Improving the integration of care for trans adults: ICTA a mixed-methods study

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research, or similar, and contains language which may offend some readers.

Published August 2024 DOI: 10.3310/EWTA4502

Plain language summary

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Health and Social Care Delivery Research 2024; Vol. 12: No. 28

DOI: 10.3310/EWTA4502

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Plain language summary

This research concerns improving the range of National Health Service health services that trans adults need. Trans people have a different gender from that assigned at birth or in early childhood. Not all need to make a medical transition to express their gender, and transition can take many different forms, including hormone therapy, various kinds of surgery, and other procedures such as hair removal. At the time of writing, trans people over 17 who need to make a medical transition can seek care at one of the United Kingdom's 10 specialist National Health Service Gender Identity Clinics. However, people must wait a very long time before they are seen.

Through 110 in-depth interviews, as well as focus groups attended by 23 people, this research explored recent experiences of trans people receiving various kinds of health care. A further 55 interviews investigated the views of National Health Service and voluntary-sector staff involved in delivering trans health care. All of this has led to insights about how services can be improved, and the development of online courses for healthcare staff and for people who use services or support those who use services.

The research indicates what can lead to experiences of poor care that is not 'joined up':

- lack of respectful treatment of trans people by general practitioner practices;
- inadequate funding of services;
- lack of support while waiting;
- the extended and difficult nature of Gender Identity Clinic diagnostic assessments;
- breakdowns in collaboration between Gender Identity Clinics and general practitioner practices over hormone therapy;
- lack of National Health Service psychological support for trans people.

The research indicates some important ways to improve care:

- training in trans health care for general practitioners;
- third-sector peer-support workers for trans people who come to National Health Service services;
- gender services taking a collaborative approach to assessing what people need, clarifying treatment options, benefits and risks;
- regional general practitioner-led hormone therapy clinics, bringing trans health care into the mainstream;
- psychology services that support trans people rather than assessing them.

Health and Social Care Delivery Research

ISSN 2755-0079 (Online)

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Editorial contact: journals.library@nihr.ac.uk

This journal was previously published as *Health Services and Delivery Research* (Volumes 1–9); ISSN 2050-4349 (print), ISSN 2050-4357 (online)

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This article

The research reported in this issue of the journal was funded by the HSDR programme or one of its preceding programmes as award number 17/51/08. The contractual start date was in February 2019. The draft manuscript began editorial review in July 2022 and was accepted for publication in October 2023. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HSDR editors and production house have tried to ensure the accuracy of the authors' manuscript and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this article.

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