

Episode: *Author Interview: “How Cisgender Clinicians Can Help Prevent Harm During Encounters With Transgender Patients”*

Guest: Ximena Lopez, MD

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Transcript by: Cheryl Green

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[bright theme music]

TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative format for accessing the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Ximena Lopez, a pediatric endocrinologist and Associate Professor at The University of Texas Southwestern Medical Center in Dallas. She is also the founder of the Gender Education and Care Interdisciplinary Support Program, which provides multidisciplinary care to transgender and gender diverse youth. She's here to discuss her article, coauthored with Antonio Garcia, *How Cisgender Clinicians Can Help Prevent Harm During Encounters With Transgender Patients*, in the August 2022 issue of the Journal, [Inequity and Iatrogenic Harm](#). Dr Lopez, thank you so much for being on the podcast. [music fades]

DR XIMENA LOPEZ: Thank you so much for having me.

HOFF: So, to begin with, what's the main ethics point of your article?

LOPEZ: So, the main ethics point would be that transgender people commonly experience discrimination from clinicians, and transgender people of color are disproportionately affected because of the compounding effects of racism. Actually, one third of transgender individuals have reported to experience discrimination in a health care setting in the preceding year, mainly related to being transgender. And because of this anticipated discrimination, they are more likely to delay or even completely forgo medical care. The avoidance of care secondary to this anticipated discrimination is associated with depression, suicidal ideation, suicidal attempts, as well as engagement in the use of recreational substances. The main point of this article is that clinicians have a responsibility to recognize the ways in which they directly contribute to the perpetuation of health disparities among transgender patients.

HOFF: And so, what's the most important thing for health professions students and trainees to take from this article?

LOPEZ: So, clinicians can act at an individual level to prevent the stigmatization of transgender patients. For example, they can signal in an open way an inclusive clinical environment. And some specific ways of doing this is to display your clinic's nondiscrimination policy indicating protection against discrimination based on gender identity like in your website. You can use visual cues in the clinic space like safe space signs on your badge. And then another important way, which is very critical, is to use gender sensitivity when communicating with your patients. Us as clinicians, we have to recognize that language can intentionally and even unintentionally lead to marginalization and stigmatization of transgender individuals. And some ways to do this in an effective way is to familiarize yourself with gender inclusive terminology; use the name and

pronouns that the patient wants to identify, or identifies with and wants you to use; use affirming language on paperwork, medical records; avoid unnecessary, intrusive questions or genital exams; and train all your staff to do the same.

Also, one has to consider the multiple marginalized experiences of transgender people of color. And remember, when caring for transgender patients with multiple marginalized identities, as in this case, people of color, you have to recognize that unless you share the same set of marginalized identities, you lack a full understanding of their circumstances and experiences. And one way to be more comfortable understanding their experience is to engage with the transgender community.

And lastly, it's important to promote a broader structural change. And the way as a medical provider or student can do this is by using your knowledge and influence on medical boards, medical societies, or in your institution.

HOFF: And finally, if you could add a point to your article that you didn't have the time or space to explore, what would that be?

LOPEZ: Yes. So, in our article, we discuss the barriers that clinicians can implement when transgender individuals seek gender affirming medical treatments like hormone therapy or surgery. These barriers are commonly described as gatekeeping, for example, when an adult is required to have a mental health evaluation before receiving treatment. We believe this can indeed create stigma and pathologize their transgender identity. But we want to make a distinction. For transgender minors or transgender youth, this is different. They might still need a mental health assessment, and standards of care do recommend a multidisciplinary and more careful approach that involves mental health care. This is because they might still be in a phase of gender exploration.

I want to make another point. We live in an era of misinformation, not just related to transgender care, but also in other medical fields. Misinformation specific to transgender care in youth has been politicized, and this is impacting the mental health care of transgender individuals and minors, and it's threatening access to their care. There's some false claims that have been distributed among the public, which include that genital surgery's done in young children or that young children receive hormone treatments. That is false. Actually, genital surgery is not recommended before adulthood. Patients have to be in puberty to receive medical treatment. And actually, the first step of medical treatment is puberty suppression, which is overall reversible. And then hormone therapy is not typically started until late adolescence. So, in this respect, physicians and trainees also have a responsibility to educate the public about the medical and scientific facts and advocate for their patients at large. [theme music returns]

HOFF: Dr Lopez, thank you so much for being on the podcast with me, and thank you for your and your coauthor's contribution to the Journal this month.

LOPEZ: Thank you so much for having me.

HOFF: To read the full article, as well as the rest of the August 2022 issue for free, visit our site, [JournalofEthics.org](https://www.journalofethics.org). We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.