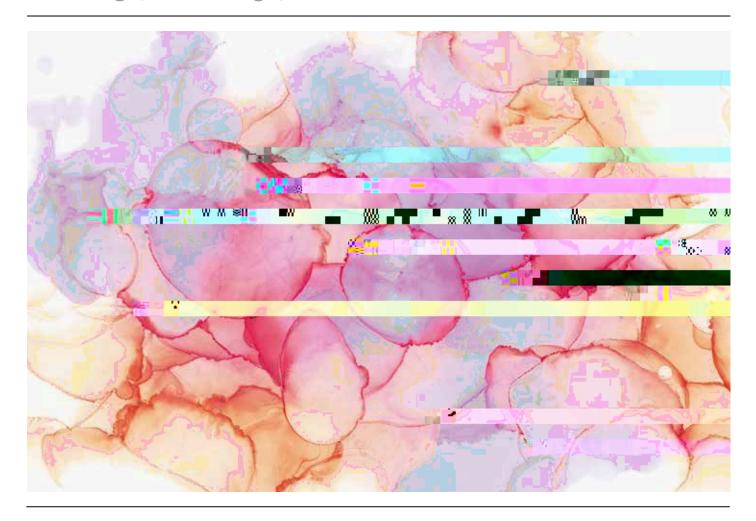
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## TIME FOR CHANGE

## **EMILY WILSON**

esearch has shown that transgender individuals experience significant health disparities<sup>1-3</sup>, stigma and discrimination<sup>4,5</sup> as well as a greater risk of suicide<sup>6,7</sup> in comparison to cis-gender individuals. Current literature states that transgender is an umbrella term used to describe any person, who experiences a discordance between their biological sex assigned at birth, male or female, and their gender identity<sup>1,8-11</sup>. Whereas a cis-gender individual is described as someone whose gender identity aligns with their assigned sex<sup>10</sup>. A person's gender identity is considered their internal experience of being male, female, neither, both or any alternative<sup>1,9,11</sup>.

Existing literature calls for more research into the

unique healthcare needs of transgender individuals<sup>3,12</sup>. However, there is limited research into the care of transgender individuals in the radiology setting<sup>9,13</sup>. This is problematic given the need for accurate information to appropriately and respectfully care for transgender individuals. This article will therefore utilise research from nursing and other transferable disciplines to explore opportunities and barriers to effective and accurate communication with transgender individuals in the radiology setting.

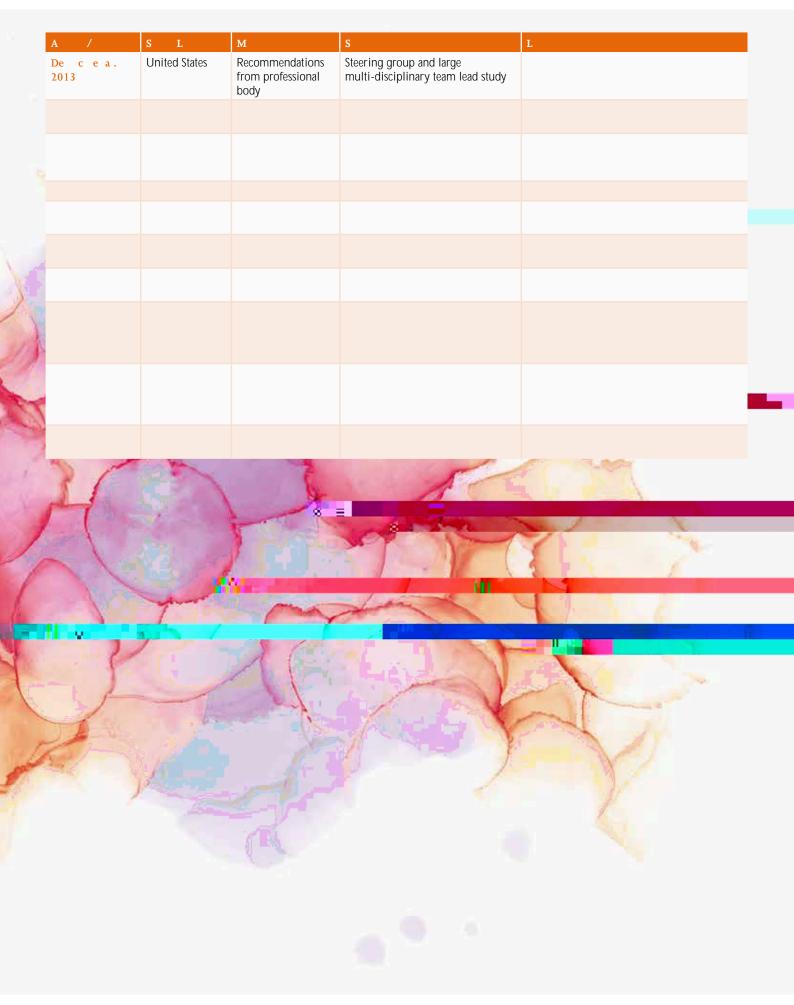
## **GENDER IDENTITY AND THE LAW**

Under the Equality Act<sup>14</sup> gender reassignment and sex are protected characteristics which constitute additional protections under the General Data Protection

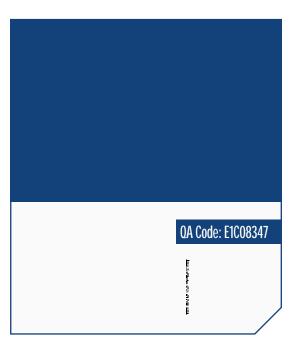
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Regulations (GDPR) $^{15}$  and the Data Protection Act $^{16}$  due to the potential for discrimination if disseminated.

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