



The Trans Workforce: The Relationship between Gender Nonconformity and Healthcare Access among Employed and Unemployed Adults



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Introduction

- As the number of people who identify as transgender or gender non-conforming (GNC) has increased, so has the frequency of gender-affirming hormonal therapy. This therapy is safe when overseen by a healthcare provider, and it provides psychological benefits in addition to physical benefits (Defreyne et al., 2023)
- Transgender people are significantly less likely to be employed than their cisgender counterparts (Mann, 2021)
- Being a part of the LGBTQIA community has been shown to be a predictive factor of burnout among anesthesiologists (especially as queer people are underrepresented in this line of work). LGBTQIA anesthesiologists face legislative challenges in addition to mental health issues, workplace discrimination, and harassment (Reece-Nguyen et al., 2022)
- Transgender and nonbinary individuals are not receiving adequate care in multiple areas of healthcare, including fertility care, which has resulted in a low uptake of fertility preservation services among the community (Amir et al., 2022)
- Although not all people who identify as trans receive surgery or hormone therapy, removing surgical requirements to change gender markers on identity documents, which must be submitted when applying for jobs, has increased the employment of Female-to-Male (FTM) individuals, but Male-to-Female (MTF) individuals (Mann, 2021)

Research Questions

- Is there a gap between access to healthcare for gender non-conforming (GNC) employees as compared to their cisgender (cis) counterparts?
- Is there a gap between quality of healthcare for gender non-conforming (GNC) employees as compared to their cisgender (cis) counterparts?

Methods

Sample

- Respondents (n=4196) were drawn from fifth wave of the U.S. National Longitudinal Study of Adolescent Health (ADDHEALTH), which surveys individuals in their late 30s/early 40s

Measures

- Sex assigned at birth (male or female) was self-identified. Then, gender presentation was assessed using a scale from 1 (very feminine) to 7 (very masculine)
- Gender non-conforming individuals were then identified (people whose gender presentation did not correspond to their gender assigned at birth) and coded as a 1, while gender conforming individuals (people whose gender presentation correspond to their gender assigned at birth) and coded as a 0
- Work status was measured with the question "Do you currently work for pay?" Possible responses were 1 (yes), 2 (no, but have in the past), and 3 (no, have never worked for pay). From there, responses were coded as no (0) or yes (1)
- Whether an employer provided health insurance was self-reported and coded as no (0) or yes (1)
- Respondents self-reported whether they had received psychological counseling in the past 12 months. Possible responses were 0 (no) and 1 (yes)

