

Introduction

Trans youths across the US still experience hardship based on their gender expression and identity. This creates barriers for trans youth to access health care due to fear of being judged. The AAPD's Policy on Care for Vulnerable Populations in a Dental Setting has a specific section regarding trans patients. This research aims to identify the extent of implementation, the degree of implementation, awareness, and any possible barriers.

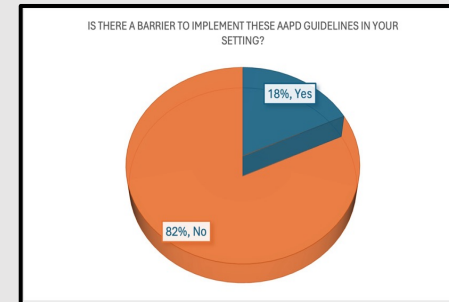
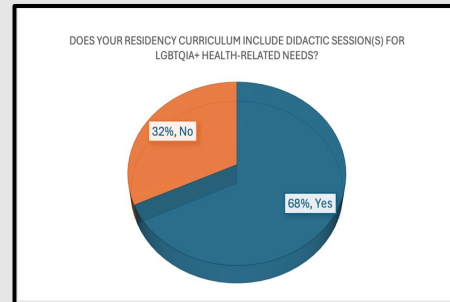
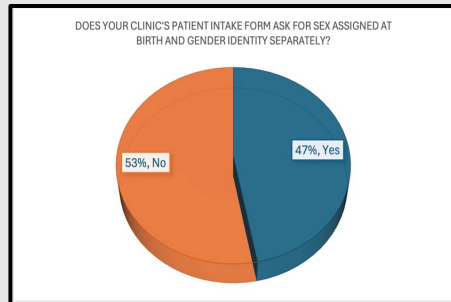
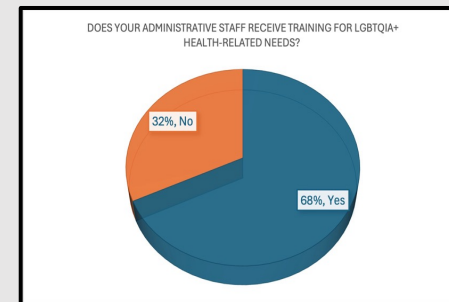
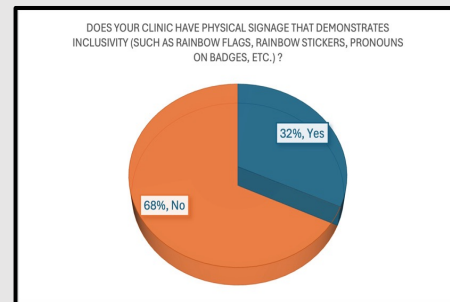
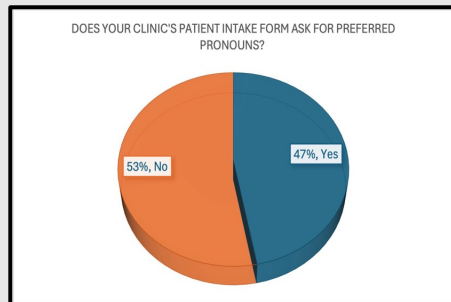
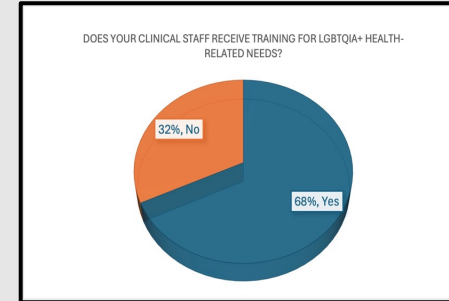
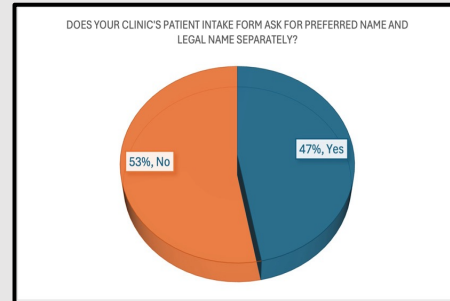
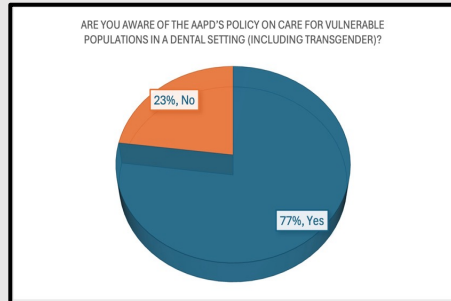
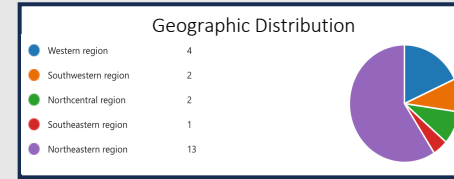
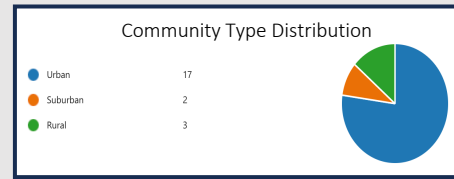
Purpose

With the recent AAPD guideline and the rise of trans visibility, it is essential that dental providers adapt and accommodate this vulnerable population. Many trans youths across the U.S. still struggle with living in a heteronormative environment; creating an accepting and welcoming health care environment would help them feel safer. The question becomes: have pediatric dental residency programs made progress in improving inclusivity of transgender youth in the dental setting?

Methods

The survey was conducted via Microsoft Forms and takes an average of 2-3 minutes to complete. No identifying data was collected, and participation completely voluntary. Program directors are qualified study subjects based on the AAPD's reserve emailing list. The data is then analyzed to identify the prevalence and barriers of this AAPD policy.

FINDINGS



Results

A total of 22 anonymous responses (from 103 identified program directors) in the U.S (21.4% response rate)

Barriers to implementation included time constraints, prevailing views and attitude in the area, lack of staff, staff turnover, and lack of functionality in the dental software.

Conclusions

The overwhelming majority of the responses were from the northeastern regions and urban setting. The majority were aware of the policy. However, only half the responders were implementing those suggested strategies created by AAPD in their programs. The varied degrees of implementation were also noted. However, only 18% reported having a barrier to implement the guideline in the program, which includes prevailing views and attitude in the area, lack of staff, staff turnover, time constraints, and lack of functionality in the dental software. Future research is needed to further illuminate why recommendations have not yet been adapted.

References



References