

# Creating curricular content through an intersectional lens: Teaching on the unique mental health challenges faced by our Black transgender and gender diverse patients

Anastasia B. Evanoff, MD<sup>1</sup> and Desta S. Lissanu MD<sup>1</sup>; Alex S. Keuroghlian, MD, MPH<sup>2</sup>

<sup>1</sup>Department of Psychiatry, Massachusetts General Hospital, 55 Fruit Street, Boston, MA, 02114  
<sup>2</sup>The Fenway Institute, Fenway Health, 1340 Boylston Street, Boston, MA 02215, USA

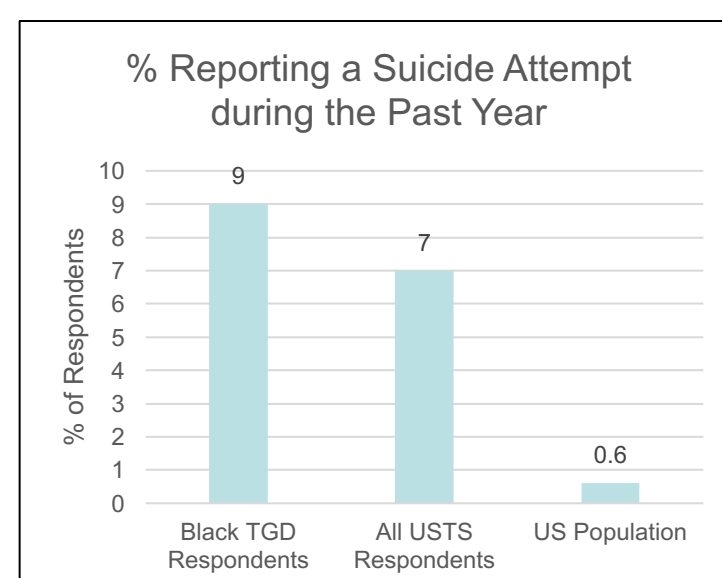
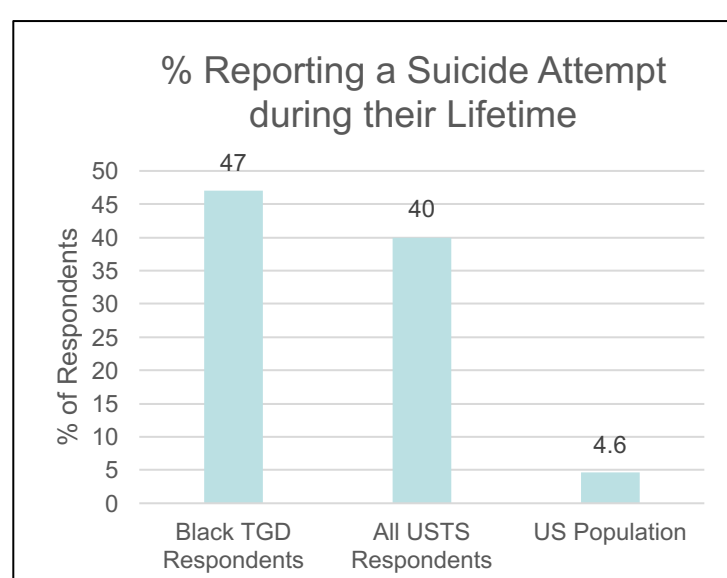


## Introduction

Although all gender and sexual minorities in the United States face significant social and structural challenges, Black transgender and gender diverse (TGD) people face unique obstacles. Consider the disproportionate number of fatal attacks against Black trans people, especially Black trans women, which the American Medical Association designated as “an epidemic of violence” in 2018.<sup>(1)</sup> Higher everyday discrimination scores and greater number of attributed reasons for discrimination experiences, for which the Black TGD community is particularly vulnerable, were independently associated with PTSD symptoms.<sup>(2)</sup>

Additional disparities are also described in US Transgender Survey (USTS), which, with almost 28,000 respondents, is the largest survey to date of transgender people living in America.<sup>(3)</sup> As this survey documents:

- Almost 2 in 5 Black respondents lived below the poverty line.
- Almost half of the Black TGD people surveyed had experienced homelessness at some point in their lives, compared to 30% of overall respondents in the USTS.
- 40% of Black survey respondents experienced “serious psychological distress” in the month before the survey, a rate 8 times higher than the general population.
- Nearly a third of respondents who saw a healthcare provider within the last year had a negative experience because of their gender identity.

