

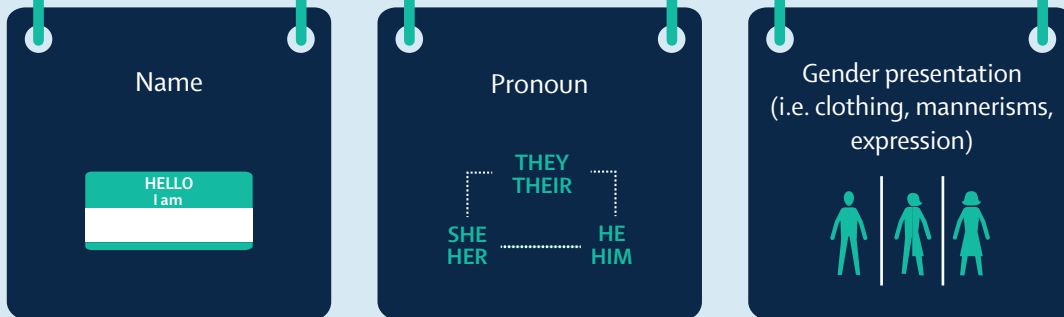
TRANSGENDER HEALTH AND WELLBEING



Gender-Affirmative Healthcare for Transgender People Worldwide

Gender affirmation is a unique determinant of transgender health and wellbeing globally. It refers to the process of having one's gender affirmed or recognised. There are four key gender affirmation domains:

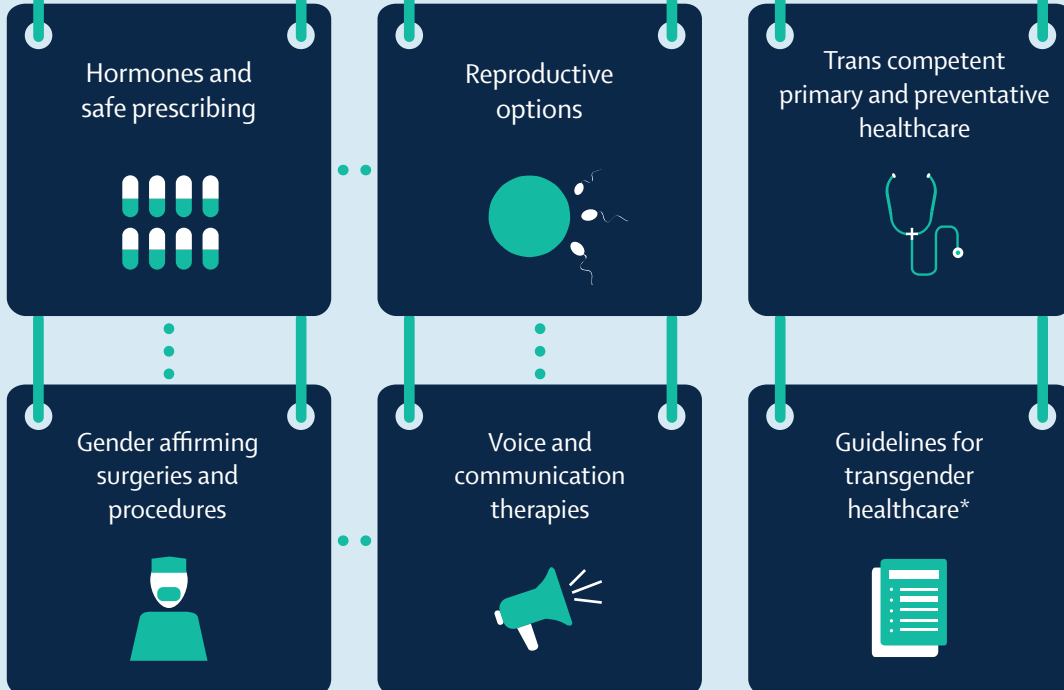
1. SOCIAL



2. PSYCHOLOGICAL



3. MEDICAL



4. LEGAL



DEFINITIONS

TRANSGENDER PEOPLE:

Often referred to as 'trans' people, transgender individuals have an assigned sex at birth that differs from their current gender identity or expression. Often this is described as an incongruence or discordance between an individual's personal sense of their own gender (their gender identity) and the sex assigned to them at birth (birth-assigned sex). This experience may be accompanied by discomfort, anxiety or distress; often called gender dysphoria.