Results

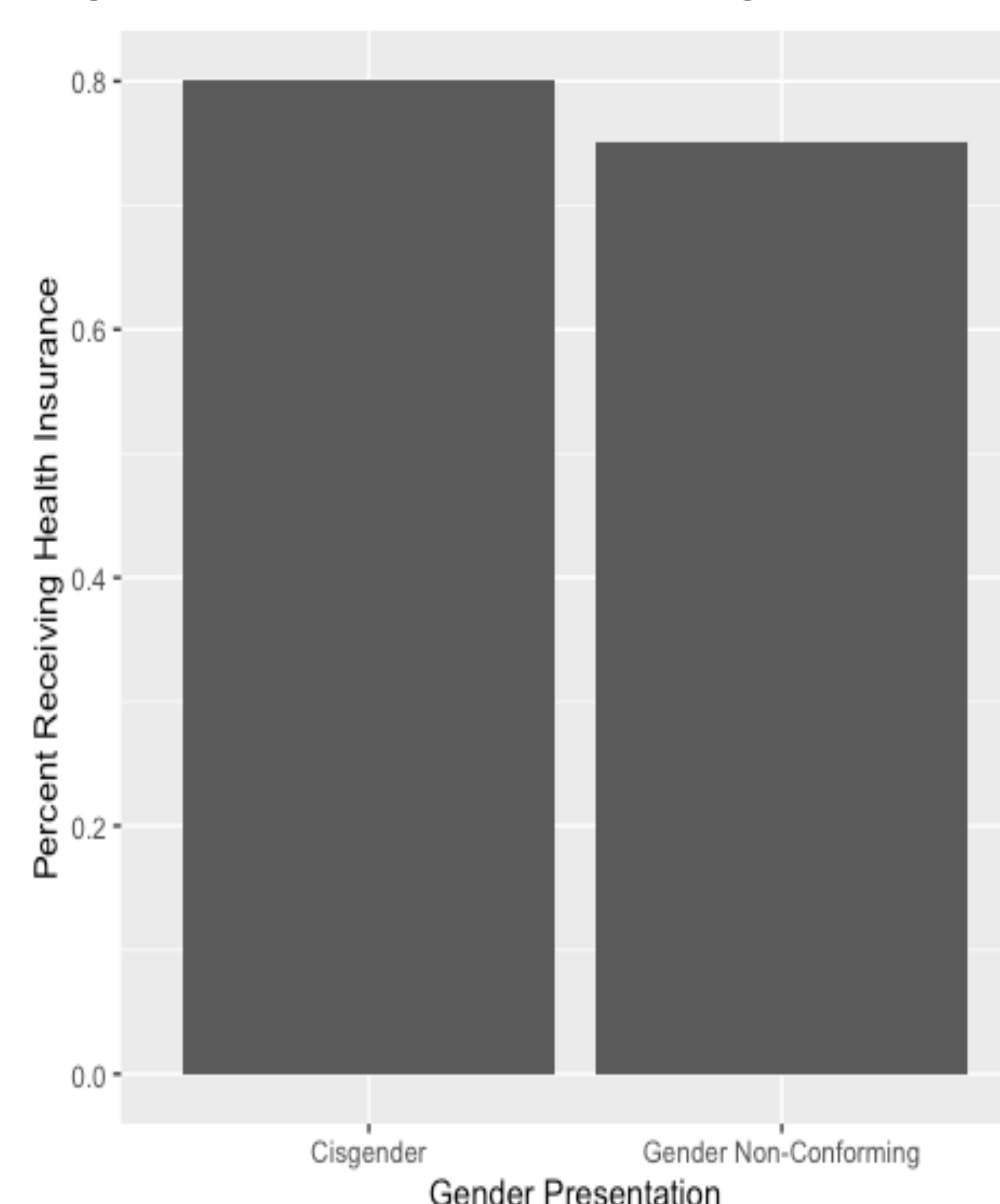
Univariate

- 3.63% of respondents are GNC (n=124)
- 96.37% of respondents are cis (n=3292)
- 79.88% of all respondents indicated that they receive health insurance (n=2719)

Bivariate

- A chi-square test indicated that 80.00% of cis employees receive health insurance, while 75.00% of GNC employees receive health insurance (p=0.21)

Figure 1. Gender Presentation and Receiving Health Insurance



Multivariate

- Gender presentation (O.R. 0.75, CI 0.50-1.15) is not significantly associated with the likelihood of receiving health insurance (p=0.171). However, there seems to be an empirical relationship between the two. The odds of GNC employees receiving health insurance are lower (0.75) than their cis counterparts.
- A logistic regression indicated that cis and GNC receiving psychological counseling in the past 12 months was not significantly associated with their access to health insurance (p=0.07)
- There were also no significant associations with the additional variables of sex assigned at birth (p=0.56) and general health (p=0.49)

Discussion

- Proportionally, the sample size of GNC individuals was much smaller than is representative of this community in the United States, which likely affected the statistical significance of results. Future studies should investigate these questions using a larger sample.
- Although results are not statistically significant, they indicate an empirical gap in health benefits for GNC individuals when compared to their cisgender counterparts.
- A smaller likelihood of receiving healthcare could affect not only general physical health for GNC and trans people, but mental health as well, given possible decreased access to lifesaving gender-affirming healthcare.
- This study, as well as future research, illuminates the importance of law and policy that uphold protections and benefits for trans people