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RECOMMENDATIONS



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SWITCH team:

Aragón A. M.; Baione, M.; Bonvicini, F.; Brando-Garrido, C.; Campanino, M.; Cardoner N.; Casoni, C.; Catilino, F.; Dolezalova, P.; Escotorin-Soza, P.; Espelt
C.; Giuliani, S.; Goldberg, X.; Graglia, M.; Heumann, V.; Malkova, M.; Marino, M.; Moscano, E.; Orlikova, B.; Pavlica, K.; Riboldi, B.; Roche, O. R.; Roche, V. I.; Salzillo, S.; Sanzo I.; Simonova, Z.; Tedesco, I.

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SWITCH PROJECT 2020





RECOMMENDATIONS

FOR REGIONAL AUTHORITIES OF PUBLIC HEALTH CARE SYSTEMS TO PROMOTE MEASURES OF SOCIAL AND HEALTH INTEGRATION FOR TRANSGENDER PEOPLE AND EQUITY

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IMPORTANT NOTE:

These recommendations are based on general criteria but must be reviewed and adapted by local experts in each context.

Not all recommendations may be feasible in all countries.

It is important that the recommendations **increase the empathy as a part** of the existing protocols and provide an analytical perspective regarding which aspects can still be improved **from the perspective of transgender persons**.

This document can be useful to discuss and to give new inputs for interprofessional meetings or meetings with policy makers.

It can be used as discussion material to check if the existing protocols are really designed to serve the needs of transgender people.

If any item does not apply to your territory due to legal, cultural or other differences, you can ignore it and base the analysis on the items that can be applied in your context.





Introduction

Scientific evidence indicates that the greatest difficulties that transgender people have in accessing health care is not only related to the existence of adequate protocols, but also to the way in which they are implemented. Carlström, R., Ek, S., & Gabrielsson, S. (2020) indicated that: "Identifying as transgender can be a positive experience involving feelings of congruency, personal growth and resiliency. However, transgender populations are also vulnerable to adverse health and disease outcomes and face barriers to health care, including discrimination and lack of awareness by professionals" (Carlström, & Gabrielsson, 2020, p.1).

The attitudes of health professionals indicate that it is not automatically easy for many professionals to provide adequate and empathetic care. Chapman et al. (2012) say that say that LGBT families seeking health care for their children can be reluctant to reveal their sexual orientation to health professionals, as they do not trust that they will be cared for in the same way as heteronormative families.

Caring for transgender persons requires knowledge of anatomical reassignments, hormonal therapy effects, but also cultural sensitivities particular to the gender identity community (Jenner, 2010). For Jenner, quality care (healthcare quality) can be determined by the importance of cultural sensitivity, institutional policy change, and professional integrity.

There is a high vulnerability of transgender people in health care and that they are victims of the violation of their dignity in relation to medical care (Carlström and Gabrielsson, 2020). For this reason, the authors insist on the central role that healthcare personnel can have as facilitator and empower of these patients. "Healthcare professionals can contribute to restoring and upholding transgender people's trust in healthcare by accepting their identity and focusing on their healthcare needs" (Carlström and Gabrielsson, 2020, p,1).

Sedlak, Veney and Doheny (2016) say that although issues about transgender individuals are now being more openly discussed in the general public, however, healthcare providers often express feeling uncomfortable in interacting with TIs because they have not been educated about care of TIs and often base their care on insensitive stereotyping.

These studies reinforce the idea of the importance of using holistic care models focused on the care of the person and the characteristics of each family system.





Beyond the existence of protocols and recommendations, it is necessary to monitor the intrapersonal, interpersonal and social skills of health personnel who implement a protocol to avoid attitudes and behaviours of undervaluation, contempt, overprotection, exclusion, that violate dignity and self-esteem of transgender people.

General recommendations?

In Europe there are cultural differences and different legal framework. Also, there are differences in a greater or lesser degree of awareness of Public Opinion on the subject.

