ABSTRACT SUBMISSION FORM

LET'S TALK ABOUT



Exploring the role of sex and gender on health research





CHRD 2020: Abstract Submission Form

Submitter Name

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Title

Health Characteristics of Transgender Youth Seeking Medical Care in the Trans Youth Can! (TYC!) Study

Background

Transgender youth are a vulnerable population who experience unique internal stressors (i.e., gender dysphoria) and may face external stressors (e.g., discrimination) and elevated rates of mental health comorbidities, self-harm, and suicidality.

Objective

Transgender youth are increasingly seeking gender-affirming medical care. No large-scale cohort study has previously examined characteristics of transgender youth seeking these treatments in Canada. TYC! is a 2-year prospective cohort study that follows youth referred for puberty suppression or gender-affirming hormones at 10 clinics across Canada.

Methods

Youth were eligible for inclusion if age 15 or younger and had reached or completed puberty by their first medical appointment for blockers/hormones at clinic. Youth data are collected via yearly interviewer-administered surveys, online symptom checklists, and clinic medical records. Baseline data are reported here.

Results

174 youth (73.3% transmasculine, 18.6% transfeminine, 8.1% non-binary) participated. Self-assessed physical health was reported as good to excellent by 74.8% of youth; however, only 45.5% rated their mental health this way. Mental health concerns were common, with 40.2% and 32.0% having formal diagnoses of anxiety and depression, respectively, while 65.2% and 19.3% self-reported current clinically significant symptoms of anxiety and depression, respectively. 67.6% reported ever engaging in self-harm, 34.5% reported suicidal ideation at some time, and 16.8% reported a suicide attempt within the past year.

Conclusion

This study is the first to examine characteristics of youth accessing puberty suppressants/gender-affirming hormones in medical clinics across Canada in a large cohort study. These youth present with mental health concerns, including depression and anxiety, self-harm and suicidality at rates higher than typically seen among youth. The 12- and 24-month follow-up of youth participating in this study will explore the role that gender-affirming treatment (e.g., puberty suppression or gender-affirming hormones) has on changes in mental health over time among transgender youth receiving medical treatment.

Theme:

Clinical

Do you have a table/figure to upload?

Yes

Untitled

Supplementary Table.pdf

Are you willing to participate in Goodbear's Den?

Yes

Presenter Status:

Undergraduate Students

What was your role in the project?

Participant data collection & wrote abstract

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Supplementary Table:

Health characteristics: Transgender and gender-diverse youth <16 years referred to 10 Canadian clinics providing gender affirming medical care

	Total	
	n=174	
	n	Weighted %
Self-assessed physical health		
Excellent or very good (1 or 2)	78	40.5
Good	61	34.4
Fair or poor	33	25.2
Self-assessed mental health		
Excellent or very good (1 or 2)	43	22.8
Good	42	22.7
Fair or poor	88	54.5
Depression (MDS often/always ≥ 4)	33	19.3
Probably anxiety (OASIS ≥ 8) ^a	94	65.2
Self-harm, past year	110	67.6
Suicidal ideation, ever	95	58.1
Suicidal ideation, past year	56	34.5
Suicide attempt, ever	53	36.0
Suicide attempt, past year	24	16.8
Diagnoses ^b		
Anxiety	75	40.2
Depression	58	32.0
ADHD	39	23.3
Autism spectrum	10	6.0
Learning disability	7	4.8
OCD	5	4.2
PTSD	3	1.9
Other c	42	25.2

MDS=Modified Depression Scale; OASIS=Overall Anxiety Severity and Impairment Scale; ADHD=attention deficit hyperactivity disorder; OCD=obsessive compulsive disorder; PTSD=post-traumatic stress disorder.

- a. Asked only of participants aged 12 years and older.
- b. Diagnosis specifically extracted, but with fewer than 3 reports were not shown: polycystic ovary disease (1 case), personality disorder (1), eating disorder (0) and intersex/DSD (0).
- c. Other diagnoses included those not specifically coded in our case report form, e.g., gastrointestinal condition, atopic conditions (e.g., eczema), oppositional defiant disorder, parent-child relationship issues, musculoskeletal condition, substance use disorder, and endocrine disorder.