



A Snapshot of Transgender Health in Missouri

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Introduction

The 2012 Institute of Medicine Report on lesbian, gay, bisexual, transgender (LGBT) health identified significant health disparities; however there is limited data on this population. Surprisingly, data focusing on the transgender community was more limited.

The purpose of this study is to explore health and health behaviors of the transgender population and how it compares to the sexual and gender minority (SGM) and Missouri population.

Methodology

Data were collected at five Missouri Pride festivals in Jun and Aug of 2011; online survey to list serves in Sept through Nov 2011

Out of the 4038 adult participants who completed the survey, 3275 self-identified as SGM and 156 as transgender

Trans Status

Q. Do you identify as transgender or transsexual?

Tobacco use

Q. Have you smoked at least 100 cigarettes in your entire life?

Q. Do you now smoke cigarettes every day, some days or not at all?

Smoking status (current, former or never) was assigned using these questions

Risky alcohol consumption

Q. On average, how many drinks do you have weekly?

Q. When was the last time you had: for men and MtF 4+ drinks/day or for women and FtM 3+ drinks/day?

Risky alcohol use was defined for males & MtF as an average 14+ drinks/week or 4+ drinks/day and for females & FtM as an average 7+ drinks/week or 3+ drinks/day

Uninsured

Q. Are you currently covered by any type of health insurance or some other kind of health care plan?

Access to care

Q. How long has it been since you last saw a doctor or other health care provider?

Q. During the last 12 months, was there any time when you needed medical care or surgery but did not get it?

Q. At any time in the past 3-months, have you ended up taking less medication than your doctor prescribed because of cost?

Depression

Q. In the last 6 months did you have symptoms of depression?

Q. When you experienced these symptoms, did they interfere with your daily activity?

Table 1. Health Risks

| | Current smoker | Some day smoker | Risky alcohol men & MtF | Risky alcohol women & FtM | Depression |
|-------|----------------|-----------------|-------------------------|---------------------------|------------|
| Trans | 42% | 17% | 47% | 43% | 44% |
| SGM | 38% | 24% | 53% | 50% | 30% |
| MO | 24% | 5% | 36% | 18% | 20% |

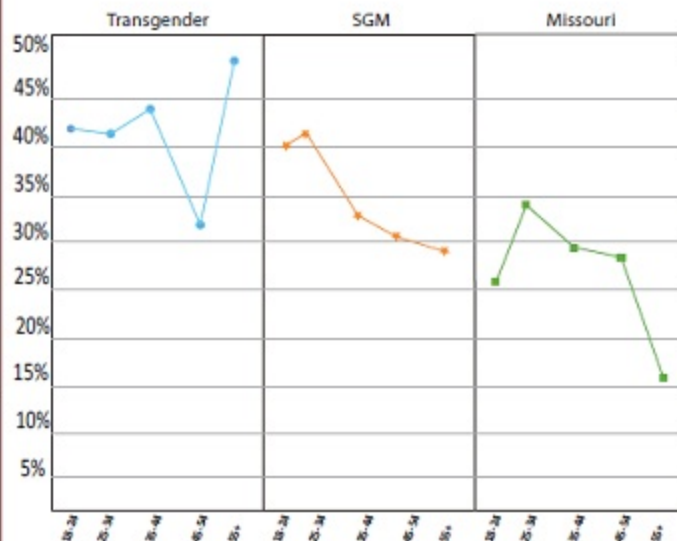


Figure 1. Current Smoker Rates by Age Range

Table 2. Access to Health Care

| | Uninsured | No health care when needed | Less medication |
|-------|-----------|----------------------------|-----------------|
| Trans | 27% | 27% | 17% |
| SGM | 22% | 17% | 7% |
| MO | 17% | 7% | 5% |

Results

Transgender and SGM participants were almost two times as likely to smoke (42%, 38% respectively) and be risky alcohol users (48%, 53% respectively) than the general Missouri population (24%, 24%) 2011 BRFSS

Transgender participants were more than three times more likely to smoke some days than Missouri residents (17%, 5% respectively)

Transgender individuals had smoking rates higher in all age groups compared to the other SGM groups (data not shown)

Transgender participants reported experiencing symptoms of depression (44%) more than twice that of the Missouri population (20%) 2011 BRFSS

Transgender individuals were slightly less likely to report healthy eating patterns than the US population (34%, 42% respectively) 2011 BRFSS

Transgender participants were almost four times more likely to not receive medical care or surgery when they needed it (27%) than the Missouri population (7%). The transgender individuals were also more likely to take less medication than their doctor had prescribed than the SGM population (17%, 7% respectively)

Conclusion

Our research confirms the Institute of Medicine's report on LGBT health; the transgender population faces significant health disparities in the state of Missouri. Transgender participants were more likely to report higher levels of tobacco use, risky alcohol use, to be uninsured, and take less medication prescribed than the Missouri population. Rates of depression in the transgender population are exceptionally high.

Smoking cessation and mental health programs should be focused on this population. More research needs to be performed with the transgender population to better understand how their health and access to health care can be improved.

Acknowledgement

The success of the project is in part due to Scout, PhD and the Network for LGBT Health Equity and Kitty Jerome for resources and guidance, for the hard work of data collection and entry by many students, for the commitment of Dean Andersen, our project coordinator. Lastly, we sincerely thank the Missouri Foundation for Health for continued funding to study health disparities in this population.