For this reason, it is difficult to make specific recommendations that are useful in a generalized way. We propose a checklist that allows each administration to check the quality of care from an empathic perspective focused on the specific needs and circumstances of transgender people.

This checklist shows the strengths and weaknesses of each protocol from a empathic perspective (prosocial applied model).

This list is an adaptation of the LIPA NET prosocial communication model (Roche, Escotorin and Roche, 2011; Escotorin, 2013; Escotorin, 2020).

In Italy, an inclusion index has been developed to explore and measure the level of LGBT inclusion by public institutions (Graglia, 2019). This index was used by "Interistitutional Committee for combating homotransnegativity and promoting inclusion of LGBT people" organized by the Municipality of Reggio Emilia (2017, 2019).

The objective of this checklist is to visualize which elements should be reinforced in the implementation of each protocol to:

- ensure effective healthcare for transgender persons;
- prevent transphobia and offer healthcare from an empathic perspective, focused on the specific needs and circumstances of transgender people;
- monitor the level of training and awareness of healthcare personnel regarding the needs of transgender people.





What a policy maker should know about trans people?

A protocol that truly guarantees equity in the healthcare of trans people must be based on the following principles:

1. Vulnerability. You must remember that transgender persons are a vulnerable group that has been the victim of stigmatization and prejudice. In many cases they have suffered bullying and not all have been supported in a positive way in the process of "transit", be it in the family, at school, in social settings.

2. Quality healthcare is a right that citizens have as all citizens, however, the culture of discrimination and violence against this group because of their gender identity causes inequity in health care, since they do not always have access to the same quality of care as cisgender persons. Therefore, even if it is not contained in the protocols, it is likely that health personnel have to learn to manage their own thought structures that are the basis for prejudice, undervaluation, lack of listening skills, among other skills.

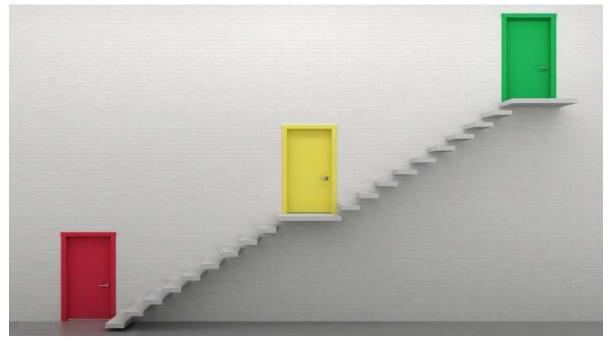
3. Culture of tolerance. Developing a welfare system that welcomes and includes trans people, allows the entire community to cultivate a culture of tolerance, with positive effects on reducing the phenomena of violence and discrimination. It also allows you to reflect on the improper use of reparative therapies and the need to intervene to control them by health institutions.

4. The needs of the trans person are unique to each trans person. The professional must give the necessary information so that the person can make the best choice based on their specific needs.





It is necessary to advance in three levels of intervention:



At a structural level (of public policies), generating protocols and legal norms increasingly adapted to the culture and circumstances of this group in all its evolutionary phases (childhood, adolescence, adulthood, and old age).

At the training level, generating specific training spaces for health personnel to help them understand the protocols, review their biases (intrapersonal training), review and optimize their empathic communication skills (interpersonal training), review their language, and make them aware of what physical, psychological and social well-being means for these patients (who have been subjected to many stressors since childhood). It is about applying the ability of metacognition. It is a skill that should be taught and trained in school at any age. But it could also be learned in adulthood. Certainly, it should be an apprenticeship and training that constitutes a basic axis of the self-training of professionals to verify the degree of mental fixation that each one has regarding their topics in ideas and thoughts.

On a practical level, offer specific guides, adapted materials, micro-videos, audiobooks, short roleplaying videos, specialized vocabulary, in an easily accessible online database or an APP that in real time helps health personnel to clarify doubts, and can find adequate resources that allow him to empathically interview transgender people, favoring a relationship of trust with patients.







