Healthcare Experiences of Transgender People of Color

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To the editor
“Healthcare Experiences of Transgender People of Color”¹ has brought up a delicate yet interesting subject: Intersectionality between transgender and ethnic minorities related to quality of medical care for them in Chicago, IL. A certain amount of transgender people from different ethnic groups—including mulattos, blacks, and latinxs—were interviewed and 100% of them answered that they have felt discriminated at medical appointments, reflecting values of a society enshrined in the fear of the unknown.

Nevertheless, a group of Brazilians has developed a research² that covered a partially similar issue. Among the interviewed, approximately 60% has experienced some form of discrimination or discomfort, considering that about 30% of the sample belonged to a non-Caucasian ethnicity. Such episodes generated a 6- to 7-fold increase in primary care consultation avoidance as a result from the lack of resources and information inside this sphere of healthcare. The direct relationship between racism and transphobia was not explicit in that paper, but when comparing the articles, Howard et al. bring enough arguments (in a global level) to infer the intersectionality in the Brazilian article as they complement each other. The USA and Brazil may not have similar colonial history; however, they resemble the roots of ethnic prejudice, which becomes a baseline when one belongs to both minorities, like trans-people of color. Data from the Brazilian paper only specified transphobia, but Howard’s research showed that intersectional oppression exists inside an environment that should be supportive instead: primary health.

Another article that reasons with Howard et al. is a review³ of access to health by the transgender population, mentioning the fact that, in the USA, transgender immigrants—mostly Hispanic and African Americans—have poor access to health,

while in Brazil access is limited by lack of resources. Both arguments corroborate the results in Howard et al., reflecting on the poor experience in caring for the health of minorities who need it the most, not only in the USA but also in Brazil.

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