TRANS MASCULINE PEOPLE:

Individuals assigned a female sex at birth who identify as men, males, transgender men, trans males, female-to-males (FtMs), or other diverse gender identities on the trans masculine spectrum.

TRANS FEMININE PEOPLE:

Individuals assigned a male sex at birth who identify as a women, females, transgender women, trans females, male-to-females (MtFs), or other diverse gender identities on the trans feminine spectrum.

NONBINARY TRANSGENDER PEOPLE:

Individuals who identify outside of the gender binary 'man' and 'woman', identifying as neither, as both, or as another gender identity on the continuum between the two. Some individuals, particularly in cultures which accept the idea of gender beyond 'man' and 'woman', identify as members of 'third genders', and/or employ indigenous gender labels.

CULTURAL DIVERSITY:

Gender is context-specific, meaning that the social and cultural characteristics (gender) associated with biological sex categories of 'male' and 'female' differ between and within cultures, geographic regions, and generations. Engagement of local transgender communities is essential to ensure the specific social, psychological, medical, and legal needs of transgender people are met in a particular country, setting, and context.

For further information on transgender health and wellbeing, visit www.thelancet.com/series/transgender-health

*GUIDELINES FOR TRANSGENDER HEALTHCARE:

- **WPATH Standards of Care (SOC7)**
http://www.wpath.org/uploaded_files/140/files/Standards%20of%20Care,%20V7%20Full%20Book.pdf
- **The Asia-Pacific Trans Health Blueprint**
United Nations Health Policy Project, Asia Pacific Transgender Network, United Nations Development Programme. Blueprint for the provision of comprehensive care for trans people and trans communities in Asia and the Pacific. 2015. http://www.healthpolicyproject.com/pubs/484_APTBFINAL.pdf (accessed May 18, 2016).
- **TRANSIT**
United Nations Development Programme, IRGT: A Global Network of Transgender Women and HIV, World Health Organization, United Nations Population Fund, United States Agency for International Development, Joint United Nations Programme on HIV/AIDS. Implementing comprehensive HIV and STI programmes with transgender people: practical guidance for collaborative interventions (TRANSIT). New York: United Nations Development Programme; 2016.
- **The UCSF Center for Excellence Primary Care Protocols**
Center of Excellence for Transgender Health. Primary care protocol for transgender patient care. San Francisco: University of California, San Francisco, 2011.
- **The Pan-American Trans Health Blueprint**
Pan American Health Organization, John Snow, Inc, World Professional Association for Transgender Health, et al. 2014. Blueprint for the provision of comprehensive care for trans persons and their communities in the Caribbean and other Anglophone countries. Arlington, VA: John Snow, Inc, 2014.

SOURCES:

1. Winter S, Diamond M, Green J, et al. Transgender people: health at the margins of society. *Lancet* 2016; published online June 17. [http://dx.doi.org/10.1016/S0140-6736\(16\)00683-8](http://dx.doi.org/10.1016/S0140-6736(16)00683-8).
2. Wylie K, Knudson G, Khan SJ, Bonierbale M, Watanyusakul S, Baral S. Serving transgender people: clinical care considerations and service delivery models in transgender health. *Lancet* 2016; published online June 17. [http://dx.doi.org/10.1016/S0140-6736\(16\)00682-6](http://dx.doi.org/10.1016/S0140-6736(16)00682-6).
3. Reinsner SL, Poteat T, Keatley J, et al. Global health burden and needs of transgender populations: a review. *Lancet* 2016; published online June 17. [http://dx.doi.org/10.1016/S0140-6736\(16\)00682-6](http://dx.doi.org/10.1016/S0140-6736(16)00682-6).
4. Winter S, Settle E, Wylie K, et al. Synergies in health and human rights: a call to action to improve transgender health. *Lancet* 2016; published online June 17. [http://dx.doi.org/10.1016/S0140-6736\(16\)30653-5](http://dx.doi.org/10.1016/S0140-6736(16)30653-5).
5. Lo S, Horton R. Transgender health: an opportunity for global health equity. *Lancet* 2016; published online June 17. [http://dx.doi.org/10.1016/S0140-6736\(16\)30675-4](http://dx.doi.org/10.1016/S0140-6736(16)30675-4).

For information on the gender affirmative model of care here, please read: Reinsner SL, Radix A, Deutsch M. Integrated and Gender-Affirming Clinical Care and Research Programs for Transgender People to Address Disparities in HIV Infection. *JAIDS* [In press].