Checklist for empathetic quality of care for transgender persons

Checklist for empathetic quality of care for transgender patients. Review the action protocol of your region / country regarding the care of transgender people.

Evaluate the level of development of local policies in your region, or of your health center (in case you are the director of a health center).

Each item proposes indicators of positive behaviors necessary to ensure a quality of empathic care for transgender people.

This list will provide you with a useful and quick map to analyze your local or organizational policies of each health center and determine possible points that should be reinforced.

Degree of development

- **Highly developed:** It is a planned measure, successfully implemented and frequently evaluated.
- **Developed:** It is a planned measure, it is thought that it works successfully, but it is not systematically evaluated.
- In development: We are in the planning phase or have taken the first implementation steps.
- **Little developed:** There is the idea, the intention to advance, it is being planned but there is still a long way to go to put it into practice.
- **Undeveloped:** Nothing has been thought about or done in this regard.





EXAMPLE HOW TO USE THE CHECKLIST

From the responses, a graph can be made that displays the strengths and weaknesses of each protocol currently in operation.

Another idea is that each response can also be assigned a number so that a quantitative assessment can be made from people's perception of local protocols:

- 5 Highly developed
- 4- Developed
- 3- In development
- 2- Little developed
- 1- Undeveloped

All of these results serve as an input to discuss the real empathic quality of existing protocols and to determine where and how they can be further improved.

	Highly developed	Developed	In development	Little developed	Undeveloped
Structural level					
The protocol of attention to transgender persons considers the needs of trans children and their families.		X			
Networking between health centres and schools attended by trans children is contemplated.			X		
The care protocol for transgender persons considers the needs of trans adolescents and their families.				X	
Networking between health centres and schools attended by trans adolescents is contemplated.					×
The care protocol for transgender persons considers the needs of trans adults.			X		
The care protocol for transgender persons considers the needs of trans elderly people.					
The protocol of attention to transgender persons considers the needs of trans people living in poverty.	X				
The protocol of care for transgender persons considers the culture variable as a necessary element to take into consideration for decision making.		X			
The care protocol guarantees trans- friendly clinic environments			X		





Self-Questionnaire to apply: Checklist for empathetic quality of care for transgender persons (SWITCH PROJECT, 2021¹)

	Highly developed	Developed	In development	Little developed	Undeveloped
Structural level					
The protocol of attention to transgender persons considers the needs of trans children and their families.					
Networking between health centres and schools attended by trans children is contemplated.					
The care protocol for transgender persons considers the needs of trans adolescents and their families.					
Networking between health centres and schools attended by trans adolescents is contemplated.					
The care protocol for transgender persons considers the needs of trans adults.					
The care protocol for transgender persons considers the needs of trans elderly people.					
The protocol of attention to transgender persons considers the needs of trans people living in poverty.					
The protocol of care for transgender persons considers the culture variable as a necessary element to take into consideration for decision making.					
The care protocol guarantees trans- friendly clinic environments					
The presence in the territory of professionals with knowledge about transgender, and willing to support the health care system, as well as patients on a personal level, is guaranteed.					
Positive meeting spaces are guaranteed, in which the staff act professionally, preserving the transgender person's privacy and integrity, being responsive and					
developing trusting relationships The care offered to transgender persons is competent					

¹ The prosocial quality of a relationship is closely related to the attribution of dignity and competence attributed to the recipient. In the case of transgender people, all the protocols presented in this document for the use of professionals reflect this attribution. However, for this attribution to be effective, that is, for the perception of the receiver to verify its acceptance and satisfaction, it is necessary to use some means or instrument that certifies that this receiver is experiencing horizontality in the relationship. One concrete way would be to create instruments that ensure that transgender people feel empowered, respected in their dignity and satisfied with the interaction with the specialist. Would be a way to reciprocate the prosocial performance. For example, that transgender people could evaluate the relationship with the professional. The checklist that we present can be converted and adapted into a Likert scale format so that they can qualify, the same items that the professional will have self-assessed.





