

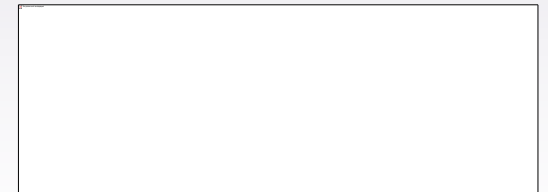


Brandon Yates, MD (Presenter)

Pronouns: He, Him, His

Mentor: Courtney Strickland, MD, FACOG, Clinical Assistant Professor

WHO PROVIDES GENDER AFFIRMING CARE? A RESIDENT PERSPECTIVE



NO DISCLOSURES



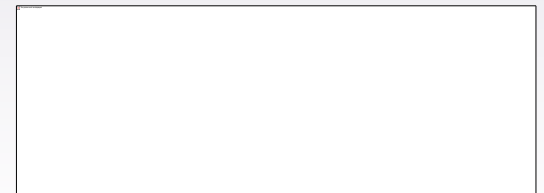
Objectives

- Relevance for the medical professional
- House Bill 808
- Introduction of study
- Methods
- Results
- Discussion



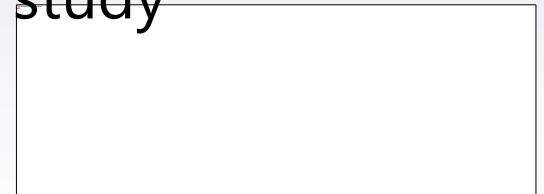
What is Gender Affirming Care?

- Supportive form of evidence-based healthcare
- Consist of services including medical, surgical, mental health and non-medical
- Gender Dysphoria vs Gender incongruence?



Why is Gender Affirming Care Important?

- Transgender and gender diverse individuals represent 0.5% of the total population
- 1.4 million adults (≥ 18 years old) in the U.S.
- This community faces social and economic marginalization due to discrimination based on their gender identity and expression
- This discrimination affects multiple facets of their lives
- 2008 – The National Center for Transgender Equality and the National Gay and Lesbian Task Force formed the 1st national transgender discrimination study



House Bill 808

- An act to prohibit gender transition procedures for minors
- Discussion of minors was not included in this study



Introduction of the Study

- Council on Resident Education in Obstetrics & Gynecology (CREOG) echoes the thoughts of ACOG, when they composed learning objectives for residents
- Recognized there was a gap in gender affirming education within our curriculum
- Intended goal was to fill this gap with development of a curriculum for OB/GYN residents
- Some barriers were encountered to the initial idea
- We decided to survey residents at our institution to get an idea of how trainees felt – who is “responsible” for providing gender affirming care?
- Our hypothesis was that residents would consider our specialty one of those responsible for providing this care and thus we MUST be proactive about including this in our training curriculum



ACOG COMMITTEE OPINION

Number 823

(Replaces Committee Opinion 512, December 2011, and Committee Opinion 685, January 2017)

Committee on Gynecologic Practice and Committee on Health Care for Underserved Women

This Committee Opinion was developed by the American College of Obstetricians and Gynecologists' Committee on Gynecologic Practice and Committee on Health Care for Underserved Women in collaboration with committee members Beth Cronin, MD and Colleen K. Stockdale MD, MS.

Health Care for Transgender and Gender Diverse Individuals



Methods

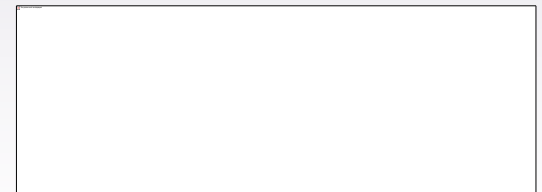
- 12 question survey distributed electronically to approximately 410 residents and fellows at ECU Health Medical Center in Greenville, NC
- Participants provided informed consent prior to agreeing to proceed with survey
- Survey asked participants about exposure to transgender and gender non-conforming patient encounters, formal gender-affirming care education, specialty that should be proficient in gender affirming care and who they would refer to provide this form of care
- Survey collected various demographic information including:
 - Age
 - Race/ethnicity
 - Gender identity
 - Region of hometown
 - Region of medical school education



Demographic Category	Frequency (n)	Percentage (%)
Age		
•20-24	0	0
•25-29	18	43.9
•30-34	21	51.2
•35-40	2	4.9
•40 and above	0	0
Race/Ethnicity		
•African American or Black	1	2.4
•Asian or Pacific Islander	6	14.6
•Caucasian or White	32	78
•Native American	0	0
•Multi-racial	2	4.9
Gender Identity		
•Man	14	34.1
•Woman	27	65.9
•Transgender	0	0
•Non-binary/Genderqueer	0	0
Region of Hometown		
•Northeast US	10	24.4
•Midwest US	1	2.4
•Northwest/Western US	2	4.9
•Southeast US	22	53.7
•Southwest US	3	7.3
•Canada	2	4.9
•Southeast Asia	1	2.4
•		
Region of Completed Med Education		
•Northeast US	6	14.6
•Midwest US	1	2.4
•Northwest/Western US	0	0
•Southeast US	23	56.1
•Southwest US	4	9.8
•Caribbean	5	12.1
•Canada	0	0
•Southeast Asia	1	2.4
Region of Intended Practice		
•Northeast US	6	14.6
•Midwest US	1	2.4
•Northwest/Western US/Pacific Islands	3	7.3
•Southeast US	29	70.7
•Southwest US	1	2.4
•Canada	1	2.4
•Southeast Asia	0	0

