CULTURALLY COMPETENT CARE FOR TRANSGENDER AND NON-BINARY PEOPLE IN RADIOLOGY

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Background:

Culturally competent care refers to patient care among minority populations, whether that is a racial, cultural, age, sex, gender, or economic class. Culturally competent care for transgender and non-binary people is not well published in medical literature.

Purpose:

This literature review served to review best practices for competent care of transgender and non-binary individuals in a radiology department, also to expose possible areas of improvement within healthcare.

Methods:

Articles were obtained from PubMed, Ovid Medline, and ScienceDirect using various keywords. Searching transgender, culturally competent care, radiology, and performing an "and" search with these terms yielded relevant literature. For literature to meet requirements it had to include discussion of care for transgender persons specifically or culturally competent care of the lesbian, gay, bisexual, transgender and queer (LGBTQ) community, within radiology. Results from selected articles were organized and reported.

Results:

Individuals providing care for transgender and non-binary patients almost never had training regarding these populations, (82.5%). Over eighty percent of providers felt asking patients for sexual orientation and gender identity (SO/GI) data would offend patients, however only 11% of patients reported they would be offended. Research suggests that asking questions regarding SO/GI on forms helps to identify needs and provide higher levels of care. The literature analyzed suggests that practitioners need to receive proper training in how to interact with and interview transgender and non-binary persons. Culturally competent care provides patients with a better experience, which usually leads to higher satisfaction ratings which improves reimbursement. The literature also suggests that registration forms and questionnaires are outdated or not asking proper questions.

Conclusion:

Culturally competent care is very important in relation to radiology exams, because biological sex determines varying interview questions. There is still a need for research into what transgender patients need, how to best interview, and what education would be the best way to disseminate this information.

Relevance to Allied Health:

This review is relevant to allied health and healthcare in general because minority populations will always be present. Transgender and non-binary patients will need special care and addressing them might require a more thorough approach. Especially within radiology, knowing the biological anatomy of a patient is important for questions regarding possible pregnancy or breastfeeding in relation to radiation exposure of the fetus. This could be beneficial across all modalities of Allied Health as well.