	Highly developed	Developed	In development	Little developed	Undeveloped
Training level					
There are specific training spaces for					
health personnel to help them					
understand the protocols.					
The audio-visual or written materials that					
exist to explain the protocols to health					
personnel have adequate didactic					
quality (they are clear, easy to read and					
understand)					
The training courses offered to					
healthcare workers help people to					
review their thoughts, identify and					
manage their own biases towards					
transgender persons.					
The training courses offered to					
healthcare workers help them to review					
their thoughts, identify and manage their					
own biases towards transgender persons.					
The training courses offered to					
healthcare personnel help them					
increase their specialized knowledge					
and become aware of the subject.					
The training courses offered to					
healthcare personnel help them					
increase and train their empathic communication skills with trans persons.					
Training courses for healthcare personnel					
increase the repertoire of non-binary					
vocabulary and are an effective					
method to train their inclusive					
communication skills with trans persons.					
The training spaces train health					
personnel to treat trans persons with					
respect, respecting their autonomy,					
decision, and perception of reality.					
Training spaces help healthcare					
personnel to go through a					
metacognitive process (think about					
what they think) to accept transgender					
persons for who they are.					
The training of the health professional					
allows them to interact with transgender					
persons without wanting to influence the					
person to change their identity.					
The training of the healthcare					
professional allows them to interact with					
transgender persons without forcing					
them to align with narrow gender roles.					
The involved staff receives adequate					
training using the respondents' correct					
name and the appropriate pronoun in					
reference to them				I	





	Highly developed	Developed	In development	Little developed	Undeveloped
Practical level			-		
There are quality, accessible graphic					
support materials that provide					
concrete tools for health personnel to					
use inclusive language and					
guarantee equitable care for trans					
people.					
There is easily accessible teaching					
material (specific guides, adapted					
materials, micro-capsules, videos,					
audiobooks, short roleplaying videos,					
specialized vocabulary) so that health					
personnel can find out when they					
need it.					
An APP or an online database is					
available to answer frequently asked					
questions from healthcare personnel					
on the subject					
There are local experts available to					
answer questions and advise					
healthcare personnel in the case of					
care of transgender patients					
The care protocol at the interpersonal					
relationship level guarantees the use					
of gender-neutral terminology					
Dialogue spaces are guaranteed, in					
which transgender people can					
express their point of view to help health personnel understand,					
empathize and cognitively align					
themselves with transgender persons.					
Healthcare staff and personnel at all					
levels (administration, cleaning,					
healthcare) are trained to manage					
their own biases and do not look at					
transgender persons with disgust.					
Healthcare staff and personnel at all					
levels (administration, cleaning,					
healthcare) are trained to manage					
their own biases and make					
transgender persons feel less worthy.					
Healthcare staff and personnel at all					
levels (administration, cleaning,					
healthcare) are trained to take					
transgender persons seriously.					
Healthcare staff and personnel at all					
levels (administration, cleaning,					
healthcare) are trained to manage					
their own biases for do not make their					
gender an issue.					





	Highly developed	Developed	In development	Little developed	Undeveloped
() Practical level					
Healthcare staff and personnel at all levels (administration, cleaning, healthcare) try their best to understand the needs of transgender persons					
Healthcare staff and personnel at all levels (administration, cleaning, healthcare) are trained to ensure efficient and empathetic communication with transgender persons.					
Healthcare staff and personnel at all levels (administration, cleaning, healthcare) realize the transgender vulnerability					
Professionals of health services for transgender people are aware of the network of peers and trans activist entities that can give their support in daily life and act as references					
Professionals treat all people with the same human dignity, respecting the right of self- determination of trans people in terms of their identity whatever their circumstances, especially in people with mental diversity, legal disability and mental illness.					





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