Results

- 65% of the respondents were identified as women
- 78% of the respondents were Caucasian or White
- 50% from the Southeast region of the US and majority intended to practice in the Southeast



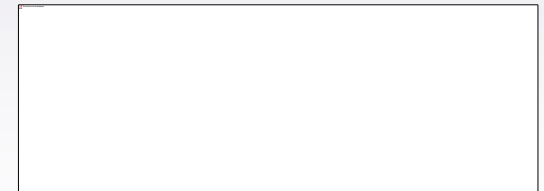
Results

Frequency (n) Percentage(%)

Which specialty(s) do you believe should be proficient in gender affirming care? (select all that apply)	Frequency (n)	Percentage(%)
• Obstetrics & gynecology	34	82.9
• Urology	28	68.3
• Pediatrics	27	65.9
• Internal Medicine/Subspecialties	29	70.7
• General Surgery	17	41.5
• Plastic Surgery	30	73.2
• Physical Medicine and Rehabilitation	9	9
• Medical Subspecialties (e.g., Endocrinology)	33	80.5
• Family Medicine	33	80.5

If you had a patient seeking gender affirming care, which specialty would you refer them to? (select all that apply)	Frequency (n)	Percentage(%)
• Obstetrics & gynecology	21	51.2
• Urology	11	26.8
• Pediatrics	5	12.2
• Internal Medicine/Subspecialties	9	22
• General Surgery	3	7.3
• Plastic Surgery	12	29.3
• Physical Medicine and Rehabilitation	1	2.4
• Medical Subspecialties (e.g., Endocrinology)	26	63.4
• Family Medicine	15	36.6
• I do not know which specialty I would refer them to	6	14.6

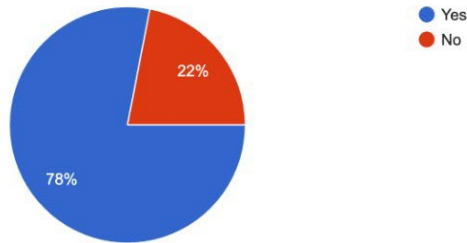
- 33% of respondents were OBGYN residents and 33% were FM residents
- 80.5% of respondents have participated in the care of individuals who identify as transgender or gender non-conforming
- 61% received formal education about gender affirming care



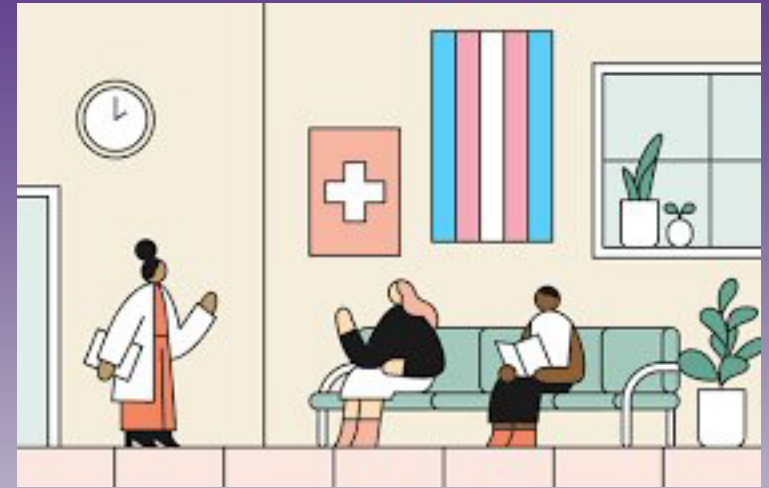
Results

Do you believe gender affirmation care should be incorporated into your residency training?

41 responses

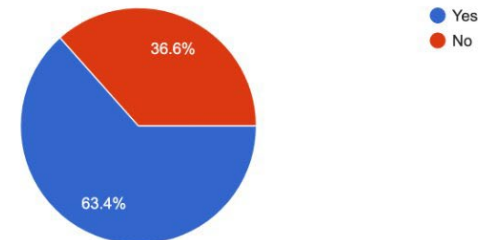


- 78% of participants believe gender affirming care should be incorporated into their residency training
- 63.4% of participants intend to provide gender affirming care in their future practice



Do you intend to provide gender affirming care in your future?

41 responses



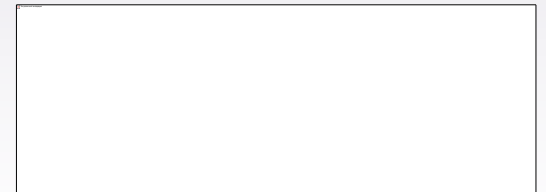
Discussion

- This survey demonstrates that medical providers may refer their patients to an OB/GYN for gender affirming care
- Most residents felt that most specialties held some responsibility in providing gender affirming care This is not only important for OBGYN but for other specialties as well
- It is imperative that gender affirming care be incorporated into the OB/GYN residency curriculum
- OB/GYN residencies can pioneer the effort to train confident and knowledge providers to care for this community



Limitations

- Small sample size
- Those who completed the survey, likely had an interest in the topic of gender affirming care
- Majority of the participant were Family Medicine and Obstetric-Gynecology residents



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- [UCSF Transgender Care Guidelines](#)
- [Fenway Health](#)