standardized model of care, with consistent institutional forms, that empowers transgender [people](#) to identify themselves as who they are," added Dr. Abramovich.

More information: June Sing Hong Lam et al, Characteristics of Transgender Individuals With Emergency Department Visits and Hospitalizations for Mental Health, *Psychiatric Services* (2021). [DOI: 10.1176/appi.ps.202100306](https://doi.org/10.1176/appi.ps.202100306)

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