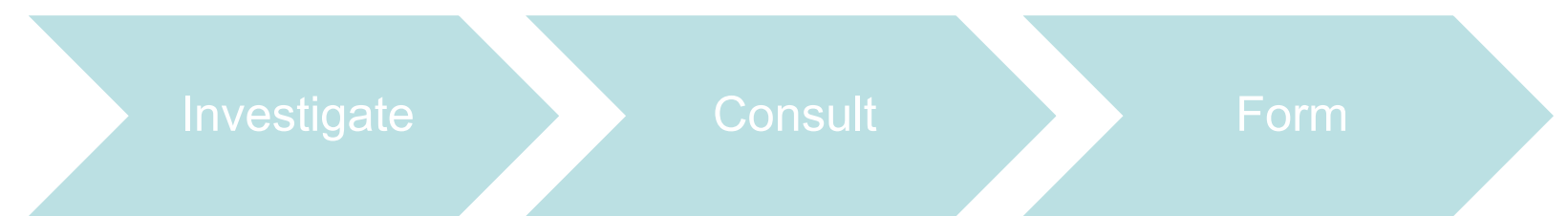


Despite the substantial and unique challenges that define the Black TGD experience in the US, there remains a paucity of educational opportunities to specifically educate medical professionals on these disparities. As our psychiatry residency curriculum is currently structured, there is no didactic experience that specifically engages with the disparities Black TGD people encounter. We posit that an intersectional approach that includes specific discussions of the impact of race is essential for providing sensitive and culturally competent medical care for Black TGD people.<sup>(4)</sup>

## Curriculum Creation

We took a step-wise approach to inform the creation of this new didactic, with 1) current content review; 2) desired content review; 3) didactic creation.

- I. Investigated** the content of current didactic material in the curriculum, which included discussions with resident and faculty teachers of existing TGD mental health didactics to determine strengths and gaps. We queried the overall curriculum layout in order to determine where new curricular content can be added.
- II. Consulted** with knowledgeable didactic leaders as well as stakeholders in the curricular content to determine what content should be added and how existing didactics can be modified and improved.
- III. Formed** a creative curricular approach to engage residents most effectively in these important topics, with an emphasis on:
  - I. Shifting from traditional scholarly and medical resources to focus more on first-hand accounts and materials created by individuals with lived experience.
  - II. Creating curricular content that is adaptable and sustainable.



- What didactics are currently available?
- What can be improved?

- Solicit stakeholder involvement about how to improve upon current didactics

- Build creative curricular approach that emphasizes lived experiences, sustainability, and adaptability

## Results

Our curriculum consisted of three distinct venues, chosen to provide a diversity of perspectives and learning modalities, including 1) traditional lecture and 2) case conference. These teaching venues total to ~2hrs of resident learning.

- I. Traditional Lecture (~1hr): Delivered at weekly residency report. Lecture structure included the following discussion points:**
  - Why focus on this particular patient population?
    - Discussed combined discrimination, define intersectionality
  - What unique challenges does this community face, especially related to mental health?
    - Discussed large social and healthcare disparities (homelessness, assault rates, HIV prevalence, suicidality, health provider discrimination)
  - How can you become a more affirming clinician?
    - Discussed going beyond pronouns, providing a welcoming and inclusive clinical space, ensuring representation of Black TGD people in research studies<sup>(5)</sup>, confronting racism and anti-Blackness as a part of care
- II. Case Conference (~1hr): Delivered at interdisciplinary staff quality improvement meeting on MGH inpatient psychiatry unit. Lecture focused on analyzing/discussing recent assault of a Black trans woman that occurred on the unit.**
  - Review of basic terms related to TGD patients and defining intersectionality
  - History of the relationship between TGD people and psychiatry<sup>(6)</sup>
  - Discussion of factors leading to assault and staff response to incident

## Conclusion

Our goal of this curricular content was to increase awareness, understanding, and engagement in our residency on the important experiences and mental health challenges faced by our Black transgender and gender diverse patients through exposure to diverse voices and stakeholders both within and outside of traditional academic venues. We sought to facilitate this by:

- creating content that can remain a sustainable part of the formal residency curriculum
- increasing commitment of our residents to this population
- providing resources for further learning and engagement

## References

- 1) AMA Press Release (June 10, 2019) - AMA adopts new policies on first day of voting at 2019 Annual Meeting: <https://www.ama-assn.org/press-center/press-releases/ama-adopts-new-policies-first-day-voting-2019-annual-meeting>
- 2) Reiser, Sari L., et al. "Discriminatory experiences associated with posttraumatic stress disorder symptoms among transgender adults." *Journal of counseling psychology* 63.5 (2016): 509.
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- 4) Crenshaw, Kimberle, "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics," University of Chicago Legal Forum: Vol. 1989: Iss. 1, Article 8. Available at: <http://chicagounbound.uchicago.edu/ucf/vol1989/iss1/8>
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- 6) Goldhammer, Hilary, Cary Crall, and Alex S. Keuroghlian. "Distinguishing and Addressing Gender Minority Stress and Borderline Personality Symptoms." *Harvard review of psychiatry* 27.5 (2019): 317-325.